PROVIDER UPDATE



Medi**Gold**

MAY 2025



MediGold Implementing New Core System

We will be implementing a new core administrative processing system – HealthRules Payer (HRP). This is a next-generation core health insurance administrative platform featuring automated claims processing and integrated administrative, financial, and clinical functionality. HRP will go live this summer and is currently in the final testing stages for configuration and workflow setup.

One of the most immediate changes for our provider community will be to our July claims payment schedule, with payments being paused for three dates – Friday, July 18, Tuesday, July 22 and Friday,

July 25, while we complete data cut-over activities. **Claims payments will resume on Tuesday, July 29**. Please note that our Payor ID Number (95655) will remain the same for electronic claims submissions.

There is a shared commitment across our organization to harness the power of HRP to administer all areas of our business to reduce inefficiencies. HRP will help transform our health plan to better serve both our member and provider communities. Next month, we'll be sharing another reminder about the coming transition to HRP with additional details. Please be on the lookout

We're Here To Serve You 🔗



Trinity Health Plan of Michigan is a Medicare Advantage plan, fully owned by Trinity Health. It's designed to provide our members with a more seamless health care experience, while also making it easier for health care teams to coordinate and deliver the best possible care. **LEARN MORE**

Provider Service Center 1-800-991-9907 (TTY 711)



May is Mental Health Awareness Month

As providers, you know how important your patients' mental health is to their overall wellbeing. There are numerous resources available to your patients to improve their mental health. One aspect that may be overlooked — simply moving!

Movement looks different for everyone - maybe your patients take exercise classes, walk, or do household chores. Movement has the power to transform their mental states and even reduce the risk for diseases like dementia. Moving our bodies releases endorphins and helps relieve stress. It also allows us to take a break from everyday challenges

and responsibilities, and helps emotions move through our bodies.*

Encourage your patients to keep moving to help improve their mental health! Their new One Pass® benefit also provides a tool called CogniFit® which offers a baseline assessment capturing their cognitive profile. It also includes a service called Grouper where members can meet people with similar interests, helping them to build new friendships. Members can get started with One Pass at YourOnePass.com!

*University of Colorado Boulder, "Mental health is ... Moving your body."

Provider Advocacy – Dos and Don'ts

As a trusted resource, we realize you may receive questions about Trinity Health Plan of Michigan from patients, colleagues, family members or friends. Please keep these dos and don'ts in mind when talking about Trinity Health Plan of Michigan.

DO

- Promote Trinity Health Plan of Michigan with your patients, and encourage them to look into our plan
- Promote our 2025 plans' product and benefit information
- Share Trinity Health Plan of Michigan social content from <u>Facebook</u> pertaining to product and benefit information
- Encourage friends, family and colleagues to learn more by visiting <u>our website</u>

DON'T

- Accept completed enrollment applications in your office
- Talk about our benefits in the exam/care setting, unless you get specific questions from patients
- Create your own original marketing content

Have concerns or questions? Please feel free to reach out to the marketing team by email at Communications@MediGold.com. We greatly appreciate your support!

Provider Service Center Closed for Holiday

The Provider Service Center will be closed **Monday, May 26** in observance of the Memorial Day holiday. Leave us a message at **800-991-9907**.



Accessing Provider Services

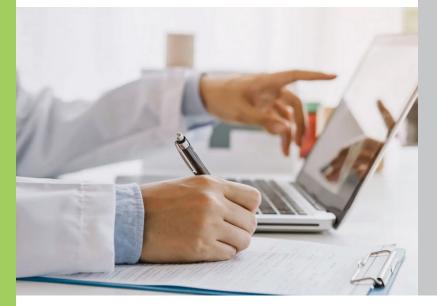
How do you get the basic information you need from us? Whether it's adding a new practitioner to your group, signing up for electronic Funds Transfer (EFT) or simply asking a credentialing question, here's how you can get the information you need.

