

PROVIDER NEWSLETTER

THIRD QUARTER 2025

STREAMLINING YOUR CLAIMS PROCESS WITH LEON HEALTH

At Leon Health, we are dedicated to assisting our provider partners by providing the necessary tools and resources for efficient claims management. Below are some helpful tips on how to check claim status and understand the claims processing.

SUBMITTING CLAIMS: BEST PRACTICES

To ensure timely and accurate processing, please follow these key steps when submitting claims:

- Electronic Submission Preferred: Submitting claims electronically is the fastest and most secure method. Our portal supports both electronic and paper submissions.
- Required Documentation: Doublecheck that all required fields are completed and that supporting documentation is attached as needed.
- **Timely Filing:** Claims must be submitted within the specified timeframes to avoid denials. Refer to our Submission Instructions for detailed guidelines and tips to avoid common errors.

CHECKING CLAIM STATUS: PROVIDER PORTAL ADVANTAGE

As a **participating provider**, you have the advantage of viewing your claim status directly on the Leon Health Provider Portal:

- Real-Time Updates: Log in to the Provider Portal to check the status of your submitted claims at any time.
- Easy Navigation: The portal allows you to search by member, date of service, claim number or check number giving you quick access to the information you need.
 - Status Definitions: The portal provides clear explanations of claim status (e.g.

paid, denied), so you always know where your claim stands.

If you are a participating provider and you are not yet registered for the Provider Portal, we encourage you to sign up today to take full advantage of these features.

CLAIM APPEALS: YOUR NEXT STEPS

If you believe a claim was incorrectly denied or paid, you have the right to file an appeal:

- Appeal Submission: Review our Claim Appeals page for contracted and noncontracted instructions
- Documentation: Be sure to include all relevant documentation and a clear explanation of why you are appealing the decision.
- **Timelines:** Appeals must be filed within the designated timeframe as outlined on our website.

NEED HELP?

Our Provider Services team is here to assist you with any questions about claim submission, status checks, or appeals. Please don't hesitate to reach out for personalized support to providerservices@leonhealth.com or call (833) 373-5366

Thank you for your partnership and for providing exceptional care to our members!



IMPORTANT UPDATE TO ACH SERVICE REQUESTS

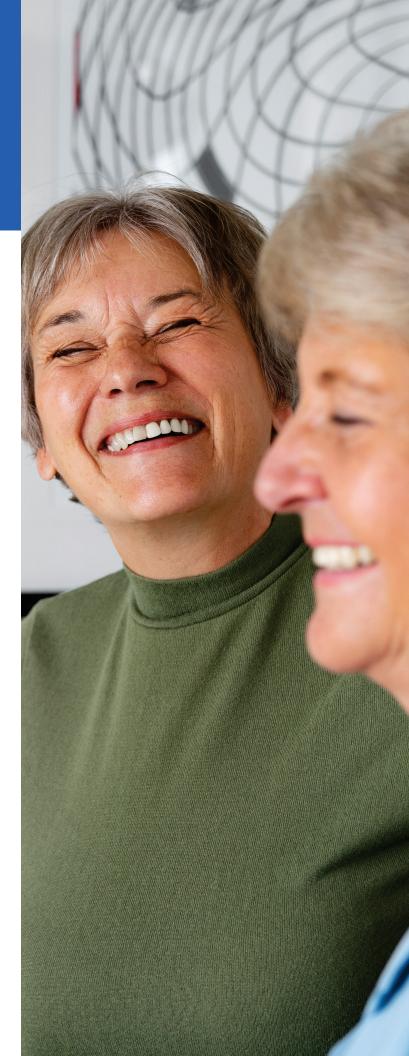
We are committed to making your experience with Leon Health as seamless as possible. As part of our ongoing efforts to streamline financial processes, we want to remind you of the correct procedure for requesting **Automated Clearing House** (ACH) services. If your office would like to initiate or update ACH services for electronic payments, please submit your request directly to our Provider Relations team.

HOW TO SUBMIT YOUR ACH REQUEST:

- Email: Send your request to Providerrelations@leonhealth.com
- **Include:** Your practice name, contact information, W9 and NPI

Our Provider Relations team will assist you promptly with the necessary steps to complete your ACH setup or update. If you have any questions or need further assistance, please don't hesitate to contact us at the email above.





PROVIDER SATISFACTION SURVEY COMING IN QUARTER 4

At Leon Health, your feedback is essential to us! We are excited to announce that a Provider Satisfaction Survey will be sent out to all providers in Quarter 4 via email. This is your opportunity to share your experiences and help us continue to improve our partnership.

SURVEY FOCUS AREAS

The upcoming survey will cover important areas of your experience with Leon Health including:

- Claim Processing
- Network Coordination of Care
- Credentialing
- Provider Relations
- · Health Plan Call Center
- Utilization Management

We encourage you to provide honest feedback on these topics. Your voice helps us understand what we're doing right and where we can make improvements.

WHY IS THIS SURVEY IMPORTANT?

At Leon Health, your feedback is our roadmap for improvement. By sharing your experiences with us, you help shape the way we serve both our providers and our members. Your insights allow us to:

- Enhance operational efficiency and make claim processing smoother and more reliable.
- · Strengthen coordination of care within our network so that patients receive seamless, high-quality service.
- · Streamline credentialing and utilization management to reduce administrative burdens and speed up important processes.
- Foster a collaborative provider network where everyone's voice is heard and valued.

