

CARE1ST PROVIDER FORUM Spring 2021



Agenda



- Health Current
- Network Management
- System of Care
- System of Care
- Care Management
- Community Affairs
- Community Engagement
- Quality Improvement
- Prior Authorization, Medical
- Pharmacy Updates
- Medical Claims

Jayme Pina **Christine Hawkins** Mark Faul Vicki Cons Dee Reny Veronica DeLaO Mauricio Orozco Maritza Jimenez Barbara Camp Maria Cole Anthony Crooks



Health Current Creating Connections. Achieving Results.

Presenter: Jayme Piña



Agenda

- About Us
- Participation & Growth Statistics
- Services & Program
- Becoming a Participant
- Questions



About Us

Health Current is the result of an executive order signed in 2005 and subsequent community efforts to develop a statewide health IT strategic plan for Arizona.

From that, the non-profit Arizona Health-e Connection (AzHeC) was founded in 2007, and the organization rebranded as Health Current in 2017.

Our commitment to helping providers make fully informed healthcare decisions is reflected in our MVP:

- Our Mission We help our partners realize their highest potential to transform care.
- **Our Vision** To make healthcare transformation a reality.
- **Our Purpose** To integrate information with the delivery of care, to improve individual and community health and wellbeing.



Participation & Growth Statistics

Who is Health Current?

861 HIE Participants and growing *as of 3/3/2021*





HIE Benefits

One connection to save time and resources – Making connections to other providers, hospitals, reference labs and health plans takes time and valuable resources from your practice. One connection <u>saves time</u> and allows <u>real-time transfer of data</u> from hospital encounters, reference lab results and other community provider encounters.

New patient information – Connection to the statewide HIE provides the ability to view current information and historical medical records in the HIE.

Timely information to coordinate care – Clinicians are able to access patient health information when, and where it is needed.

Secure communication – The use of the HIE's DirectTrust-certified, HIPAA-compliant secure email system facilitates the easy and secure exchange of patient information between providers, care team members and healthcare facilities.





Community Provider

HIE Testimonial

"The HIE is a huge part of our daily work, we use it all the time. We receive patient alerts from Health Current and task them out to the appropriate providers. All of our physicians and medical assistants **prepare for each appointment** early in the morning—or sometimes the night before—**by looking up the patient's information** through the HIE portal."

Practice Manager, Pendleton Pediatrics

ARIZONA'S HEALTH INFORMATION EXCHANGE



healthcurrent.org



Using the HIE Portal

HIE Portal

Secure online access to a consolidated patient record, including specialized view of SMI patient crisis data

- Includes all treating physical care providers. Can include behavioral health services with patient consent.
- Individualized one patient at a time
- Used by care managers & clinicians to identify the complete patient history for care coordination, transitions of care, changes, etc.
- Can use 36-month period for population health activities (risk stratification, outreach campaigns, etc.)



Data Available (varies by data source)

- Demographics
- Encounters (Inpatient/ED/Outpatient)
- Results (Lab/Rad/Trans)
- Allergies/Adverse Reactions
- Medications/Prescriptions
- Conditions (Diagnosis/Problems)
- Procedures/Treatments
- Immunizations
- Vital Signs
- Advance Directives
- Payers

- Family History
- Social History
- Clinical Documents
 - Discharge Summary
 - CCD/CCDA
 - Emergency Room Report
 - Encounter Summary
 - Progress Notes
 - Transition of Care/Referral Summary
 - History & Physical Report
 - Operative Note
 - Consultation Note
 - BH Court Orders



Finding Visits, Hospitalizations & Clinical Lab Results

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Ĉ			More Patient Information							
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	Admission Type	Date	Source	Name	Date	Source	Prenatal Multivitamin	1.0	Dignity Health 4	
% \$	Emergency 04/04/2019 Dignity Health Mercy Gilbert Medical Center:HL7 Hospital Inpatient, Emergency, and Ambulatory Encounters easy to search within the HIE portal, along with corresponding Lab / Rad Results and Transcribed Reports			↓ Uric Acid, Protein, Urine, Random, Normalized, Comprehensive Metabolic Panel, WBC, RBC, Hematocrit, Hemoglobin, Platelet Count, MCV, MCH, MCHC, RDW(cv), MPV, Segmented Neutrophils, Lymphocytes, Monocytes, Absolute Neutrophil, Absolute Lymphocyte, Absolute Monocyte, Absolute Essionphil, Absolute Basophil, Eosinophils, Basophils, RDW(sd), NRBC RE, Nucleated Red Blood Cell Percent, Immature Granulocytes,	06/30/2020	Sonora Quest Lab			Chandler Regional Medical Center:HL7	
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<u>گ</u>	No data available for this section	cc	mpleted (4)	Title Al Patient currently pregnant (finding)	D	ignity Health 22	Transition of Care/Referral Summary	07/31/2020	Dignity Health Chandler R	

12



Using HIE Alerts

Patient Alerts

Event-driven notifications triggered by admissions, discharges, registrations and clinical/laboratory results

- Notification that an identified event has happened to a member of a pre-defined population (e.g. high needs patients, chronic care panels, SMI, condition-specific panels)
- Used by care managers, case managers & clinicians for monitoring care plan activities (e.g. annual labs, needed tests) & utilization of services



Real-time Alerts sent via Direct Secure Messaging

- Individualized based on identified event
- Immediate care team response, next day coordination of care, follow through on tests ordered

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Setting Up Alerts for Visits, Hospitalizations & Lab Results

- Aggregate reports for all patients experiencing the event or condition being monitored
- Can be trended to monitor performance over time at a team/clinic level

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		:HH-NMH	SUS/	AN 7	86.52-Painful respiration 107.89-Other chest pain	-		17-Jul-2018 04:34 AM		TSDALE RN CAL

Sending Facility, Visit Type,	sending ID, Patient, DOB, Patient ID, PCP, Diagnosis, Date, Time, Location
Banner Health,ED Admit,	N/A, NO,N/A,11-Jan-2019,07:28 PM,N/A
Banner Health,ED Discharge,	N/A, NO,N/A,12-Jan-2019,10:40 PM,N/A
Banner Health,ED Admit,	N/A, NO,N/A,12-Jan-2019,01:24 PM,N/A
Banner Health,ED Discharge	N/A, BLANK,N/A,12-Jan-2019,03:16 PM,N/A



Additional HIE Services

• EHR Integration

Connection built to practice/organization's EHR to allow for seamless transfer of information between provider and healthcare community.

• CSPMP & HIE Integration

Access via the HIE Portal to Arizona's controlled substance prescription monitoring program (CSPMP) to meet prescriber mandate; providers must register with the Arizona State Board of Pharmacy; doesn't include access by prescriber delegates

• Patient Centered Data HomeTM (PCDH)

ADT alerts and follow-up information exchange with other US based HIEs; 47 participating HIEs nationwide with 16 currently exchanging data with Health Current

NOTE: Health Current is in the process of updating its HIE platform to the newest version, this new platform provides more capabilities, enhance data exchange functionality and a more comprehensive view of patient data via the Portal.



Health Current Service Fees

FREE for Community Providers!



