



Provider Forum

Beth Lackey, PN Director

June 9, 2021

Agenda

- ▶ Provider Council Updates
- ▶ Provider Portal Update
- ▶ Medicaid Transformation
- ▶ New Webpages
- ▶ Member Café's & Pyx
- ▶ Pharmacy
- ▶ EVV status update
- ▶ Provider training
- ▶ Due Process Training



Provider Council Updates

- ▶ Provider Council Meets the Fourth Friday of Each Month via zoom
- ▶ They begin at 9:30am
- ▶ This is an open Meeting
- ▶ When: Jun 25, 2021 09:30 AM Eastern Time (US and Canada)
- ▶ Register in advance for this meeting:
- ▶ <https://partnersbhm.zoom.us/meeting/register/tJMof-CprDooG9Mv3jvIRSQqhgTi5t-bs0fw>
- ▶ After registering, you will receive a confirmation email containing information about joining the meeting.



Participating Provider Dispute Policy Changes

- ▶ Partners made some recent revisions to the provider dispute policy. All disputes will now be handled through a panel process. Disputes are divided into two categories.
- ▶ Type I Disputes which are of an administrative or non-clinical nature and Type II Disputes which are of a clinical nature. Partners' provider dispute process involves an internal panel review for Type I disputes and a two-level review process for Type II.
- ▶ There are some exclusions to the process and not all parties and issues are subject to this participating provider dispute process. Please see the revised policy located at <https://providers.partnersbhm.org/provider-disputes/> for further information.

If you have questions regarding disputes, please email Trish Plaster at tplaster@partnersbhm.org or call 828-325-8150.



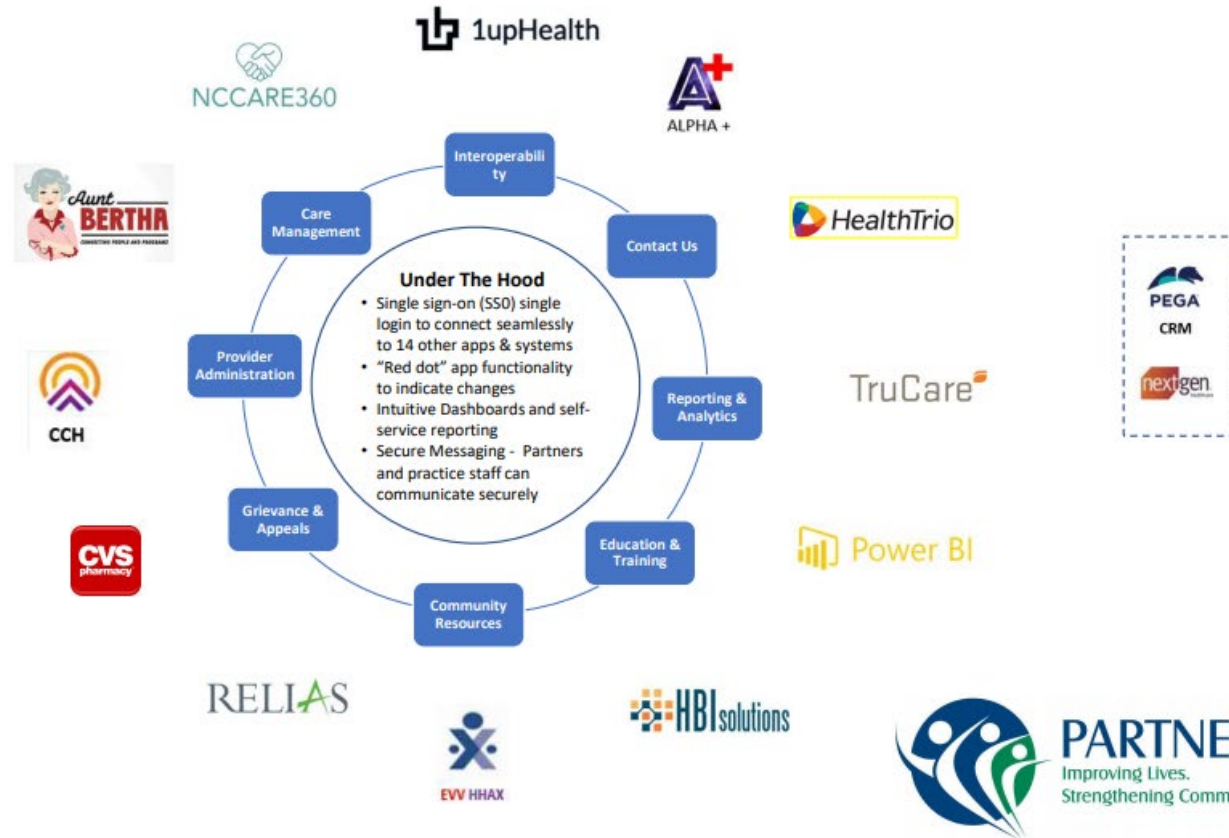


Provider Portal Update

Beth Lackey PN Director

ProviderCONNECT

PARTNERS CONNECT – one *launchpad* for an easy to use, single point of access experience



- ▶ Thank you to providers who have submitted the Local Administrator information.
- ▶ We are reaching out to new providers to obtain this information as their contract goes out.
- ▶ There is nothing more for providers to do at this time.
- ▶ Partners will reach back out when we are ready to connect providers to the portal.





