

September 2022

PROVIDES PLUS



WHAT YOU NEED TO KNOW ABOUT LEON HEALTH

LEON HEALTH is owned and operated by the **LEON** family. Effective January 1, 2022, **LEON HEALTH** has 26 plus thousand lives and counting. **LEON HEALTH** has three (3) benefit packages for the **LEON MEDICAL CENTERS** patients. Each benefit package offers your patients medical services that meet their needs. Here is a description of the plan benefits:



PROVIDERS RESOURCES

LEON HEALTH has made available the following provider resources on our website:

- Clinical Practice Guidelines
- Contracted Provider Dispute Form
- Facility Interest Form
- Medication Therapy Management (MTM) Program
- Practice Address Change Request Form
- Prior Authorization Forms
- Provider Interest Form
- Waiver of Liability

Please visit our website to review these important documents:
www.leonhealth.com/provider-portal

LEON HEALTH provider portal resources:

- Member Eligibility
- Claim Status and Information
- Remittance Advice
- Authorization Review

Please visit our provider portal at:
www.ehealth-lhp.healthsuiteadvantage.com/

If you have any questions, you can always contact our provider relations department at:
TOLL-FREE NUMBER: 833-373-5366 **OR EMAIL:** providerrelations@leonhealth.com

LEON HEALTH BENEFIT PACKAGES



MEDIEXTRA

Comprehensive plan with Initial Coverage limit of \$8,000 for Prescription Drugs, \$0 copay amounts on most services with a maximum out of pocket of \$1,000 and great supplemental benefits.



MEDIDUAL

Dual SNP plan - Great plan for members with Medicaid and Medicare, with \$100 per month for Over the Counter and up to 15 meals monthly and no copays, focused case management and great supplemental benefits.



MEDIMORE

Unique plan that has \$110 per month Part B Reduction Plan and great supplemental benefits.

For more information about our benefits, please visit our website www.leonhealth.com



ADMINISTRATIVE UPDATES

UPDATE:

CLAIM SUBMISSION P.O. BOX ADDRESS CHANGE

Update your records accordingly and submit all future paper claims to the new address listed.

Department	Old Claims P.O. Box	New P.O. Box
Claims	Leon Health, Inc. Attn: Claims Department P.O. Box 668680 Miami, FL. 33166	Leon Health PO Box 61265 Phoenix, AZ 85082-1265

If you have any additional questions, please contact our Claims Department at (305) 718-2840 or via email at ProviderRelations@leonhealth.com.



WHAT YOU NEED TO KNOW!

LEON HEALTH PLAN has partnered with **AVAILITY** to service your electronic data interchange (EDI) transactions and to offer a direct connection to our plan for the following health transactions.



Availity is now live as an EDI gateway for the following transactions

- **LIVE** - Electronic claim submissions (837 P/I)
- **LIVE** - Electronic remittance advices – ERA (835) (**enrollment with Availity required**)
- **LIVE** - Claims Status Inquiry & Response (276/277)
- **Coming Soon** - Requests and responses for eligibility and benefits (270/271)