HIE Onboarding Program

Last Chance! Sign Participation Agreement by 3/31/2021

- No Participation Fees for Community Providers
- AHCCCS pays the HIE to onboard its key Hospitals, FQHCs, FQHC-LA, RHCs and provider practices

Current Program

- Eligibility Registered Medicaid Providers seeing Medicaid patients
- Requirements Connect bi-directionally to the HIE, Health Current Gateway satisfies this requirement
- Subsidy Set subsidy, based upon type of entity
 - Hospitals \$20,000
 - FQHCs, FQHC-LA, RHCs \$10,000
 - Practices (26+ providers) \$10,000
 - Practices (1-25 providers) \$5,000





Becoming a Participant



Steps to Participate

- 1. Initial contact with Health Current Recruitment Department
- 2. Introductory phone call to be scheduled with potential participant
- 3. Identify applicable Health Current programs for potential participant
- 4. Participation Agreement and Amendment; sent, signed, and returned
- 5. HIE Account Manager assigned and the service planning kickoff meeting held
- 6. Services initiated



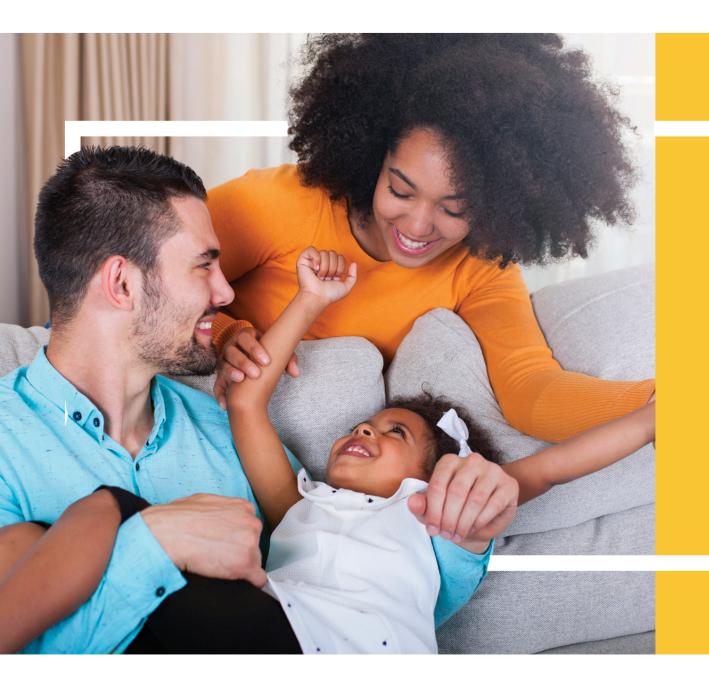
Contact Us to Get Started!

Jayme Piña, Manager, Recruitment and Engagement <u>recruitment@healthcurrent.org</u> 602-688-7216

> Schedule your Appointment Today!

Follow Us:





Plan Updates

Christine Hawkins Provider Relations and Contracting Specialist II





Central GSA Care1st Members Transition to Arizona Complete Health

- This summer, Care1st Gila, Maricopa and Pinal members will have an opportunity to choose another AHCCCS plan or be assigned to AzCH effective October 1, 2021.
- In the interim,
 - You should continue to treat member from each health plan as you do under your current contract(s). Your existing provider support channels will remain in place.
 - Members in the Northern GSA, i.e. Apache, Coconino, Mohave, Navajo and Yavapai counties are <u>NOT</u> impacted by this change. Care1st will continue to service the Northern GSA.
 - Watch your Blast Faxes for ongoing changes affecting Claims and Prior Auths



Our Physical Address

1870 W. Rio Salado Parkway Tempe, AZ 85281

The main entrance and visitor parking for the 3-story 1870 building are located in the back of the building – on the north side by the canal.

NOTE: This is only a physical address change. Please see blast fax below for all updated addresses for Care1st and WellCare.

https://www.care1staz.com/az/PDF/provider/blastfaxes/2020/1020.pdf

Network Management

CARE ST HEALTH PLAN ARIZONA

Network Management Representatives – Central Region

- Central Valley Gail Garrison
- Northwest Valley John Schneider
- South Valley Christopher Masiello
- Southeast Valley Steve Bigman
- Southwest Valley Alethea Ortega
- Northeast Valley Christine Hawkins

ggarriso@care1staz.com

john.schneider@care1staz.com

cmasiell@care1staz.com

sbigman@care1staz.com

amortega@care1staz.com

chawkin2@care1staz.com

Gila / Pinal Counties – Currently covered by Christine Hawkins



- The following counties have a Network Management Representatives assigned
 - Mohave Ron Record <u>Ronald.Record@wellcare.com</u>
 - Graham / Greenlee / Cochise covered by John Schneider
 - Apache / Coconino / Navajo Deborah Parker <u>dparker4@care1staz.com</u>
 - Yavapai Covered by Chris Masiello
 - Pima Covered by Steve Bigman

Note: If you do not know who your Network representative is, contact (866) 560-4042, Option 5, then option 7. Territories are generally assigned according to the Primary Office Location and/or Administrative Office Location.



Changes to your Practice

- Please communicate any changes to your practice to ensure accurate processing of claims payment and directory information including:
 - Providers joining or exiting the practice
 - Requests for providers to joining the practice need to be accompanied by a current and fully executed AzAHP form https://www.care1staz.com/az/providers/frequentlyusedforms.asp
 - Address, telephone or fax number changes
- Send notification by fax to (602) 778-1875 or by email to

sm_az_pno@care1staz.com and copy your Network Management Representative.



Credentialing

- Start with the CAQH website, ensuring your practitioner profile is current, and all relevant documents are uploaded. Also, please ensure that Care1st is authorized to view the provider application.
 - To access the CAQH Website please visit: <u>https://proview.caqh.org/login</u>
 - CAQH documents that will be required: medical license, DEA license, COI, certifications etc.
 - If an adverse action is present you must include a detailed explanation/legal documentation for the Credentialing Committee to consider
 - If a gap in practice is present you must include a detailed explanation for the Credentialing Committee to consider

NOTE: If the CAQH application is not current, our CVO will return the application to the health plan as incomplete. This will stop the credentialing process.



Credentialing (Cont'd)

- Complete all pages of the relevant AzAHP form, found on our website <u>https://www.care1staz.com/az/providers/frequentlyusedforms.asp</u>
- Types Of Forms
 - AzAHP Practitioner form
 - AzAHP Organizational form
 - AzAHP Facility form
 - These forms work for all AHCCCS plans
- REMEMBER This is the data that will be loaded in the claims system, so it must be accurate



Credentialing (Cont'd)

Send the completed AzAHP form to the Network Management mail box at

sm_az_pno@care1staz.com
Or fax the forms to (602) 778-1875

As a reminder, a clinician will not be reimbursed for services until they have completed credentialing. Effective dates will not be retroactive.

Network Management



Credentialing (Cont'd)

- The request is added to the Network Management database and forwarded to Credentialing Department
- When credentialing is completed, the provider is loaded into the claims payment system
- A Welcome Letter is sent notifying the practice of the effective date of the provider

Network Management - WEBSITE



For the latest news on Care1st Health Plan of Arizona, go to:

https://care1staz.com/az/provid ers/network_overview.asp

Click on Blast Faxes for details on ongoing updates to Prior Auth, Specialty Pharmacy, Formulary, Billing, Etc.



Welcome Providers

We're transitioning to Centene Corporation! In January, 2020, Care1st and WellCare Health Plans was acquired by Centene Corporation. You play a very important role in the delivery of health care services to our members. We are committed to working closely with you. We continually strive to remove administrative barriers, so that you can focus on caring for our members.

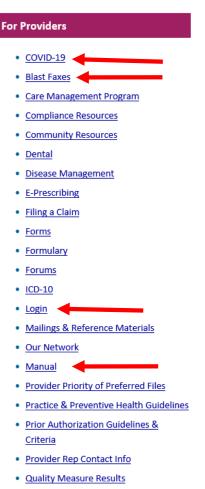
Medical administration including: Customer Services, Prior Authorization, Claims, Network Management, Case Management, Disease Management, Concurrent Review, Quality Improvement and Behavioral Health will continue to be housed together in Phoenix, fostering close communication and coordination between all areas.

We look forward to partnering with you to achieve better outcomes and to increase patient satisfaction and access to preventative care.

To learn how to participate in our network, please contact our Network Management Team at (602) 778-1800 (Options in order: 5, 7).

Communication is essential to a successful partnership. Our Network Management Team is available to answer questions and resolve issues. Once contracted with us, a Network Management Representative will be assigned to you. Your representative serves as your primary Care1st/WellCare point of contact and is focused on working with you and your staff.

