

Comprehensive Post Acute Network
Anthem Contract Process

The following steps/documents must be completed to move the provider to contract status with Anthem after the initial acceptance as a provider on their panel:

The provider must complete 3 forms that will be submitted to Anthem for contract participation. Anthem will forward a Facility Agreement if they get accepted to participate as a provider on the payer panel.

Step 1: Application for Contract Consideration - Anthem

- Form 1 of 3: Demographic Profile**
- The form asks for facility billing information, address, operating numbers, etc.
- Form 2 of 3: Capability Survey**
- Provider marks the list of services that are provided at the facility
- Form 3 of 3: Skilled Nursing Facility Participation Criteria**
- Provider marks and completes the list of questions specific to their services and outcomes

Submission of Forms: All three forms listed above must be completed and returned to both Anthem contracting representatives for consideration:

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Step 2: Sign Anthem Facility Agreement

DEMOGRAPHIC PROFILE
Skilled Nursing Facilities

Date Completed _____

IDENTIFYING INFORMATION

Facility Name _____

Owner/Affiliate _____

Tax ID Number _____

NPI Number _____

Medicare Number _____

Medicaid Number _____

CMS Rating _____

SITE ADDRESS

Street Address _____

City _____ State _____ Zip _____

County _____

Phone Number _____

Fax Number _____

Contact Name _____

Email Address _____

BILLING ADDRESS

Street Address _____

City _____ State _____ Zip _____

County _____

Phone Number _____

Fax Number _____

Contact Name _____

Email Address _____

CAPABILITY SURVEY
Skilled Nursing Facilities

Facility Name _____

NPI _____

Date Completed _____

SERVICE*	YES	NO	COMMENTS
1. General			
Number of Beds			
Private Rooms			
Bed scales & oversized beds for patients greater than 300 LBS			
Accept Pediatric Patients <i>Ages</i> _____			
Accommodate Weekend Admissions			
Therapy Provided on Weekends			
2. Specialized Care			
Wound Care <i>Stage(s)</i> _____			
Negative Pressure Wound Care Devices			
Brain/Head Injury Trauma			
Spinal Cord Injury			
Ventilator Dependent			
Ventilator Weaning			
Complex Tracheotomy Care			
Hemodialysis Coordination			
Peritoneal Dialysis			
PCA Pump			
Complex and/or Multiple PIC Lines			
Are their other specialty services not indicated that the SNF has the capabilities to provide?			
3. Administer Infusion Therapy			
IV Fluids or Antibiotics			
4. Isolation Room			
For Infectious Patients			
For MRSA Patients			
If there is not an isolation unit will you bunk like patients in the same room?			
5. Other			
Non Emergent Transportation			

**Provided by SNF or accessed through a participating provider in the applicable network.*

Skilled Nursing Facility Participation Criteria				Yes	No
Name of SNF	Medicare Cert #	Date			
				1.	Weekly Medical Assessment There is a Physician, Certified Nurse Practitioner (CNP) or Physician Assistant (PA) on site and available to evaluate patients at least weekly and more often as necessary.
2.	Follow-up with Primary Care Physician (PCP) For all admissions, facility has a process in place to notify PCP of patient's admit, as well as to send the PCP a discharge summary upon discharge.				
3.	Admissions Facility accepts patients 7 days a week, 24 hours a day from hospital, home, MD office and/or Emergency Department.				
4.	Staff to Support Admissions Staff will be available 5 days a week 7:30 a.m. until 5:30 p.m. to accept and communicate to member any admission and denial communication received from Anthem Case Management.				
5.	Weekend and Holiday Admissions When patient is admitted on a weekend day (<u>Friday, Saturday or Sunday</u>) or on a <u>Holiday</u> for therapy, therapy evaluation is completed within 24 hours of admission.				
6.	Therapies (Physical & Occupational) 6 days per week Facility provides P.T. and O.T. for Anthem patients six days per week.				
7.	Medication Reconciliation In preparation for discharge, does facility have a process in place to review (with patient &/or family member/POA) current medications patient is taking, as well as those medications in place at home that patient was taking prior to admission?				
8.	Ability to Provide Electronic Reviews sent through secure email Does this facility have the ability, through secure e-mail, request and submit <i>admission and concurrent clinical review updates</i> ?				
9.	CMS Survey (Inspection) DATE of most recent survey:				
	a) CMS Overall Star Rating- At the time of this submission, facility has an overall rating of 2 OR MORE . NOTE: Single (Supporting documentation of overall star rating must accompany this survey.)				
	b.) Number of Health Deficiencies in your facility's most recent CMS Survey. (Number of deficiencies must be at or below the national average of 7.5)				
	c.) Did Facility have any L3 health deficiencies in your facility's most recent CMS Survey. http://www.medicare.gov/NHCompare/Include/DataSection/Questions/HomeSelect.asp				