



By  **EmployerDirect** Healthcare

**EMPLOYER DIRECT HEALTHCARE, LLC.**

**PROVIDER MANUAL**

## I. Introduction

This **Employer Direct Healthcare Provider Manual** (the “Manual”) contains additional information concerning the operating policies and procedures of Employer Direct Healthcare, LLC. (“EDH”). The information contained in this Manual applies to Providers, including any Bundled Providers, who care for Members.

EDH is committed to working with Providers and their staff members to assure that Members have access to quality services. Your cooperation and compliance with the requirements, policies and processes in your Provider Agreement and this Manual benefits you and your patients.

The requirements, policies and processes set forth in this Manual are a contractual obligation as stipulated in your Provider Agreement with EDH. Additionally, capitalized terms in this Manual shall have the respective meanings assigned to such terms in the Provider Agreement. In the event of a conflict between the terms of your Provider Agreement and this Manual, the terms in the Provider Agreement shall control.

Any changes to this Manual will be communicated by EDH to Providers at least thirty (30) days prior to implementation and will be communicated in an EDH newsletter, email notification, verbal communication or notification on the EDH home page, [www.edhc.com](http://www.edhc.com). The Manual will be available to Providers on the EDH website, [www.edhc.com](http://www.edhc.com).

Finally, facilities utilizing Bundled Providers are responsible for ensuring that Bundled Providers comply with any applicable requirements of this Manual, including any changes to the Manual.

## II. Quality and Efficacy Information to be provided by Providers to EDH

Providers are required to disclose accurate and complete information to EDH, when requested by EDH and pursuant to the terms of the Provider Agreement, so that EDH may effectively and accurately inform Plan Sponsors and Members about the availability, quality and efficacy of a Provider’s medical services. Any such information shall be disclosed by Providers within fifteen (15) days of a request from EDH, and Providers are solely responsible for the cost, content and accuracy of such information. Providers are also required to promptly provide EDH with any updates to this information during the term of the Provider Agreement.

Such information shall include all documentation and materials that EDH may reasonably request with respect to:

- (a) As applicable, a description of a Provider’s location, facilities and equipment, capacity and any additional information concerning the facilities and equipment as EDH may reasonably request.

- (b) Statistical measures, including numbers of procedures performed and specific major complications, if any.
- (c) Third party review, awards and accreditations.
- (d) Summaries of any studies on outcomes and other patient quality of service measures.
- (e) All protocols needed for Member care including, but not limited to, preadmission, pre-operative and discharge protocols.

### **III. Additional Provider Duties**

In addition to the Provider Duties set forth in the Provider Agreement, Providers are also required to comply, as applicable, with the following requirements:

- (a) **Designated Contact Person.** Providers shall designate one or more individuals to provide EDH with relevant information for the implementation of the Provider Agreement and to work with EDH as necessary during the term of the Provider Agreement to facilitate the provision of Covered Services. Any changes with respect to the identity of a Provider's designated contact person shall be promptly communicated to EDH.
- (b) **Access and Communication with EDH.** Providers shall provide for prompt telephone access with EDH during normal business hours for non-emergency inquiries. Additionally, Providers and EDH will establish mutually agreeable procedures and protocols for urgent communications at all times and Providers shall provide EDH with a contact name for any such urgent communications.
- (c) **Requirements for Member Travel.** Prior to an Episode of Care, EDH shall notify Provider of any Member Travel, or, in the event Provider becomes aware of Member Travel, shall notify EDH. Providers shall confirm a Member's travel plans with both EDH and the Member. Provider shall then, upon confirmation of travel plans, work with EDH to ensure appropriate level of care and organization of the members continuum of care prior to travel for services. Provider will work with EDH to update EDH of any necessary changes to travel arrangements to optimize the member experience and outcome.
- (d) **Quality Assurance and Utilization Review.** Providers shall cooperate with the quality assurance and utilization review programs of EDH and Plan Administrators, and, upon reasonable request, Providers shall provide EDH and/or Plan Administrators with access to pertinent documents maintained by Providers as required in connection with such programs.

- (e) **Medical Records.** Providers shall provide for and ensure all requisite procedures and policies for the timely filing and maintenance of Member medical records. EDH will obtain necessary medical authorizations from each Member for the specific purpose of sharing Member medical records with Providers.
- (f) **Descriptions of Episodes of Care and Medical Billing Records.** Providers shall promptly provide EDH with appropriate and customary documentation of the medical care provided during Episodes of Care, including copies of medical records, UB-04 and/or HCFA-1500 forms. Any filings by Providers, submitted to EDH, after one-hundred and eighty (180) days from the conclusion of the Episode of Care, will not be accepted or reimbursed by EDH. Provider also will relinquish any rights under the Provider Agreement to seek reimbursement directly from the Plan Sponsor or Member.
- (g) **Non-Discrimination.** Providers shall not discriminate in the delivery of Covered Services to Members on the basis of race, religion, national origin, sex, marital status, sexual orientation, health status (except as directly related to medical treatment), disability, source of payment for services, or age.

#### **IV. EDH Customer Service Contact Information**

Questions about your Provider Agreement, the information in this Manual or Employer Direct Healthcare? EDH is just a telephone call or e-mail away. Please contact us as follows and we will be pleased to promptly assist you with your inquiry:

Employer Direct Healthcare

Telephone: 855-200-2099

E-Mail: [EDHCPProviderTeam@edhc.com](mailto:EDHCPProviderTeam@edhc.com)