

Provider Post

News and updates you need to know

January 27, 2017

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January Provider Champion – Brentwood Hospital, Shreveport, LA

In 2017, AmeriHealth Caritas Louisiana will be spotlighting providers to show our appreciation for your commitment to providing quality service to our members – your patients.

ACL's January *Provider Champion* is Brentwood Hospital. Brentwood Hospital offers behavioral health and chemical dependency treatment for children, adolescents, adults and seniors. Brentwood Hospital is accredited by The Joint Commission and is a Top Performer on Joint Commission Key Quality Measures. We value Brentwood Hospital's commitment to improving the mental health of AmeriHealth Caritas Louisiana members, as well as their partnership in the development of our behavioral health provider value-based contracting model.

We recently caught up with Brentwood Hospital's CEO and Managing Director, William Weaver. Mr. Weaver had this to say about working with AmeriHealth Caritas Louisiana:



"I like that AmeriHealth Caritas Louisiana is able to leverage best practices from their other lines of business. They are willing to participate, are responsive to issues, and they are proactive in keeping us informed."

We are excited about the pay-for-performance plan, which we worked collaboratively with AmeriHealth Caritas to pilot for Behavioral Health. AmeriHealth Caritas has developed a strong network of resources which aid in the discharge planning process. AmeriHealth Caritas has a good reputation. When I speak positively to others about our experience with them, I always see a lot of heads nodding."

Look for more *Provider Champions* in upcoming issues of AmeriHealth Caritas Louisiana’s Provider Post, or contact your Provider Network Management Account Executive to be considered or nominate someone as our highlighted provider.

National Health Services’ (NHS’) Role in Behavioral Health 7- or 30-Day Follow-up

AmeriHealth Caritas Louisiana (ACLA) has contracted National Health Services (NHS) to complete an assessment on all ACLA members who are discharged from a psychiatric hospital. For nearly fifty years, NHS has been at the forefront of providing care and services to people with special needs. Today NHS, through its subsidiaries, is a leading provider of community-based, non-profit education and human services.

The goal of this program is to ensure members are appropriately accessing follow-up care and to surpass performance standards for the HEDIS 7/30 Follow-Up Hospitalization (FUH) measure. The HEDIS FUH measure looks at the percentage of discharged members who receive follow-up with a mental health practitioner within seven (7) and thirty (30) days of discharge. *The follow-up must be facilitated after the member has been discharged from the hospital. Follow-up may be facilitated on the same day as discharge, and even while the member is still at the hospital, as long as it occurs after discharge has taken place.* During the session, NHS will verify and reinforce with the member any scheduled follow-up appointments with established providers. Although the NHS assessment meets the definition of follow-up for the purpose of HEDIS, it will not substitute or take the place of any post-discharge care routinely provided by your agency. All members are encouraged and directed to continue their behavioral health care with their established providers.

If the member does not receive the assessment by the NHS Patient Discharge Coordinator on the day of discharge, **NHS shall conduct evaluations between 7 and 30 days from the date of discharge.** If the member has not been seen for a follow-up appointment, NHS will schedule an appointment to complete a 7 day post discharge follow-up. AmeriHealth Caritas Louisiana asks for your support in working with the NHS associate in scheduling the assessment and in welcoming the NHS associate in your facility to complete this assessment. Again, NHS will reinforce to the member that follow-up with the established provider is very important.

If you would like more information on NHS and the services they provide, please visit their website at www.nhsonline.org.

AmeriHealth Caritas Louisiana appreciates your understanding of this process. If you have any concerns about this process, please call your Provider Account Executive.

Louisiana Department of Health’s Health Plan Advisory 16-34: Inpatient Hospital Claims that Initiate with an Outpatient Status

Health Plan Advisory 16-34 was posted on Louisiana Department of Health’s website on December 1, 2016 to clarify Louisiana Medicaid’s policy on inpatient claims initiating with an outpatient status. The advisory states that if a recipient is outpatient on hospital day 1 and converts to inpatient on hospital day 2, the outpatient “admit day” becomes the inpatient “admit day.” For more detailed information regarding this policy, please see Louisiana Medicaid Hospital Services Manual, Section 25.5, available at www.lamedicaid.com under Provider Manuals.