The Payer Name and ID

- **Payer Name:** Leon Health Plan
- **The payer ID:** A3565

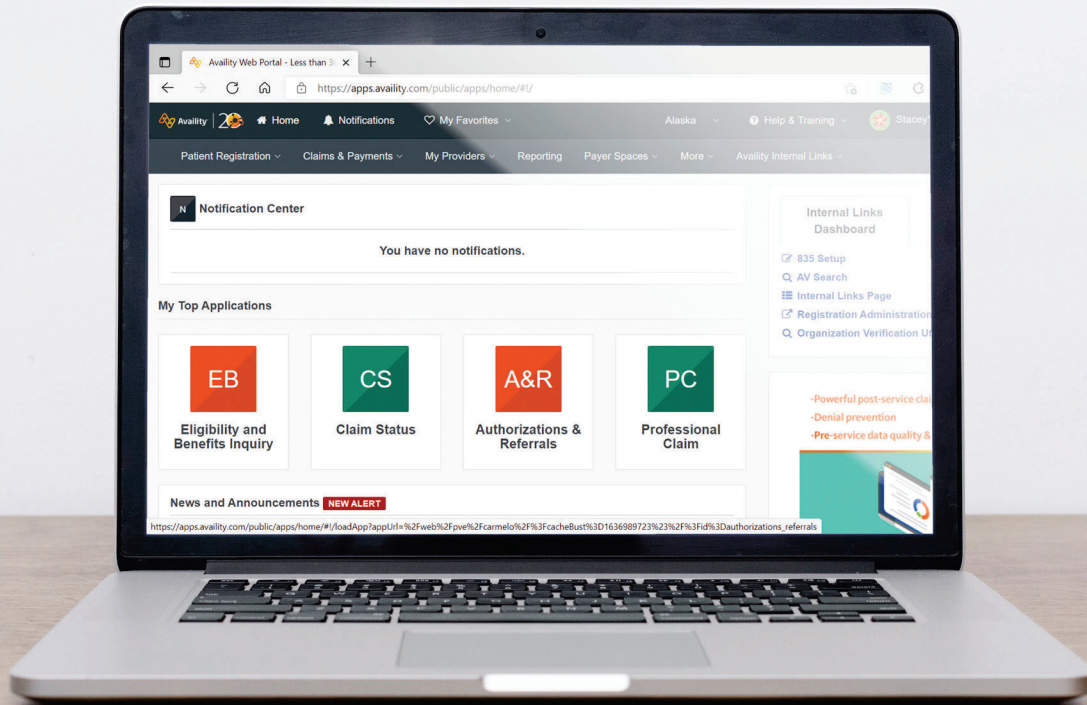
WHAT YOU CAN DO NOW

Complete the steps below:

1. **Register with Availity to get a customer account.**
 - a. Go to www.availity.com and click Register.
 - b. Follow the attached instructions to enroll to receive 835s from Leon

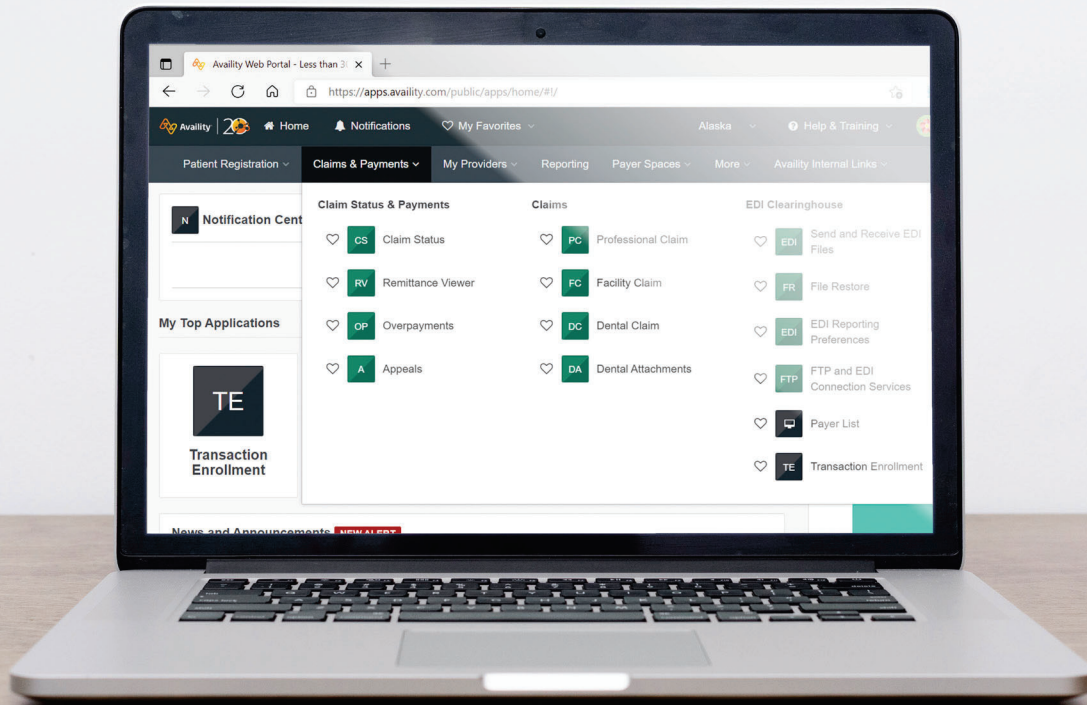


Once provider created an Availity portal account, follow the steps below:



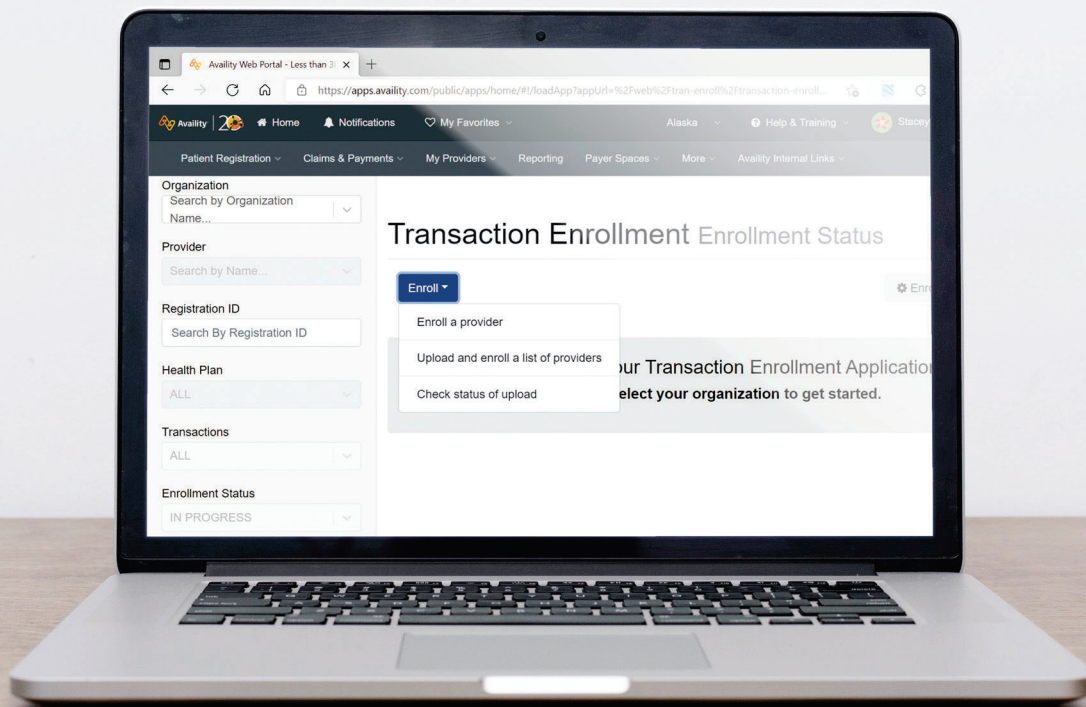
STEP 1

Enrollment: Account administrator should log on and select: "Claims & Payments"