Care1st Home



- <u>AHCCCS Member and Provider Survey</u> <u>Results</u>
- Quality Management
- Behavioral Health Information &

Blast Faxes



Provider Blast Faxes

2021

- 03/16/2021 AHCCCS BED CAPACITY SURVEY BEHAVIORAL HEALTH RESIDENTIAL FACILITIES
- AND RESIDENTIAL TREATMENT CENTERS
- 03/10/2021 REMINDER PROVIDER FORUM NOTIFICATION & INVITATION SPRING 2021 2021 2021
- 03/04/2021 FORMULARY UPDATES EFFECTIVE 4/1/2021 000
- 03/03/2021 PROVIDER FORUM NOTIFICATION & INVITATION SPRING 2021 000
- 02/24/2021 AHCCCS BED CAPACITY SURVEY 202
- 02/17/2021 BILLERS' CORNER NON-EMERGENCY TRANSPORTATION CLAIM BILLING REMINDERS 4004
- 02/12/2021 OUTPATIENT IMAGING PROGRAM PROVIDER EDUCATION WEBINARS 100
- 01/30/2021 UPDATES TO PRIOR AUTHORIZATION GUIDELINES FOR IMAGING PROCEDURES EFFECTIVE MARCH 1, 2021 2021
- 01/19/2021 CONNECT TO THE AZHIE IMPROVE CARE 202
- 01/06/2021 AHCCCS ELECTRONIC VISIT VERIFICATION (EVV) FAQS & TIMELINE 202





<u>COVID-19</u>



- <u>Care Management Program</u>
- <u>Compliance Resources</u>
- <u>Community Resources</u>
- Dental
- <u>Disease Management</u>
- <u>E-Prescribing</u>
- Filing a Claim
- Forms
- Formulary
- Forums
- Login

Provider Manual





Provider Manual

Click on the appropriate section title below to view and/or print the contents of a particular section or view the entire manual

TABLE OF CONTENTS:

SECTION I - INTRODUCTION

- ▶ Welcome
- Mission Statement
- Introduction to Care1st
- Department Organization

SECTION II - QUICK REFERENCE CONTACT LIST

- Department Contacts
- ▶ Website
- Contracted Vendors
- Arizona Health Care Cost Containment System (AHCCCS)
- Hearing Impaired
- Translation Services

SECTION III - PROVIDER ROLES AND RESPONSIBILITIES

- PCP Gatekeeper Role
- Specialist Responsibility
- Service Delivery Responsibilities
- Care Coordination
- Appointment and Wait Time Standards
- Provider Network Changes

Care1st Home

For Providers

- <u>COVID-19</u>
- Blast Faxes
- Care Management Program
- Compliance Resources
- Community Resources
- Dental
- Disease Management
- <u>E-Prescribing</u>
- Filing a Claim
- Forms
- Formulary
- Forums
- Login
- Mailings & Reference Materials
- Our Network



Secure Portal - Login



Care1st Main Website



Care1st Health Plan Arizona

A Home / Providers / Provider Login



We're transitioning to WellCare Health Plans! in

October 2016, the company behind Care1st and ONECare was acquired by WellCare Health Plans Inc. As a result, we will be transitioning to a new Provider Portal beginning with 2019 ONECare plans.

Please use Wellcare's secure Provider portal to access 2019 ONECare plans.

You may continue to use this portal to access 2018 Care1st and ONECare plans.

Provider Login



TERMS OF USE ; DISCLAIMER

I have read and understood the Terms of Use



Not registered? Click here to Request Access.

Appointment Availability



- Care1st is required to confirm providers are meeting AHCCCS appointment availability standards for Routine and Urgent appointments for Primary Care, Specialist, Behavioral Health providers.
- A Care1st Network Management Representative will check in periodically and ask about your Appointment Availability.
- Your appointment availability information should be readily available to the Representative at the time of asking. Please ensure that your front office staff is knowledgeable on how to determine your availability to see Care1st members.
- Details can be found in the Care1st Provider Manual at: <u>https://www.care1staz.com/az/PDF/provider/manual/sections/ProviderManual_03.p</u> <u>df?ver=2020.05</u>

AHCCCS Provider Enrollment Portal



Provider Enrollment Portal (APEP)



As of August 31, 2020, all new providers, as well as existing providers who need to update their accounts, will use the AHCCCS Provider Enrollment Portal (APEP). This online system, available 24/7, streamlines the provider enrollment process and eliminates the need for paper-based applications.

- Enroll as an AHCCCS provider.
- Update information (such phone and addresses).
- Upload and/or update licenses and certifications.

Refer to your Blast Fax that was sent out on August 14, 2020 or the AHCCCS website. <u>https://www.azahcccs.gov/PlansProviders/APEP/ProviderEnrollment.html</u>



Social Determinants of Health PCP Screenings and Assessments

Mark Faul, Workforce Development Specialist



OVERVIEW



- Define Social Determinants
- Identify resources to improve quality of life
- Gain knowledge of the 5 key determinants
- Present the AHCCCS approved screening tools
- Introduce the ICD-10; Z-Codes
- Review screening tools and timelines



Social determinants of health are the conditions in the environments in which people are born, live, learn, work, worship, and age that affect a wide range of health functioning and quality of life outcomes.

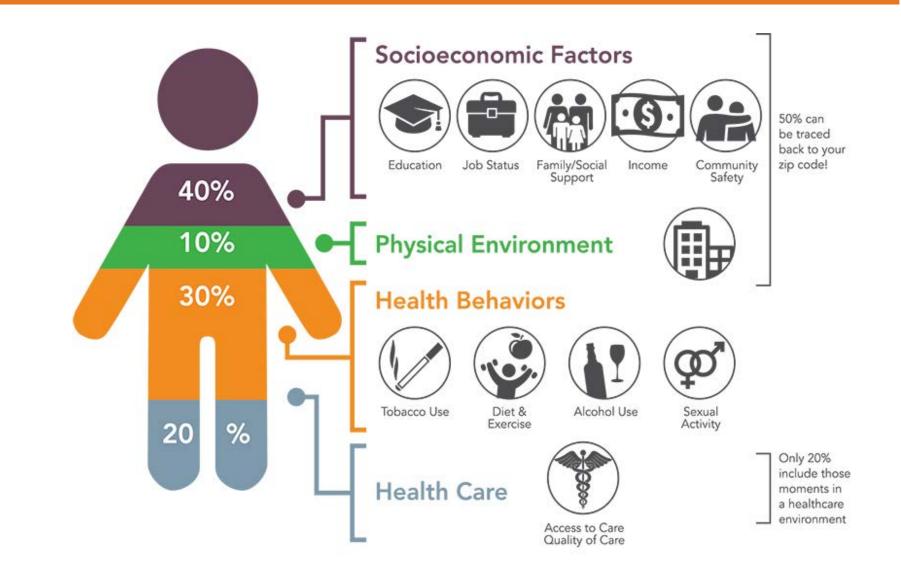




- Safe and affordable housing
- Access to education
- Public safety
- Availability of healthy food
- Local emergency/health services

Social Determinants Of Health









Health Outcomes



Mortality

- Morbidity
- Life Expectancy
- Health Care Expenditures



Practices (Behavioral and Physical) should be using SDOH

screens annually or as needed.

This is critical!

- Presents opportunities to help a member's quality of life improve
- Trust and credibility are gained when action is taken to help address these conditions
- Opportunity in every interaction with a member to acknowledge and celebrate resiliency



- The Protocol for Responding to and Assessing Patients Assets, Risks, and Experiences (PRAPARE)
- Patient Centered Assessment Method (PCAM)
- The Health Leads Screening Toolkit
- Hennepin County Medical Center Lifestyle Overview



SDOH ICD-10 Code List

Z-Codes

Any identified social determinant diagnosis codes should be provided on all claims for AHCCCS members in order to comply with state and federal coding requirements.

https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/Exhibit 4-1SocialDeterminantsHealthICD-10List.pdf

ICD-10 Code list



Social Determinants of Health ICD-10 Code List

Beginning on March 1st, 2018, the following ICD-10 diagnosis codes will be defined as **Social Determinants of Health** codes.

Please note that Social Determinants of Health codes may be added to or updated on a quarterly basis. Providers should remain current in their thorough utilization of these codes.

