

Availity Provider Portal Coding & Condition Gaps Reports

Note: This presentation includes optional narration. For slide narration either:

- 1) In “Slide Show View”, press page-down on your keyboard to advance to next slide and page-down again to play narration, repeat as you progress.

OR

- 2) In “Normal View”, simply click on the speaker icon and then the Play Button to play the narration assigned to the slide displayed on your screen.



Availity –Coding & Condition Gaps Report

This presentation will discuss the following:

- *Report Objectives – the purpose and goals of the report.*
- *How to register and log in to Availity using the provided links.*
- *How to access the report – navigating payer spaces and applications.*
- *Coding & Condition Gaps Landing Page – report goals, descriptions and action items.*
 - ✓ *Coding gap data example – list of members with coding gaps and their conditions.*
 - *Needed actions – how providers can help and partner with Aetna Better Health.*
 - *Submitting Corrected Claims if needed – guide to re-submitting EDI or paper claims.*
 - ✓ *Condition gap data example – list of members with condition gaps and their conditions.*
 - *Needed actions – how providers can help and partner with Aetna Better Health.*
 - ✓ *Save and download data – how to save data to your computer with multiple options (Word, Excel, PDF, etc).*



Availity – Report Objectives

Aetna Better Health strives to partner with the provider community to manage care gaps for members affected by chronic medical conditions. Therefore, it is very important that we partner together and do the following:

- identify plan membership having chronic conditions and monitor their utilization to ensure they are getting the care they need at the time they need it.
- encourage membership having chronic conditions to seek and establish care management plans with their doctors when care gaps are present.
- ensure complete and accurate claims are submitted to the Health Plan for subsequent encounter submission to state regulators.



Availity –Coding & Condition Gaps Report

GETTING STARTED



Availity – Getting Started

Log in to access the report using the link below:

<https://apps.availity.com/availability/web/public.elegant.login>

If not an existing Availity User, the following links may be utilized to get registered.

- Registration link for Availity if not already using:
 - <https://www.availity.com/Essentials-Portal-Registration>
- Issues with Availity Registration Process or Access:
 - <https://www.availity.com/Contact-Us>
- Availity Client Services at 1-800-282-4548

Once you have access, the log in screen will look like this:



Availity – Portal Landing Page

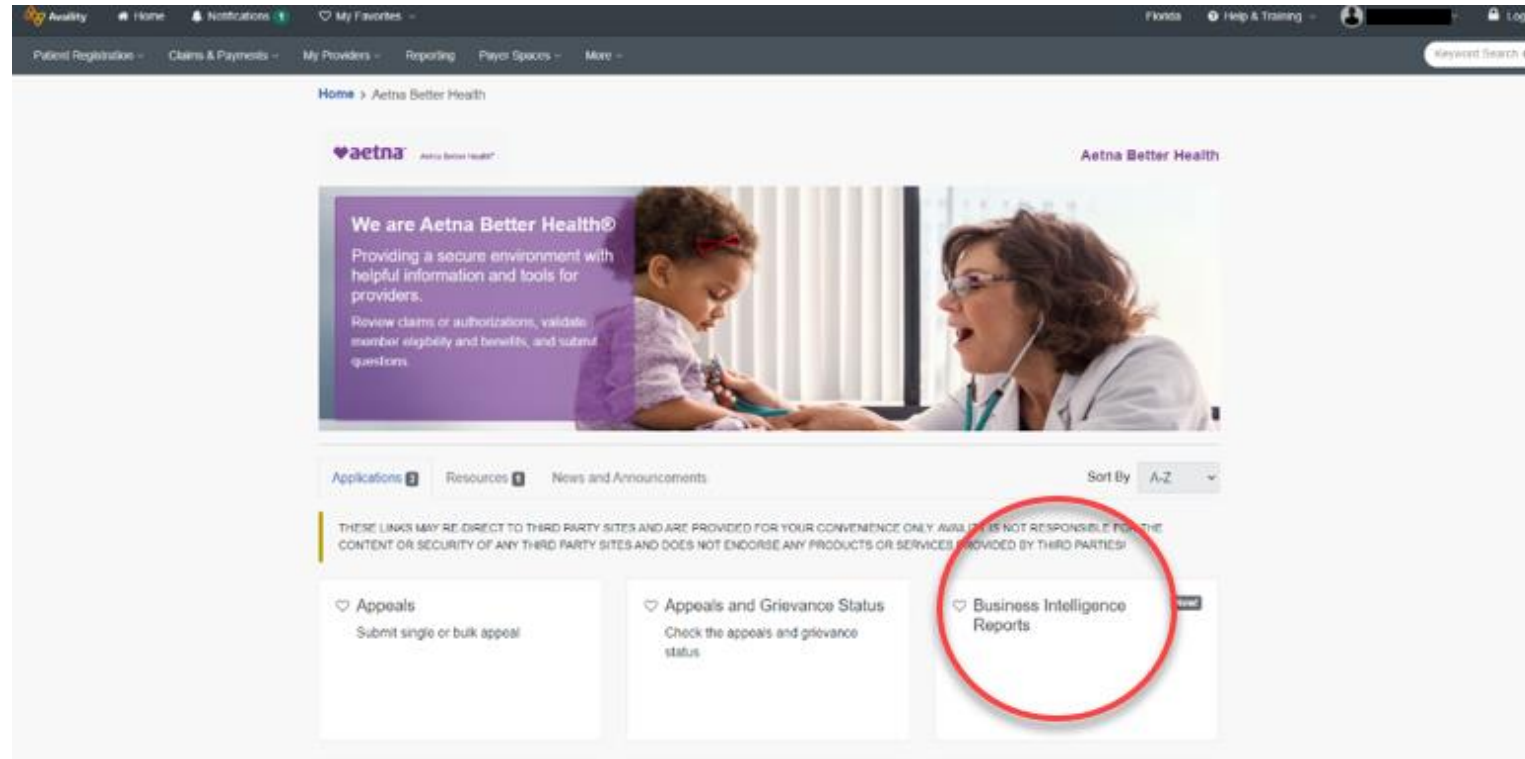
Select Aetna Better Health:

