Healthcare Financial Management Association AmeriHealth Caritas North Carolina Update

April 25, 2023

The content presented within this training is for informational purposes only and not intended as medical advice or to direct treatment. Physicians and other health care providers are solely responsible for the treatment decisions for their patients and should not use the information presented and accompanying materials to substitute independent clinical judgment.





Agenda



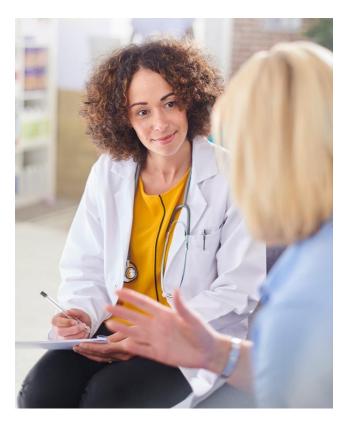
- Mission and Vision
- About ACNC
- Provider Support
- Quality Improvement
- Claims and Billing
- Member Success Story
- Questions and Discussion

Introduction



The AmeriHealth Caritas Mission & Vision

To help people get care, stay well, and build healthy communities. We have special concern for those who are poor.



To be the national leader in empowering those in need, especially the underserved and the disabled, across their full life journey, from wellness to resilience, in order to reach their American Dream.

ACNC by the Numbers



• 332,947 Enrolled Medicaid beneficiaries (as of March 2023). Just over 70% of members are under age 21.

5 Wellness & Opportunity Centers – Asheville, Charlotte, Greensboro,

Fayetteville, and Greenville. (Mobile Center to serve Greater Triangle/Raleigh-Durham arrives in July.)

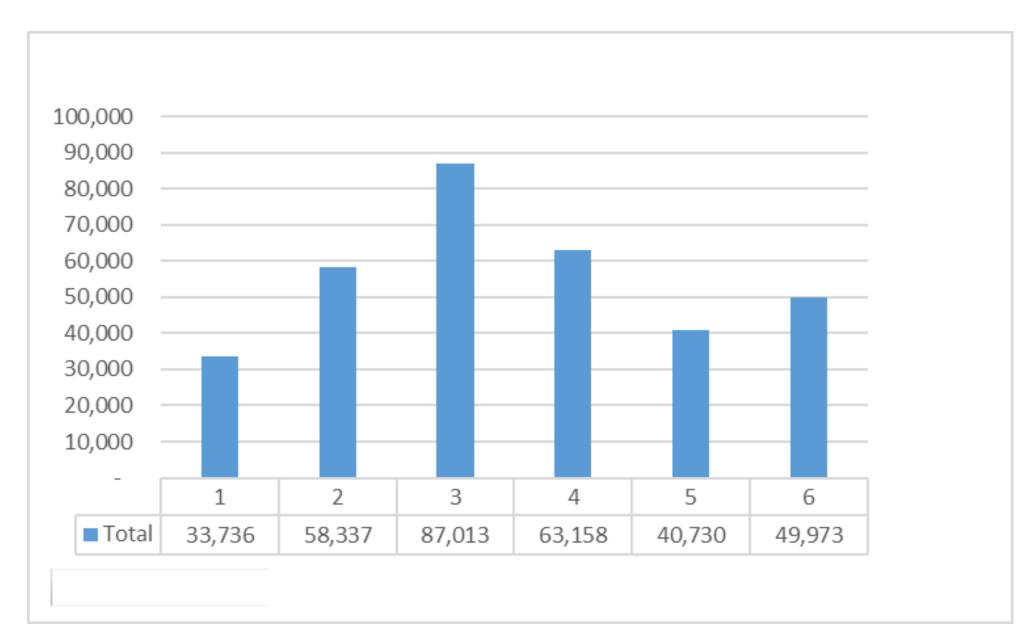
- Commitment to local engagement community-based associates living and working in each region.
- More than 56,000 contracted providers and provider groups.
- More than 350 associates supporting ACNC.



Back to School event (fall 2022)
Fayetteville Wellness & Opportunity Center

Membership by Region





Provider Support



Provider Support – A Partnership





Provider Support – Provider Network Management



Experienced Leadership Team

Dedicated team of ACNC Provider Network Directors and Managers

Account Executives – single point of contact

- Live and work in North Carolina.
- Assigned to cities, counties and then by provider type –per region.
- Dedicated team for behavioral health/substance use provider support

Face-to-Face and **Telephonic Support**

- Website and NaviNet provider portal navigation.
- Member marketing materials for your office.
- Provider orientations, <u>trainings</u> and <u>Wellness and Opportunity Center</u> events.