ICD-Code	Description	
Z550	Illiteracy and low-level literacy	
Z551	Schooling unavailable and unattainable	
Z552	Failed school examinations	
Z553	Underachievement in school	
Z554	Educational maladjustment and discord with teachers and classmates	
Z558	Other problems related to education and literacy	
Z559	Problems related to education and literacy, unspecified	
Z560	Unemployment, unspecified	
Z561	Change of job	
Z562	Threat of job loss	
Z563	Stressful work schedule	
Z564	Discord with boss and workmates	
Z565	Uncongenial work environment	
Z566	Other physical and mental strain related to work	
Z5681	Sexual harassment on the job	
Z5682	Military deployment status	
Z5689	Other problems related to employment	
Z569	Unspecified problems related to employment	
Z570	Occupational exposure to noise	
Z571	Occupational exposure to radiation	
Z572	Occupational exposure to dust	
Z5731	Occupational exposure to environmental tobacco smoke	
75730	Occupational exposure to other air contaminants	



- Include Z- Codes with the diagnosis
- Some EHR's allow mapping the codes directly from the screening tools
- Ensure the code is addressed in treatment and documented

For Assistance



Call to get the help you need. 1-866-775-2192

Get connected with the right social services, including:

- Transportation
- Medication assistance
- Free/reduced cost dental
- Financial assistance (utility and rent)
- Support groups

- Legal, tax and probate advice
- Financial and estate planning
- Volunteerism or community engagement
- Community-based healthy living programs
- Elder assistance

WellCare Health Plans, Inc., is an HMO, PPO, PFFS plan with a Medicare contract. Enrollment in our plans depends on contract renewal. Please contact your plan for details.





AHCCCS Whole Person Care Initiative

https://azahcccs.gov/AHCCCS/Initiatives/AHCCCSWPCI/

Social Determinants, Demographics and Outcomes

https://www.azahcccs.gov/PlansProviders/Demographics/

SDOH ICD-10 Code List

https://www.azahcccs.gov/PlansProviders/Downloads/FFSProvider Manual/Exhibit_4-1SocialDeterminantsHealthICD-10List.pdf

PCPs Required to screen:

- Depression
- Drug and alcohol misuse
- Anxiety
- Suicide risk at least annually or whenever the member evidences symptoms

Primary Care Screening and Referral

Practice Guidelines & Preventive Health Guidelines

Care1st utilizes practice guidelines, criteria, quality screens and other standards for certain areas of medical management, disease management, and preventive health. Our guidelines follow nationally accepted standards and are reviewed and approved by our Medical Management Committee, which is comprised of both clinical staff and network physicians. Updates occur annually or more frequently if needed. If you have questions on our guidelines or would like a hard copy of our guideline mailed to your office you may contact Provider Network Operations at 602-778-1800

Practice Guidelines

Dysphagia and Assessing Risk of Aspiration and Choking 100	
HIV Guidelines	
HCV Guidance: Recommendations for Testing, Managing, and Treating Hepatitis C	
Pressure Ulcers in the Developmentally Disabled	
"The Fatal Four" Part TwoDehydration	
High Blood Pressure 100	



Screening Tools

Depression

▶ <u>PHQ</u>

PHQ-A EDE

PHQ-2 PDF

Anxiety

GAD-7 EEE

Trauma

ACES FOF

Substance Use

CAGE EDE

► DAST 💴

► <u>SBIRT</u>

Suicide Risk

C-SSRS

Social Determinants of Health (SDOH)

PRAPARE

Care1st requires that PCPs routinely screen



- Depression: PHQ-9 and other PHQ-9 versions: <u>https://www.phqscreeners.com/select-screener</u>
- Depression: PHQ-A adolescents -<u>file:///C:/Users/mshen/Downloads/APA_DSM5_Severity-Measure-For-Depression-</u> <u>Child-Age-11-to-17.pdf</u>
- Depression: PHQ-2 <u>https://aidsetc.org/sites/default/files/resources_files/PHQ-2_English.pdf</u>
- Anxiety: GAD-7 <u>https://adaa.org/sites/default/files/GAD-7_Anxiety-updated_0.pdf</u>
- Suicide risk C-SSRS <u>https://cssrs.columbia.edu/</u>



- PHQ-2 and PHQ-9 to screen for depression
- CAGE-ID, Drug Abuse Screen Test (DAST) and the SBIRT

Integrated Services

- Within 7 days or immediately for urgent situations
- Or at least 3 culturally appropriate referrals

PCPs to refer



Make connections with BH providers

- Provider service line at 602.778.1800 or 1-866-560-4042
- Care Coordination 8am-5pm (602) 778-8301
- Care1st Care Management Referral Form

https://care1staz.com/az/providers/frequentlyusedforms.asp

Fax to 602-224-4372



- Refer to Behavioral Health Services when appropriate
- PCP initiated medication services for a member to treat a behavioral health condition:
 - the PCP will inform the member that non-medication management services, such as counseling, are available through Care1st
 - how member may access those services.



The PCP will coordinate

- Coordinate the transfer as needed
- Provide a sufficient supply of behavioral health medications
- Notify all entities involved

The Behavioral Health provider

will coordinate with PCP

- If unknown PCP, contact Care1st Customer care
- Request medical information from assigned PCP
- Coordination should occur throughout the treatment



The PCP and BH Provider will

- Respond to the request for medical records within 10 days of request
- Record request and response in medical records





- Policy 1410: Primary Care Provider (PCP) Behavioral Health Treatment and Coordination
- Policy 1400: Adult System of Care Components and Principles

https://care1staz.com/az/PDF/provider/manual/sections/Pro viderManual_07.pdf?ver=2020.05



Autism Spectrum Disorder (ASD) Virginia (Vicki) Cons, Director, BH



Referring for BH Services for ASD



- May refer in a variety of ways:
 - Referring to an Outpatient Clinic Provider (PT 77, IC, FQHC) for specific services (i.e. peer support, counseling, etc.) as an intake/assessment and treatment plan must be completed indicating the service(s) to be provided are medically necessary.
 - Referring to the provider directory: <u>https://azonline.care1staz.com/az/ancillary_care1st_providers</u>
 - Contacting the Care Coordination line Monday-Friday 8 a.m.-5 p.m. at 602.778.8301
 - Submitting a referral to Care Management by using the Care1st Care Management Referral Form, which can be found at <u>https://care1staz.com/az/providers/frequentlyusedforms.asp</u>
 - Establishing a collaborative relationship with neighboring contracted behavioral health providers

Self-Referring for Behavioral Health Services



- A member may self-refer to behavioral health services.
 - An intake/assessment and treatment plan must be completed indicating the service(s) to be provided are medically necessary.
- A member may obtain information regarding contracted behavioral health providers by:
 - Going to the Care1st website at <u>www.care1staz.com</u>.

Provider Website Resources/Support



https://www.care1staz.com/az/providers/network.asp



Our Network

AHCCCS Complete Care (ACC) begins on October 1, 2018. Care1st will be an ACC contractor in the North and Central Geographic Service Areas (GSA)! The North GSA includes Mohave, Coconino, Navajo, Apache and Yavapai Counties. The Central GSA includes Maricopa, Pinal and Gila Counties

Care1st contracts with many quality health care professionals. Our network is made up of physicians, hospitals, CRS clinics, miscellaneous other healthcare providers and more than 500 local pharmacies.





Medical Provider Search	J.
Dental Provider Search	
Ancillary Provider Search	
Radiology Providers	
Retail Pharmacy Search	
Care1st Practitioner Directory (PDF)	
Autism Spectrum Disorder (ASD) Pro	viders
Center of Excellence Coming soon	
Family-Run Organizations	
Peer-Run Organizations	
Medication-Assisted Treatment (MAT) Providers
Detox Providers	

Substance Use Disorder Treatment for Pregnant Women



Resources/Support continued



- County
- Address/City/Zip
- Phone Number
- Ages Served (0-3, 3-5, 6-12, 13-18, 18 +)
- Ability to Diagnose
- Support Services Provided
- Evaluation/Screening
- Counseling/Therapies Offered
- Types of Rehabilitation Services Offered
- Medical Services



https://www.care1staz.com/az/members/links.asp



Care1st Health Plan Arizona, Inc. is committed to partnering with the communities we serve to deliver the highest quality integrated healthcare. We work with a variety of community organizations to provide comprehensive up to date information on programs, services and resources to help our members improve and maintain their overall health.