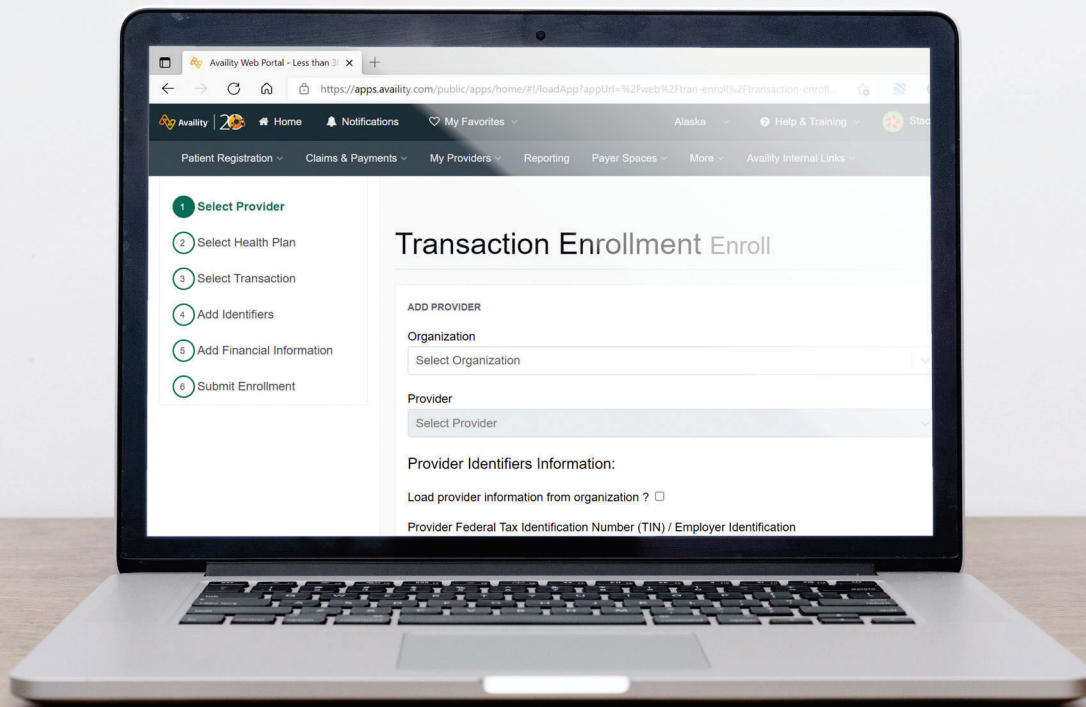
STEP 2

Enrollment: From "Claims & Payments"; select "Transaction Enrollment"



STEP 3

Enrollment: From “Transaction Enrollment” select “Enroll”



STEP 4

Enrollment: Follow step by step instructions to enroll for 835 transaction



QUICK START GUIDE

AVAILITY PORTAL AND EDI CLEARINGHOUSE

Ready to get started with Availity? We're here to help. Check out these resources.

REGISTER A NEW ORGANIZATION

Go to [Register and Get Started with Availity's Portal](#) for live and on-demand resources to help you register your organization.

ADD USERS TO AN EXISTING ORGANIZATION

USERS: Ask your organization's Availity Portal administrator to set up your user account and access.

ADMINISTRATORS: For step-by-step instructions on how to add new users to your organization, see the [Add users](#) help topics.


HELP, TRAINING, AND SUPPORT IN AVAILITY PORTAL

Once your organization has registered with Availity, and you have your user account, log in to Availity Portal for access to a variety of help, training, and support resources.



HELP

In the Availity Portal menu bar, click **Help & Training > Find Help** to visit the provider help center.

Tip: For information about individual fields on Availity Portal application pages, click the blue question mark icons  next to certain fields. You will see the help in a pop-up window.

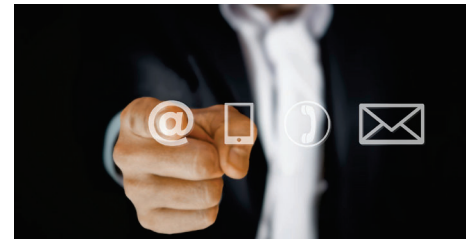


TRAINING

In the Availity Portal menu bar, click **Help & Training > Get Trained** to enroll in live and on-demand training.

Tip: Take one of these courses to get started:

- **USERS:** [Get Onboarded to Availity's Portal - Training Program](#)
- **ADMINISTRATORS:** [Availity Portal Administrator Onboarding](#)



SUPPORT

In the Availity Portal menu bar, click **Help & Training > Availity Support** to access online support ticketing and online chat. Or, call 1.800.AVAILITY (282.4548).

Tip: See the [Availity Client Services](#) help topic for more information.

MORE HELPFUL RESOURCES

- [Availity Portal Reference Guide for Users](#)
- [Availity Portal Reference Guide for Administrators](#)
- [Availity EDI Connection Services Startup Guide](#)
- [Availity EDI Companion Guide](#)

MEDICARE NEWS



On May 4, 2022 Medicare released a memo describe how providers should submit encounters for Telehealth Services. Medicare is requesting that providers submit one of these two:

- 79.** Modifier “95” (Synchronous telemedicine service rendered via real-time Interactive audio and video telecommunications system) for all telehealth face to face encounters.
- 80.** To report EDRs and CRRs for audio-only services (for dates of service on or after January 1, 2022) to the EDS, use modifier “93.”

