Spring Webinar 2019

Arkansas Total Care PASSE Provider Overview

March 6, 2019

Agenda

- PASSE & ARTC Overview
- Provider Resources
- Online Tools
- Claim Submission Information
- Contact Information
- Important Reminders

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Acronyms

Acronym	Definition
ARTC	Arkansas Total Care
DHS	Department of Human Services
HEDIS	Healthcare Effectiveness Data and Information Set
ID	Identification
NPI	National Provider Identifier
PASSE	Provider-led Arkansas Shared Savings Entity
PCP	Primary Care Physician
TIN	Tax Identification Number
IDD	Intellectually and Developmentally Disabled
BH	Behavioral Health

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What Is A PASSE?

- A PASSE is a Provider-led Arkansas Shared Savings Entity
- Created by Act 775
- DHS defines the PASSE as “A new model of Organized Care that will address the needs of certain Medicaid Beneficiaries who have complex behavioral health and intellectual and developmental disabilities service needs”
- Provider-led in that providers must own at least 51% of the new company
- To learn more about the PASSE program visit Medicaid’s website at: https://humanservices.arkansas.gov/about-dhs/dms/passe

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Purpose of the PASSE

- To improve the health of Arkansans who have need of intensive levels of specialized care due to mental health, intellectual or developmental disabilities
- To link providers of physical health care with providers of behavioral health care and services for individuals with developmental disabilities
- To coordinate care for all community-based services for individuals with intensive levels of specialized care needs
- To reduce excess cost of care due to under-utilization and over-utilization of services
- To allow flexibility in the array of services offered to the population served
- To reduce costs by organizing care, not just by managing finances
- To increase the number of service providers available in the community to the population covered

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OUR PURPOSE

Helping Arkansas Live Better

CORPORATE PHILOSOPHY

Transforming the health of the community one person at a time

OUR MISSION

Better health outcomes at lower costs

OUR BRAND PILLARS

Focus on individuals + Active Local Involvement + Whole Health

OUR BELIEFS

- We believe in treating the whole person, not just the physical body.
- We believe treating people with kindness, respect and dignity empowers healthy decisions.
- We believe we have a responsibility to remove barriers and make it simple to get well, stay well and be well.
- We believe local partnerships enables meaningful, accessible healthcare.
- We believe healthier individuals create more vibrant families and communities.

About Arkansas Total Care

Arkansas Total Care is a newly formed partnership between Arkansas Health & Wellness, Mercy Health, and Lifeshare, Inc.

Mercy Health- Mercy operates 7 acute care, specialty care, and critical access hospitals in Arkansas, with additional facilities in Kansas, Missouri, and Oklahoma. Mercy provides primary and physical health services as well as behavioral and pharmacy services.

LifeShare- A licensed IDD and community-based provider in Arkansas, supporting people with Intellectual and Developmental Disabilities and other complex needs. For more than 20 years, LifeShare has created person-centered empowering programs and now works with other providers in manage care settings to collaboratively build programs that empower the lives of the people we collectively support.

Arkansas Health & Wellness- Arkansas Health & Wellness currently offers both Ambetter (a health insurance marketplace plan) and Allwell (a Medicare Advantage plan) in Arkansas. Arkansas Health & Wellness has a history of providing products and services for under/uninsured populations, employers, and self-employed groups. Through its corporate parent, Centene, Arkansas Health & Wellness also has over 30 years of experience supporting the community and those covered by Medicaid, including members with IDD and Behavioral Health needs.

PASSE Model Implementation

- There are two phases for Arkansas Medicaid's implementation of this new model

	Phase I – 2018		Phase II - 2019
	Arkansas Total Care	AR Medicaid	Arkansas Total Care
Care Coordination Services	X		X
Benefits & Eligibility		X	X
Claims Processing		X	X
Prior Authorization		X	X
Utilization Management		X	X
Case Management		X	X
Network Contracting	X		X
Provider Network		X	X

ID Card--Sample

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PASSE
An Arkansas Medicaid Program

NAME: ‹JANE DOE›
MEMBER ID#: XXXXXXXXXX

RX: ENVOLVE PHARMACY SOLUTIONS
1-800-460-8988
RXBIN: 004336
RXPCN: MCAIDADV
RXGRP: RX5476
PHARMACY HELP DESK: 1-855-266-2596

If you have an emergency, call 911 or go to the nearest emergency room (ER). If you are not sure if you need to go to the ER, call your PCP or Arkansas Total Care's 24/7 nurse advice line at 1-866-282-6280.

IMPORTANT CONTACT INFORMATION: Member Services: 1-866-282-6280
TTY/TDD: 711, 24/7 Nurse Advice Line: 1-866-282-6280, Vision: 1-844-280-6792

MEDICAL CLAIMS:
EDI Payer for Medical Claims 68069
Arkansas Total Care
Attn: Claims
P.O. Box 9020
Farmington, MO 63640

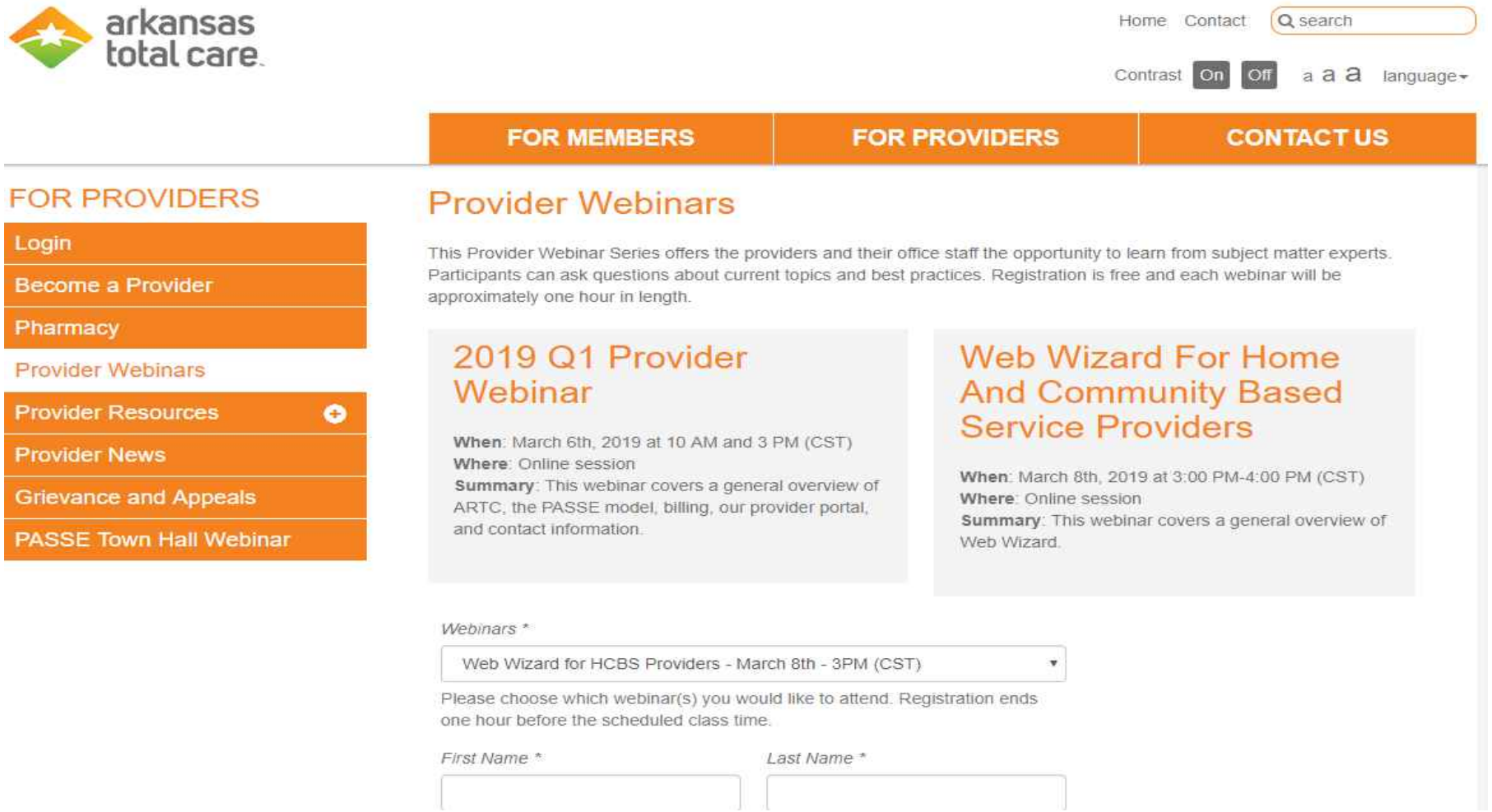
VISION CLAIMS:
EDI Payer for Vision Claims 56190
Envolve Benefit Options
Attn: Claims
PO Box 7548
Rocky Mount, NC 27804