For Members

- <u>COVID-19</u>
- Find a Doctor, Hospital, Urgent Care, <u>Pharmacy</u>
- <u>Behavioral Health Crisis Hotlines</u>
- Prescription Drug
- Member Handbook
- Healthy Rewards
- <u>Care Management Program</u>
- <u>Community Resources</u>
- Member Newsletters
- Smoking Cessation
- Member Advocacy Council
- <u>Member Advocacy Tools</u>



https://www.care1staz.com/az/members/links.asp

Program services vary depending on your needs, but may include:

- Financial Assistance (Utilities, Rent)
- Medication Assistance
- Housing Services
- Transportation
- Food Assistance
- Affordable Childcare
- Job/Education Assistance
- Family Supplies (Diapers, Formula, Cribs and More)

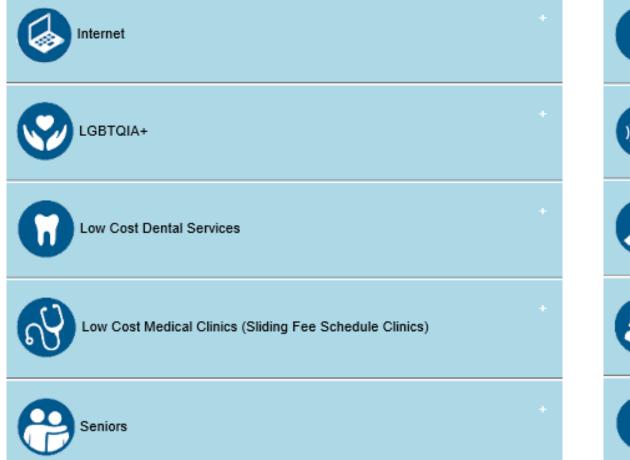


Program services vary depending on your needs, but may include:

General Resource and Referral	Food Resources
Advocacy Organizations	Foster Care and Adoption
Behavioral Health (Mental Health and Substance Use Disorders)	Housing
Children's Health and Wellness	Individuals with Autism Spectrum Disorder (ASD)
Employment	Individuals with Developmental Disabilities



Program services vary depending on your needs, but may include:



Sexual and Domestic Violence Support Resources	
Suicide Prevention	
Tribal Members	•
Veterans and Military Families	÷
Women's Health and Wellness	•

Resources continued...



Provider	Service Description
The Arc's Autism NOW Center	The Autism NOW Center provides high quality resources and information in core areas across the lifespan to individuals with Autism Spectrum Disorders (ASD) and other developmental disabilities, their families, caregivers, and professional in the field. Focus areas include early detection, Early intervention, and Early education; Transition from high school into early adulthood; Community based employment; Advocacy for families and self-advocates; and Networking in local, state, and national arenas.
Arizona Autism Coalition	The Arizona Autism Coalition improves the lives of individuals with Autism Spectrum Disorder and their families in Arizona by sharing resources and affecting autism systems reform through statewide collaboration and advocacy. The Coalition goals and objectives are designed to provide and support an inclusive membership organization for all service providers and families affected by autism in Arizona.
<u>Autism Speaks</u>	Autism Speaks is dedicated to promoting solutions for the needs of individuals with autism and their families through advocacy and support, increased understanding and acceptance and research into causes and better interventions for Autism Spectrum Disorder (ASD).



Centers of Excellence:

- are facilities and/or programs that are recognized as providing the highest levels of leadership, quality, and service
- align physicians and other providers to achieve higher value through greater focus on appropriateness of care, clinical excellence, and patient satisfaction.





Adult System of Care

- Center of Excellence for chronic pain with or without co-occurring substance use disorders that address behavioral and physical healthcare needs.

Children's System of Care

- Center of Excellence for children with the following special healthcare needs:
 - 1. Children aged birth to five with behavioral health needs
 - 2. Children at risk of/with Autism Spectrum Disorder (ASD)
 - 3. Adolescents with Substance Use Disorders
 - 4. Transition Aged Youth



Integrated Care Virginia (Vicki) Cons, Director, BH



What is Integrated Care?



- Collaboration and coordination between health care professionals to provide complete treatment to patients and improve overall well-being
- Integration is the combined set of methods, processes and models that seek to bring about this improved coordination of care.



- Improved patient satisfaction
- Enhances access to services
- Improves quality of care and life for the member
- Lowers overall health care costs



- Provide holistic care for members with chronic behavioral and physical health conditions that affect health and well-being.
- List of available Integrated Clinics: <u>https://azonline.care1staz.com/az/anc</u> <u>illary_care1st_providers</u>

Care1st Ancillary Providers

Click on the specialty services below to find out more about that provider Ancillary Providers Image ACUTE REHAB HOME HEALTH AMBULATORY SURGICENTERS HOSPICE HOSPITALS BEHAVIORAL HEALTH HOSPITAL BEHAVIORAL HEALTH INTEGRATED CLINIC INFUSION BEHAVIORAL HEALTH OUTPATIENT CLINIC LABS BEHAVIORAL HEALTH RESIDENTIAL FACILITY ORTHOTICS AND PROSTHETICS BEHAVIORAL HEALTH SUBACUTE FACILITY **OUTPATIENT REHAB - PT/OT/ST**

Integrated Clinics



BEHAVIORAL HEALTH INTEGRATED CLINIC

Provider Name	Address	County	Phone Number	Fax Number	Hours
COMMUNITY INTERVENTION ASSOCIATES INCIDBA COMMUNITY HEALTH ASSOCIATES	1701 N DOUGLAS AVE , DOUGLAS, AZ 85607 Q	COCHISE	520-366-3133	520-364- 2770	
SOUTHWEST BEHAVIORAL & HEALTH SERVICES INC	1515 E CEDAR ST STE B2 B4 E1 E2, FLAGSTAFF, AZ 88004 Q	COCONINIO	928-779-4550	928-779- 4493	
THE GUIDANCE CENTER INC	2187 N VICKEY ST, FLAGSTAFF, AZ 86004 Q	COCONINO	928-527-1899	928-714- 6480	
ENCOMPASS HEALTH SERVICES	463 S LAKE POWELL BLVD, PAGE, AZ 86040 Q	COCONINO	928-645-6113	928-645- 3254	
COMMUNITY BRIDGES INC	803 W MAIN ST , PAYSON, AZ 85541 Q	GILA	928-468-0022	928-468-	
		What is Integrated Care?		0044	
HORIZON HEALTH AND WELLNESS INC	447 E BROADWAY RD BLDG A, APACHE JUNCTION, AZ 85120 Q	MARICOPA	480-474-5830	480-982- 3142	
TOUCHSTONE BEHAVIORAL HEALTH DBA TOUCHSTONE HEALTH SERVICES	12409 W INDIAN SCHOOL RD BLDG E, AVONDALE, AZ 85392 🔍	MARICOPA	866-207-3882	602-732- 4980	
COMMUNITY BRIDGES INC	824 N 99TH AVE STE 108, AVONDALE, AZ 85323 Q	MARICOPA	623-907-1457	623-775- 2425	
SOUTHWEST BEHAVIORAL & HEALTH SERVICES INC	26428 W HWY 85 , BUCKEYE, AZ 85326 Q	MARICOPA	623-882-9906	623-882- 9908	
PSA BEHAVIORAL HEALTH AGE	3271 E QUEEN CREEK RD STE 101, GILBERT, AZ 85297 Q	MARICOPA	480-550-3193	480-550- 3194	