Medicaid Transformation

Beth Lackey PN Director

Medicaid Transformation

July 1, 2021 Standard Plan launch date!

Open Enrollment for members has ended.

If you missed the NCDHHS training: Partners Training Library:

<https://www.partnerstraining.org/training-library/>

Have a question? Need to help a member after launch?

toc_partners@partnersbhm.org



NC Medicaid Community Health Plans

- **WellCare:** [wellcare.com/NC](https://www.wellcare.com/NC)
- **UnitedHealthcare Community Plan:** uhccommunityplan.com/nc
- **HealthyBlue:** HealthyblueNC.com
- **AmeriHealth Caritas:** amerihealthcaritasnc.com
- **Carolina Complete Health:** carolinacompletehealth.com



Transitioning members

- ▶ Partners Transition of Care group is collaborating with standard plans to identify and transition high needs members who have elected coverage under one of the standard plans effective July 1, 2021.
- ▶ Partners may need your assistance with release of information signatures
- ▶ NCTRACKS
 - Verify member eligibility
 - Identify individual's plan coverage
 - View assigned plan and effective dates



Marketing & Communications

Partners' Marketing & Communications department has created two web pages to help members, families, stakeholders, providers and community members understand and remain updated on both Medicaid Transformation County Realignment.



Medicaid Transformation

Medicaid Transformation Web Page

- You can access this page through a drop down on the Partners website home page.
- You can also access it through this direct link:
<https://www.partnersbhm.org/county-realignment/>.
- This page provides:
 - General information about Medicaid Transformation.
 - Information specific to members and providers.
 - Provider FAQ!
 - Important dates and resources.



County Realignment

County Realignment Web Page

- You can access this page from a sliding banner on the home page.
- You can also access it through this direct link:
<https://www.partnersbhm.org/county-realignment/>.
- This page provides:
 - General and county-specific information, including timelines.
 - Frequently Asked Questions for members and providers.
- We will continue to update and buildout pages as we go through the realignment process.





PARTNERS

Improving Lives. Strengthening Communities.®

**Member Engagement
Department
Beth Brooks**

Member Engagement Team

Allison Crotty, **Member Engagement Director**

Beth Brooks, **Member Engagement Specialist Lead**
(Iredell, Surry, Yadkin)

Lindsay Green, **Member Engagement Specialist**
(Cleveland, Gaston, Lincoln)

Melissa Hatton, **Member Engagement Specialist**
(Burke, Catawba, Rutherford)

Shirley Moore, **Member Engagement Specialist/CFAC Liaison**

Laverne Currence, **Plan Transition of Care Coordinator**

Sharon Welling, **State-Funded Waiting List Coordinator**



Member Engagement Roles

Provide customer service to members and families.

Help link members to available community resources.

Support members moving between health plans.

Develop and maintain a State-funded waiting list.



Member Engagement



Member Engagement

provides advocacy, supports and education for our members and families who receive Medicaid and uninsured services.



Member Engagement



Contact us to have your voice heard.

We provide information about community resources, types of services and your rights as a member.

- ▶ Log on to your Member Portal, find a provider or download the latest Member Handbook at www.partnersbhm.org
- ▶ Questions? Call [704-884-2729](tel:704-884-2729) or Contact the Member Engagement team at memberquestions@partnersbhm.org
- ▶ Find us on Social Media



@PartnersHealthMgmt



@PartnersHM



@partnershealthmgmt



Pyx Health Mobile App



ENROLL TODAY!

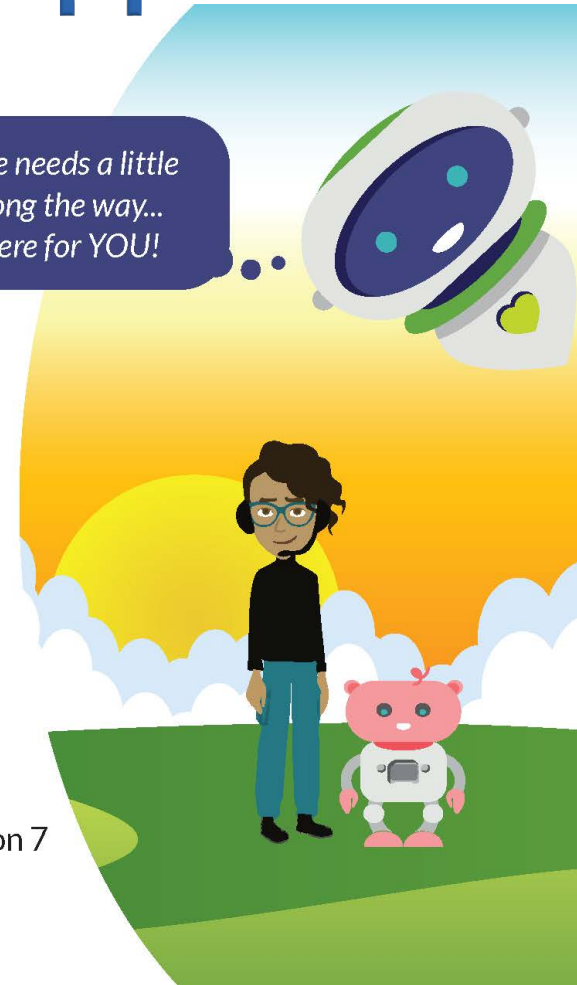
Use your smart phone
to go to **www.HiPyx.com...**
no need to go to the app store.