PROVIDERS:
Provider Services: 1-866-282-6280
IVR Eligibility Inquiry - Prior Auth:
1-866-282-6280
Vision: 1-844-280-6792

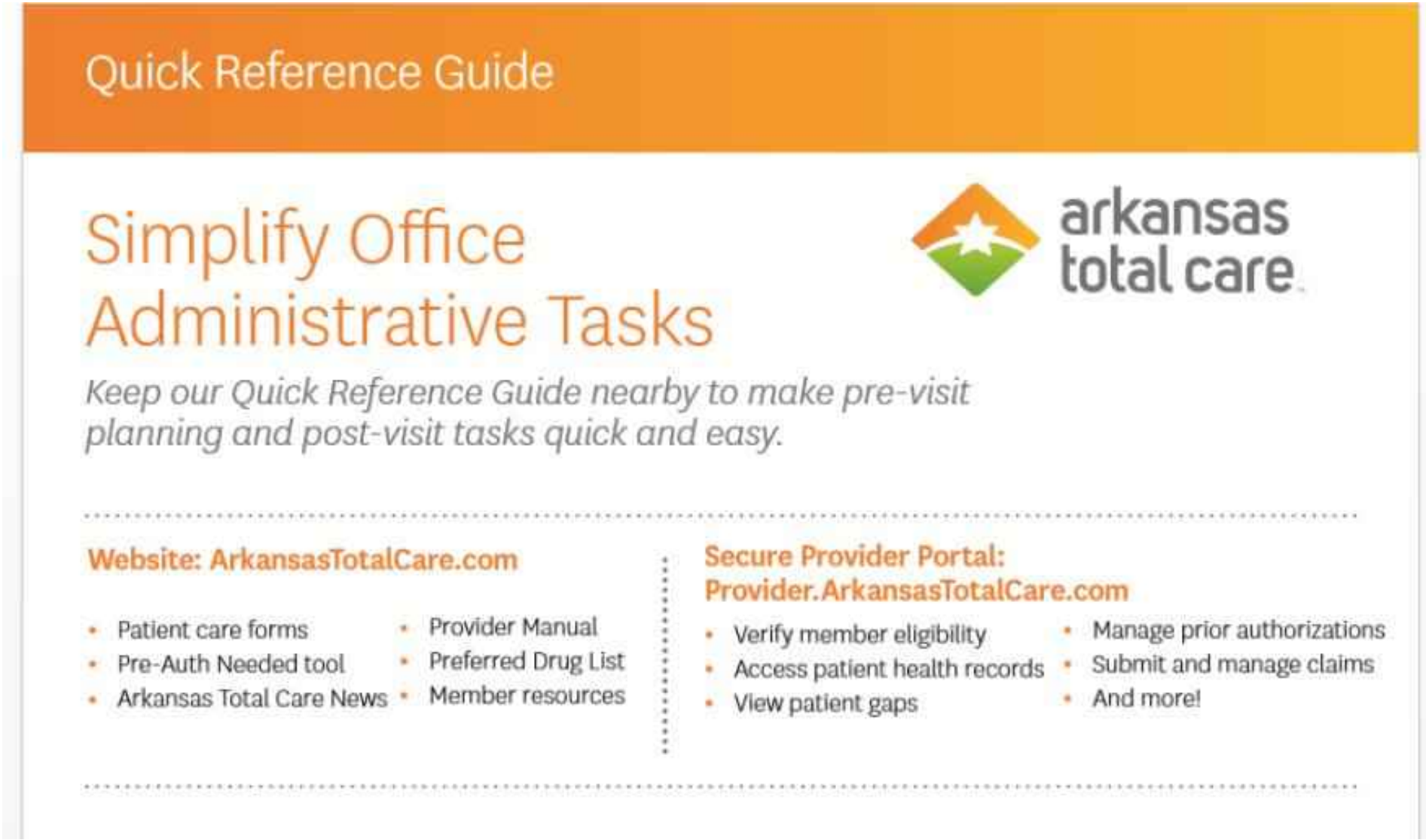
EDI/EFT/ERA please visit Provider Resources at ArkansasTotalCare.com

Online Resources

Provider Webinar Sign Up



Provider Resources



Quick Reference Guide

Simplify Office Administrative Tasks

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Keep our Quick Reference Guide nearby to make pre-visit planning and post-visit tasks quick and easy.

