

Provider News

January 2022



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Newsletter* and other
communications via email?

Submit your information to us
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COVID-19 information from Summit Community Care

Summit Community Care is closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part.

For additional information, reference the *COVID-19 Updates* page on our [website](#).

ARPEC-0579-20

Availity Authorization app available to Summit Community Care providers beginning in 2022

Submitting prior authorizations is now easier and multi-payer

We know how much easier it is when you have access to digital apps that streamline your work. Thousands of providers already use the Availity* Authorization app to submit prior authorizations for other payers. Now, we want to make it easier to submit prior authorization requests to Summit Community Care by making the app available in 2022 to our providers as well.

ICR is still available

If you need to refer to an authorization that was submitted through the Interactive Care Reviewer (ICR), you still have access to that information. We have developed a pathway for you to access your ICR dashboard – You simply follow the prompts provided through the Availity Authorization app.

Innovation in progress

While we grow the Availity Authorization app to provide even greater functionality and to expand Summit Community Care-specific prior authorizations, we have provided access to ICR for:

- Appeals
- Behavioral health authorizations
- Medical specialty pharmacy authorizations

Notices in the Availity Authorization app will guide you through the process for accessing ICR for these Alternate Authorization/Appeal functions.

Begin submitting digital prior authorizations through the Authorization app in 2022

If you aren't already familiar with the Availity Authorization app, live training and recorded webinars are available.

Date	Time (All training sessions are one hour)
Wednesday, January 5, 2022	11 a.m. ET/8 a.m. PT
Tuesday, January 11, 2022	3 p.m. ET/12 p.m. PT
Thursday, January 20, 2022	12 p.m. ET/9 a.m. PT
Tuesday, January 25, 2022	12 p.m. ET/9 a.m. PT
Wednesday, January 26, 2022	3 p.m. ET/12 p.m. PT

You can always log onto [availity.com](https://www.availity.com) to view the webinars at your convenience. From **Help & Training**, select **Get Trained** to access the Availity Learning Center. Select the **Session** tab to see all upcoming live webinars.

Tip: To find the authorization training faster, use keyword *AvAuthRef* in the search field.



Availity Authorization app available to Summit Community Care providers beginning in 2022 (cont.)

Now, give it a try

Eliminate the time and costs associated with faxing prior authorizations by using the Availity Authorization app. It's easy, convenient, and available when you are, 24/7.

Get access by logging onto [availity.com](https://www.availity.com). Under the **Patient Registration** tab, select **Authorizations & Referrals**. The app is easy to navigate with intuitive functions that walk you through the submission.

Tips: You will need to have the Authorization Role assignment in order to access the app and to submit prior authorizations. Your organization's Availity administrator can assign the role to you.

If you have any questions, reach out to Availity at **800-282-4548**.

** Availity, LLC is an independent company providing administrative support services on behalf of Summit Community Care.*

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Policy Updates – Prior Authorization

Notice of Material Amendment to Healthcare Contract

Prior authorization updates for medications billed under the medical benefit

Effective for dates of service on and after May 1, 2022, the following medication codes billed on medical claims from current or new *Clinical Criteria* documents will require prior authorization.

Note: Inclusion of a National Drug Code on your medical claim is necessary for claim processing of drugs billed with a not otherwise classified (NOC) code.

<i>Clinical Criteria</i>	HCPCS or CPT® code(s)	Drug
ING-CC-0183	J3590	Sogroya®
ING-CC-0184	J9348	Danyelza®
ING-CC-0185	C9074, J0224	Oxlumo™
ING-CC-0186	J9353	Margenza™
ING-CC-0187	Q2054	Breyanzi®
ING-CC-0188	J3490, J3590	Imcivree™
ING-CC-0189	J1426	Amondys 45™
ING-CC-0190	J3490, J3590, C9399	Nulibry™

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<i>Clinical Criteria</i>	HCPCS or CPT® code(s)	Drug
ING-CC-0116	J9036	Belrapzo
ING-CC-0161	J9227	Sarclisa
ING-CC-0104	J0642	Khapzory

AR-NL-0251-21/ARPEC-1230-21

Visit the [Clinical Criteria website](#) to search for the specific *Clinical Criteria*.



Notice of Material Amendment to Healthcare Contract

Certain specialty medication precertification requests may require additional documentation

As part of our ongoing quality improvement efforts, Summit Community Care is updating our precertification processes for certain specialty medications. Effective August 1, 2021, we may request additional documentation for impacted medications billed under the medical benefit to determine medical necessity.

Upon request, providers shall submit documentation from the member's medical record for each policy question flagged for documentation. A denial may result if documentation does not support medical necessity.

Note: Inclusion of a National Drug Code on your medical claim is necessary for claim processing of drugs billed with a not otherwise classified (NOC) code.



Read more online.

AR-NL-0202-21

Visit the [Clinical Criteria website](#) to search for the specific *Clinical Criteria*.

Quality Management

Reducing the burden of medical record review and improving health outcomes with HEDIS ECDS reporting

The HEDIS® Electronic Clinical Data Systems (ECDS) reporting methodology encourages the exchange of the information needed to provide high-quality healthcare services.

The ECDS Reporting Standard provides a method to collect, and report structured electronic clinical data for HEDIS quality measurement and improvement.

Benefits to providers:

- Reduced burden of medical record review for quality reporting
- Improved health outcomes and care quality due to greater insights for more specific patient-centered care

ECDS reporting is part of the National Committee for Quality Assurance's (NCQA) larger strategy to enable a Digital Quality System and is aligned with the industry's move to digital measures.

Learn more about NCQA's digital quality system and what it means to you and your practice [online](#).

ECDS measures

The first publicly reported measure using the HEDIS ECDS Reporting Standard is the Prenatal Immunization Status (PRS) measure. In 2022, NCQA will include the PRS measure in Health Plan Ratings for Medicaid and Commercial plans for measurement year 2021.

For HEDIS measurement year 2022, the following measures can be reported using ECDS:

- Childhood Immunization Status (CIS-E)*
- Immunizations for Adolescents (IMA-E)*
- Breast Cancer Screening (BCS-E)
- Colorectal Cancer Screening (COL-E)
- Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)

- Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM-E)*
- Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)
- Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)
- Depression Remission or Response for Adolescents and Adults (DRR-E)
- Unhealthy Alcohol Use Screening and Follow-Up (ASF-E)
- Adult Immunization Status (AIS-E)
- Prenatal Immunization Status (PRS-E) (Accreditation measure for 2021)
- Prenatal Depression Screening and Follow-Up (PND-E)
- Postpartum Depression Screening and Follow-Up (PDS-E)

Of note, NCQA added the ECDS reporting method to three existing HEDIS measures: Breast Cancer Screening, Colorectal Cancer Screening and Follow-up Care for Children Prescribed ADHD Medication. Initially, the ECDS method will be optional, which provides health plans an opportunity to try out reporting using the ECDS method before it is required to transition to ECDS only in the future.

** Indicates that this is the first year that the measure can be reported using ECDS*

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

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