

AmeriHealth Caritas North Carolina (ACNC) Update

April 17, 2024

Healthcare Financial Management Association

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.



Delivering the Next
Generation
of Health Care

Agenda

- Mission and Vision
 - About ACNC
 - ACNext Overview
 - Provider Support
 - Quality Improvement
 - Claims and Billing
 - Questions and Discussion
-

Mission and Vision

AmeriHealth Caritas North Carolina is part of the AmeriHealth Caritas Family of Companies, one of the nation's leaders in health care solutions for those most in need.

Our mission

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

Our vision

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

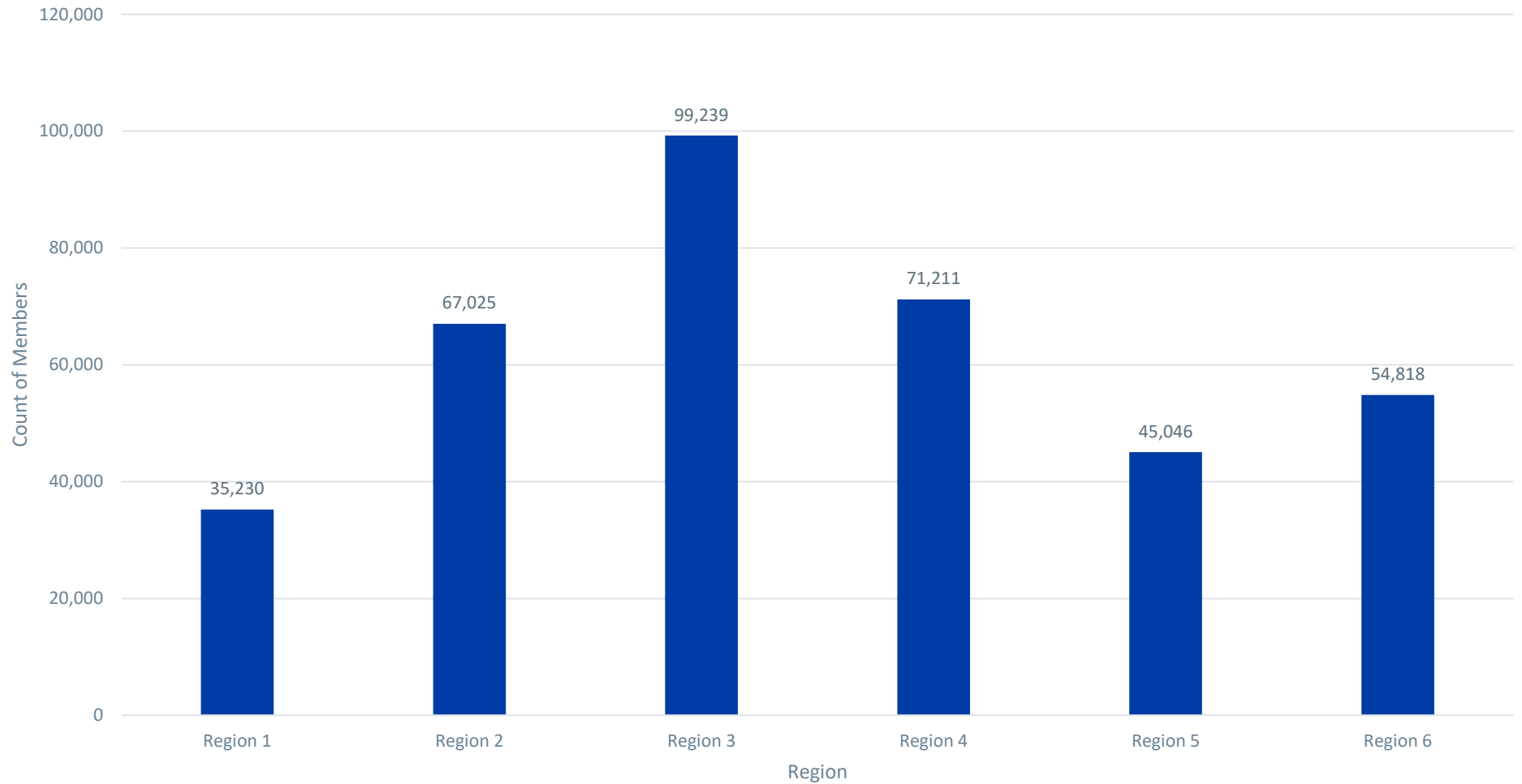
- 372,569 Enrolled Medicaid beneficiaries (as of February 2024). Just over 70% of members are under age 21.
- 6 Wellness & Opportunity Centers – Asheville, Charlotte, Greensboro, Fayetteville, Greenville and a Mobile Center.
- Commitment to local engagement – community-based associates living and working in each region.
- More than 70,000 contracted providers and provider groups.
- More than 350 associates supporting ACNC.