Your first stop with any inquiries should always be the Provider Service Center (PSC). Staffed with experts in all aspects of our business, they can help you with any provider-related issues you might have. You can reach the PSC at 800-991-9907 (TTY:711). The following resources and methods can be used in addition to the PSC:

Provider Administrative Manual

To get the most comprehensive provider-related information for our health plan, you can access our Provider Administrative Manual through our website. You'll find the complete manual is organized in an easily accessible format. Everything from Eligibility and Enrollment, to Provider Policies and Protocols to Claims Processing Procedures and Guidelines, it's all there in the online Provider Administrative Manual.





Email us

When you have a question, you can also email us for help:

- 1) MediGoldcontracting@mchs.com This is a general mailbox for questions for your Provider Relations Network Manager (PRNM). Please use this address for general questions which will be forwarded to your specific PRNM for a response.
- 2) For credentialing questions, please contact **MCredentialing@mchs.com**. Use this email address to check on credentialing status for new providers on your team and for credentialing materials. Please allow 48 business hours for a response.



Join the Network – Access this link if you want your practice to join our provider network, or to add a new practitioner to an existing group already under contract.

Electronic Payment and Remittance
Request form – Enroll in electronic payment
and remittance services with us via this form.

Provider Information Change –

For address, financial, name change or phone number changes and more

Provider Request for Termination form –

To request a practitioner(s) to be removed from our network, please use this form

Again, when in doubt, please contact our Provider Service Center for assistance, or any of the other options available. We are here to serve you!

*These and other provider forms can be accessed on the **Provider Forms page** on our website

Medicare Billing Guidelines Should be Followed

As a reminder, Nurse Practitioners (NP) and Physician Assistants (PA) need to follow Medicare Billing Guidelines outlined in the Medicare Administrative Manual. These provider types should not be billing with an SA modifier to allow claims to process correctly.

Bladder Cancer

Key Facts

- Bladder cancer is the sixth most common type of cancer in the United States and the 10th most common cancer in the world. In 2025, approximately 84,870 people will be diagnosed with bladder cancer, and 17,420 people are expected to die from it, according to estimates from the Surveillance, Epidemiology, and End Results Program (SEER) of the National Cancer Institute (NCI).
- •In 2022, over half a million people worldwide were diagnosed with bladder cancer, and more than 220,000 people died from the disease. It is a complex and highly recurrent disease and is one of the most challenging and expensive cancer types to diagnose and treat.
- Risk factors for bladder cancer include tobacco use, having a family history of the disease, and exposure to
 certain chemicals in the workplace. Other risk factors include drinking well water with high levels of arsenic
 and having a history of bladder infections, according to the NCI.
- The chance that men will develop bladder cancer is about 1 in 27, according to the American Cancer Society. Some of the common signs and symptoms of bladder cancer include blood in the urine, pain when urinating, having to urinate more often, and back pain.

CMS requires submission of risk-adjusting diagnosis codes within the reporting period of each calendar year based on diagnoses documented in the medical records.

ICD-10-CM	DESCRIPTION
C67	Malignant neoplasm of bladder
C67.0	Malignant neoplasm of trigone of bladder
C67.1	Malignant neoplasm of dome of bladder
C67.2	Malignant neoplasm of lateral wall of bladder
C67.3	Malignant neoplasm of anterior wall of bladder
C67.4	Malignant neoplasm of the posterior wall of bladder
C67.5	Malignant neoplasm of bladder neck
C67.6	Malignant neoplasm of ureteric orifice
C67.7	Malignant neoplasm of urachus
C67.8	Malignant neoplasm of overlapping sites of bladder
C67.9	Malignant neoplasm of bladder, unspecified

Malignant Coding Tips:

Document the status of the malignancy, whether it is an active cancer receiving treatment, or a history of cancer that has been excised and eradicated. Secondary malignant neoplasm currently receiving treatment can be reported and coded by the site of the metastasis.

Do You Have Access to Our Provider Portal?

Through the Provider Portal you can:

- Verify eligibility of members
- Verify member claims history
- View member payment status, and more!

