

Sentara Medicare Provider Frequently Asked Questions - PQAT Forms

What is a PQAT form?

PQAT stands for pre-enrollment qualification assessment tool. This form is required to verify that your patient has a qualifying chronic condition in order to be enrolled in a Sentara Medicare chronic condition special needs plan (C-SNP). There are two versions of the PQAT—one for our lung C-SNP and one for our diabetes and heart C-SNP.

Is this form required by the Centers for Medicare & Medicaid Services (CMS)?

Yes. Medicare requires health plans to obtain confirmation/verification of a chronic condition to enroll in a C-SNP plan through a PQAT.

How will I receive the PQAT?

Typically, the plan sends the provider's office a fax or email requesting that a PQAT be completed. However, you may also receive the PQAT from your patient or their broker.

How do I send the PQAT back to Sentara Medicare?

You will fax the form back to Sentara Medicare at 757-648-1367 or 1-833-459-0789.

*We currently do not have the ability to load the forms into all platforms that our in-network providers use

Is there a deadline for when I have to return the PQAT back to Sentara Medicare?

Yes. For your patient to remain enrolled in their C-SNP, Sentara Medicare must submit the PQAT to the CMS by the end of the first month the patient is enrolled. To meet this deadline, we ask that the provider fill out, sign, and return the PQAT within 72 hours of receipt.

What happens if I do not return the PQAT within 72 hours?

If the PQAT is not returned to Sentara Medicare with enough time to submit to CMS, the member will be notified of disenrollment, and if applicable, returned to their previous Medicare plan until the PQAT can be obtained and an enrollment application reprocessed.

The form indicates the patient is in jeopardy of losing their insurance if the PQAT is not received by a certain time. This statement has caused a lot of frustration and worry for the patients. Is this necessary to state?

Yes. CMS has a strict deadline to submit verification by. It is necessary to let all parties know there is a risk of disenrollment if this deadline is not met.

Can the PQAT form be tied to an office visit vs a deadline?

A: No. Enrollment can occur at any time the member requests it, so aligning the collection of the forms with an office visit will potentially cause your patient to lose their enrollment eligibility in their C-SNP.

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Can providers receive a master list on January 1 of each year for whatever patients need these forms? We could manage it better versus waiting for the patient to show up with it.

Unfortunately, we do not know when a member will request enrollment in a C-SNP to be able to provide a list.

In the past, when I completed and returned the PQAT, my patient called to say that Sentara Medicare has not received it. Has this process been improved?

Yes. We have a dedicated team to receive these forms and complete the process to send them to CMS.

I have had patients bring the incorrect form in for my signature. What is being done to make this process clearer?

We have done away with having separate forms for the providers and for our members. We now have one form to be used for both, so the form you receive will have a section for you to fill out and sign.

Which provider staff are permitted to sign the form?

The provider should sign the forms. Please follow the normal protocol your office uses for documents requiring the provider's signature.

How many C-SNPs does Sentara Medicare have?

Two:

- Sentara Medicare Engage Diabetes and Heart (HMO C-SNP)
- Sentara Medicare Engage Lung (HMO C-SNP)

What are the qualifying chronic conditions for the diabetes and heart plans?

Qualifying chronic conditions for Sentara Medicare Engage – Diabetes and Heart:

- Diabetes (Types I and II)
- Chronic heart failure
- Cardiovascular disease

What are the qualifying chronic conditions for the lung plan?

Qualifying chronic conditions for Sentara Medicare Engage – Lung:

- Asthma
- Chronic bronchitis
- Emphysema
- Pulmonary fibrosis
- Pulmonary hypertension