



PhysicianPerformance

Empowering Physicians. Elevating Healthcare.

Office Manager Meeting

October 7, 2025

Agenda

- Introductions
- Health plan contract updates
- Specialty Spotlights
- Enrollment Updates
- Council for Affordable Quality Healthcare, Inc. (CAQH)
- CMS Exclusion checking reminder



INTRODUCTIONS

Physician Performance Team

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HEALTH PLAN CONTRACT UPDATES



SPECIALTY SPOTLIGHT

Specialty Spotlight



IN FOCUS

Important updates for the provider community

2025 Q1 New Group Updates, New Provider Updates & Termed Providers



Welcome new Physician Performance practices

Please join us in welcoming the following groups that recently joined PPLL:

Carlos A. Moreno, MD Associates, P.C.
PCP in Norwood, MA

HMFP new staff arrivals - 2025 Winter update

The following new HMFP Providers have joined since November 2024. Click [here](#) to view each departments' program updates and [here](#) to see listings by department of new staff arrivals.



Please welcome these new providers joining existing Physician Performance groups:

Spotlight on Gastroenterology



March is Colorectal Cancer Awareness. Screening can reduce incidence and mortality through early detection and removal of precancerous growths. Helping patients understand the various ways they can be screened increases their compliance with the screening. Click [here](#) to view BILHPN's patient education materials on patient screening options that can be incorporated into your practice's work flow, and click [here](#) to view a screening colonoscopy access listing by BILHPN facility.

Dr. George Dickstein and Dr. Nitin Aggarwal, gastroenterologists from two of our community GI practices, shared some thoughts on [updates in GI care](#). This is for informational purposes only, and this should not be considered medical advice. We would encourage you to reach out to your Physician Performance or BILHPN gastroenterologist for further guidance on these topics.



The chart below outlines gastroenterology practices that are members of Physician Performance, along with a summary of services provided and contact information for referrals. Click [here](#) to see all the gastroenterology providers in the BILHPN network. If you need assistance finding a gastroenterology provider for a particular patient, please reach out to us and we can connect you to the appropriate referral management contact.

Practice	Location	3rd available appointment-Non-urgent	Services offered	Contact
BIDMC Department of Gastroenterology	Boston, MA	Existing: MD specific once established	Consults, EGD, Infusions, ERCP, EUS, Endoscopy.	GI Call Center 617.754.8888

ENROLLMENT UPDATES

Enrollment Updates

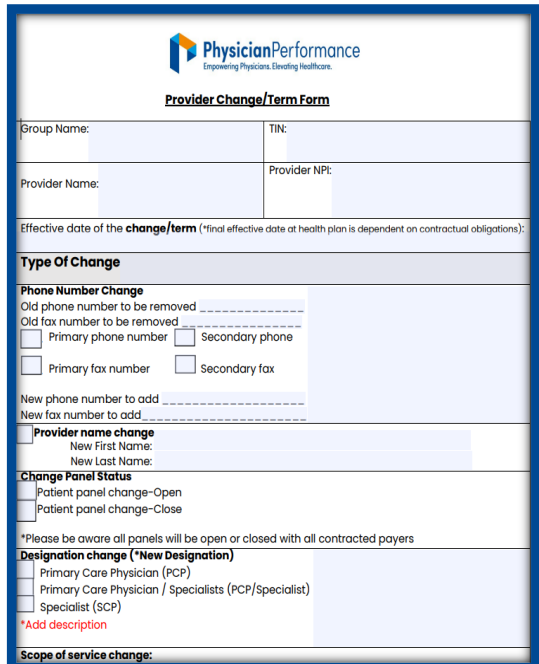
- BILHPN and Physician Performance team have worked together to streamline enrollment forms
- New provider joining an existing Practice
 - Form has been consolidated for efficiency
 - Ability to attach required documents
 - Ability to sign agreements
 - Form is available electronically
 - Issued to office manager and provider
 - Physician, NP/PA, Behavioral Health, Ancillary providers
 - Other notes:
 - American Board has changed its policy and is no longer providing termination / renewal dates

The screenshot displays the 'PROVIDER ENROLLMENT ONBOARDING FORM' from the Beth Israel Lahey Health Physician Performance Network. The form is organized into several sections:

- Header:** Includes the organization's name and logo.
- Form Fields:** Contains input areas for 'Date of Request', 'Start Date', 'Submitter Name', 'Submitter Email', and 'Onboarding provider'.
- SECTION 1 - PROVIDER INFORMATION:**
 - Provider's Legal Name:** A text field.
 - Provider's Email:** A text field.
 - Citizenship Status / Visa:** A section with multiple-choice options for 'American Citizens' (Yes/No), 'Citizenship (country):', and 'Expiration Date:'. It also includes a question about permanent immigrant status.
 - Foreign Graduate:** A section with a 'No' option and a 'Yes - If Yes, please attach the following:' list containing: 'Letter of recommendations from Dept. Chief attesting to the applicants unique clinical skills and leadership', 'Letter from peer not within the provider's practice', and 'Letter of ECMG Certificate'.
- Practice Information:** A section at the bottom of the form.