AmeriHealth Caritas Louisiana uses the Louisiana Medicaid’s Health Plan Advisories to audit our claims adjudication system to ensure alignment with LDH policy. Any overpayments identified in the course of this review will be recovered as appropriate. Health Plan Advisory 16-34 can be found on Louisiana Department of Health’s website at

<http://new.dhh.louisiana.gov> on the Healthy Louisiana page under Provider & Plan Resources and Informational Bulletins.

Notice of Pregnancy (NOP) Form Submission

Effective 1/1/2017, CPT code 99420 is being retired by the American Medical Association and should not be used for reimbursement of a Notice of Pregnancy (NOP) form submission. AmeriHealth Caritas Louisiana offers a \$15 supplemental reimbursement for submission of each NOP form completed in its entirety.

Providers are no longer required to submit a claim with CPT code 99420 to receive the \$15 reimbursement from AmeriHealth Caritas Louisiana. The new process is below:

1. Providers should complete the NOP form as early as possible in pregnancy for each expectant patient who is an AmeriHealth Caritas Louisiana member. The form is available online at: www.amerhealthcaritasla.com > providers > provider forms > Notice of Pregnancy.
2. Completed AmeriHealth Caritas Louisiana NOP forms should be faxed to our Bright Start® Maternity Program at **1-888-877-5925**.
3. Providers will receive a monthly supplemental payment for each completed form that is submitted.

TIN/ID number*



Provider ID number should be used in this section on the NOP form

The NOP gives our Bright Start® maternity care management team the best opportunity to appropriately assist with managing our maternity members.

Primary Care Provider Quality Enhancement Program Expanded

AmeriHealth Caritas Louisiana is pleased to announce the continuation and expansion of our incentive program, the Primary Care Provider (PCP) Quality Enhancement Program (QEP). The QEP provides incentives for high-quality and cost-effective care, member service and convenience, and health data submission.

AmeriHealth Caritas Louisiana is excited about our enhanced incentive program. We actively work with your primary care practice so you can maximize your revenue while providing quality and cost-effective care to our members. **The enhanced program now includes practices with panel sizes of less than 500 members.** The new small panel-QEP (SP-QEP) program has two tiers: practices with panels of 50 – 149 and practices with panels of 150 – 499.

Program Overview

The QEP is intended to provide financial incentives over and above a PCP practice's base compensation. Incentive payments are not based on individual performance, but rather the performance of your practice, unless you are a solo practitioner.

Practices with panel sizes of 500 or more members are eligible for the full incentive payment. PCP practices with fewer than 500 members on their panels ("small panels") are eligible for participation in the QEP as of January 2016.

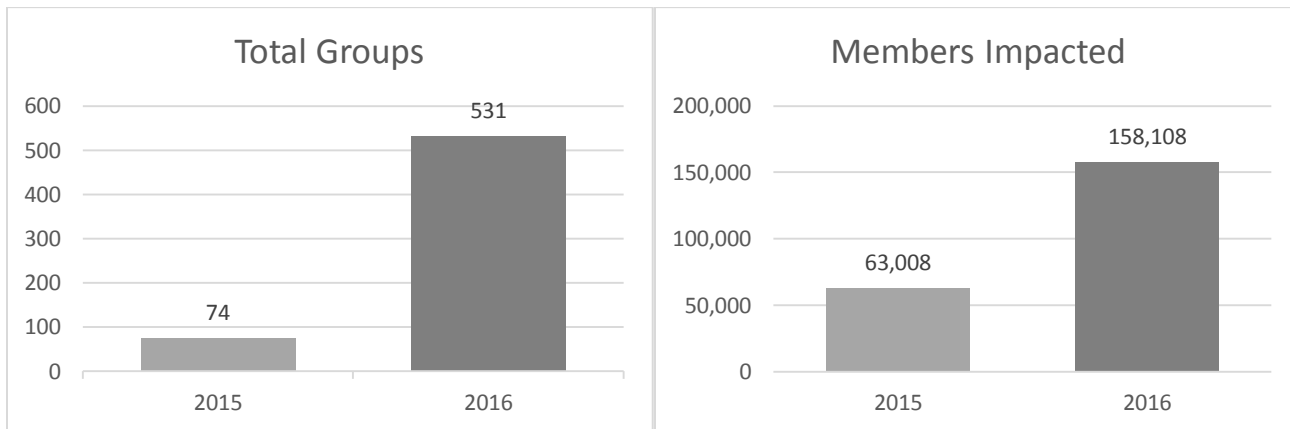
Hospital owned and large PCP groups (including FQHCs) that have an alternate incentive arrangement or risk sharing arrangement with AmeriHealth Caritas Louisiana are not eligible for the QEP. PCP practices that are part of a large

system but not owned by that system, in which the system has an alternative incentive arrangement or risk sharing arrangement with AmeriHealth Caritas of Louisiana, are eligible for participation in QEP.