The screenshot shows the Availity portal landing page. At the top, there is a navigation bar with the Availity logo and links for Home, Notifications (1), and My Favorites. Below this is a secondary navigation bar with links for Patient Registration, Claims & Payments, My Providers, Reporting, Payer Spaces, and More. The main content area features a large banner for the COVID-19 PROVIDER Resource Center with a 'GET UPDATES' button. Below the banner is a Notification Center with a 'Patient Admission' alert. The 'My Top Applications' section includes 'Eligibility and Benefits Inquiry' (EB) and 'Add User'. A central grid displays various payer logos, with the Aetna logo circled in red. Other logos include Banner, Devoted, Humana, Molina Healthcare, Sutter Health, Texas Health, WellCare, and others. A 'Profile' link is visible at the bottom right of the grid. A 'News and Announcements' section with a 'NEW ALERT' tag is at the bottom left.



Availity – Report Type Selection

Select Business Intelligence Reports:



Availity – Provider Demographic Report Inputs

Select your organization, Tax ID, and NPI:

Home > Aetna Better Health > Business Intelligence Reports

Business Intelligence Reports

Give Feedback

Select Organization *
Select...

Select a TaxID *
Select...

Select a NPI *
Select...

Note: The NPI is required for verification, but it will not be applied as a report Filter. The reporting is by TIN.

* = Required Field

Clear Submit

Under Reports section, choose Condition & Coding Gaps:

Business Intelligence Reports

Home > PROVIDER Home

Value Based Solutions | Gaps In Care | Reports

Links

- Welcome to Business Intelligence Reports
- Value Based Solutions
- Gaps In Care
- Reports
 - PCP Report Card
 - PrioritizedMemberList
 - PDS Roster Echo-Back
 - Provider Encounter Rejections
 - Assigned Member Panel (All)
 - Gaps in Care By Provider Account
 - Inpatient Authorization Census (All)
 - PCMH Care Coordination Payment
 - Condition & Coding Gaps**

Important Message



Availity – Coding & Condition Gaps Report Introduction Landing Page



Coding & Condition Gaps Report

Report Date : 7/31/2024 Data Refreshed On: 7/16/2024 3:33:16 AM

[Go to Report Tab](#)

[Introduction](#)

[Coding Gap](#)

[Condition Gap](#)

1

2

3

Aetna Better Health strives to partner with the provider community to manage care gaps for members affected by chronic medical conditions.

Therefore, it is very important that we partner together for the following:

- Identify plan membership having chronic conditions and monitor their utilization to ensure they are getting the care they need at the time they need it.
- Encourage membership having chronic conditions to seek and establish care management plans with their doctors when care gaps are present.
- Ensure complete and accurate claims are submitted to the Health Plan for subsequent encounter submission to state regulators.

Potential Coding Gaps

This file identifies members who had visit within your practice during the current evaluation period, but the associated claim did not address members' previously diagnosed chronic conditions

Action Item

Pull the member's medical record for the identified date of service to determine whether a care plan for the chronic condition was discussed on this date of service. If the medical record:

- Does in fact substantiate the diagnosis, please send to Aetna Better Health a corrected claim with the same or similar diagnosis code related to the chronic condition.
- Does not substantiate management of the chronic condition on the date of service, there may be a need to contact the patient to ensure care plans are current and effective.