Website: ArkansasTotalCare.com

- Patient care forms
- Pre-Auth Needed tool
- Arkansas Total Care News
- Provider Manual
- Preferred Drug List
- Member resources

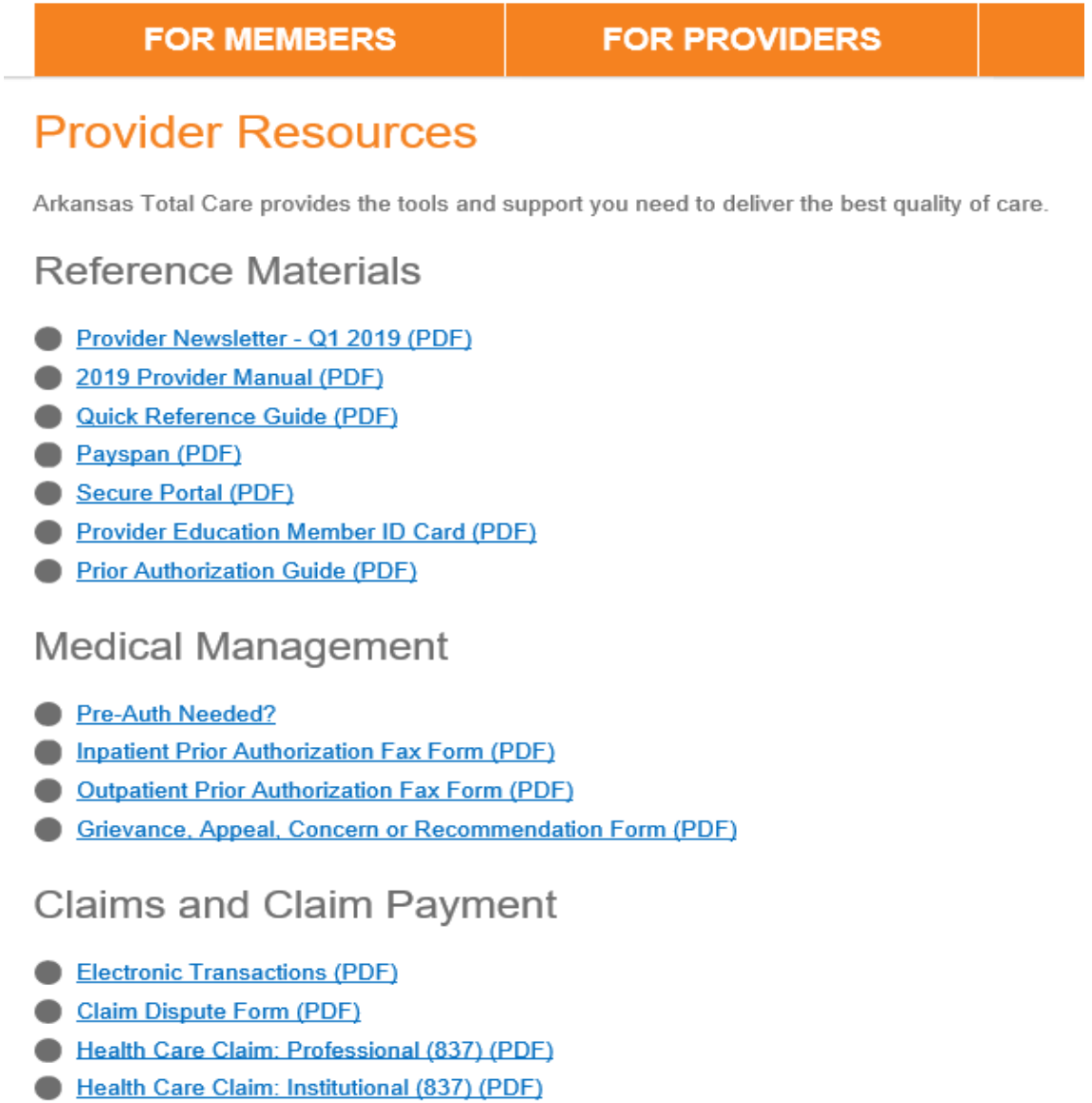
Secure Provider Portal: Provider.ArkansasTotalCare.com

- Verify member eligibility
- Access patient health records
- View patient gaps
- Manage prior authorizations
- Submit and manage claims
- And more!

Online Resources

Provider Resources

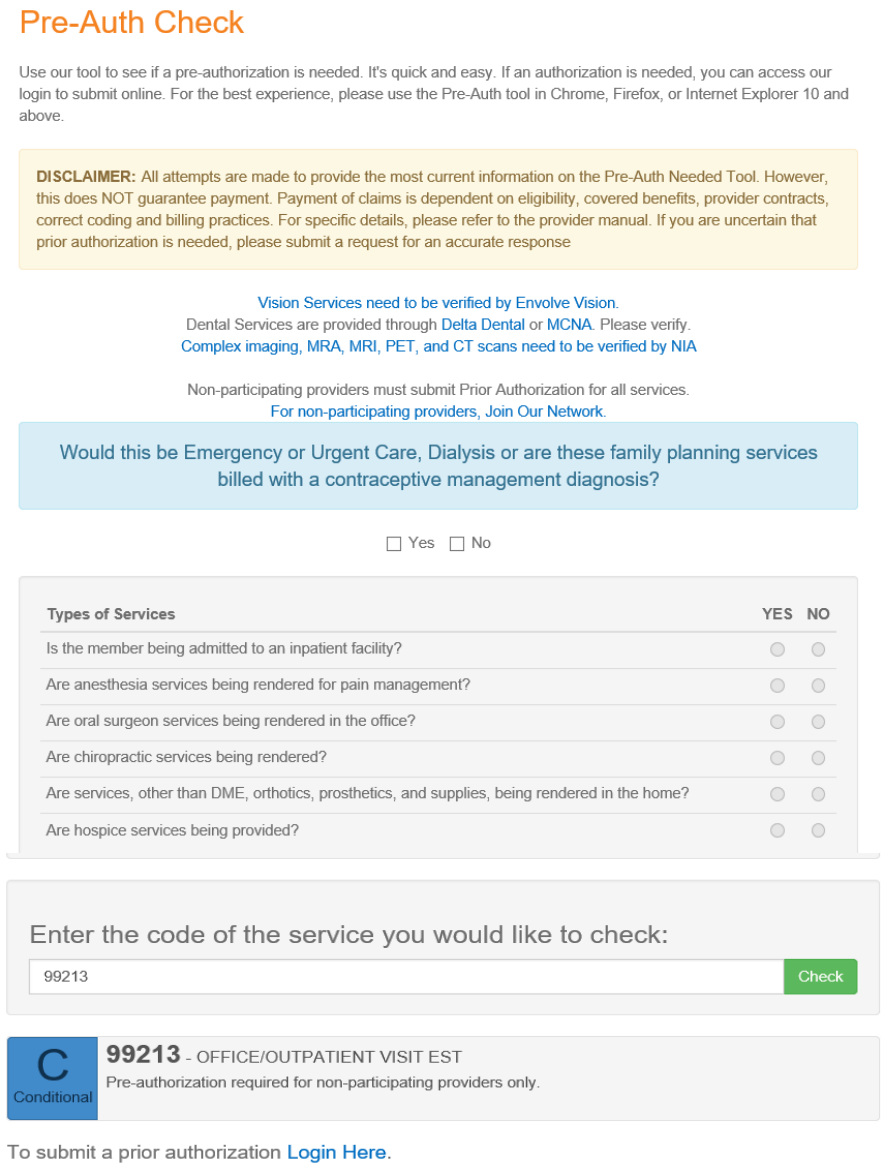
- 2019 Provider Manual
- Provider Newsletter
- Quick Reference Guide
- Pre-Auth Needed? Tool
- Inpatient Authorization form