Small Panel Program

The SP-QEP program has the same quality measures as the QEP applicable to practices with member panel sizes with 500 or more members on their panels but has a tiered payment structure based on panel size. Practices with member panel sizes of 50 – 149 are eligible for a quarter of the total potential per member per month (PMPM) bonus payment of the full QEP payment and practices with member panel sizes of 150 – 499 are eligible for half of the total potential PMPM bonus payment of the full QEP payment.

By expanding the QEP program to include participation of providers with smaller panels, the program is able to directly impact more than twice as many members.



Performance Incentive Payment (PIP)

A PIP may be paid in addition to a practice’s base compensation. In general, program payments are calculated based upon how well a PCP office scores on each bonus component relative to other qualifying AmeriHealth Caritas Louisiana participating PCP offices of the same specialty type and panel size range (pediatrics, internal medicine, OB/GYN if participating as a PCP, and general and family practice). Payments may vary based on the number of practices in the qualifying base. The six components are listed below.

1. Quality Performance.
2. Severity of Illness.
3. Cost-Efficiency Management.
4. Non-Emergent Emergency Room (ER) Utilization.
5. Improvement Incentive.
6. Patient-Centered Medical Home (PCMH).

For detailed information about the QEP program or to request a copy of the full QEP Manual, please contact your Network Management Provider Account Executive.

Modifications to the Pre-Authorization Process for Mental Health Rehabilitation (MHR) services

Effective January 1, 2017, AmeriHealth Caritas Louisiana will implement modifications to the pre-authorization process for Mental Health Rehabilitation (MHR) services. If you provide these services, it is important that you review the below information so that you and your agency can become familiar with the upcoming changes.

AmeriHealth Caritas Louisiana will now require the Child and Adolescent Service Intensity Instrument (CASII) or the Child and Adolescent Level of Care Utilization System (CALOCUS) to be completed for all Child and Adolescent Mental Health

Rehabilitation initial service requests and annually thereafter. AmeriHealth Caritas Louisiana will provide training for providers on the modified pre-authorization process. Communications on dates/locations will be provided through your AmeriHealth Caritas Louisiana Account Executives. Immediate information about CASII can be located online at: http://www.aacap.org/aacap/Member_Resources/Practice_Information/CASII.aspx.

1. AmeriHealth Caritas Louisiana will implement a *Member's Choice in Provider* form to be used for all MHR services in an attempt to reduce duplication of services. Providers will be responsible for having the member and/or their legal representative complete and sign the form indicating their choice of provider for the provision of MHR services. The form must then be submitted along with the Prior-Authorization request to AmeriHealth Caritas Louisiana. The *Member's Choice in Provider* form can be located on the AmeriHealth Caritas Louisiana website at www.amerhealthcaritasla.com on the Providers tab under Forms.
2. AmeriHealth Caritas Louisiana has revised the *Child and Adolescent MHR Treatment Request* form to capture additional information for the Prior Authorization process. Changes include:
 - a. A place to submit the ICD-10 diagnosis code along with the Diagnostic and Statistical Manual (DSM) code for the member.
 - b. A reminder to attach the *Choice in Provider* form, as well as the Clinical Assessment and/or Treatment Plan, when applicable.
 - c. A place to clarify the specific interventions for each service requested.
 - d. A note that if the request is for both Community Psychiatric Supportive Treatment (CPST) and Psychosocial Rehabilitation (PSR), it is necessary to clearly indicate the need for both services and the different interventions to be utilized in both services.
 - e. The addition of several Symptom criteria that can be noted for Continued Stay Requests. The additions/revisions include: Disruptive Behaviors, Paranoia and Interpersonal conflicts.