Enrollment Process

- Change / Term form consolidation
 - Streamlined the form to enable practice to record and submit all types of changes and termination
 - Form goes to Physician Performance and BILHPN Enrollment
- Power BI Health Plan Report Tool
 - BILHPN and Physician Performance are working together to provide a tool that will enable practices to view their providers status with payors



The image shows a screenshot of a web-based form titled "Provider Change/Term Form" from Physician Performance. The form is designed for submitting changes or terminations for a provider. It includes fields for Group Name, TIN, Provider Name, and Provider NPI. A section for "Effective date of the change/term" is present, with a note that the final effective date is dependent on contractual obligations. The "Type Of Change" section includes checkboxes for "Phone Number Change" (Old phone number to be removed, Old fax number to be removed, Primary phone number, Secondary phone number, Primary fax number, Secondary fax) and "New phone number to add", "New fax number to add". There is also a section for "Provider name change" (New First Name, New Last Name). The "Change Panel Status" section includes checkboxes for "Patient panel change-Open" and "Patient panel change-Close". A note states "Please be aware all panels will be open or closed with all contracted payers". The "Designation change (*New Designation)" section includes checkboxes for "Primary Care Physician (PCP)", "Primary Care Physician / Specialists (PCP/Specialist)", and "Specialist (SCP)". A red link "*Add description" is visible. The "Scope of service change:" section is at the bottom.

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Provider Change/Term Form

Group Name: TIN:

Provider Name: Provider NPI:

Effective date of the **change/term** (*final effective date at health plan is dependent on contractual obligations):

Type Of Change

Phone Number Change
Old phone number to be removed _____
Old fax number to be removed _____
☐ Primary phone number ☐ Secondary phone
☐ Primary fax number ☐ Secondary fax

New phone number to add _____
New fax number to add _____

Provider name change
New First Name: _____
New Last Name: _____

Change Panel Status
☐ Patient panel change-Open
☐ Patient panel change-Close

*Please be aware all panels will be open or closed with all contracted payers

Designation change (*New Designation)
☐ Primary Care Physician (PCP)
☐ Primary Care Physician / Specialists (PCP/Specialist)
☐ Specialist (SCP)
[*Add description](#)

Scope of service change:



**COUNCIL FOR AFFORDABLE QUALITY
HEALTHCARE, INC.**

Council for Affordable Quality Healthcare, Inc.

- We would like to remind all of our group practices about the importance of maintaining accurate information in the health plan provider directories and the process for making demographic changes related to your practice.
- To ensure accurate and timely updates, it is essential that any demographic changes are first communicated to Physician Performance before entering the information into the CAQH / CAQH ProView™ system.
- Communicating this information is a requirement of the Participation Agreement, and helps maintain constancy and accuracy across all records and avoids any potential discrepancies that may cause issues such as claims payment denials

Council for Affordable Quality Healthcare, Inc.

- Please notify us of any changes regarding:
 - Practice Location
 - Adding or removing a practice location
 - Provider details
 - Examples: name change; Status changes between PCPs and Specialists; PCP open / closed patient panel changes
 - Tax Identification Number
 - Any other relevant demographic information
- Once we have received and approved your updates, you can then proceed to enter the information into CAQH system. Physician Performance will notify BILHPN Provider Enrollment and the changes will be submitted to the health plans

Council for Affordable Quality Healthcare, Inc.

- Federal government and Massachusetts Division of Insurance require the following be updated by providers every 90 days:
 - Health Plans must publish accurate provider directories to ensure patients have access to up-to-date information about in-network providers.
 - Plans must contact their contracted providers on a quarterly basis to update directory information.
 - All updates to the online provider directories must be completed within 30 days of receiving information requiring an update.
 - State regulation now requires health plans to remove non-responding providers from directories.

Council for Affordable Quality Healthcare, Inc.

- New fields added this year that providers need to update:
 - Languages spoken by the provider
 - List of genders and gender identities they treat
 - Age groups treated by the provider
 - Special populations and cultural groups they treat
 - Telehealth modalities
 - Availability to accept new patients

CMS REQUIRED EXCLUSION CHECKING

CMS Exclusion Checking

- Reminder to Practices on Required Exclusion Checking
- All BILHPN providers are responsible for complying with BILHPN contracts, which require you to ensure that employees and vendors, as well as any other downstream contractors, have not been excluded from participating in federal health care programs.
- Exclusion checking is the process of verifying that a current or potential employee or vendor is not classified as an excluded individual who is prohibited from participation in any federal healthcare program.

CMS Exclusion Checking

- This process should happen before hire of an employee or before signing a new vendor contract, and then at least annually.
- Please review all new vendors and employees through each of these lists:
 - [List of Excluded Individuals/ Entities \(LEIE\)](#)
 - [System for Award Management \(SAM\)](#)
 - [Exclusion Checks MassHealth Suspended or Excluded Providers](#)



OPEN DISCUSSION / QUESTIONS



THANK YOU