Online Resources

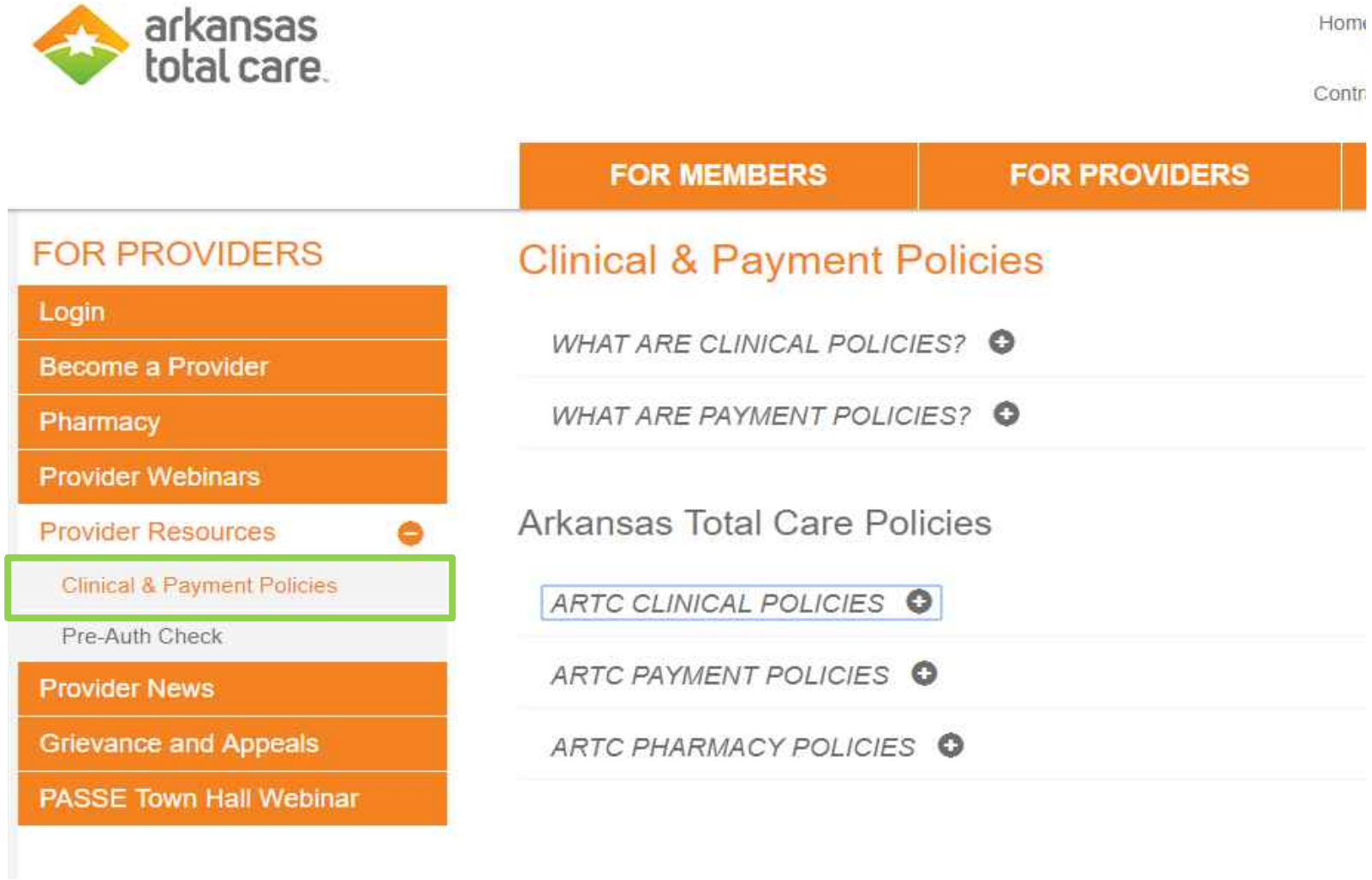
Provider Resources (cont.)

- Pre-Auth Needed Tool- Check to see if a service needs a Prior Authorization
- You will need to answer 6 questions with the radio buttons before the box to enter your code will appear
- Once your code is entered, you will see a green N for no auth required, a red Y for auth required, or a blue C for conditional.



Clinical and Payment Policies

- Effective May 1, 2019, Arkansas Total Care will have updated Clinical and Payment policies. This information will be available to you on the website under the Provider Resources tab.

