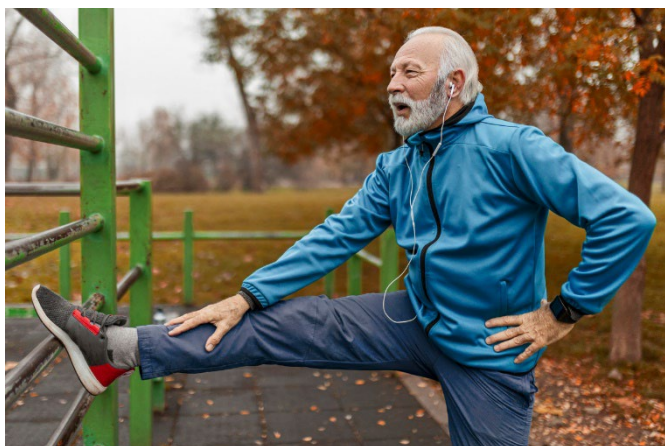


PROVIDER UPDATE

September 2023

September is Pain Awareness Month



As we know, exercise is a great way to help alleviate aches and pains. September is Pain Awareness Month and a great time to encourage your patients to learn how to manage their pain with exercise through their fitness benefit, SilverSneakers®. All our plan members have access to this fitness benefit.

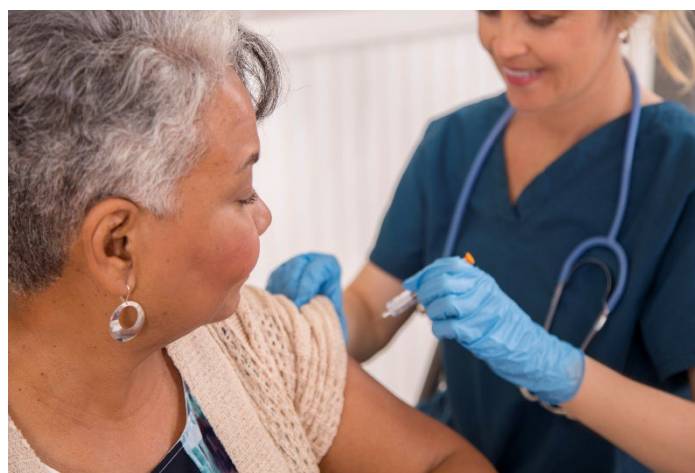
Encourage your patients to get moving today!

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Reminder: Encourage Your Patients To Get The Influenza Vaccine

Remember to talk to your patients about the importance of getting an annual flu shot and be sure to check with them at follow up appointments to ensure they have received it.

Experts from the Centers for Disease Control and Prevention (CDC) recommend receiving the influenza vaccination, covered through your patient's Medicare Part B benefit, in October as seasonal flu activity often begins in the fall.



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Chronic Kidney Disease

Chronic kidney disease (CKD), also known as chronic kidney failure and chronic renal failure, involves a gradual loss of kidney function over time.

Hypertension and Diabetes are often caused and linked to Chronic Kidney Disease. If either of these conditions are present and uncontrolled, it can lead to further progression in CKD.

Important Coding Information

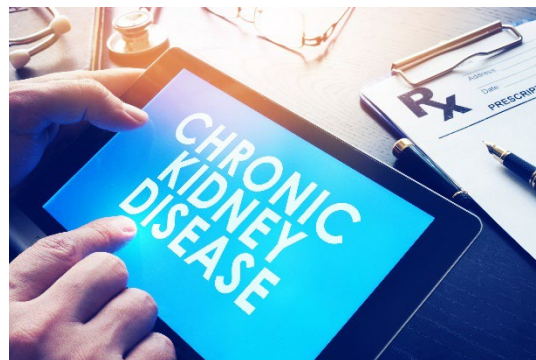
When documenting the diagnosis or progression of CKD, there are two tests that are typically used:

- Albumin-to-Creatinine Ratio (ACR)
- Estimated Glomerular Filtration Rate (eGFR)

Provider documentation must specifically state the stage of CKD, the ACR and GFR test results are not sufficient documentation alone.

Since CKD is often caused by Hypertension and/or Diabetes, it is important to code these conditions if they are linked:

- Diabetic CKD (E08.22, E09.22, E10.22, E11.22, E13.22)
- Hypertensive CKD (I12-, I13-)



Code Selection

Stage	GFR	ICD-10-CM Code
1	>90	N18.1
2	60-89	N18.2
3 (unspecified)	30-59	N18.30
3a	44-59	N18.31
3b	30-44	N18.32
4	15-29	N18.4
5	<15 (without dialysis)	N18.5
End Stage Renal	<15 (on dialysis)	N18.6

Sign up for Provider Email Updates

Do you know a provider who would benefit from these monthly updates? Encourage him/her to sign up on our website at [MediGold.com/For-Providers](https://www.MediGold.com/For-Providers).

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CMS Medicare Advantage Reimbursement Model V28 Changes: Kidney Disease

In 2024 CMS will begin to shift from V24 Risk Adjustment model to the new V28 model for Medicare Advantage reimbursement. This will influence Hierarchical Classification of Conditions (HCCs) codes related to patients.