If you have trouble, call us at 1-855-499-4777.

Questions?

Contact Member Engagement: (877) 864-1454, Option 7
www.partnersbhm.org/member-education

*Everyone needs a little
help along the way...
we're here for YOU!*



MemberCONNECT

MemberCONNECT is our member portal. Here members can register for seamless communication with Partners and access updates and health information.

To log into **MemberCONNECT**, go to

<https://www.partnersbhm.org/member-education/#Member-Portal>



Member Cafe

Partners' Member Café

We listen. We care. We help you take action.

Do you have questions or concerns about your health, your rights, or your current services? Partners cares and wants to listen. Grab a cup of coffee and join us for Partners' Member Café, a safe place for you to voice your concerns and learn about resources and services available to you.



When? The second Tuesday of each month.

Time? 1:00 p.m. – 2:00 p.m.

How? Via Zoom. Register at <https://www.partnersbhm.org/events/member-cafe/>





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Introduction to Partners Pharmacy Benefit

Jerry McKee Pharm.D., M.S. BCPP
Senior Director of Pharmacy Services

Pharmacy Benefit History

- ▶ Pharmacy benefit has historically been carved out of LME/MCO behavioral health
- ▶ Managed Medicaid will move LME/MCO to whole person care, adding physical health and pharmacy to benefits offerings
- ▶ LME/MCO Managed Medicaid contract awards will be made June 11, 2021 and the plan launch will occur July 1, 2022
- ▶ Standard Managed Medicaid plans will launch July 1, 2021
- ▶ Partners will contract with a pharmacy benefits management (PBM) company to assist the internal Pharmacy Team in delivering the pharmacy benefit



Pharmacy Benefit Foundation

- ▶ The Standard plans and Tailored plans will all have the same Medicaid formulary or preferred drug list, referred to as a PDL
- ▶ The same utilization management criteria (prior authorization/PA criteria) for non-preferred medications will be used across all plans
- ▶ This will assure uniformity across all standard and Tailored plans and minimize provider and member confusion around what is covered
- ▶ While the basic pharmacy benefit is similar across all plans, how it is delivered may look and feel different to members and providers



How do I get my questions answered regarding pharmacy benefits?

- ▶ Partners will have a local member call center for members
- ▶ The PBM will have a call center for providers and pharmacies for pharmacy benefit questions
- ▶ Members with pharmacy benefit questions that cannot be answered by the Partners call center staff will be warm-transferred to the PBM call center for response
- ▶ Partners will host a website with the formulary/PDL information, UM/PA criteria, clinical coverage policies, and other clinical information as well as contact information for the Partners inhouse pharmacy team



Proactive Provider Outreach Regarding PDL Changes, etc

- ▶ Partners Pharmacy Team will proactively reach out to providers and network pharmacy members to educate regarding any changes in PDL and/or clinical coverage policy well in advance of implementation
- ▶ These changes will be posted on the website at that time
- ▶ Partners Pharmacy Team contact information will be on the communication information and website for follow-up questions
- ▶ Partners Pharmacy Team has a designated position whose primary role is to assure that PBM functions are occurring according to plan (PBM Liaison role)

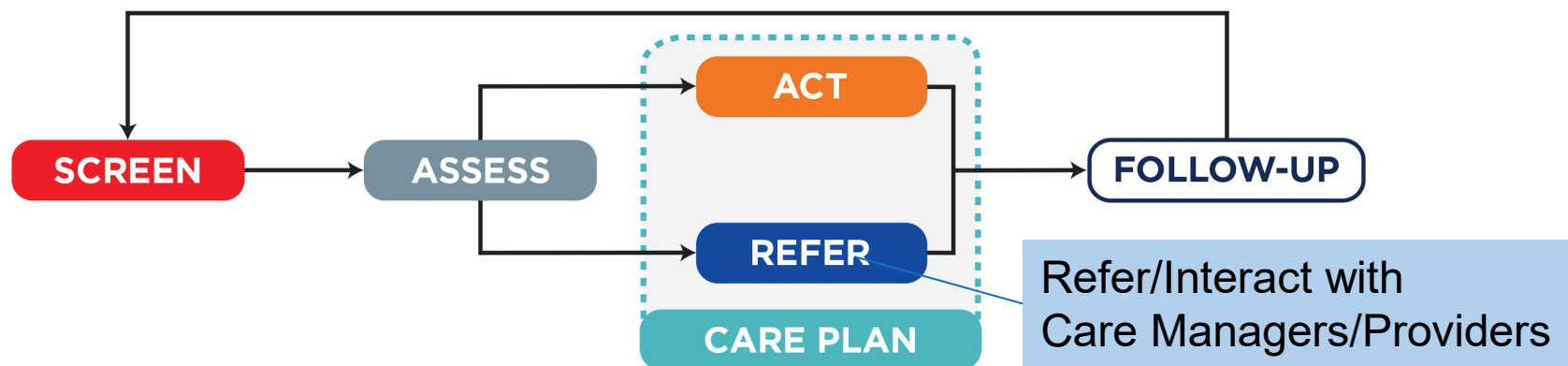


Pharmacy-Care Management and Whole Person Care

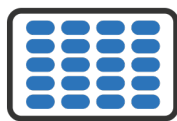
- ▶ The Pharmacy Tam will consist of Pharm.D. trained, board certified medication use experts and Certified Pharmacy Technicians who will use population health analytics to identify high risk cases and reach out, via care managers, to perform comprehensive medication management reviews, submit care recommendations to providers and follow outcomes
- ▶ This risk stratification is possible by having access to physical health, behavioral health, and pharmacy claims, along with social determinants of health information and using algorithms, predict future healthcare risk
- ▶ Medication reconciliation will occur for members moving from inpatient settings to the community in conjunction with pharmacy and care managers- it is critical to have “one source of truth” for a medication list post-discharge to assure all providers, CM, and the member are working together to preserve wellness



