



KIDS
HEALTH
FIRST

PEDIATRIC ALLIANCE



KHF PA Meeting

IPA-GA network August 21, 2025- Virtual



Donna

Agenda Items:

- Practice Liaison Updates (Donna)
- Practice Business Support Updates (Barbara)
- Provider Relations Updates (Patsy)
- Quality Updates (Liz and Laura)
- Q&A
- Discussion with Dr. Brad Weselman and Tom Finnerty

Practice Management Updates

Coming Events

Donna

- Register: August 26, 1-2 PM. Brent Reece, JD, Risk Management SS&P. "Legal Considerations in Practice Management"
- Register: September 3, 1-2 – Health Insurance Program Town Hall
- Register: September 4, 12-12:45 "Health Information Technology Optimization" presented by Sanofi
- Save the Date: October PA Meeting, **IN PERSON, Thursday, October 30th**, 10am-12:30pm. Brian Tuttle, HIPAA Compliance Consultant addressing the Security Risk Assessment
- Fall Quality Forum (TBD)

RSV Updates

- RSV Toolkit in process of updating
- Enflonsia approved 8/4/25
- Reminder that claims generally only covered 10/1/25-3/31/26

Cigna and Aetna Downcoding

- Due to take effect 10/1/25 (Cigna)
- Aetna apparently has had a similar policy for over a year
- KHF actions
 - Benchmarking- all over the map in using these higher codes
 - Coordinating with GAAAP, TCHN (TCCN doesn't hold Cigna contract) for greater practice advocacy
 - Provider education opportunities for coding and documentation
 - Practice support for identifying downcodes

Cigna E&M Downcoding

Applies to 6 high-level E&M codes:

- 99204–99205 (new patients)
- 99214–99215 (established patients)
- 99244–99245 (consult codes – rarely used in our network)

Cigna may downcode submitted CPT by one level if the claim does not support the higher level.

- Medical records are not reviewed before the adjustment.

An appeal can be submitted with supporting documentation of the original code.

Policy link in August Billing & Coding newsletter.

HIPAA NPP- Reproductive

- On June 18, 2025, the U.S. District Court for the Northern District of Texas issued an order declaring unlawful and vacating most of the HIPAA Privacy Rule to Support Reproductive Health Care Privacy at 89 Federal Register 32976 (April 26, 2024).
- The courts decision in Purl vs United States Department of Health and Human Services, which applies nationwide, essentially eliminates the enhanced federal privacy protection for enhanced reproductive healthcare information.
- The original HIPAA Privacy Rule and it's protections still stands.
- Many states have their own privacy and consumer protection laws that may impose additional obligations when handling reproductive health care information.
- HHS will determine next steps after a thorough review of the court's decision.

Misc.

- Employee Handbook
- Contact Management- please keep current for the 2 KHF newsletters- good job with setup!
- Supporting one another
- CPR resource- for your staff and for a "friends and family" program

Practice Business Support

Practice Business Support – TCCN & KHF

Barbara

CPR Program

TCCN Professional
Liability Program
(Risk Management)

**KHF Malpractice
Program
(Risk
Management)**

TCCN Health
Insurance Program

**KHF Sanofi
(Vaccine & Flu)**

KHF Merck

**TCCN GSK
(Vaccine & Flu)**

**TCCN Pfizer
(Pevnar, COVID,
Trumenba)**

**TCCN
AstraZeneca
(FluMist)**

**TCCN Seqirus
(Flu)**

TCCN Merchant
Services

TCCN CHADIS
Purchasing Program

TCCN McKesson
Medical Supplies

**TCCN Anytime
Pediatrics**

**KHF Coding
Seminar (Annually-
November)**

**KHF OSHA
Training (Annually-
April)**

KHF NP Protocol

**KHF MOC
Programs**

**Moderna
New – KHF & TCCN**

Fall Timeline

- August: Respiratory Season Guidance
 - Flu, RSV, COVID
 - Flu Shipping Now
 - RSV in next month or so

For RSV – please be aware that if you give immunization outside of window (Oct-Mar) you RISK not getting reimbursed.

- Late September: Malpractice Renewal
- End of October: Health Insurance Renewal
- Mid-November: Health Insurance Open Enrollment

Risk Management – Coming Attractions!

Barbara

- Save the Date: August 26, 1-2 PM. Brent Reece, JD, Risk Management SS&P. *"Legal Considerations in Practice Management"*
- October 9, 2025
 - *Risk Assessment Trends and Deep Dive*

Thank you for completing the Malpractice Risk Assessments!!

