

Procedures to convey temporary facility changes due to the COVID-19 pandemic

As you know, AmeriHealth HMO, Inc. and AmeriHealth Insurance Company of New Jersey (collectively, AmeriHealth New Jersey) require participating providers to provide advance written notification of changes that affect your availability to provide care to patients. As the COVID-19 pandemic continues, we want to ensure we have the information needed to ensure a smooth transition for your patients, our members.

Follow the steps outlined below to notify us of any of the following scenarios:

- Temporary closing of your facility
- Moving your AmeriHealth New Jersey patients to another facility
- Experiencing quality or staffing issues that may affect your ability to treat our members

If one of the scenarios above occurs or you anticipate will occur, please email the following information to the Provider Network Services team at qualitymanagement@amerihealth.com:

- 1. A comprehensive list of AmeriHealth New Jersey members at your facility that includes the following:
 - a. Member name
 - b. ID number
 - c. Date of birth
 - d. Level of care (SNF, subacute, assisted living, residential, etc.)
- 2. A description of the issue
- 3. Action steps you are taking to address the issue
- 4. A timeline for mitigation of the issue
- 5. The name and contact information of the associate at your facility who is responsible for the action plan and who can answer questions about the plan
- 6. The facility name, address, NPI, and contact information if you require the use of another facility
- 7. A copy of all communications notifying our members and/or their families of your plan and the date it was/will be sent

Once your temporary procedures are no longer needed, please notify us by sending a follow-up email to qualitymanagement@amerihealth.com.

Please let us know if you have additional guestions or need further assistance.

Thank you for your continued commitment to our members.