Reminder – Adverse Incident Reporting

AmeriHealth Caritas Louisiana providers are required to report adverse incidents to AmeriHealth Caritas Louisiana within 24 hours of the time the provider becomes aware of their occurrence.

Furthermore, AmeriHealth Caritas Louisiana providers are required to develop written policies and procedures for an incident management process, to take strong measures to prevent the occurrence of adverse incidents, to investigate and report on those that occur, and to take reasonable corrective action to prevent reoccurrence.

For additional information on adverse incident reporting, please refer to AmeriHealth Caritas Louisiana's Provider Handbook located under Resources on the Provider tab of our website at www.amerhealthcaritasla.com. The reporting form and complete filing instructions are also located on our website on the Providers tab under Forms.

BEHAVIORAL HEALTH UPDATES

[Claims Billed with H0011 Denied with H65/X01](#)

AmeriHealth Caritas Louisiana – *Provider Post*

AmeriHealth Caritas Louisiana recently identified an issue where claims billed with procedure code **H0011 - Alcohol and/or drug services; acute detoxification (residential addiction program inpatient)** were denying with reason code **H65 - Modifiers reordered** or **X01 - Authorization/Notification/Referral not obtained**.

If you submitted claims on or after 12/1/2015 billed with procedure code H0011 and your claims denied with reason code H65 or X01, please resubmit the claims. Our system has been corrected to appropriately process these claims.

CLINICAL CORNER

Changes to the Authorization Process for Permanent Supportive Housing (PSH) Services

What has changed?

- Beginning January 27, 2017, AmeriHealth Caritas Louisiana will no longer require PSH providers to submit clinical documentation and/or a request for authorization of PSH services.

What is the new process?

- The Louisiana Department of Health (LDH) will notify AmeriHealth Caritas Louisiana when a member is approved for PSH tenancy supports.
- Once AmeriHealth Caritas Louisiana receives the approval from LDH, we will authorize services and notify providers within two (2) business days.

Substance Use Disorder (SUD) Detox Prior Authorization Change

Historically, AmeriHealth Caritas Louisiana authorized SUD detox services based on provider notification 48-hours prior to discharge without medical necessity review.

Effective January 27, 2017, this process will change to the following:

1. The first 5 days of SUD detox will continue to be authorized upon receipt of provider notification without medical necessity review.
 2. Prior authorization is required to continue treatment beyond 5 days and a medical necessity review will be conducted. Providers should submit a request for continuation of services within 24 hours of the 5th day.
 3. AmeriHealth Caritas Louisiana will provide a determination within 24 hours of receiving a request.
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BILLING UPDATES

Reminder: Important Notice Regarding JW Modifier

Claims submitted with the code **JW - Drug amount discarded/not administered to any patient** will be denied. AmeriHealth Caritas Louisiana does not cover any procedure code billed with a JW modifier for unused drugs.

Allowances for CPT Codes 99173-EP

AmeriHealth Caritas Louisiana is in the process of configuring our system to process claims for codes 99173-EP according to Louisiana Medicaid policy effective 02/01/2012 as follows:

- Payment for CPT code 99173-EP will be allowed when billed on the same claim as a preventative medicine Evaluation and Management (E&M) code (examples: 99381-99385 or 99391-99395) for members who were 4-20 years of age from 02/01/12-11/30/13 and members 3-20 years of age effective 12/01/13 and forward.
- The payment allowance on 99173-EP will be \$2.00 in accordance with the Louisiana Medicaid EPSDT Fee Schedule.

If either of these codes is billed for members ages 21 years of age and over the claim will deny with code ZB3 - Member's age not valid for procedure.

Once our system configuration has been completed, claims with codes 99173 & 99173-EP will be reprocessed back to the original effective date of 02/01/2012. Additional details regarding claims reprocessing timeframes will be included in a future Provider Post. Stay tuned!

Featured Article

Ahead of the Pack: An Overview of PerformSpecialty

Your patient starts to feel sick and begrudgingly makes an appointment to visit you. You write a prescription and the patient is off to a local pharmacy. The patient fills the prescription, takes the pills, and is better in a few days. We are all familiar with this series of events, but what if your patient's condition isn't so simple? What if he or she has a more serious illness that requires a complex medication, counseling, and guidance? Would he or she even fill the prescription at all?