Our Mobile Center was a centerpiece of an August Back-to-School event in Durham, which included immunizations, food and diaper distribution, school supplies and haircuts for kids. Durham Bulls mascot Wool E. Bull event made an appearance!



Membership by Region

ACNC Membership by Region



Membership data as of 2/12/24



AmeriHealth *Caritas*SM

Next

A product of AmeriHealth Caritas North Carolina, Inc.

AmeriHealth Caritas NEXT: North Carolina (ACNNext)

We aim to continue to be there for our members as they transition out of Medicaid and can gain coverage through the Health Insurance Marketplace.

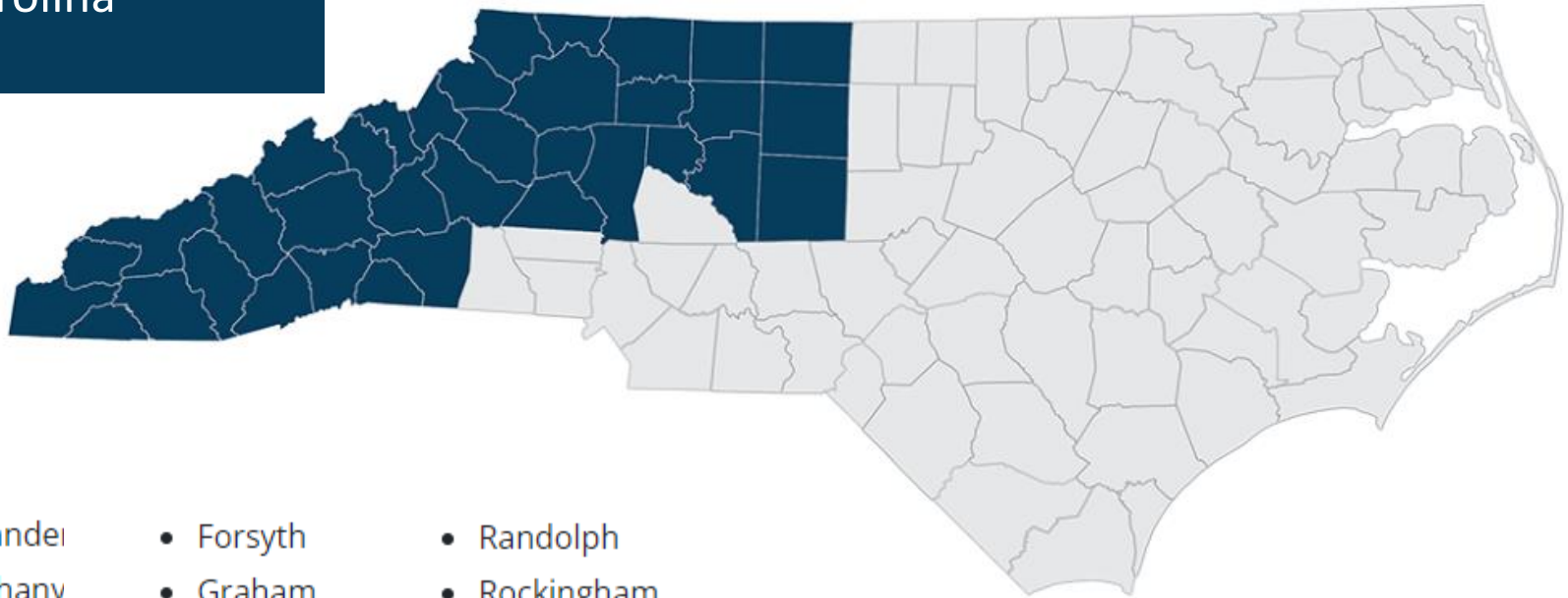
- Launched January 1, 2022
- Available on and off the Health Insurance Marketplace®
- *Empower* those in need across their full life journey by providing a health insurance option for those who otherwise would have no access to health insurance coverage through their employer, Medicaid, or Medicare.