Integration of Community Pharmacy into the Partners Team- A New Team Member in the Game



Med Sync



Adherence Packaging



Delivery



Transitions of Care



SDOH



Substance Abuse



Hypertension



Diabetes



Asthma/COPD



Med Rec



Depression/Anxiety



COVID-19



What You Should Expect from Your Pharmacist

A Guide for Patients and Families

Community pharmacists, along with your other health care providers, can help you to understand your medications so that you take them correctly to get the most benefit and avoid unwanted side effects.

Pharmacists should:



Treat you with respect.



Answer your questions about medications, insurance benefits, and other health concerns.



Have a private and confidential setting to discuss your medications with you.



Help you understand information in medication handouts and online resources.



Establish an ongoing professional relationship with you.



Explain the reasons for taking your medications as prescribed or recommended.





Teach you how to use prescription and over the counter medications, vitamins, and supplements.



Work with other health care professionals to solve any potential or real concerns with your medications.



Provide information about the benefits and potential side effects of medications.



Work with you on an ongoing basis to re-evaluate your medication needs based on your treatment response.

These expectations allow you to benefit from the services that pharmacists have to offer. If you currently do not have such a relationship with a pharmacist, please tell your pharmacist that this is the type of care that you expect. If this level of care is not available from your current pharmacist, we encourage you to identify another pharmacist in your community who will provide these services to you.



Conclusion

- ▶ The addition of the pharmacy benefit is anticipated to poise Partners to improve member care
- ▶ Integration of community pharmacists to the Partners team offers many exciting possibilities in terms of member access to care
- ▶ Integrated care, including pharmacy, has proven to improve outcomes, improve quality of care, and decrease cost in other settings and we expect to replicate that in our model





EVV Update

Wake Young

Electronic Visit Verification (EVV)

Simple Claims Billing and EVV Implementation

Partners has partnered with HHAeXchange to provide a free Electronic Visit Verification (EVV) and billing tool for member placement, scheduling, authorization management, communication, and direct billing for Home Health Aide services.

What does the HHAeXchange Portal provide to homecare agencies?

The HHAeXchange Portal provides a direct connection from the agency to your contracted LME(s) for:

- Electronic case broadcasting, authorizations, plan of care management and entering confirmed visits
- Real-time two-way messaging with the LME(s)
- Free EVV solution for time & attendance and duty tracking
- Electronic billing



Electronic Visit Verification (EVV)

For Provider/Vendors working towards Electronic Visit Verification (EVV) with HHAeXchange (HHAX) and Partners, your agency has two different billing options:

- ▶ **Option #1: Use the Free EVV Tool provided by the North Carolina LME/MCO and HHAeXchange**
 - The Welcome packet below provides an overview of the training required to submit claims to Partners
 - Free EVV Tool Welcome Packet: [The HHAeXchange EVV Free Tool Welcome Packet](#)
 - For Questions or help with HHAX or Testing with Option #1...
 - Please email HHAeXchange at Support@HHAeXchange.com
- ▶ **Option #2: Our agency has an existing EVV system and we would like to use this method of connecting**
 - The Welcome packet provides an overview of the training required to submit claims to Partners
 - EDI Welcome Packet: [The HHAeXchange Homecare EDI Process](#)
 - For Questions or help with EDI Assistance...
 - Please contact HHAX EDI support at EDISupport@hhaexchange.com
- ▶ For additional information, please visit the [Provider Information Center page](#) to learn more about the partnership, training details and the EDI Process.
- ▶ Should you still have questions specific to Partners, please email EVVSupport@partnersbhm.org



Partners - EVV Service Codes

Service Code	Description
H2022:U4	Transitional Living Adolescents and Adults
H2022:U4:CR	Transitional Living Adolescents and Adults
S5125	Personal Care Services
T1015	In-Home Intensive Supports-Individual
T1019:U4:CR	Individual Support
T1019:U4	Individual Support
T1019:U4:DJ	Individual Supports
T1019:U4:EP	Individual Supports -EPSDT
T2013	In-Home Skill Building Individual
T2013:TF:FL	COMMUNITY LIVING & SUPPORTS - INDIVIDUAL
T2013:TF:HQ:CR	Community Living and Supports
T2013:TF:HQ: FL	Community Living & Supports Group
T2013:TF:U4	Moderate In-Home Skill Building
T2013:U4:CR	In-home Skill Building - Individual
T2013:TF	Community Living and Supports
T2013:TF:CR	Community Living and Supports
T2013:TF:EO	Community Living and Supports Empl of Rec
T2013:TF:HQ	Community Living and Supports Group
T2013:TF:HQ:EO	Community Living and Supports Group Empl of Rec
T2013:U4	In-home Skill Building - Individual
T2033:U1	Supported Living Periodic
T2033:U1:FL	Supported Living Periodic

