

Behavioral Health Partnership Oversight Council <u>Operations Committee</u>

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Co-chairs: Lorna Grivois & Stephen Larcen

Meeting summary: June 18, 2010

Next meeting for CTBHP program: Friday Sept. 10th @ 2:30 at VO/Rocky Hill

Attendees: Steve Larcen & Lorna Grivois (Co-Chairs), Teddi Creel (DSS), Scott Greco (Vo RRT), Paul Tom, Susan Pausmer, Rob urban, Kyra Lorde (RRT), Jill Benson, M. Bissell, Elizabeth Collins, Blair MacLachlan, Christine Quintiliani, Linda Russo, Joe Sullivan, Pat Sullivan, Christine Rizzo, Jenny DeMars & Dianne Michaelsen (ABH), Sandi Quinn & Lynne ringer (VO), (M. McCourt, leg. Staff)

Rapid Response Team (RRT)

(Click icon below to view details of presentation)



DSS, HP (formally EDS) and VO work together on the RRT to proactively identify and resolve provider billing issues through denied claims review submitted by providers, provider education & training, information sharing and identification of systemic issues. Find information on the RRT on ValueOptions website: <u>www.CTBHP.com</u>, click on *contacts/links* at the very bottom of the page. Contact a RRT member to make a formal assistance request at:

http://www.ctbhp.com/RAPID_RESPONSE_TEAM_CONTACTS.pdf

Highlights of the discussion/presentation included the following:

- RRT meets the 1st & 3rd Friday of the month. RRT activities include:
 - "Special projects" are undertaken to resolve claims issues and give providers administrative training/assistance to prevent future claims problems. Important for providers to obtain PA, correctly bill with the 120 timely filing in order for claims to processed and payments made in a timely manner.
 - The team works with merged entities noting the trend for several independent practices to merge, to sort out PAs from the IP prior to the merge.
 - Provider education and training is done in group and onsite individual practice settings. Virtual training is also available to assist providers to reduce claims errors.

- Provide information about program changes, claims issues and FAQs that is important especially to new providers.
- Identify systemic issues through claims review and work with providers, which facilitate policy clarification and refined procedures.
- Committee participants noted that RRT was very helpful in resolving claims issues during the system 'Interface' transition. The provider program change alerts prepare them for upcoming changes.
- (*Slides 9-20*) Lynne Ringer (VO) reviewed the appeal levels, and submission & response time frames. Comments included:
 - There is an expedited appeal process applied when the member's welfare is in jeopardy. VO stated these are infrequent.
 - The new Medicaid medical necessity definition is part of the VO process.
 - Providers can appeal a denial decision for a member/patient.
 - 7 day appeal submission limit can be problem for providers. VO takes into consideration commercial carrier denial timeframes. RRT will discuss this further with HP.
- Claims process is outlined in slides 24 25.
- Questions asked related to claims and retroactive Medicaid eligibility.

<u>Committee participants can email Scott Greco with questions related to the presentation:</u> <u>Scott.Greco@valueoptions.com</u>

Providers: Where to go for assistance:

- <u>HP Provider Assistance:</u> (slide 25)
 <u>The HP Provider Assistance Center (PAC)</u>
 <u>1-860- 269-2028 (local to Farmington)</u>
 <u>1-800- 842-8440 (Toll free)</u>
- RRT <u>http://www.ctbhp.com/RAPID_RESPONSE_TEAM_CONTACTS.pdf</u>
- CT BHP & Charter Oak claims may be submitted electronically to: <u>www.ctdssmap.com</u> - in addition providers can view claims processing status on this site.

VO Intensive Case Management

Steve Larcen asked if there were VO ICM changes as Natchaug has seen slow uptick in inpatient delay days. VO stated there were some interim changes at 3 hospitals related to staff maternity leave but the ICM staff will be back by July 13th. There are currently several open ICM positions. The ICM staff will no longer be back up for VO call waiting.

Next meeting for Operations Committee on CTBHP program will be in Sept. Operations will continue to meet with DMHAS on the SAGA conversion to Medicaid FFS.