The Kidney Disease Group had the following changes:

- V24 HCC 134 (Dialysis Status) and V24 HCC 135 (Acute Renal Failure) were removed from V28 and are no longer HCCs.
- CKD 3 is split into separate HCCs for stages 3a and 3b:
 - Codes relating to CKD stage 3b were moved to V28 HCC 328 (Chronic Kidney Disease, Moderate (Stage 3B)) with an increase in RAF of 0.116
 - Codes relating to CKD stages 3a or unspecified were moved to V28 HCC 329 (Chronic Kidney Disease, Moderate (Stage 3, Except 3B)) with an increase in RAF of 0.116
- V24 HCC 136 (Chronic Kidney Disease, Stage 5) had all of its codes moved to V28 HCC 326 (Chronic Kidney Disease, Stage 5) with an increase in RAF of 0.674
- V24 HCC 137 (Chronic Kidney Disease, Severe (Stage 4)) had all of its codes moved to V28 HCC 327 (Chronic Kidney Disease, Severe (Stage 4)) with an increase in RAF of 0.347

Referrals to In-Network Providers

All referrals and prior authorization requests for members for out-of-network services must be made by a network provider. Prior authorization is not required for referrals for in-network services, however, all referrals and prior authorization requests for out-of-network services should be made by a network provider.

You are responsible for the care of your members whether you provide the care directly or indirectly. Medical care including diagnostic testing, sought out-of-network (excluding emergent or urgent care) at your direction but not prior authorized, will be subject to MediGold's Remediation Policy:



MediGold will implement progressive disciplinary steps with MediGold participating providers who do not comply with the contractual requirement to refer members to MediGold participating providers or fail to obtain prior authorization from MediGold for services listed on MediGold's Prior Authorization List. These disciplinary steps include focused review, monetary penalties, and adverse participation decisions.

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Part B and Part D vaccines – How to know what’s covered by our plans

You and your patients may be confused by changes affecting what our plans will and won’t cover related to vaccines.

As a reminder, Part B vaccines, such as influenza, pneumonia, and COVID-19, may be administered in your offices and billed directly to the plan or can be administered at an in-network retail pharmacy. However, unless your practice is equipped to bill Part D vaccines directly through the pharmacy adjudication system (POC), Part D vaccines, such as the Shingrix (Shingles) vaccine, must be billed through an in-network retail pharmacy. Please direct your patients to their participating retail pharmacy to obtain their Part D vaccines. Providing Part D vaccines in your office and having patients seek reimbursement, leaves patients at risk of additional financial costs that may not be incurred if they go to the retail pharmacy for their vaccine. Part D vaccines must be billed directly through the pharmacy system to receive the full benefit patients are entitled to receive under their Part D benefits. Please see the chart below for a list of Part B and D vaccines, and corresponding copays.

ABRYVVO	Part D	Inflation Reduction Act- \$0 copay
ADACEL	Part D	Inflation Reduction Act- \$0 copay
AREXVY	Part D	Inflation Reduction Act- \$0 copay
BCG VACCINE	Part D	Inflation Reduction Act- \$0 copay
BEXSERO	Part D	Inflation Reduction Act- \$0 copay
BOOSTRIX	Part D	Inflation Reduction Act- \$0 copay
COVID VACCINES (ALL)	Part B	Part B- \$0 copay
DIPHTHERIA/TETANUS TOXOID	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
ENGERIX-B	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
GARDASIL 9	Part D	Inflation Reduction Act- \$0 copay
HAVRIX	Part D	Inflation Reduction Act- \$0 copay
IMOVAX RABIES (H.D.C.V.)	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
INFLUENZA VACCINES (ALL)	Part B	Part B- \$0 copay
IPOL INACTIVATED IPV	Part D	Inflation Reduction Act- \$0 copay
IXIARO	Part D	Inflation Reduction Act- \$0 copay
MENACTRA	Part D	Inflation Reduction Act- \$0 copay
MENQUADFI	Part D	Inflation Reduction Act- \$0 copay
MENVEO	Part D	Inflation Reduction Act- \$0 copay
M-M-R II	Part D	Inflation Reduction Act- \$0 copay
PNEUMOVAX 23	Part B	Part B- \$0 copay
PREHEVBRIO	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
PREVNAR 13	Part B	Part B- \$0 copay
PRIORIX	Part D	Inflation Reduction Act- \$0 copay
PREVNAR	Part B	Part B- \$0 copay
RABAVERT	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
RECOMBIVAX HB	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
SHINGRIX	Part D	Inflation Reduction Act- \$0 copay
TDVAX	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
TENIVAC	Part B vs. D	Inflation Reduction Act- \$0 copay, if Part D
TRUMENBA	Part D	Inflation Reduction Act- \$0 copay
TWINRIX	Part D	Inflation Reduction Act- \$0 copay
TYPHIM VI	Part D	Inflation Reduction Act- \$0 copay
VAQTA	Part D	Inflation Reduction Act- \$0 copay
VARIVAX	Part D	Inflation Reduction Act- \$0 copay
YF-VAX	Part D	Inflation Reduction Act- \$0 copay