During any follow-up visit, ensure all identified diagnoses are appropriately captured in the medical record and billed on the claim.

Potential Condition Gaps

This file identifies members that have been seen by your practice in the recent past or are assigned to a provider in your practice as a primary care physician; but the members do not have claims indicating treatment of a chronic condition within the evaluation period

Action Item

Historical diagnoses concerning the members' chronic condition have been provided. Please assess if an annual, or follow-up visit, is scheduled for these patients:

- If a follow-up visit with the patient is scheduled, when the appointment occurs, please discuss any applicable chronic condition and appropriate care plan with the patient.

Be sure that the medical record appropriately documents all associated diagnoses and send to the health plan a claim that accurately and completely reflects all diagnoses represented in the medical record for the date of service.

- If a follow-up visit with the patient is not scheduled, please outreach to the patient to schedule a visit so that the patient's care plan can be developed or updated, as necessary.

The care plan should be discussed with the patient during the scheduled appointment and all chronic conditions appropriately documented in the medical record and a corresponding claim billed to the health plan.



Availity – Example - Coding Gap Report



Coding & Condition Gaps Report

Report Date : 7/31/2024 Data Refreshed On: 7/16/2024 3:33:16 AM

[Go to Report Tab](#)
[Introduction](#)
[Coding Gap](#)
[Condition Gap](#)

Tax ID : 203226273

Provider Name	NPI	Aetna Provider ID	Member Name	Gender	DOB	Patient Account Number	Service Date	ClaimID	Condition	DX Code	Diagnosis Description
				F			10/26/2023		Hematological	D58.2	OTHER HEMOGLOBINOPATHIES
				F			5/6/2024		Pulmonary	J45.998	Other asthma
				M			10/24/2023		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
				M			10/24/2023		SKCVL	M940	CHONDROCOSTAL JUNCTION SYNDROME TIETZE
				F			12/28/2023		Pulmonary	J45.20	MILD INTERMITTENT ASTHMA UNCOMPLICATED
				F			2/13/2024		PSYL	F983	Pica of infancy and childhood
				F			2/13/2024		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
				M			6/27/2023		Hematological	D58.2	OTHER HEMOGLOBINOPATHIES
				M			6/27/2023		Pulmonary	J45.20	MILD INTERMITTENT ASTHMA UNCOMPLICATED
				M			5/15/2024		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
				F			11/7/2023		Pulmonary	J45.20	MILD INTERMITTENT ASTHMA UNCOMPLICATED
				M			5/18/2023		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
				M			4/8/2024		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
				M			4/8/2024		SKCVL	Q666	Other congenital valgus deformities of feet



Availity – Coding Gap Report & Needed Actions

For the Coding Gap Report Aetna Better Health is seeking your assistance to see if the medical record substantiates adding the same or similar related diagnosis code to a corrected version of the claim.

If the medical record:

- does in fact substantiate adding the same or similar diagnosis, please send Aetna Better Health a corrected claim with the diagnosis code related to the chronic condition that is appropriate. Please refer to slide 12 for the instructions on how to submit a “corrected claim”.
- does not substantiate management of the chronic condition identified by previous medical records, at the practice’s discretion, there may be a need to contact the patient to ensure care plans are current and effective. Regarding the date of service identified in the report for the identified patient, no further action is needed by the practice. Aetna Better Health appreciates the efforts made by the practice to ensure complete and accurate records.

Tips for Submitting Corrected Claims (If coding gaps were found)

Process for Corrected Professional Claims

Note: Corrected claims are subject to timely filing submission guidelines. If you receive a denial related to this initiative, please contact your provider network representative so special accommodations can be arranged.

When submitting a Corrected Claim electronically (EDI)/837:

- For Professional claims, providers must include the original Aetna claim number in Loop 2300 segment REF*F8 with the claim's Frequency Code (CLM05-3) of "7" (Replacement of prior claim).

When submitting a Corrected Claim via Paper Claim forms:

- For Professional claims on CMS-1500 (02-12), the provider must include the original Aetna claim number and bill frequency code per industry standards. When submitting a Corrected claim, enter the appropriate bill frequency code ("7") left justified in the left-hand side of Box 22.

Example:

22. MEDICAID RESUBMISSION CODE	ORIGINAL REF. NO.
7	1234567890A33456

Note: Any missing, incomplete, or invalid information in any field may cause the claim to be rejected. If you handwrite, stamp, or type "Corrected Claim" on the claim form without entering the appropriate Frequency Code "7" along with the original claim number as indicated above; the claim will be considered a first time claim submission.