Virginia (Vicki) Cons

Director, Behavioral Health Services

(602) 570-1048

vcons@care1staz.com



Care Management and COVID Vaccine Outreach

Dee Reny Director, Medical Management





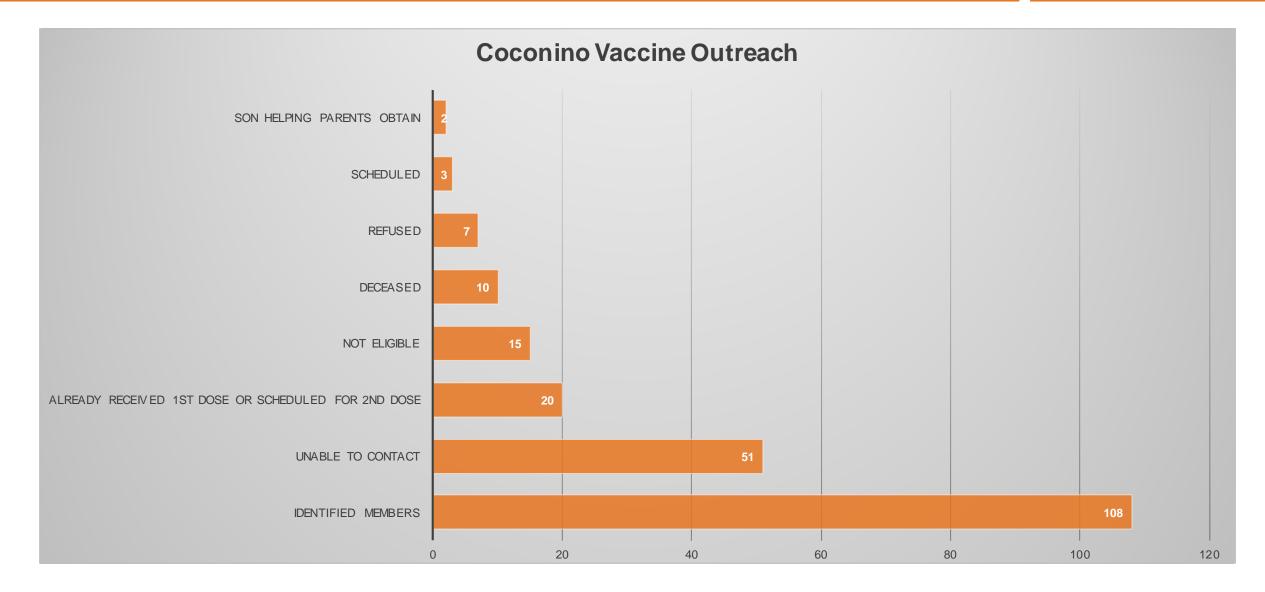
Targeted Approach

All members being actively Care Managed discuss COVID vaccine

- Educate and lend support on where to receive by county
 - Arrange transportation support as needed
- Fluctuate approach by county
 - Northern AZ Health (Coconino) partnered with Dr Fess and Dr Carrol
 - NAZ holding 10 slots per day for Medicaid members
 - Care Management partnering with UHC and Health Choice
 - Schedule high risk members in open slots

Coconino Outreach





Additional Initiatives



Additional Initiatives

- Partnership with Corporate Centene
 - Gathering member data to run text campaign and POM calls
- Strategic community partners
 - Also conducting members outreach to lend resources and support to obtaining the vaccine



Leadership Team

Dee Reny RN/BSN/CCM: Director of Medical Management

Dee.reny@wellcare.com

(602)778-3280

 Jearlyn Tsosie MSW/LMSW: Manager of Care Management <u>itsosie@care1staz.com</u>

(602)782-1970

- Connie Thompson RN/BSN: Supervisor of Care Management <u>Connie.Thompson@wellcare.com</u> (602)778-1840
- Lubia Arriaza: Supervisor of Care Coordinator

LArriazaOliva@Care1stAZ.com (602)778-4157



Community Affairs Team Justin Harris, Community Relations Coordinator



Arizona Medicaid (AHCCCS) Presence



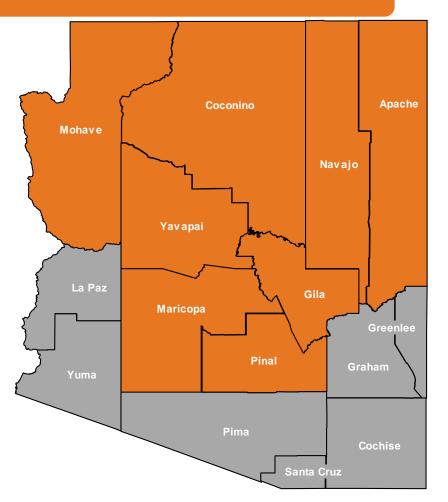
Care1st Health Plan Arizona serves approximately 190,000 Medicaid (AHCCCS) members across the state.

Arizona Medicaid (AHCCCS) Presence:

- Offers plans through the Care1st Health Plan Arizona brand
- Serves 188,789 Medicaid (AHCCCS) members
- Plans available in Maricopa, Gila, Pinal, Mohave, Coconino, Apache, Navajo and Yavapai counties

MEDICA ID

*Service area effective as of July . 1, 2020





The Community Affairs Team:

The Care1st Community Relations team recently integrated with the Arizona Complete Health Community Affairs team under the leadership of Greg Taylor, Regional Vice President of Community Affairs.

Veronica De La O, Community Relations Manager, manages Arizona Complete Health Corporate/Care1st Corporate Foundation and partnership with the Care1st Avondale Resource Center, oversees outreach in Maricopa, Mohave, and Yavapai Counties

Justin Harris, Senior Community Relations Specialist, oversees outreach in Coconino, Navajo, and Apache Counties

Team goal: Establish high level partnerships with elected officials, local government, provider offices, and non-profits to improve health outcomes in the communities that we serve.



To help us fulfill our mission of improving the health of the community one person at a time, Arizona Complete Health (AzCH) and Care1st have developed a Community Reinvestment Program. This program provides philanthropic support for health and wellness initiatives and to community-based organizations that are working to improve the health of our local communities.

Health aligns our Corporate Giving investments with:

- Internally established priorities based on areas of concern among AzCH and Care1st members
- County and local community health improvement plans
- For more details about specific areas of focus, please reference the AzCH/Care1st Philanthropic Funding Priorities Guide which can be found on <u>The CyberGrants Application</u> <u>Portal</u>.
- Community-based organizations that are working to improve the health of our local communities

For more information please reach out to Greg Taylor or Veronica De La O.

Community Reinvestment Program



Some examples of AzCH health priorities include:

- Expanding wellness and prevention efforts, such as cancer screenings or flu shots
- Empowering individuals to manage chronic disease, such as diabetes, asthma or another chronic conditions
- Promoting substance abuse prevention and treatment to help educate, reduce stigma and encourage greater access to treatment
- Raising awareness about mental health, support and services to help educate the community, reduce stigma, promote greater access to services and support recovery and resiliency
- Building pathways that maximize independence and make accessing services easier for persons with disabilities and their families, no matter the disability
- Addressing social determinants of health, those factors in our lives that impact our ability to be healthy and stay healthy, such as housing, employment, nutrition, safety



- Care1st Welcome Rooms provide the features of a Resource Center in a neighborhood setting. Care1st partners with community-based organization or a contracted Provider by offering one-on-one assistance to individuals eligible for government-sponsored health care programs, provide health care information and education.
- In the fall of 2019 Care1st Health Plan Established its Welcome Rooms Strategy: the mobile Welcome Rooms offers a location to host an event, the event may include children's reading and literacy, nutrition, and wellness classes, AA/NA meetings, and provide special needs resource navigation. Our Welcome Room strategy in Arizona includes engagement efforts through Promotoras and Community Health Workers, peer and family support specialists and care coordination staff.



Welcome Room Example: September of 2019 Welcome Room took place at the Coalition for Compassion and Justice in Prescott, AZ (CCJ). Care1st Health Plan provided CCJ a sponsorship. 60 Community Members participated.

Partners:

- Coalition for Compassion and Justice (CCJ)
- Northern Arizona Council of Governments (NACOG)
- Area Agency on Aging
- Yavapai County Health Department
- Catholic Charities
- US Vets
- Family Involvement Center
- Yavapai FQHC

- St. Luke's Food Pantry
- Helping Families In Need (HFIN)
- Prescott Public Library
- MATFORCE/Yavapai Reentry Project
- Spectrum Behavioral Health
- Stepping Stones Agencies (Behavioral Health)
- Community Dietician

Partnering with Care1st Health Plan



- Care1st Health Plan distributed over 15,000 masks, hand sanitizer, head shields, and medical gowns to Provider offices and non-profits in Arizona in need of PPE.
- Host a Welcome Room with Care1st Health Plan to engage your current patients to learn about community resources and get their clinical screenings completed.
- Care1st has marketing dollars to sponsor your community health events or health program initiatives that align with the plan's Community Giving.
- Connect your Provider office to health navigators or assistors to help with current and new members enroll into health care



Veronica DeLaO

Community Relations Manager Care1st Health Plan Arizona 1870 W. Rio Salado Tempe, AZ 85281 **Cell:** 602-489-4165 <u>V.DeLaO@Care1staz.com</u>

Justin Harris

Community Relations Specialist, Senior Care1st Health Plan Arizona 1870 W. Rio Salado Tempe, AZ 85018 **Cell:** 480-244-8965 J.Harris@Care1staz.com

Greg Taylor, Regional Vice-President Arizona Complete Health 333 E. Wetmore Rd. Suite 600 Tucson, AZ 85705 gtaylor@azcompletehealth.com 480-234-2606

Veronica De La O: Mohave, Yavapai and Maricopa Justin Harris: Coconino, Navajo, Apache, and Maricopa Greg Taylor: State-Wide



Advocacy Department Mauricio Orozco Manager, Community Engagement





Transform the member experience by:

- Engaging and empowering members to create healthy habits.
- Supporting community organizations that address socioeconomic conditions for our members.



