

**CONNECTICUT
MEDICAL GROUP
MANAGEMENT
ASSOCIATION**

**SECOND
ANNUAL PAYER
RESOURCES
DAY**

February 23, 2018



AGENDA

- A new look for the Anthem provider website
- Updates and improvements to the provider maintenance form for reporting demographic changes
- Availity™ Multipayer Portal – updates and new features
- State of Connecticut Benefits Update

Anthem Provider Website Redesign

When you accessed Anthem.com's provider website a few weeks ago, you may have noticed a completely new look for the landing pages. That was the first in a series of design changes that we hope will make the Anthem provider site more streamlined, efficient, and easy to navigate. Part of this is accomplished through duplicating information and forms you use regularly on both anthem.com and the Availity site, so that you do not need to toggle back and forth. When you are in Availity you will find them there.

But when you do log in to anthem.com, we want to make that a better experience as well!

New Provider Maintenance Form

You will now be able to attached an IRS W-9 form or other documentation that is require for certain changes.

Notification of Receipt- After submission, an email with the change request reference number will be sent to the address provided in the contact information on the General Information page. Provide this number if there is a need to reference this request.

Notice of Completion - A final email message will be sent to the contact email address when the update has been completed.

As a general rule, a minimum of 30 days advance notice of a provider demographic and/or practice change is required. Refer to the requirements in your Provider Agreement.

Availity Multi-Payer Portal Updates

**From the menu bar at the top of the Availity home page, select
PATIENT REGISTRATION**

- for eligibility and benefits information
- authorizations and referrals

CLAIMS & PAYMENTS

- for claims status inquiry, professional and facility claims
- secure messaging (send an inquiry to Anthem on a specific claim as an alternative to calling the Provider Service Center)
- do not use this link to remittance viewer

REPORTING

- there is a range of reporting available on utilization and other data for practice/facility administrators

PAYER SPACES

- click on the Anthem logo for the additional tools you previously found on the Anthem secure provider site, including the following:

Availity Updates cont'd

CLEAR CLAIM CONNECTION™ – a plug and play tool to help you identify potential claims edits

REMITTANCE INQUIRY – this is the link you should use to locate and print/download Anthem remittances. Select Payer Spaces and go to the Anthem Payer Space in order to find the Remittance Inquiry tile.

FEE SCHEDULES – check reimbursement on the Anthem fee schedule for the codes you bill

EDUCATION AND RESOURCE CENTER – here you will find other tools, forms, and information from anthem.com's provider site at your fingertips, organized under headings that make it easy to find what you need quickly.

Availity Updates cont'd

Newest feature added January 2018 – Member ID card viewer

Once a successful eligibility and benefits inquiry has been completed for a member, the Member ID card will be available so that you may view front and back for member services or other contact information, or print a copy of the ID card for the patient file.

Select the View Member ID Card button which will appear upon completion of the E&B transaction.

The member ID card will be also be available for Medicare Advantage products.

State of Connecticut Benefits

Beginning 10/1/17, the State of Connecticut Employer Group implemented preferred provider benefit designs to their group plans.

When State of Connecticut members select a Preferred PCP or Specialist in the designated Preferred Provider tier, there is no office visit co-pay. If the member chooses a Participating tier PCP or Specialist (depending upon specialty) they will pay the plan's \$15 office visit copayment

This benefit program includes PCPs and the following specialties only at this time:
Allergy & Immunology, Cardiology, Endocrinology, Ear Nose and Throat (ENT), Gastroenterology, OBGYN, Ophthalmology, Orthopedic /Surgery, Rheumatology, and Urology

In order for a participating PCP or Specialist to be identified as a Preferred provider, he/she must participate in, and be in good standing with, Anthem's Enhanced Personal Health Care ("EPHC") Program (applicable to PCPs), or meet certain quality-of-care and cost efficiency benchmarks (applicable to specialists.)