Availity – Example - Condition Gap Report



Coding & Condition Gaps Report

Report Date : 7/31/2024 Data Refreshed On: 7/16/2024 3:33:16 AM

[Go to Report Tab](#)

[Introduction](#)

[Coding Gap](#)

[Condition Gap](#)

Tax ID : 320115907

Provider Name	NPI	Aetna Provider ID	Member Name	Gender	DOB	Condition	DX Code	Diagnosis Description
				M		Cardiovascular	I471	SUPRAVENTRICULAR TACHYCARDIA
				F		Skeletal	M419	SCOLIOSIS UNSPECIFIED
				M		Cardiovascular	I10	ESSENTIAL PRIMARY HYPERTENSION
				M		CNS	G629	POLYNEUROPATHY UNSPECIFIED
				M		Substance Abuse	F1010	ALCOHOL ABUSE UNCOMPLICATED
				M		Skeletal	S022XXA	FRACTURE NASAL BONES INITIAL ENCOUNTER CLOSED FX
				M		Skin	L02415	CUTANEOUS ABSCESS OF RIGHT LOWER LIMB
				F		Diabetes	E119	TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS
				F		Hematological	D573	SICKLE-CELL TRAIT
				F		Skin	L0291	CUTANEOUS ABSCESS UNSPECIFIED
				M		AIDS/HIV/Infectious Disease	A400	SEPSIS DUE TO STREPTOCOCCUS GROUP A
				M		Skin	L02818	CUTANEOUS ABSCESS OF OTHER SITES
				F		Metabolic	E806	OTHER DISORDERS OF BILIRUBIN METABOLISM
				M		Cardiovascular	I469	CARDIAC ARREST CAUSE UNSPECIFIED
				M		CNS	G931	ANOXIC BRAIN DAMAGE NOT ELSEWHERE CLASSIFIED


Availity – Condition Gap Report and Needed Actions

For the Condition Gap Report Aetna Better Health is seeking your assistance to see if an annual or follow up visit is scheduled soon for these patients:

- **If so**, this is a reminder that the patient has been identified as having a chronic condition. When that appointment occurs, be mindful of the identified chronic condition as you manage the patient’s care plan and their medical record for that day. Finally, send the health plan a claim that contains all appropriate diagnosis codes representing the medical record for the date of service.
- **If not**, we would request outreach to the patient from the practice to ensure a care plan exists and is effective for the patient. Recommend the member schedule an appointment to discuss the care plan related to their chronic condition(s) documented in their previous medical records.



Availity – Download & Save

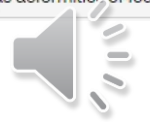
Navigation: |< < 2 of 3 ? > >| | ↺ |  Find | Next

aetna Coding & Condition Report Date: 7/31/2024 10:33:16 AM
Go to Report Tab [Introduction](#) [Condition Gap](#)

Tax ID: 203226273

Provider Name	NPI	Member Name	Gender	DOB	Patient Account Number	Service Date	ClaimID	Condition	DX Code	Diagnosis Description
			F			10/26/2023		Hematological	D58.2	OTHER HEMOGLOBINOPATHIES
			F			5/6/2024		Pulmonary	J45.998	Other asthma
			M			10/24/2023		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
			M			10/24/2023		SKCVL	M940	CHONDROCOSTAL JUNCTION SYNDROME TIETZE
			F			12/28/2023		Pulmonary	J45.20	MILD INTERMITTENT ASTHMA UNCOMPLICATED
			F			2/13/2024		PSYL	F983	Pica of infancy and childhood
			F			2/13/2024		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
			M			6/27/2023		Hematological	D58.2	OTHER HEMOGLOBINOPATHIES
			M			6/27/2023		Pulmonary	J45.20	MILD INTERMITTENT ASTHMA UNCOMPLICATED
			M			5/15/2024		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
			F			11/7/2023		Pulmonary	J45.20	MILD INTERMITTENT ASTHMA UNCOMPLICATED
			M			5/18/2023		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
			M			4/8/2024		Pulmonary	J45.40	MODERATE PERSISTENT ASTHMA UNCOMPLICATED
			M			4/8/2024		SKCVL	Q666	Other congenital valgus deformities of feet

Download menu options: Word, Excel, PowerPoint, PDF, TIFF file, MHTML (web archive), CSV (comma delimited), XML file with report data, Data Feed



Availity – Coding & Condition Gaps Report

THANK YOU