Malpractice Notifications

If you encounter a situation that could reasonably lead to a malpractice claim, lawsuit, or board complaint, **contact Brent immediately.**

Examples of reportable situations include:

- Unexpected patient outcome that raises concern for you and/or the parents.
- Parents make legal threats or demand reimbursement (verbally, in writing, or through the portal).
- Parents express dissatisfaction and transfer care to another provider.
- Negative comments posted on social media about care or the practice.
- Parents incur additional medical expenses tied to your provider's care (e.g., ER visit after an appointment).
- A serious or catastrophic medical event occurs following a visit.
- Receipt of a medical records request from an attorney.

Important:

- Do **not** decide based on whether you believe care was appropriate.
- The key question is: *Could parents or their attorney pursue this further?*
- Always err on the side of caution and report.

Why reporting matters:

- Protects coverage by creating a claim "placeholder."
- Allows the carrier to step in early, if resolution is possible.

Brent Reece, JD, CPCU

d: 770-308-2087

c: 706-300-2033

breece@sspins.com

NP – Composite Board Update

- Effective **July 7, 2025**, GCMB has migrated all licensing and application services to the **ThoughtSpan Licensing Gateway**. This modern platform replaces our legacy systems and offers a faster, more secure, and user-friendly experience.
- **Gateway link:** <https://gateway.medicalboard.georgia.gov/>
- **Mandatory registration:** All users—regardless of any prior portal accounts—**must** create a *new* ThoughtSpan profile. The system will automatically match your existing licenses and pending applications using your demographic details. If you experience issues with this or any other issues, please submit a ticket at <https://gcmb.nextrequest.com/> and select the department “**ThoughtSpan Licensing Gateway Issues.**”

TCCN Health Insurance Program Review

- **Concern:** Over the last 5 years, program expenses have exceeded premiums collected, resulting in an **MLR over 100%**.
- **Board Directive:** Recognizing the program's critical importance to member practices, Board directed the Broker & program staff to assess its viability, trends, and long-term sustainability.
- **Review Process:** Analysis was thoroughly evaluated and vetted by the Network Management Committee, with support and guidance from the Broker and program staff.
- **Next:** Review issues identified, and Committee's recommendations presented on the next slides.

Program Changes Recommended by Committee

Barbara

1. Minimum contribution level increased to 70% from current 50% minimum. *(Rollout to practices should emphasize the associated tax benefits to the practice.)*
2. Enforce 60% minimum participation level requirement (minus valid waivers).
 - Practices hitting a minimum threshold of between 50-60% will be evaluated by Broker/OneDigital and TCCN.
3. Mandatory assignment of a designated Benefits Champion for participating practices.
 - Champion will work directly with the broker to ensure all of the information is disseminated and assure enrollment process and requirements are met.
 - Practice administrators and the Benefits Champion must attend either the live webinar or watch the recording and attest to having seen and understood the enrollment process they must follow.
 - Mandate participation of every employee in the enrollment process, regardless of intent to participate or not: Employees declining participation to enroll online must sign a waiver form.
4. Practices must offer all required supplemental benefits options to their employees (specifically worksite benefits).

Provider Relations Update

Credentialing Committee 2025 Schedule

- Submit all required initial credentialing documents by the desired months deadline.
- If documents are missing or incomplete, providers will be delayed to the next meeting.
- Recredentialing must be completed by a specific date, or providers will be non-compliant.
 - Kathryn sends recredentialing notifications to practice 2-3 months early to ensure there are no compliance concerns.
 - If you receive an email from Credentialing@khfirst.com, please respond ASAP!

Month	Last Day to Submit Documents	Credentialing Meeting Date
September	9/2/2025	9/9/2025
October	10/7/2025	10/14/2025
November	11/4/2025	11/11/2025
December	12/2/2025	12/9/2025

DEA/License Expirations

KHF Credentialing monitors DEA/License expirations.

- Checks for updated expiration dates on respective websites.

PA will receive a reminder email, if expiration is close.

- Please respond within the timeframe requested so your provider remains compliant.

Physician & APP Coding Expert

Does your practice have, or do you know of a provider who is a billing expert in KHF network?

- Physician or APP

Donna is seeking a provider who can identify and assist with:

- Current vs. Old codes
- Changes in coding associated with procedures

Vaccine Rate Update

Enflonsia

Cigna will include in 8/1/25 injectable list.

No pricing/rates released by other health plans

- CPT 90382 (Vaccine)
- CPT 96380 (Admin Code)
- CPT 96381 (Admin Code)

COVID

Aetna, Cigna, & UHC fee schedules on KHF intranet.