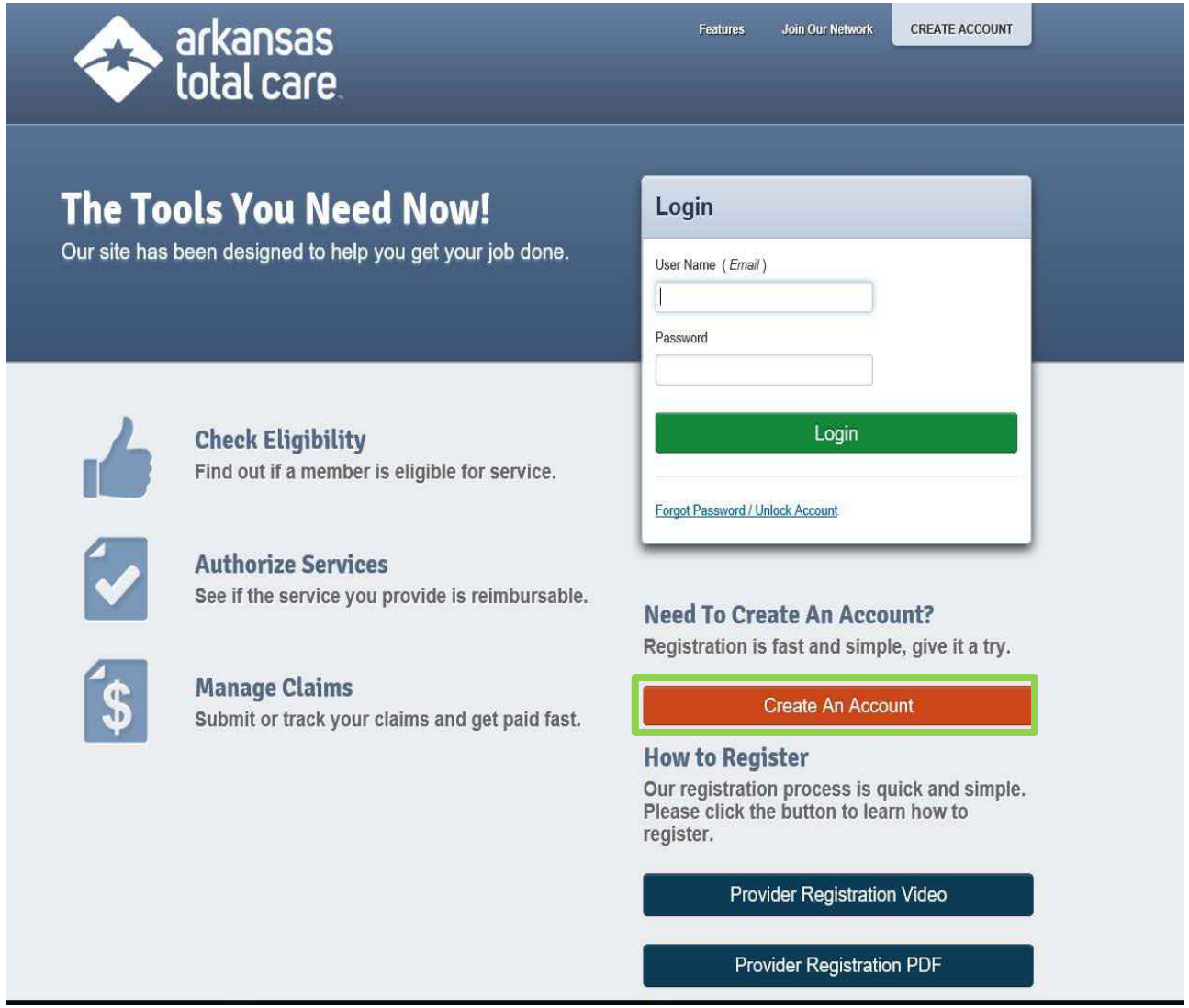


Online Resources

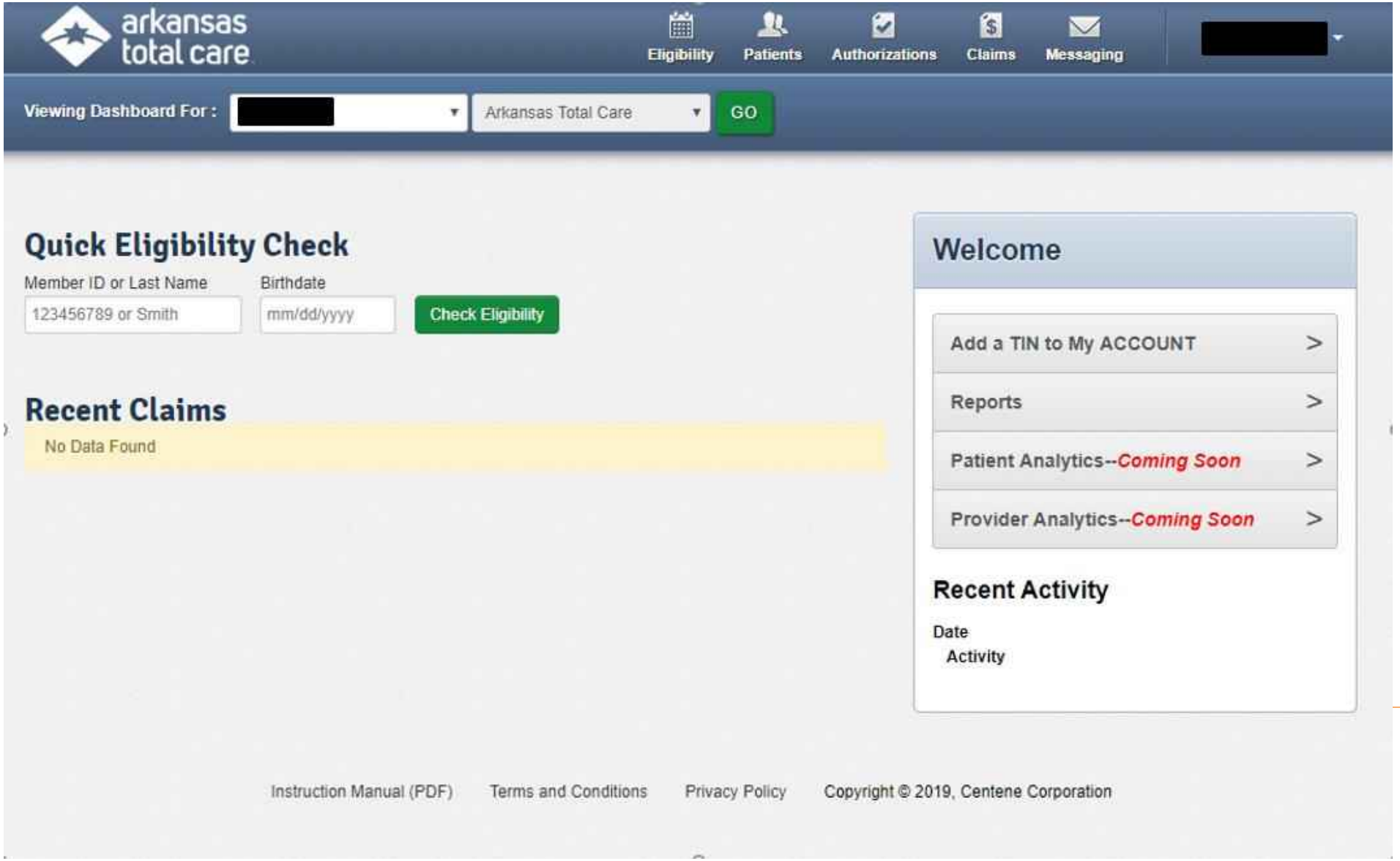
Secure Provider Portal:

- Verify member eligibility
- Submit and view status for claims and authorizations
- View detailed patient list

- The ARTC provider portal is separate from the Ambetter & Allwell portal! You will need to create a new login.