EVV Claims
Dates of service
06/30/21



EVV – Important Dates

- ▶ **Provider Pre-Go live Training Webinars**
 - Tuesday June 15th, 10:00 AM 2021
- ▶ **EDI Provider Post Integration Training Webinar:**
 - Tuesday May 25th, 10:00 AM 2021
 - Thursday June 2nd, 12:00 PM 2021
- ▶ **Go-Live Date:** Providers to begin using the HHAX Enterprise platform for all home health aide services
 - Wednesday June 30th, 2021





Provider Training

Michelle Stroebel

Provider Training tip

- ▶ Providers must follow Service Definition requirements for staff training.
- ▶ There are 3 required trainings that providers can choose to self-train within your agency:
 - PCP Instructional Elements
 - Crisis Response
 - Service Definition Training
- ▶ Partners will continue to offer through PTA
- ▶ If you self train, we recommend:
 - Document sign in/out sheet to evidence time requirements met
 - Be able to show curriculum for course
 - Assure training certificate has title matching service definition requirements



CBT Learning Community

An opportunity for provider self care

- Build clinical skills for evidence based practices
 - Reduce Burnout
 - Professional Growth
 - Connect to a professional community
 - Gain a sense of mastery
 - Learn and practice skills through case review
 - Improve in quality of care delivered
-
- Register for this recurring opportunity on the PTA Training Calendar



Provider Open House

Want to speak to someone about a question?

Monthly Opportunity for providers to ask questions of Partners subject matter experts

Zoom platform using breakout rooms to interact

Have your questions ready before session

Register through the Provider Training Academy to gain your zoom link



Partners Training Academy

Find scheduled provider trainings on the PTA website.

<https://www.partnerstraining.org/>

Email questions and comments for PTA and provider trainings at

training@partnersbhm.org



★ Partners ★

TRAINING ACADEMY



ASAM Training

▶ Live Training

- Live training includes 13 contact hours, the time-limited use of an electronic version of The ASAM Criteria manual (3rd Edition) and an opportunity to obtain a hard copy of The ASAM Criteria manual for the cost of shipping (\$15.50 per manual).

▶ eTraining

- eTraining includes 12 continuing education credit hours provided through The Change Companies®, and access to the modules through June 30, 2021.

Please visit <https://bhs.unc.edu/asam/dashboard> for more information including continuing education credit options, training dates and registration.



Cultural Competency for Behavioral Health Providers: Office of Minority Health training

- ▶ FREE e-learning opportunity

<https://thinkculturalhealth.hhs.gov/education/behavioral-health>

- ▶ OMH encourages all certified counselors, nurses, psychiatrists, psychologists and social workers to take this program and earn up to five continuing education credits at no cost.
 - The program's 4 courses cover:
 - Connections between culture and behavioral health
 - The impact of cultural identity on interactions with clients
 - Ways to engage, assess and treat clients from diverse backgrounds





DUE PROCESS: Robust, Multi-Door Dispute Resolution System

*Provider Forum
June 2021*

****Subject to change
and explanation.
www.partnersbhm.org***

**Andrew Walsh, JD, MBA
CLO & General Counsel**

4 LME/MCO “Due Processes”

➤ Robust and Multi-Door

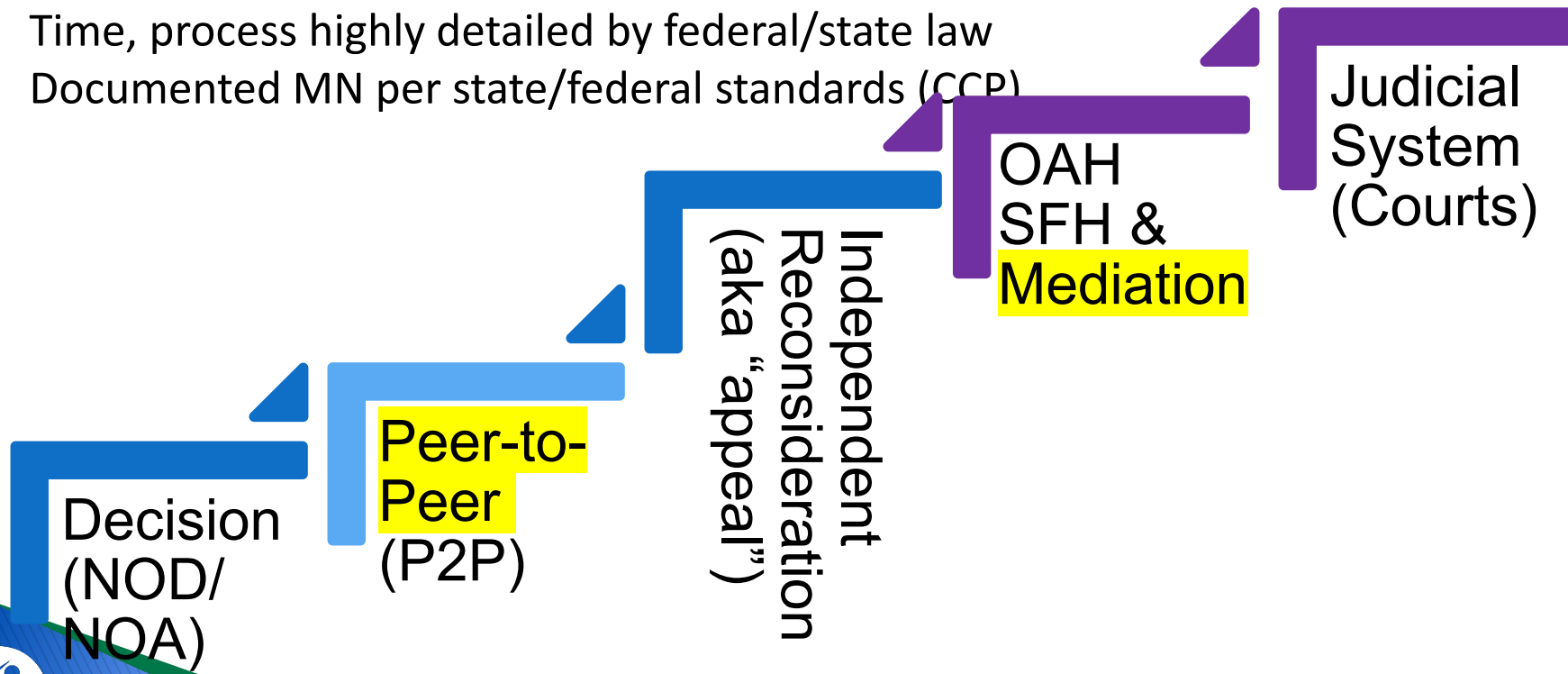
➤ Four Dispute Types:

- Member: belongs to member; CM can say “yes,” but not “no”
 1. Medicaid Appeals: Medicaid services denied, terminated, suspended or reduced
 2. Non-Medicaid Appeals: consumer services funded by state, county and other sources
 3. Provider Disputes: paybacks (TNOs), terminations, suspensions, claims denials
 4. Grievances (catchall for rest): rudeness, dissatisfaction, RADSE denials, individualized rates, SIS scores ...



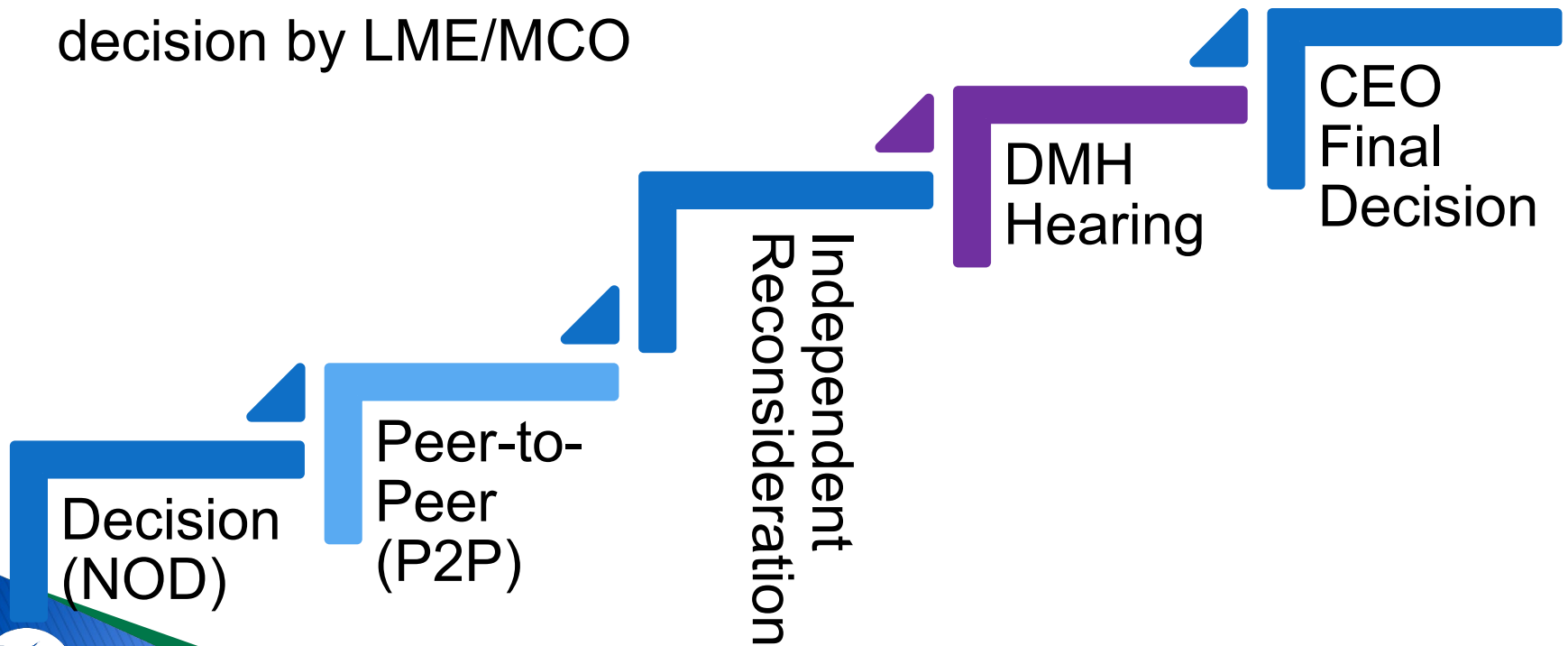
Member Medicaid Appeals ("Adverse Benefits Determination")

- Services denied, suspended, terminated or reduced
- Belongs to member, not provider, albeit can represent
- From internal (blue) to external (purple)
- Time, process highly detailed by federal/state law
- Documented MN per state/federal standards (CCP)