Advocacy and Resource Connection Newsletter



Newsletter





Pharmacy Vaccination Sites for People 75 and Older

Listed below are select Albertson's and Safeway pharmacy locations offering vacoine (<u>Moderna</u>) for adults age 75 and older in Maricopa County. Appointments will be available for up to two weeks at a time. As inventory is assessed, appointments will be added on a weekly basis. If you do not see appointments, please check back at the end of each week to see newly added appointments. Public Health is not able to assist with setting appointments. You must provide a form of ID verifying your age at your scheduled appointment. Appointments are required; no wak-ins.



- This is an example of the ARC weekly newsletter
- The ARC newsletter includes community information and resources that address the Social Determinants of Health.
 - COVID-19 events
 - Food resources
 - Financial assistance
 - Employment supports
 - Community education and information
- Our community engagement team is considering the creation of a monthly ARC newsletter for providers. (Instant Poll)

Community Engagement Lunch & Learn



- Monthly, 3rd Wednesday from 12:15-12:55 pm
 - Guest speakers from state and community-based organizations that provide programs, services, and resources to help members address social determinants of health.
- Contact Mary Perez at <u>mary.perez1@care1staz.com</u>

Date	Speaker(s)
1/21/21	City of Phoenix, Human Services Department Community and Senior Services Division
2/17/21	St. Joseph The Worker
3/17/21	DES Unemployment Insurance

Your Advocacy Team





Son Yong Pak Director, Advocacy SonYong.Pak@Care1stAZ.com (602) 778-8327



Mauricio Orozco Manager, Community Engagement <u>morozco@care1staz.com</u> (602) 474-1302



Ethan Amos Manager, Tribal Relations & Cultural Competency <u>eamos@Care1staz.com</u> (928) 714-6116



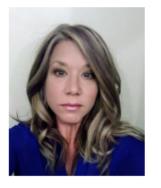
G'Kyshia Hughes Senior Member Advocate <u>g'kyshia.hughes@care1staz.com</u> (602) 474-1304



Mary Pérez Community Relations Coordinator <u>mary.perez1@care1staz.com</u> (480) 375-6160



Georgina Lopez-Morineau Community Relations Coordinator georgina.morineau@care1staz.com (480) 375-6088



Kristi Denk Housing Management Specialist <u>kristi.denk@care1staz.com</u> (602) 778-8381





Quality Improvement

Maritza Jimenez, Quality Improvement Project Manager





- AHCCCS is updating its Performance Measures to match HEDIS and CMS Core specifications.
- Minimum Performance Standards (MPS) previously set by AHCCCS are being changed to "Meet or Exceed the NCQA HEDIS Medicaid Mean."
- The AHCCCS has changed the health plans measurement year for Performance Measures from an AHCCCS contract year (October 1 – September 30) to a calendar year (January 1 – December 31).

EPSDT Measures Changes



- The W15 (6 visits by 15 months of life) measure has been expanded to W30 (8 visits by 30 months of life). This measure is broken out into two submeasures:
 - 6 visits by 15 months (AHCCCS will continue to focus on this rate.)
 - 16-30 months
 - Due to the change in this measure, AHCCCS will be updating the AHCCCS EPSDT Periodicity schedule to include an EPSDT visit at month 30.
- The Well Child Visits 3-6 years olds (W34) and Adolescent Well Care Visit (AWC) are merging into one measure called Child and Adolescent Well-Care Visits (WCV).
 - This measure will cover EPSDT visits at ages 3 years old to 21 years old.



- AHCCCS will be updating the guidelines for when developmental screenings should be done for members aged birth to 3 years old.
- The new guidelines will match the CMS Core Measure for Developmental Screenings in the First Three Years of Life.
- Three age specific screenings will be required during the 12 months preceding or on a member's first, second or third birthday.



 AHCCCS will be updating the timeline for the completion of a postpartum care visit to match the HEDIS specifications for access to postpartum care.

 The postpartum care visit will now be able to completed between 7 and 84 days. Care1st has rolled out a Member Incentive Program.

- The purpose of this program is to increase the rate of:
 - EPSDT visits
 - Timely initial Prenatal Care visits
 - Postpartum Care Visits



Healthy Rewards Measure	Requirement for Incentive	Reward Value
Annual Checkup	Completion of an EPSDT visit for members aged 3 – 21 years old.	\$25
Well-Child Visits (Birth to 15 Months)	Completion of the first 4 EPSDT visits in the Birth - 15 Months Measure	\$25
Well-Child Visit 6 (Birth to 15 Months)	Completion of all 6 EPSDT visits in the Birth - 15 Months Measure	\$50



Healthy Rewards Measure	Requirement for Incentive	Reward Value
Prenatal Care Visit	Complete the first prenatal visit during the first trimester to qualify for a reward and a bonus item. If member becomes eligible for Care1st after the first trimester, a visit within 42 days of enrollment would qualify for a reward and a bonus item.	\$20 PLUS Bonus reward of a single stroller or playpen
Postpartum Care Visit	Complete a postpartum visit between 7–56 days after giving birth.	\$20



- Reminder: EPSDT forms or copies of medical documentation containing all the elements of the EPSDT visit must be submitted to Care1st.
- Forms can be submitting via:
 - Fax: 602-224-4373
 - Mail: Attn: Care1st EPSDT
 P.O. Box 52079
 Phoenix, Arizona 85072-2079



Prior Authorization Medical

Barbara Camp, Supervisor, Operations





- Effective March 1, 2021 most radiology authorization requests for will be processed by National Imaging Associates (NIA).
 - Prior Authorizations Guidelines have been updated for NIA authorization requirements
 - Authorization requests to be uploaded into NIA portal at RadMD.com
 - Authorization requests received at Care1st with dates of service after 3/1/21 will be forwarded to NIA via fax.

When to Request Prior Authorization



PA Guidelines are found on the Care1st website

https://www.care1staz.com/az/PDF/provider/PriorAuthReferenceGrid/2019/PA111119.pdf

- Prior Authorization Guideline- Provides General Guidelines by Category
- Attachment 1- Detailed Outpatient Procedure Code Authorization Requirements
 - 700+ pages of all CPT codes. Easy to search by using Ctrl F

Prior Authorization Guidelines

Attachment 1 – Detailed Outpatient Procedure Code Authorization Requirements

Change Log for Attachment 1 mm

(Effective 08/01/2020).



To Submit a Prior Authorization Request

- BEST OPTION-Complete Treatment Authorization Request, attach clinical notes, physicians order or referral, and fax to (602) 778-1838
- Call the request in to (602) 778-1800 option 5 then option 6 then option 3

Note: clinical notes and other supporting documentation need to be received before decision can be rendered.

Prior Authorization Turn Around Times



Authorization TAT

- Urgent 72 hours
- Routine 14 days
- Marking a request urgent when it does not meet the above definition, may result in less time to obtain necessary information and render decision.
- A request submitted as urgent must meet AHCCCS definition or it may be downgraded by clinical staff to a routine request.
- Appointment availability does meet the urgent definition.
 - AHCCCS defines an urgent request as:
 - "A request for services in which either the requesting provider indicates or the contractor determines that following the standard timeframes for issuing an authorization decision could seriously jeopardize the member's life or health or ability to attain, maintain, or regain maximum function."