Ongoing education and assistance.

Provider Support – Contact Information





Find my Provider Network Account Executive

Contact via regional email boxes

Member Services

1-855-375-8811

Provider Services

1-888-738-0004

TTY/TDD

1-833-870-5588

WEB

https://www.amerihealthcaritasnc.c

PORTAL

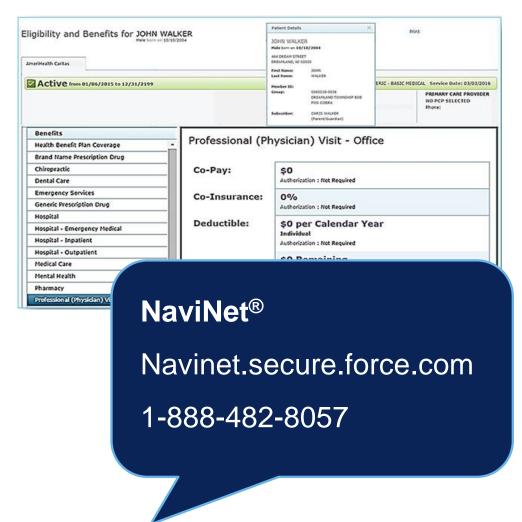
NaviNet®

ACNC Account Executives - Back: Demetrius Vaughn, Maria Abate, Doris Brown, and Clarence Lawing. Front: Bernadette Owens

PROVIDER RESOURCES SECURE PROVIDER PORTAL



- Member eligibility and benefits information
- Panel roster reports
- Care gap reports to identify needed services
- Create claims investigations to research or dispute claims
- Member clinical summaries
- Admission and discharge reports
- Medical and pharmacy claims data
- Claims adjustment inquiry



Provider Support – Keeping You Informed





Providers

CARE IS THE HEART OF OUR WORK

Provider Digest

Provider Digest — January 2023

AmeriHealth Caritas North Carolina (ACNC) is committed to providing the support you deserve. You will find the following topics in this digest:

- NC Health Choice (North Carolina's CHIP program) is moving to Medicaid.
- North Carolina Medicaid Standard Plan and Tailored Plan Tobacco-Free Policy Requirements

RESOURCES

- Reminder: Appointment wait-time standards
- Vision Services for Adults

TRAINING

- Let's Work Together: NEW Provider Orientation
- 2023 Substance Use Disorders (SUD) TeleECHO Clinic
- Solution for Online Prior Authorizations Register for Training Dates
- Earn CMEs/CNEs with our No-Cost Presentations by Physicians for Social Responsibility
- <u>Early Periodic Screening</u>, <u>Diagnostic and Treatment</u> (<u>EPSDT</u>) <u>Zoom Webinar Training</u>

Read the full January Provider Digest.

QUICK REFERENCE RESOURCE LINKS

NCDHHS Taxonomy Enrollment Reminders | Medication Look Up Tool | Member Rights and Responsibilities | NaviNet Provider Portal | Prior Authorizations Reference Guide | Region Map and Account Executive Contact

Visit the <u>Provider section</u> of the AmeriHealth Caritas North Carolina website for more information, news and resources for providers. If you need assistance regarding this email or other issues, please contact your Account Executive.

Download Adobe Reader





2022/Issue 1



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Quality Improvement



2023 Quality Performance Improvement Projects

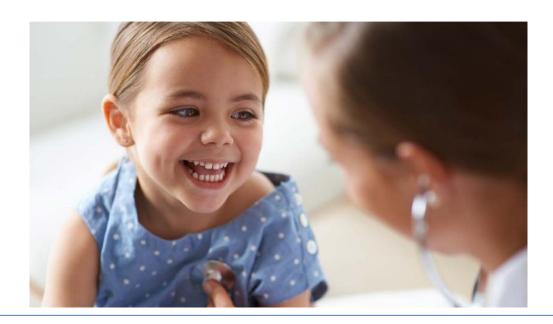


Clinical PIPs:

- Improving Childhood Immunization Rates for Combo-10.
- Improving Hemoglobin A1c Levels for Members with Diabetes.
- Improving Timeliness of Prenatal Care and Completion of Postpartum Care Visits.