- CPT 91318 (Pfizer)
- CPT 91319 (Pfizer)
- CPT 91320 (Pfizer)
- CPT 91321 (Moderna)
- CPT 91322 (Moderna)

TCCN Payor Escalations & Concerns

Anthem	<p>Meetings held with Anthem EVP to stress negative impact on TCCN practices, includes financial strain, inability to submit claims for unloaded data, etc.</p> <ul style="list-style-type: none">• Outstanding 2024 rosters, final provider data ETA mid-August.• Claims projects to initiate when data complete. <p>Directory inconsistencies.</p> <ul style="list-style-type: none">• APPs are often missing in directory.• Missing physicians caused by data errors and/or Availity attestation. PCP assignments impacted.
Amerigroup	<p>Contract load complete as of 5/22.</p> <ul style="list-style-type: none">• Claims project in process. <p>PMPM roster audit reflected missing practices/providers.</p> <ul style="list-style-type: none">• Global PMPM Audit in process.

Claim Issues?

Send to payorconcerns@khfirst.com

- All supporting documentation
- EOB's/remittance
- ID cards

Quality/Utilization Management

Liz Hogan,
Laura Baldwin

Well Child and Immunization MOC

Part 4 - 25 points

Register Now



Well Child
Visits 0-15
months

Well Child
Visits 15-30
months

Well Child
Visits 3-21
years

Childhood
Immunization
– MMR

Childhood
Immunization
– Combo 7

Childhood
Immunization
– Combo 10

Adolescent
Immunization
– Combo 2

Key Learning Objectives

- **Well-Child Visit Rates:** Implementing strategies to ensure timely and regular preventive care visits.
- **Immunization Rates:** Developing and applying interventions to increase vaccination coverage among pediatric patients.
- **Vaccine Coding and Identification of Data Capture Issues:** Ensuring accurate documentation, coding of vaccinations, and identifying gaps or errors in data capture to improve immunization tracking and reporting.
- **Training Pediatricians on Vaccine Hesitancy:** Offering resources and guidance to help pediatricians confidently discuss vaccine safety with families and address their concerns.
- **Communicating About Vaccines** - Robert A. Bednarczyk, PhD

Reducing Potentially Avoidable ER Visits (PAER)

- **Business Objective:** Achieve a reduction in potentially avoidable emergency room (ER) visits to enhance cost-efficiency under our value-based care contracts.
- **Why It Matters:**
 - **Drive shared savings** for our affiliated practices
 - **Improve patient care coordination and outcomes** by managing care before escalation to the ER.
 - **Secure long-term financial sustainability** for our organization within value-based payment models.
- **Key symptom focus areas:** Headache, vomiting/dehydration and fever

- **Communication strategy:** Equip TCCN practices with clear messaging and educational materials that guide families in choosing the appropriate care setting—pediatrician (medical home), urgent care, or emergency department—to minimize unnecessary pediatric ER visits.
- **Sample messaging or materials to be created:**
 - **Symptom-based decision aids:** Charts, decision trees, or flowcharts to help caregivers assess symptoms and decide whether to call the pediatrician, go to urgent care, or the ER.
 - **Fever guidance:** When to manage at home vs. escalate, especially in infants under 2 months.
 - **Dehydration/red flag recognition:** How to spot concerning signs during vomiting/diarrhea episodes.
 - **Medication dosing instructions:** Clear dosage charts to reduce caregiver anxiety and errors.
 - **After-hours protocol explanation**

PAER Practice Touchpoints

- Beginning outreach with practices that have the **highest ED utilization rates on our payor contracts.**
- Goal: Pinpoint patients who may need:
 - Support in establishing a relationship with a PCP
 - Education on when to treat at home, see PCP, use urgent care, or go to the ED
- Partnering with **CHOA** to ensure consistent messaging across practices
- May be reaching out to **your practice** to collaborate on this work



Quality Push – Progress Update

Purpose:

- Strategically engage practices with the most opportunity for improvement or largest patient panels
- Leverage summer well-check season to close care gaps and improve metric performance
- Support value-based care success by driving improvements in quality outcomes and shared savings

Approach:

- Assigned team of 7 reps
- Each rep assigned ~7–8 practices; Laura supporting larger groups and PAER
- Email outreach began in June
- Focused meetings were had with practices to:
 - Review updated TCCN scorecards
 - Identify 2025 performance opportunities
 - Share tools and support available through TCCN

Coming soon:

- Asthma Push and flu recall lists
- Fall Push and recall lists

Misc

- Tom Finnerty and Dr Brad Weselman discussion
- Other questions?

- Dr. Weselman contact information:
- Brad.weselman@tccn-choa.org

**Thank you for attending! Slides
will be sent via the RoundUp**