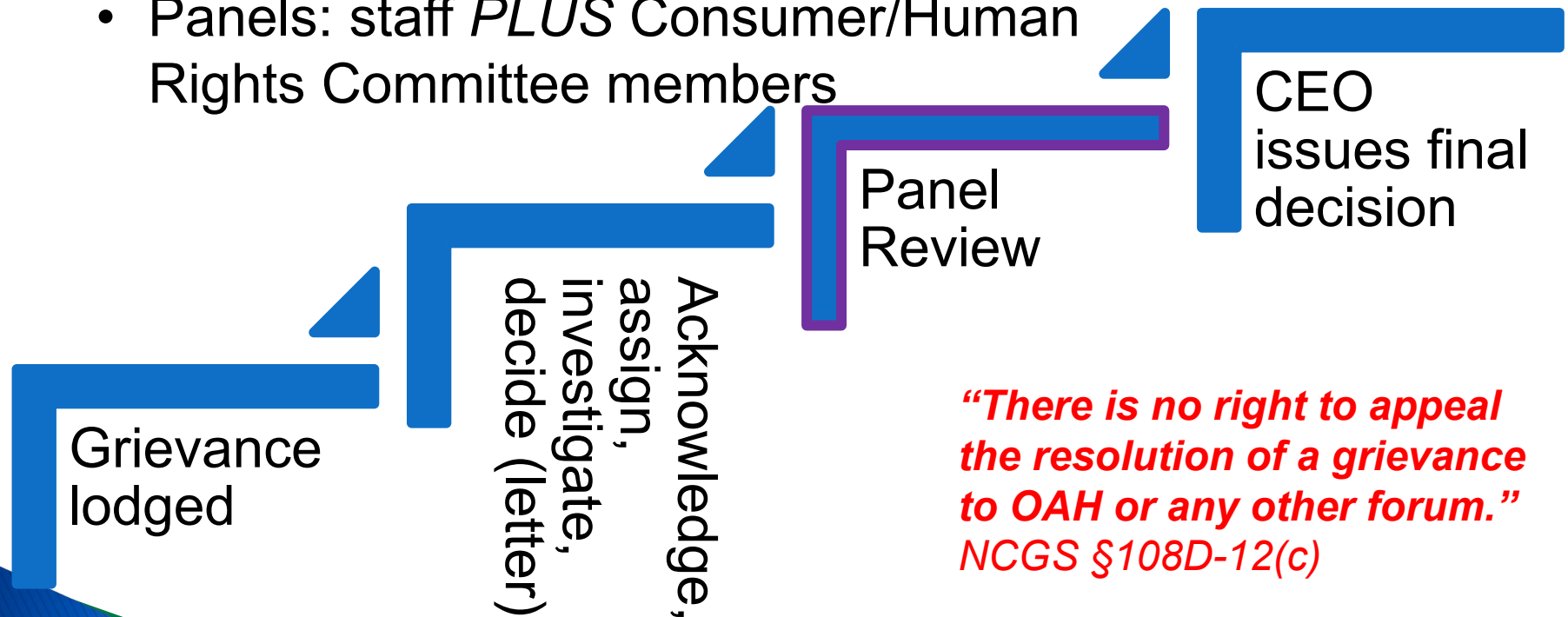
Recipient **Non-Medicaid** Appeals

- State (IPRS), county & related funds
- Limited, discretionary funds w/o entitlement, so less formal and final decision by LME/MCO



Grievances

- All Staff Trained to take
- Can be from (almost) Anyone, Covering (almost) Anything
- Panels: staff *PLUS* Consumer/Human Rights Committee members