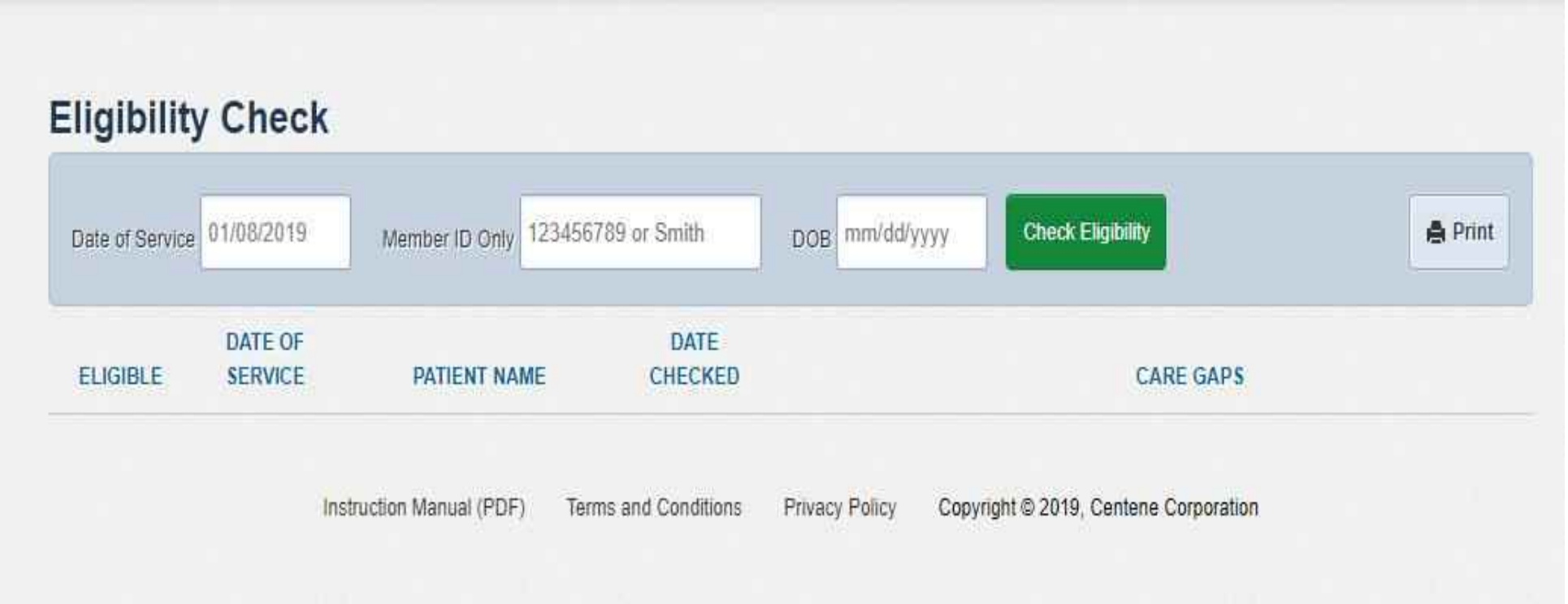


Secure Provider Portal



Secure Provider Portal (cont.)

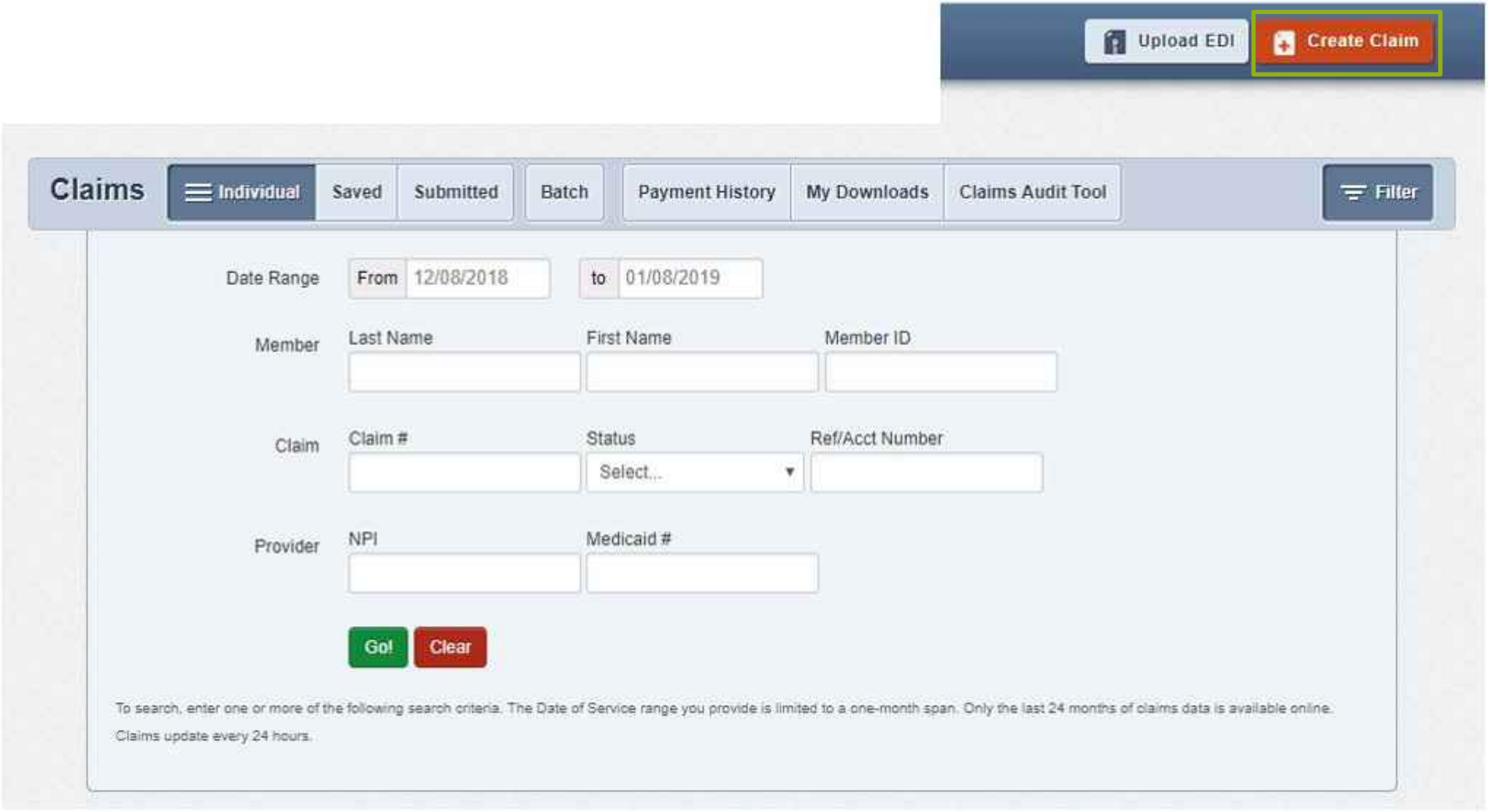
Secure Provider Portal (cont.)



- Member ID or Last Name *and* DOB

Secure Provider Portal (cont.)

Secure Provider Portal (cont.)