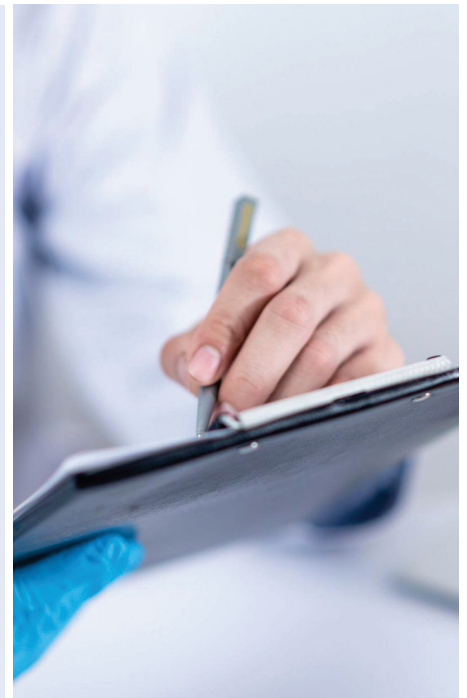
In addition to the modifiers Medicare is requiring providers to indicate the Place of Service to:

- 1.** POS 02 for telehealth services provided other than in patients home, or
- 2.** New POS 10 for telehealth services provided in patients home (which is a location other than a hospital or other facility where the patient receives care in a private residence).

UPDATING AND CERTIFYING PROVIDER DATA IN THE CENTERS FOR MEDICARE & MEDICAID SERVICES' NATIONAL PLAN & PROVIDER ENUMERATION SYSTEM

On June 29th, Medicare released a memo to remind our contracted health care providers, to review their National Provider Identifier (NPI) data in National Plan & Provider Enumeration System (NPPES) as soon as possible to ensure that accurate provider data is displayed. As you may know, providers are legally required to keep their NPPES data current. Centers for Medicare & Medicaid Services (CMS) is also encouraging Medicare Advantage Organizations to use NPPES as a resource for our online provider directories. By using NPPES, we contact you for updated directory information and provide more reliable information to Medicare beneficiaries.

If the NPPES database is kept up to date by providers, our organization can rely on it as a primary data resource for our provider directories, instead of calling your office for this information. With updated information, we can download the NPPES database and compare the provider data to the information in our existing provider directory to verify its accuracy.



When reviewing your provider data in NPPES, please update any inaccurate information in modifiable fields including provider name, mailing address, telephone and fax numbers, and specialty, to name a few. You should also make sure to include all addresses where you practice and actively see patients and where a patient can call and make an appointment. Do not include addresses where you could see a patient, but do not actively practice. Please remove any practice locations that are no longer in use. Once you update your information, you will need to confirm it is accurate by certifying it in NPPES. Remember, NPPES has no bearing on billing Medicare Fee-For-Service.

If you have any questions pertaining to NPPES, you may reference NPPES help at <https://nppes.cms.hhs.gov/webhelp/nppeshelp/HOME%20PAGE-SIGN%20IN%20PAGE.html>. Please direct any general questions about this notice to our Credentialing Department e-mail to credentialing@leonhealth.com.



HEADS UP

1. UPDATED PROVIDER WEBSITE COMING SOON, WILL FEATURE:

- Claim Submissions, Status, and Appeal Instructions
- Provider Relations and Credentialing Information
- News and Announcements
- Frequently Asked Questions by Providers

2. OPEN ENROLLMENT COMING SOON:

- Every year, Medicare's open enrollment period is October 15-December 7.

LEON'S BRAIN LABORATORY

SUDOKU

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	3					2	6	4
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	5					6	4	
4	6	3		2			9	
				5				7
			7				3	5
2						9		
		1						6

HUMAN BONES

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E	C	T	P	S	U	R	E	M	U	H	L	MANDIBLE
R	L	A	M	D	P	E	M	I	R	R	V	MALLEUS
U	A	L	S	A	I	A	B	M	A	A	C	SCAPULA
M	V	U	L	P	N	O	T	L	H	D	O	CLAVICLE
E	I	S	A	A	A	D	H	N	E	I	C	STERNUM
F	C	I	R	T	L	E	I	P	X	U	C	HUMERUS
A	L	M	O	E	U	T	A	B	A	S	Y	RADIUS
I	E	A	P	L	B	A	L	S	L	C	X	ULNA
B	T	L	M	L	I	M	U	T	U	E	S	SCAPHOID
I	L	L	E	A	F	A	P	A	R	T	T	COCCYX
T	A	E	T	A	N	H	A	P	S	T	E	FEMUR
A	N	U	C	L	F	L	C	E	M	R	L	PATELLA
I	U	S	U	E	D	U	S	S	E	U	B	TIBIA