Your feedback is essential for us to identify what's working well and where we can do better. By taking a few moments to complete the survey, you directly contribute to our shared success and help us deliver even better service to our community.



KEEP YOUR PROVIDER INFORMATION CURRENT WITH LEON HEALTH



As a trusted partner in delivering highquality care to our members, we want to remind you how crucial it is to Leon Health

WHY IS THIS IMPORTANT?

Accurate provider information:

- Ensures our members can find and access your services with ease
- Supports timely and efficient referrals
- · Helps us maintain compliance with regulatory standards
- Reduces administrative delays for you and your staff

PLEASE NOTIFY US IMMEDIATELY IF THERE ARE ANY UPDATES TO YOUR:

- · Address, suite number, or zip code
- · Phone number
- · Addition or removal of practice locations
- · Status on accepting Leon Health patients

- · Status on accepting new patients
- · Name or practice name
- Specialty
- · Employment or board status

HOW TO UPDATE YOUR INFORMATION:

Simply email our Provider Relations team at <u>Providerrelations@leonhealth.</u> <u>com.</u> Please include any supporting documentation, such as updated licenses, certifications, or written confirmation of demographic changes.

TIMELY COMMUNICATION HELPS US SERVE YOU AND OUR MEMBERS BETTER!

By keeping your information up to date, you help ensure seamless access to care for our members and continued compliance for your practice. Thank you for your partnership and attention to this important matter.

THE IMPORTANCE OF THE TWO MIDNIGHT RULE INPATIENT ADMISSION POLICY

The Two Midnight Rule **Inpatient** Admission Policy is a key requirement for all Medicare Advantage (MA) plans, including Leon Health Plan, as mandated by the Centers for Medicare & Medicaid Services (CMS). This policy establishes the criteria for determining when an inpatient hospital admission is considered medically necessary, based on the expectation that a patient will require hospital care spanning at least two midnights as documented by the admitting provider.

Following this rule ensures that our health plan remains compliant with federal regulations, supports appropriate use of hospital resources, and maintains consistency in admission decisions. Ultimately, this helps ensure that our members receive the right level of care at the right time—benefiting both patients and providers alike.

WHY IS THIS POLICY IMPORTANT?

The Two Midnight Rule forms the foundation for determining whether an inpatient hospital admission is reasonable and necessary for Medicare Advantage (MA) members. CMS mandates that all MA plans, including Leon Health Plan, follow this benchmark as outlined in 42 CFR §412.3. Adhering to this policy, ensures:

- Regulatory compliance with Medicare laws and CMS guidelines
- Appropriate utilization of hospital resources
- Consistent, evidence-based admission decisions
- Member access to medically necessary inpatient care

This policy applies to all Leon staff, contracted entities, and providers involved in prior authorization, concurrent review, or retrospective review of inpatient admissions. The policy details the process for reviewing hospital admissions—both prospective and concurrent—to determine the correct admission status for our members based on medical necessity, as documented by the admitting physician or provider.

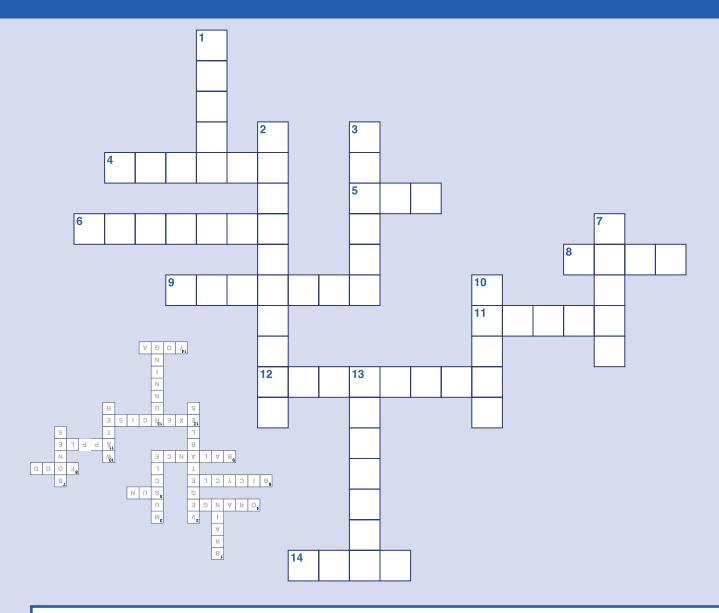
QUESTIONS?

Providers can access the policy directly on the Leon Health website by navigating to: Member Resources > How Can We Help? > Internal Coverage Criteria.

Alternatively, you can view the policy using this link: https://www.leonhealth.com/wp-content/uploads/pdf/leon-health-internal-coverage-criteria-2.pdf.



CROSSWORD HEALTHY AGING



ACROSS

- **4.** A good source of Vitamin C
- 5. Get your vitamin D from the ___
- 6. Exercise equipment with 2 wheels
- **8.** Fuel to your body
- **9.** You need good ______ to stand on one foot
- 11. A red or green fruit
- 12. Makes you fit and strong
- **14.** A series of stretches and poses mixed with deep breathing exercises

DOWN

- 1. Puzzles will keep your _____ sharp
- 2. Carrots, potatoes, and broccoli

- **3.** Lots of exercise will make them stronger
- **7.** Drink milk to keep them nice and strong
- 10. Keeps you hydrated
- **13.** Faster than walking