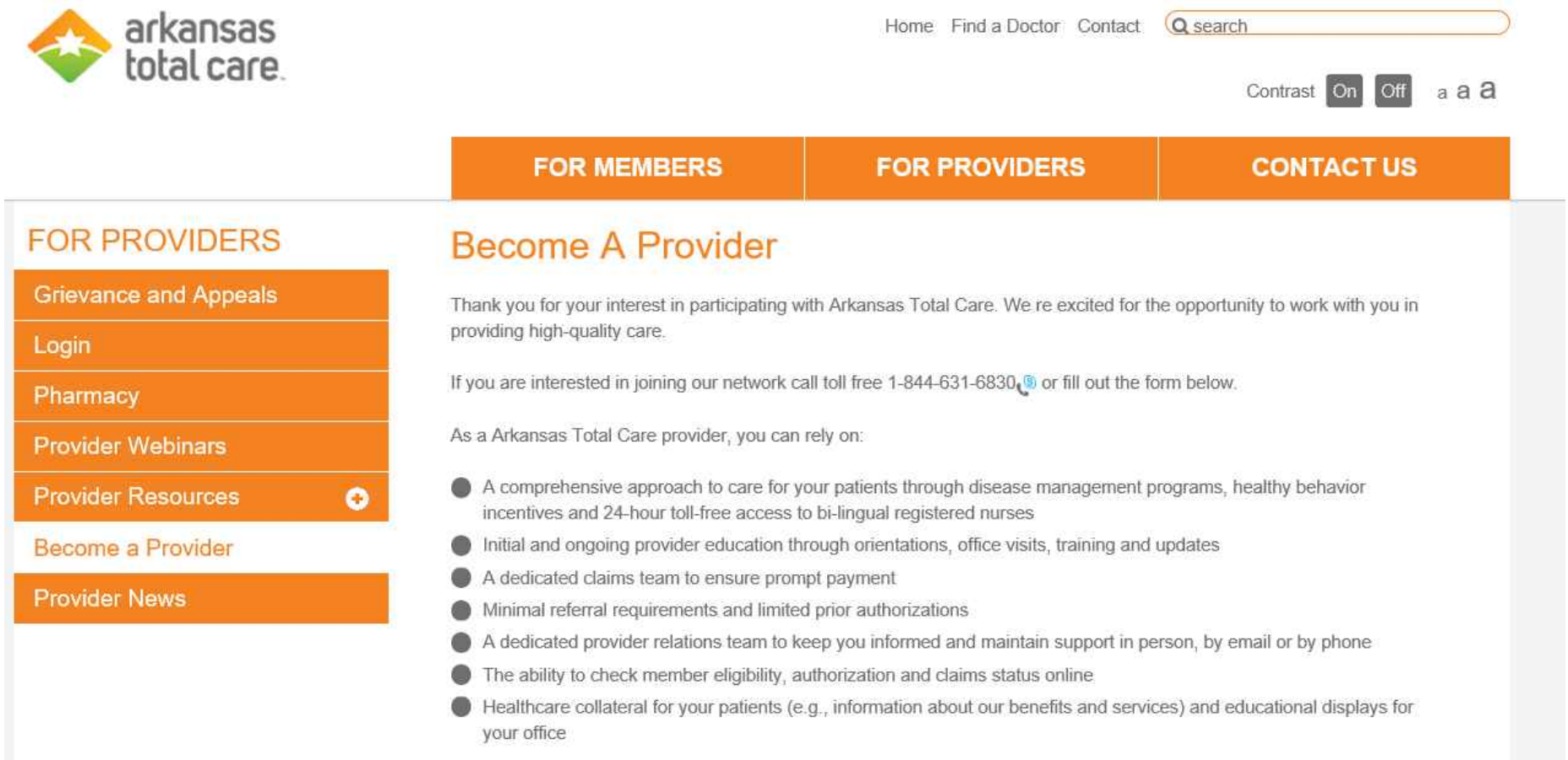


March 1st Claims

- All claims with a date of service March 1st or later need to be submitted to the PASSE.
- DO NOT HOLD CLAIMS FOR PASSE MEMBERS.
- Our system is active and processing claims today.
- Use our free, secure provider portal or your regular clearinghouse with our payer ID 68069.

Provider Contracting

- To join our network select ‘Become A Provider’ from the ‘For Providers’ tab on our website. You must currently be a participating Arkansas Medicaid provider.



Provider Contracting

Arkansas Total Care Contracting

Phone Number: 1-844-631-6830

Hours of Operation: 8am-4:30pm

Provider Contracting Email Address:

ArkansasContracting@centene.com

Regular contracting inquiries and contract requests

Provider Services

Arkansas Total Care

Provider Services

Phone: 1-866-282-6280
Website: arkansastotalcare.com

Email inquiries to:

Providers@ArkansasTotalCare.com

Authorization Process

Submit Prior Authorization

If a service requires authorization, submit via one of the following ways:

SECURE WEB PORTAL

Provider.ArkansasTotalCare.com

After normal business hours and on holidays, calls are directed to the plan's 24-hour nurse advice line. Notification of authorization will be returned phone, fax, or web.

PHONE

1-866-282-6280
(TDD/TTY: 711)

FAX

1-833-249-2342

Claims Submission Information

- **Electronic Claim (EDI)**
  - ANSI XS12N 837
  - Payer ID: 68069

- **Paper Claim**
  - CM 1450 (UB-04) for hospitals & facilities
  - CMS 1500 (02-12) for physicians & practitioners
  - Attn: Claims PO Box 8020, Farmington, MO 63640-5090

- **Provider Portal**
  - Web Wizards
  - Online data entry
  - Batch upload

Claims Submission Information

- Timely Filing
  - 365 days from date of service

- Please include Provider Medicaid ID on all claims submissions (Provider Medicaid ID is required for Atypical providers but is also preferred for all providers)

- Providers who are out of network and haven't submitted claims with us in the past will need to send us a W9 so we can get you loaded in our system to ensure claim payment isn't delayed
  - Please use the Provider Relations inbox to send us a copy of your W9 at providers@arkansastotalcare.com

Claims Submission Information

Electronic Funds Transfer Payspanhealth.com

Payspan
A Faster, Easier
Way to Get Paid

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Arkansas Total Care offers Payspan, a free solution that helps providers transition into electronic payments and automatic reconciliation.