In 2014, PerformSpecialty® opened its doors in the Orlando, Florida area. Its goal was to support and assist patients in situations like this. At its core, PerformSpecialty is a specialty pharmacy designed to serve patients with conditions such as hemophilia, hepatitis C, human growth hormone deficiency, multiple sclerosis, rheumatoid arthritis, and many other chronic conditions. Unlike a corner drugstore, PerformSpecialty provides its patients with specialized drugs. These include complex oral therapies that require counseling, infusions, and other drugs that must be administered by a nurse or doctor. In addition, PerformSpecialty provides an extra level of care to its patients and their prescribers, assisting them with their conditions and keeping them on track.

“Extra level of care” can be a bit of an understatement. Each day, PerformSpecialty employees assist doctors with medical and pharmacy benefit verification, prescription clarifications, and visits with nurses; educate patients on their diseases; help patients manage side effects; and provide access to support resources and financial assistance. That's not all — continuous quality checks and reporting are performed each step of the way to make sure the schedule of care is met, the patient's quality of life is maintained, and that everyone is taking their drugs as needed.

“The patient is never alone in their journey toward recovery,” states Dino Martino R.Ph., Executive Director of PerformSpecialty. “Every time they interact with a medical professional, we are right there with them. It's important to forge relationships and build a team, because at the end of the day, that's what improves the patients' quality of life.”

PerformSpecialty is owned by PerformRxSM, AmeriHealth Caritas Louisiana's pharmacy benefit manager that has expertise in providing access to pharmacy services for those most in need. . This direct integration allows PerformSpecialty to use extra support and resources not available to most specialty pharmacies. This translates into better member care.

Still, some are skeptical. “Why use PerformSpecialty?” is a question the Executive Director encounters frequently from doctors. For the answer, the Executive Director defers to their first-ever patient, who is open about her experience. “My

quality of life has improved...Since working with PerformSpecialty, everything has gotten easier.” She assures, “I look forward to their call each month!”

Getting started at PerformSpecialty is simple. “With a quick phone call, fax, or e-script, a doctor can get the medication request to us and we’ll take care of it from there.” the Executive Director says. That’s how easy PerformSpecialty strives to make it. After the PerformSpecialty team receives a prescription from the doctor, they immediately reach out to the patient and introduce the pharmacy, collecting any payment due and verifying shipping information. If a patient needs copayment assistance, the PerformSpecialty team sets the patient up with an available financial assistance program. If the patient is low on refills, PerformSpecialty contacts the doctor in advance to avoid any interruption in therapy. Even more important, if the medication requires prior authorization, PerformSpecialty facilitates that with the patient’s prescriber, without the patient having to do any work.

“Our goal was to create a specialty pharmacy operation that can easily integrate its services with provider offices and payer’s case management or care coordination programs to enhance quality while simplifying administrative burdens of doctors’ offices. I am happy that we have done that,” states Mesfin Tegenu, President of PerformRx.

Contact PerformSpecialty

PerformSpecialty is here for you whenever you need us. Feel free to get in touch with us at any time. Visit the PerformSpecialty website at www.performspecialty.com or contact PerformSpecialty by emailing to info@performspecialty.com or calling 1-855-287-7888.

To send an e-script: Search “PerformSpecialty” or NPI number “1437562642” in your e-prescribing database to begin a new prescription request.

Online Resources

At AmeriHealth Caritas Louisiana we’re always working to bring you the information you need. Here’s a look at what’s new or recently updated on our website at www.amerihealthcaritasla.com:

- Behavioral Health Child and Adolescent Mental Health Rehabilitation Treatment Request Form
- Member’s Choice in Provider Form
- News and Updates
- Notice of Pregnancy (NOP) Form
- Provider Account Executives
- Provider Reference Guide

Provider Post Corrections

On January 20, 2017, providers were faxed a Provider Post with the incorrect date of January 20, 2016 noted in the date field. The correct date of the Provider Post is January 20, 2017. This update will be noted on the electronic version of the Provider Post on the Provider tab of our website at www.amerihealthcaritasla.com under News and Updates.

Questions

If you have questions about any of the content in this Provider Update, please contact your Provider Account Executive or call Provider Services at 1-888-922-0007.