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AmeriHealth Next North Carolina footprint

35 counties in North Carolina



- Alexander
- Alleghany
- Ashe
- Avery
- Buncomb
- Burke
- Caldwell
- Catawba
- Cherokee
- Clay
- Davidson
- Davie
- Forsyth
- Graham
- Guilford
- Haywood
- Henderson
- Iredell
- Jackson
- Macon
- Madison
- McDowell
- Mitchell
- Polk
- Randolph
- Rockingham
- Rutherford
- Stokes
- Surry
- Swain
- Transylvania
- Watauga
- Wilkes
- Yadkin
- Yancey



A product of AmeriHealth Caritas North Carolina, Inc.

Provider Support



Provider Support – A Partnership



Provider Support – Provider Network Management

Experienced Leadership Team

Dedicated team of ACNC Provider Network Directors and Managers

Single Point of Contact

- Dedicated, live and work in North Carolina.
- Assigned to cities, counties and then by provider type –per region.
- Knowledgeable in behavioral health, physical and substance use disorder benefits.

Face-to-Face and Telephonic Support

- [Website](#) and [NaviNet](#) provider portal navigation.
- Member marketing materials for your office.
- Provider orientations, [trainings](#) and [Wellness and Opportunity Center](#) 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.com>

PORTAL

[NaviNet®](#)

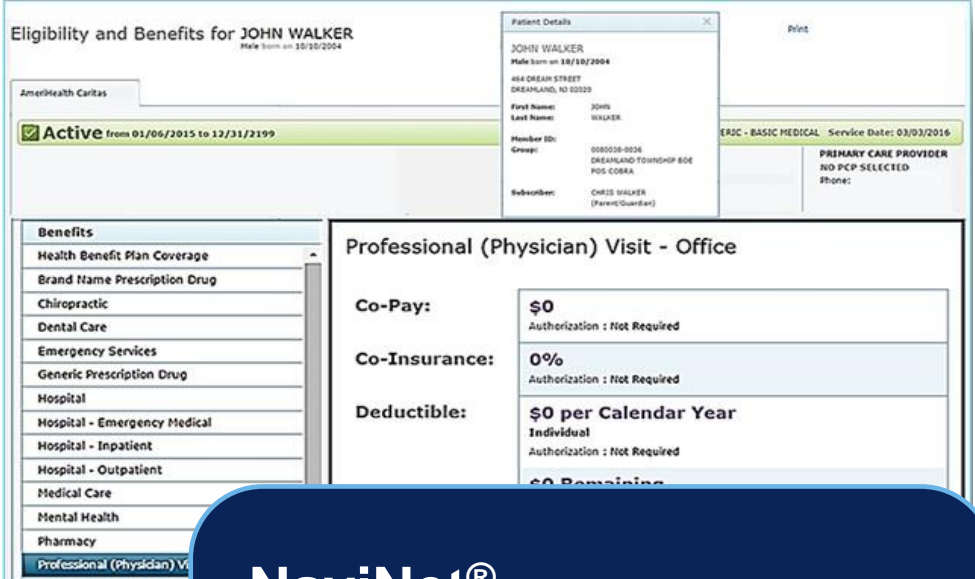


L-R: Provider Network Account Executives Clarence Lawing, BJ Callicutt and Lori Osborne attended the i2i Center for Integrative Health Conference in Raleigh in June, hosting a Fun in the Sun raffle for providers. Photo courtesy of Cramer Gallimore Photography Studio.

PROVIDER RESOURCES

SECURE PROVIDER PORTAL

- Member eligibility and benefits information
- Panel roster reports
- **New! Provider Performance Roll up reports**
- Create claims investigations to research or dispute claims
- Member clinical summaries
- Admission and discharge reports
- Medical and pharmacy claims data
- Claims adjustment inquiry



The screenshot displays the 'Eligibility and Benefits for JOHN WALKER' page. At the top, it shows the patient's name and birth date (Male born on 10/15/2004). Below this, there is a section for 'Active' status from 01/06/2015 to 12/31/2019. A 'Patient Details' pop-up window is visible, showing the patient's address (464 DREAM STREET, DREAMLAND, NC 28032), first and last names (JOHN WALKER), member ID (080038-0028), group (DREAMLAND TOURSHIP BDE POS CORA), and subscriber (CHRIS WALKER (Parent/Guardian)). The main page also shows a 'Benefits' list on the left, including Health Benefit Plan Coverage, Brand Name Prescription Drug, Chiropractic, Dental Care, Emergency Services, Generic Prescription Drug, Hospital, Hospital - Emergency Medical, Hospital - Inpatient, Hospital - Outpatient, Medical Care, Mental Health, and Pharmacy. The 'Professional (Physician) Visit - Office' section is highlighted, showing a Co-Pay of \$0, Co-Insurance of 0%, and a Deductible of \$0 per Calendar Year. A 'Print' button is located in the top right corner.