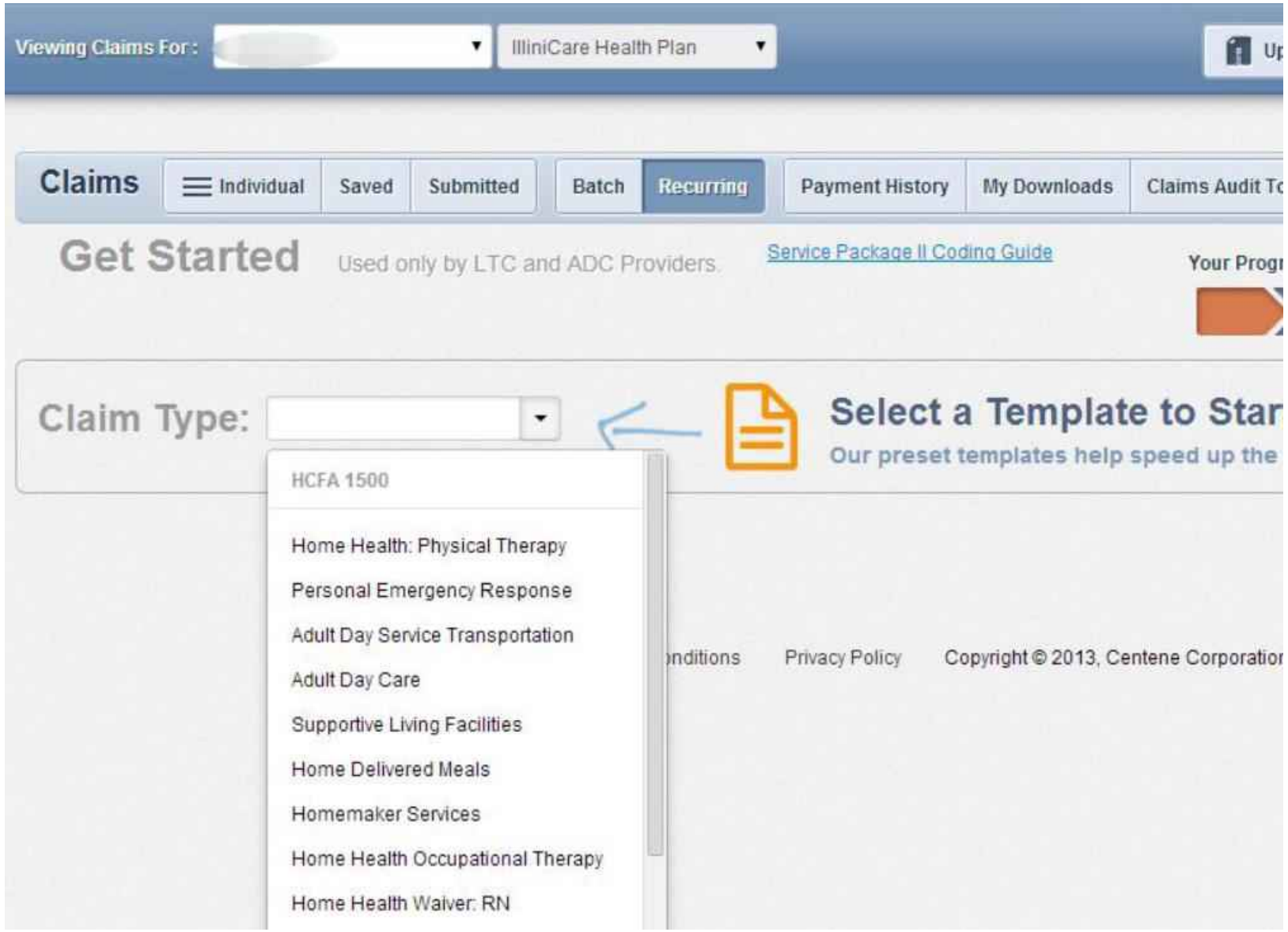
Claims Submission Information

- If a member has Medicare primary you will initially need to submit those claims to Medicare. Once they have processed you will need to submit your claim to us with a copy of the remittance from Medicare.

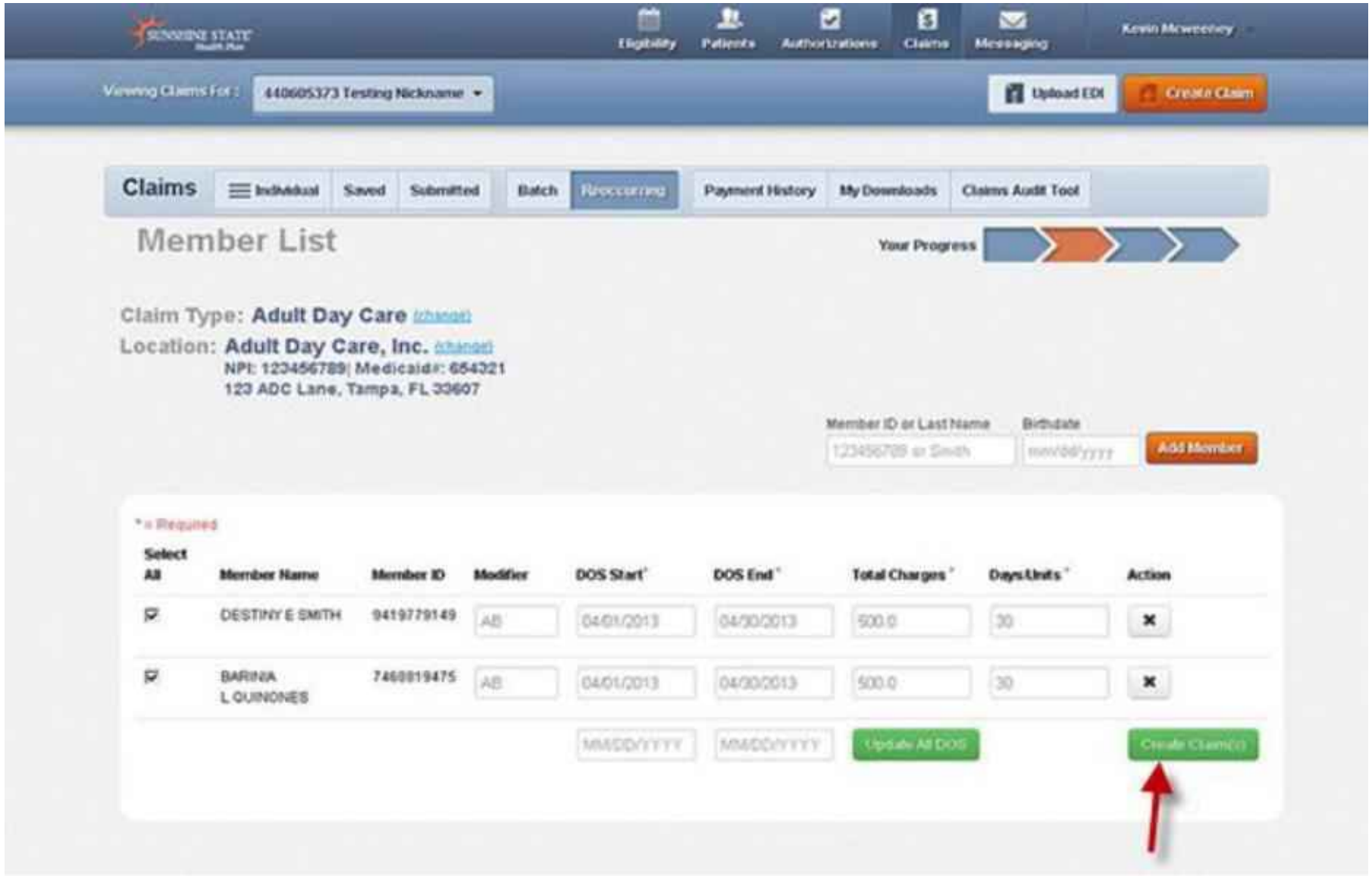
- This process will move back to only one initial submission to Medicare in the near future. We will communicate to you when this is available.

- We do have a list of codes that are not covered by Medicare so that you can submit those claims directly to us instead of Medicare first.

Web Wizard - HCBS



Web Wizard


Eligibility
Patients
Authorizations
Claims
Messaging
Upload EDI
Claims
Individual
Saved
Submitted
Batch
Payment History
My Downloads
Claims Audit Tool
Member List
Your Progress
Claim Type: Adult Day Care
Location: Adult Day Care, Inc.
NPI: 123456789| Medicaid#: 654321
123 ADC Lane, Tampa, FL 33607
Member ID or Last Name
Birthdate
Add Member
Select All
Member Name
Member ID
Modifier
DOS Start
DOS End
Total Charges
Days/Units
Action
DESTINY E SMITH
9419779149
BARINIA L QUINONES
7460819475

Q&A

Thank you