***“There is no right to appeal the resolution of a grievance to OAH or any other forum.”
NCGS §108D-12(c)***

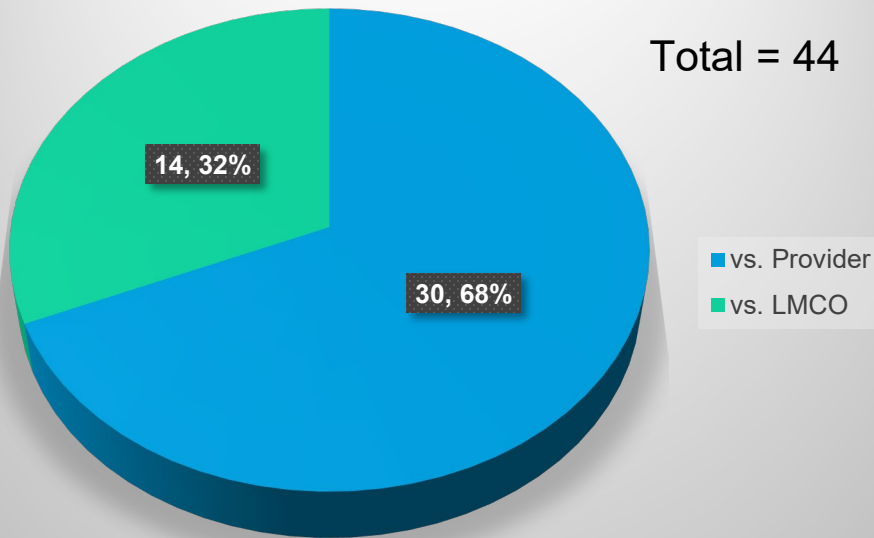


Grievance Data

05/25/2020-05/25/2021

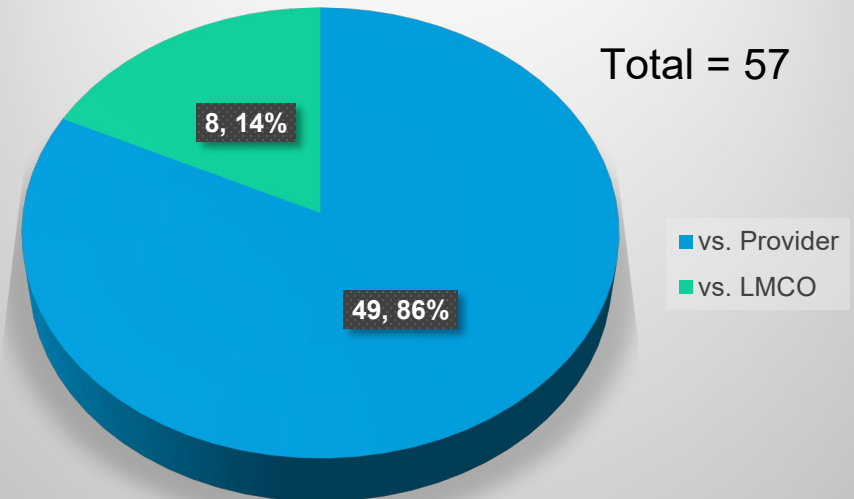
Complaints (05/25/2020-05/25/2021)

Total = 44



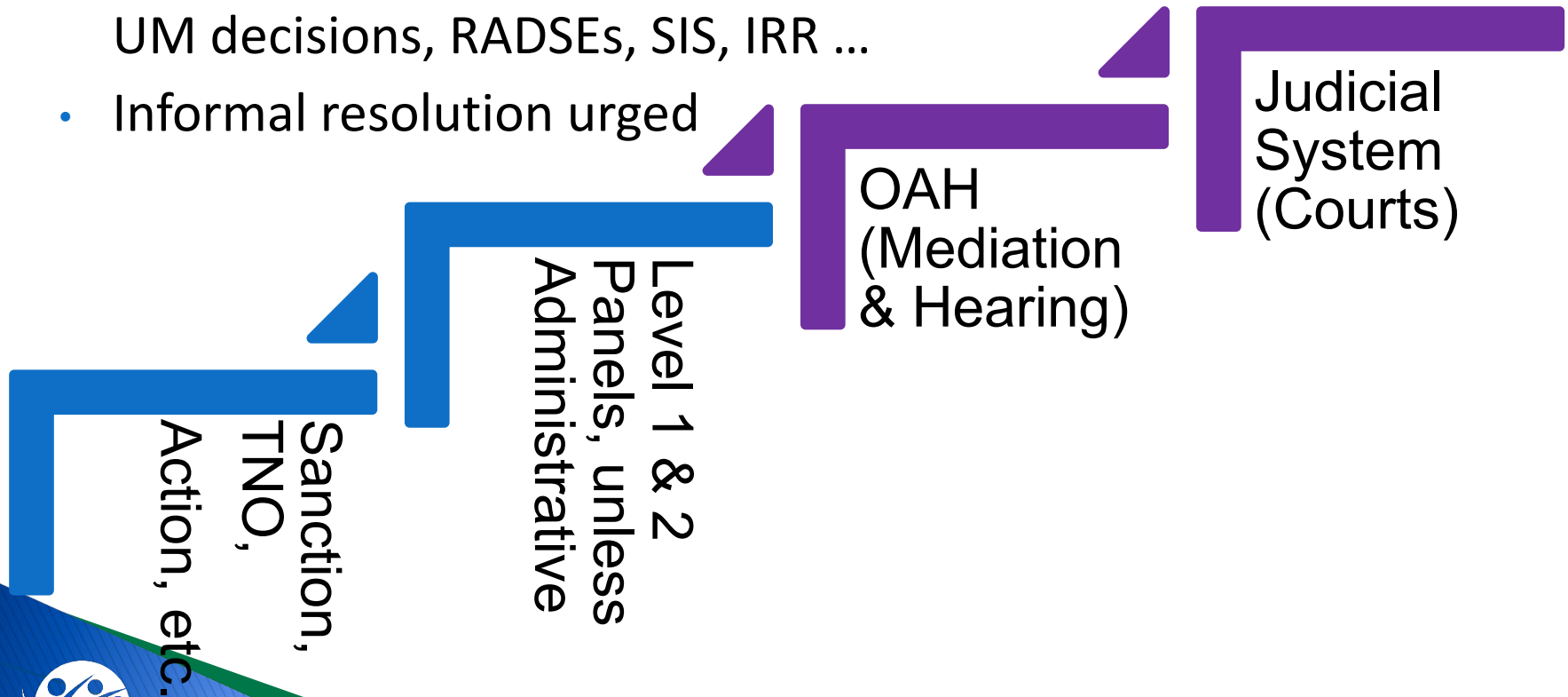
I&R (05/25/2020-05/25/2021)

Total = 57



Provider Appeals

- Mix of State Law, Contracts, Waiver and URAC/NCQA
- About Provider terminations, suspensions, paybacks, etc., not UM decisions, RADSEs, SIS, IRR ...
- Informal resolution urged



Thank you

Immediately after this webinar, you will receive a very brief feedback survey in your email box.

Please take this opportunity to share feedback and topics you would like to see in the September forum.