Prior Authorization Fax Backs



Common Reasons for Receiving a Fax Back:

- Missing Information
 - CPT codes
 - diagnosis codes
 - no clinical information
- No Authorization Required
- Redirect to PCP
 - Non-Par providers submitting requests will be redirected back to the PCP for referral
- Redirect to PAR provider
 - Requests for a member to go to a non-par provider will be redirected in network
 - Exceptions will be made if there is no contracted providers in the area

Prior Authorization Useful Resources



- Medicaid Prior Authorization Grid Please use as a resource
 - https://www.care1staz.com/az/providers/priorauthreferencegrid.asp
 - Last updated January 2019
- Find useful Prior Authorization forms here
 - https://www.care1staz.com/az/providers/frequentlyusedforms.asp
- Care1st Customer Service: (602) 778-1800

Care1st fax number: (602) 778-1838



Pharmacy Updates

Maria Cole Pharmacy Director



Formulary Updates/Highlights: April 1st, 2021



- Glucagon-Like Peptide-1 Receptor Agonists (GLP-1s):
 - Bydureon Vials (discontinued)
 - Bydureon Pens (to be discontinued as of March 2021)
 - Trulicity (formulary with PA)
- Hypoglycemics SGLT2s
 - Invokamet (formulary with PA)
 - **Synjardy** (formulary with PA)
 - **Xigduo** (formulary with PA)
- Dipeptidyl Pepidase-4 Enzyme inhibitors (DPP-4s)
 - Trijardy XR (formulary with PA)
- Otic Antibiotics:
 - Ofloxacin Otic (added to the formulary)

Care1st Website





- Care1st Health Plan Arizona Comprehensive Machine Readable File (01.01.21)
- Care1st Health Plan Arizona Comprehensive Searchable PDL Tool with UM Criteria
- Care1st Health Plan Arizona Comprehensive PDL (01.01.21) (PDF)
- Care1st Health Plan Arizona Dual Eligible Over-the-Counter (OTC) Drug List (PDF)
- AHCCCS Drug List (Effective January 01, 2021) (PDF) 100
- Care1st Health Plan Arizona Comprehensive PDL Provider Notice of Change Updates
- Summary of AHCCCS P&T Formulary changes
- 2020 Diabetic Supply Information (PDF) Image: 2020 Diabetic Supply Information (PDF)
- 2021 Diabetic Supply Information(PDF) Image: 2021 Diabetic Supply Information(PDF)
- Medicaid Drug Coverage Request Form(PDF)

Select Language



- Login
- Mailings & Reference Materials
- Our Network
- Manual
- Provider Priority of Preferred Files
- Practice & Preventive Health Guidelines
- Prior Authorization Guidelines & Criteria

- Care1st Health Plan Arizona • **Comprehensive PDL**: list of all the drugs on the formulary.
- Care1st Health Plan Arizona • **Comprehensive PDL Tool** with UM Criteria: Provides additional information on all medications on the formulary with a link to PA criteria if applicable.
- If a drug requires PA or is not ۲ listed on the plan PDL, submit a PA request using Cover my Meds or fill out and fax the Prior authorization request form under the Forms tab.

ROPA: Referring, Ordering, Prescribing, Attending



- Hard stop starting on June 1st, 2021.
- Soft edit March 2021.
 - Pharmacy will be able to override.
- Claims from providers who are not enrolled with AHCCCS will not pay, be reimbursed.
- Examples of services affected:
 - Home care services
 - Lab testing
 - Durable Medical equipment
 - Prescription drugs



- Pharmacists, interns and residents are not required to enroll at this time.
- Registration is available through the AHCCCS Provider Portal on the AHCCCS website
 - <u>https://www.azahcccs.gov/PlansProviders/APEP/ProviderEnrollment.html</u>
- Applications processed within an average of 6 business days but can take up to 45 days.



Medical Claims Anthony Crooks, Senior Claims Liaison



Claims Top Denials



Top 5 Denial Reasons and Reminders to Reduce Denials:

1. Duplicate Billing:

- Use the Care1st Web portal to confirm claim status at any time
- Allow 45-60 days from the initial claim submission prior to resubmitting
- Contact Claims Customer Service to assist with questions prior to submitting duplicates
- Notify your Provider Rep of claims resubmission projects exceeding 100 claims

2. Provider Not Contracted – Auth Required:

- Refer all laboratory services to Sonora Quest (our exclusive lab)
- Non-contracted providers must obtain authorization for all services
- Contact your Provider Rep promptly to add new providers to the Care1st contract as they
 join the group

3. Primary Insurance on file-Bill Primary Insurance:

- Verify coverage at each appointment
- Use AHCCCS online to verify other coverage

Claims Top Denials



Top 5 Denial Reasons and Reminders to Reduce Denials:

4. Patient Not Eligible on Date of Service:

 Confirm eligibility on AHCCCS online or with Care1st Customer at time of service or prior to claims submission

5. Exceeds Timely Filing Limit:

- Initial claims submissions must be received within 180/6 months, or 60 days from the date on the primary carriers remit, whichever is greater
- Resubmissions must be received within 12 months of the date of service, or 60 days from the last adverse decision or date on the primary carriers remit, whichever is greater
- Note To avoid timely filing rejections please monitor your rejection reports if you are submitting claims electronically <u>EDI-Master@wellcare.com</u>

Covid 19



Covid-19 Reminders

AHCCCS requirements for Covid-19 related services and/or testing

- Append the CR modifier per the AHCCCS FAQ page for all services related to, or as a result of Covid-19
- New telehealth guidelines updated 01/13/2021 are now posted on the AHCCCS website: <u>https://www.azahcccs.gov/PlansProviders/MedicalCodingResources.html</u>
- Testing codes U0001-U0004 are not allowed for provider type 08 (MD-Physician) or any mid-level providers unless an exception is obtained from AHCCCS

Outreach and advocacy

Care1st continues to monitor denials and Covid-19 related codes and diagnosis codes, providing outreach/education as needed, as well as working with AHCCCS on potential issues affecting coverage

Covid-19 claims resources are available on the Care1st Website

Covid FAQ link https://care1staz.com/az/providers/COVID19_Providers.asp

OB Billing



Maternity Billing Guidelines

- Prenatal visits can now be submitted as they occur at the normal billed charge for the level of care provided. These visits will be reimbursed at the rates outlined in the provider contract.
- Notification is required within 30 days of confirmation of pregnancy
- To receive proper credit for the total OB package bill all visits at the providers contracted rate or higher.
- Prenatal visits no longer need to be reported with the final total OB claim as a 0.00 or 0.01 charge

OB Billing, cont.



- When the delivery claim is received, a reconciliation will be performed on all prenatal visits paid.
 - For claims that meet the total OB criteria all prenatal visits will be adjusted at the time the total OB package is paid and confirmation of recoupment of these claims will appear on same remittance as the total OB payment
 - If the member does not qualify for the total OB package, the delivery claim will be paid at the appropriate delivery only rate and fee for service prenatal visits will not be recouped.
- Services included/excluded in the total OB package will remain the same as outlined in section VI, page 15 of the Care1st provider manual, which can be found on the Care1st web site.
- Note: Maternity claims may still be billed under the prior format, capturing all HEDIS visits on the final claim billed with a 0.00 or 0.01 charge if preferable.

Claims Reminders



FQHC/RHC/IC Radiology and Pathology certifications

 Radiology and Pathology certifications must be maintained with AHCCCS to avoid rejections and recoupment through the encounter process.

Payment rates exceeding billed charges

 Care1st pays up the lesser of case rate/fee schedule allowance on professional claims. To avoid rework, please ensure the billed amount exceeds the contracted case rate/fee schedule

Prior Authorization

- To avoid denials include the prior authorization approval number on all professional claims in field 23 (EDI Loop 2300 REF/G1)
- Top 3 prior authorization denials last month 96127, 76376 and H2012
- https://www.care1staz.com/az/providers/priorauthreferencegrid.asp

Claims Reminders



Billing Secondary Claims Electronically

- Effective September 2019 Care1st began accepting secondary claims via EDI
- Secondary Claims on Dual Members
- Claims for dual members covered under both Wellcare Liberty and Care1st are automatically crossed over with the exception of the claim types below.
 - Durable Medical Equipment/Orthotics
 - Home Health Care
 - FQHC/RHC
 - MSIC/Integrated Clinic
- Please contact claims customer service on dual claims that have not crossed over prior to resubmitting

QUESTIONS / COMMENTS





THANK YOU