NaviNet®

Navinet.secure.force.com

1-888-482-8057

Provider Communications

October Provider Digest

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

- [NC Medicaid Expansion Policy Flexibilities Announced](#)
- [Flu Shot Reward for Infants/Toddlers](#)
- [No Co-Pay Required for Adult Vaccine Administration](#)
- [Care Gap Closure Documentation Reminder](#)
- [2023 Provider Satisfaction Survey](#)
- [Timely Filing Requirement Announcement](#)

BENEFITS SPOTLIGHT

- [Member CARE Card Rewards Program](#)

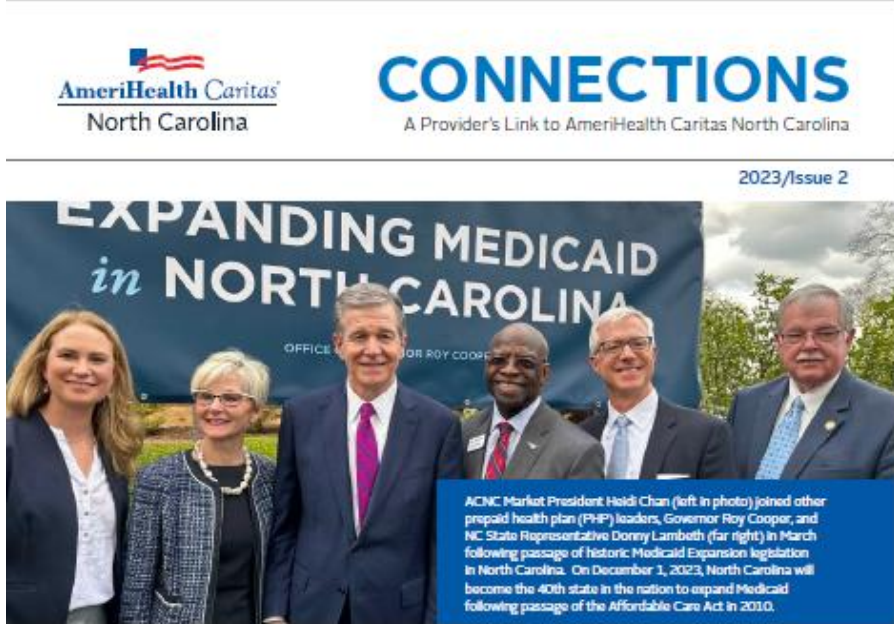
TRAININGS AND FORUMS

- [Childhood Health and Wellness Clinical Leadership Forum](#)
- [Registering for and Using NaviNet, Our Provider Portal](#)
- [Provider Orientation Held Monthly](#)
- [On-Demand Video Training: Electronic Claims and 275](#)

NC Medicaid Expansion Policy Flexibilities Announced

In preparation for the December 1 launch of Medicaid Expansion, North Carolina Department of Health and Human Services (NCDHHS) has announced policy flexibilities to ease beneficiary confusion and administrative burden on providers. NCDHHS may opt to extend any of these flexibilities after the designated time frame, based on plan operations, to ensure the stability of Medicaid operations for Expansion beneficiaries. Review the [September 25, 2023 NCDHHS bulletin](#) and [Frequently Asked Questions](#) for more information. Material in the chart below is subject to change based on NCDHHS guidance.

Sign Up for monthly Provider Digests via your AE or by requesting [HERE](#)



CONNECTIONS
A Provider's Link to AmeriHealth Caritas North Carolina

2023/Issue 2

EXPANDING MEDICAID in NORTH CAROLINA

OFFICE OF GOVERNOR ROY COOPER

ACNC Market President Heidi Chan (left in photo) joined other prepaid health plan (PHP) leaders, Governor Roy Cooper, and NC State Representative Donny Lambeth (far right) in March following passage of historic Medicaid Expansion legislation in North Carolina. On December 1, 2023, North Carolina will become the 40th state in the nation to expand Medicaid following passage of the Affordable Care Act in 2010.