Non-Clinical PIP:

Improving the Number of Care Needs Screenings Completed for Medicaid Members.



Value-based Programs



AmeriHealth Caritas began partnering with providers to deliver innovative, value-based programs. Since that time, we have promoted value-based care models that incentivize high-quality, cost-effective care over the traditional fee-for-service system.

Transforming provider compensation to a value-based structure can help increase opportunities for providers to better:

- Integrate physical and behavioral health services
- Address the social determinants of health,
- Advance health equity
- Enhance patient and provider experiences
- Improve quality and efficiency outcomes

Accessing Care Gaps in NaviNet via Eligibility & Benefits Inquiry



Alert-related information on a member is available via the **Eligibility and Benefits Inquiry**.



Workflows for this Plan

Eligibility and Benefits Inquiry

Claim Status Inquiry

Report Inquiry

Claim Submission

Provider Directory

Pharmacy Authorizations

Forms & Dashboards

Pre-Authorization Management

InterQual Transparency

Training Videos

Claims Investigations

Care Gap Response Forms

Quick Links:

Planned maintenance to the Care Gaps and Condition Optimization Program (COP) platforms may occur on Thursday evenin again after 10 p.m. ET. Thank you for your patience.

We welcome AmeriHealth Caritas North Carolina providers to the **NaviNet Plan Central page**, website. These tools will assist you in providing the best care possible for our members.

TOOLS FOR QUALITY OUTCOMES

Our quality tools and resources are designed to support AmeriHealth Caritas North Carolina's Medic

Using the Care Gaps Response Forms allows you to close care gaps by entering information electron Response Form training video, navigate to the form to enter information on services provided and fit

Please note that with this upgraded electronic functionality, faxed submissions of the Care G

- · 2022 HEDIS Comprehensive Provider Education Tool (PDF)
- · Care Gaps Response Forms Training Video
- Care Gaps Response Form Provider Guide (PDF)
- Behavioral Health Quality Enhancement Program (BH QEP) Manual (PDF)
- Primary Care Physician Quality Enhancement Program (PCP QEP) Manual (PDF)

Claims and Billing



Known Issues Addressed or Projects Completed



Provider Enrollment File (PEF) and ACNC Provider File Review Management

Claims

Researching ACNC internal provider data files that identify any elements that do not match the source of truth (PEF). ACNC files must match NCDHHS PEF, which is based on NCTracks data.

Provider Directory Accuracy Review

Working to update provider data to assure the directory is accurately displaying for our members and prospective members.

275 Attachment Functionality Implemented

Electronic intake of documents to support claims

Clinical Editing Denials Mapping

Appropriate editing; however, explanation codes had to be updated on remittance advice.

Top Claims Denial Reasons



Explanation of Benefits From Primary Carrier Required

Required when the member has an insurance plan (other than Medicaid) that is the primary payer for services or products provided.

Submitted After Plan Filing Limit

AmeriHealth Caritas has a 180-day timely filing deadline for original claims, while corrected claims can be submitted within 365 days of the original service.

Definite Duplicate

Occurs when a claim for the same member/date/service/provider has been previously received and adjudicated by the health plan.

No Precertification/Authorization Obtained

There is no evidence that required authorization was obtained for the service or product.

ORP (Ordering, Rendering, Prescribing) Provider Taxonomy Missing/Inaccurate

Required taxonomy codes are missing or do not match what is on file for the provider with NC DHHS/NCTracks.

Tips to Prevent Claims Denials



- Encourage Billing Departments to bookmark the ACNC Claims and Billing Guide:
 https://www.amerihealthcaritasnc.com/assets/pdf/provider/claims-billing/claims-and-billing-manual.pdf
- Verify the member's insurance and eligibility status for any insurance coverages reported.
- Submit claims according to the plan's timely filing guidelines. ACNC's timely filing is 180 days from the date of service.
- Submit all services on the corrected claim that were on the original claim PLUS the corrected information.
- Avoid handwriting or stamping the words "corrected, resubmitted or voided" on the paper claim it will cause the claim to be denied.
- Confirm/verify prior authorization/precertification.
- Ensure accurate coding—code to the highest level of specificity and use the most current versions of CPT, HCPCS and ICD coding resources.

Member Success Story



Questions and Discussion



ACNC Points of Contact



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