In This Issue

A year in review with Market President, Heidi Chan.....	2	Registering for and using NaviNet, our provider portal.....	11
Introducing our Provider Network leadership.....	3	Evidence-based clinical guidelines.....	11
Do you know your Provider Network Account Executive?.....	3	Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Training.....	11
Around the state.....	4	Options for pharmacy prior authorizations.....	12
Regional baby showers raise maternal health awareness.....	5	What is delegated care management?.....	13
The key to provider recredentialing is found in NCTracks.....	6	"Let Us Know" program: Population Health referrals and support for chronic conditions.....	15
Help us fight fraud, waste and abuse.....	6	Language services support for provider practices.....	15
A conversation with Jennifer Frazer, Director, Quality Management.....	7	Offering whole-person care for today, tomorrow, and whatever comes next.....	15
Value-based programs pay off for members and providers.....	9	Meeting our members where they are.....	17
Highest performing provider groups in each QEP measure.....	10	Helping members understand their benefits.....	17
		Wellness & Opportunity Center calendar of events.....	18

CONNECTIONS A Provider's Link to AmeriHealth Caritas North Carolina 1

Quality Improvement



2024 Quality Improvement Priorities

State Mandated Performance Improvement Projects:

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

Quality Withhold Program:

- NC DHHS instituted a Quality Withhold Program in 2024
 - 1.5% of capitation is being withheld from PHPs
- To earn withhold dollars, PHPs are expected to:
 - Increase Childhood Immunization Status performance for overall population
 - Increase Childhood Immunization Status performance for the Black/African American population
 - Increase Prenatal and Postpartum care performance
 - Pass reporting validation for health-related resource needs screening

Value-based Programs

ACNC partners with providers to deliver innovative, value-based programs. Our value-based care models incentivize high-quality, cost-effective care over the traditional fee-for-service system.

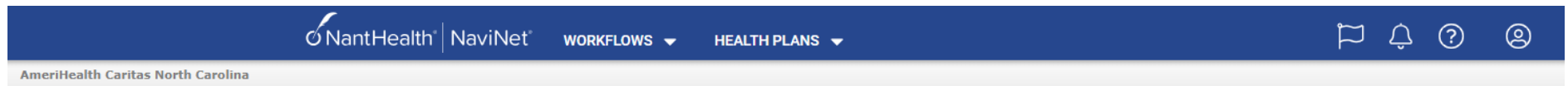
Transforming provider compensation to a value-based structure can help increase opportunities for providers to better:

- **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**

[Value-based programs webpage](#)

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
- Claim Submission
- Core Authorizations
- Forms & Dashboards
- InterQual Transparency
- Medical Authorizations
- Medical Authorizations Log
- Pharmacy Authorizations
- Provider Directory
- Report Inquiry

Planned maintenance to the Care Gaps and Condition Optimization Program (COP) platforms may occur on **Thursday evenings between 6 p.m. and 10 p.m. ET**. You may be unable to access these applications during that time. If you experience difficulty, please log out and try again after 10 p.m. ET. Thank you for your patience.

Authorizations are here!
Submit online today
Learn more

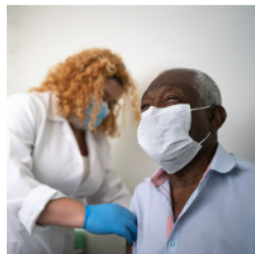
Training Videos

- ADT Alerts
- Care Gap Response Forms
- Claims Investigations
- Tutorial - Authorization Inquiry Process
- Tutorial - Authorization Submission Process

Quick Links:

- [Billing information](#) (PDF)
- [File a Provider Grievance or Appeal](#)
- [NCDHHS Provider Fact Sheets](#)
- [Provider manual](#) (PDF)
- [Provider Quick Reference Guide](#) (PDF)
- [Radiology authorizations](#)

Welcome to the provider portal, NaviNet Plan Central.



Welcome to Plan Central! AmeriHealth Caritas North Carolina's (ACNC's) secure provider portal homepage of NaviNet. From here you can access the following features: claims submission and status, electronic prior authorization submission, grievance and appeals, member eligibility verification and remit statements.

For Primary Care Providers, member panel rosters are available. AMH providers can pull their capitation reports from the workflow menu under Financial Reports.

Visit our [Prior Authorization webpage](#) for details on requesting prior authorization for different services.

Tools for Quality Outcomes

Our quality tools and resources are designed to support ACNC Medicaid providers and staff in giving members excellent and efficient health care.

Using the Care Gaps Response Forms allows you to close care gaps by entering information electronically, while reducing paperwork and enabling more frequent status updates. Here you can watch the Care Gap Response Form training video, visit the form to enter information on services provided and find step-by-step instructions on accessing and

Provider Network Operations 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**

Monitoring provider data updates to ensure provider directory is accurately displaying provider information 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**

ACNC 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. Effective July 1, 2023, ACNC's timely filing is 365 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.
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Questions and Discussion



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