

PROVIDER POST

News and updates you need to know

Table of Contents

- Expansion of mental health professionals.....2
- Transcranial magnetic stimulation (TMS)2
- Remote patient management: elevating care for hypertension and Type 2 diabetes3
- AmeriHealth Caritas Louisiana offers no-cost language interpretation services for our members4
- Notification of Pregnancy (NOP) form4
- Health conditions affecting minority populations.....5
- Behavioral Health Member Experience survey results6
- Close the year strong by closing cancer screening gaps in care7
- Behavioral Health Claims and Billing training8
- Top Denials and Tips on How to Resolve Them training.....8
- Cultural competency training9
- Questions9





Expansion of mental health professionals

The Centers for Medicare & Medicaid Services (CMS) approved Louisiana's Medicaid State Plan Amendment (SPA) to expand mental health professionals to include provisionally licensed professional counselors (PLPC), provisionally licensed marriage and family therapists (PLMFT), and licensed master social workers (LMSW) with an effective date of **August 1, 2024**. The rates listed for PLPCs, PLMFTs, and LMSWs have been added to the Specialized Behavioral Health Services (SBHS) fee schedule. AmeriHealth Caritas Louisiana has updated our claims processing systems to properly adjudicate behavioral health claims for PLPCs, PLMFTs, and LMSWs, completed **September 29, 2024**.

What do you need to do?

For dates of service on or after **August 1, 2024**, AmeriHealth Caritas Louisiana will recycle any claims that were not paid in accordance with these changes within 15 days of implementing the system changes. Providers do not need to take action.

Reminder: Please refer to a complete list of provider alerts on our website's **Provider Newsletters and Updates page**.

Transcranial magnetic stimulation (TMS)

AmeriHealth Caritas Louisiana would like to inform you that an update has been made by Louisiana Medicaid regarding transcranial magnetic stimulation (TMS). Louisiana Medicaid does not cover persistent depressive disorder.

The Medicaid procedure file has been updated to reflect this change; the fee-for-service (FFS) fee schedule and the Specialized Behavioral Health Services (SBHS) fee schedule will be updated on the Louisiana Medicaid website, www.lamedicaid.com.

AmeriHealth Caritas Louisiana has updated our claims system to reflect these updates.

PLEASE NOTE: The following claims processing conditions will **no longer apply**:

1. If the hard copy documentation is not present, the claim will be denied, and
2. If the hard copy supporting documentation is present and meets the clinical criteria, the claim will be allowed to continue normal processing.

AmeriHealth Caritas Louisiana will recycle impacted claims back to **August 2, 2024**. Providers do not need to take action.

Reminder: Please refer to a complete list of provider alerts on our website's **Provider Newsletters and Updates page**.



Remote patient management: elevating care for hypertension and Type 2 diabetes

In our efforts to employ a more targeted approach for our hypertension and Type 2 diabetes patients, **AmeriHealth Caritas Louisiana is now offering Ochsner Digital Medicine to eligible patients.** Ochsner Health’s innovative remote patient management program has proven to be a game-changer in managing these cardiometabolic conditions, delivering significant health outcomes and reducing overall costs.

Ochsner Digital Medicine is a patient-centered, home-based program that began in-house at Ochsner Medical Center nearly ten years ago. The program has since expanded to offer services to health plans and employers in all 50 states. The program focuses on reducing the total cost of care to directly benefit both members and payers.

On average, the program has achieved \$2,200 in savings per member per year. This is largely due to proven clinical outcomes: 79% of enrolled patients reached their blood pressure goals, and 81% met their A1c goals within just six months.

A comprehensive approach

Ochsner Digital Medicine is a remote patient management program that combines digital health tools with a professional care team. This team includes clinicians and health coaches who work together to interpret data from digital blood pressure cuffs or glucometers. Members take their readings from home, and the information is seamlessly integrated into their electronic health record (EHR) system through the Digital Medicine app.

Clinicians monitor members’ readings and provide medication management to go beyond mere monitoring for true management of the members’ condition. A panel of health coaches provide tailored lifestyle advice, offering practical tips to help members stay on track and aid in behavioral change.

The program’s impact on member outcomes is significant:

- A 45% reduction in emergency department visits for hypertension patients.
- A 38% reduction in hospital admissions among hypertension patients.
- A 30% reduction in emergency department visits for patients with Type 2 diabetes.

AmeriHealth Caritas Louisiana encourages you to ensure your eligible patients diagnosed with hypertension or Type 2 diabetes are aware of the Digital Medicine program. This is a proven solution to effectively manage cardiometabolic conditions. Let’s work together to proactively support patients as they take steps to achieve better health.

How do I refer patients to the program?

You can help your eligible patients start their enrollment by referring them to the Digital Medicine signup portal during their office visit. In addition, the Digital Medicine team will reach out to eligible patients to encourage enrollment in the program. Patients can begin enrolling in the program by visiting ochsner.org/careforla.

Source: Ochsner Digital Medicine, “Break the RPM Mold for Your Population,” <https://connectedhealth.ochsner.org/digital-medicine/health-plans>



AmeriHealth Caritas Louisiana offers no-cost language interpretation services for our members

Members should be advised that interpretation services from AmeriHealth Caritas Louisiana are available at no cost. When a member uses AmeriHealth Caritas Louisiana interpretation services, the provider must sign, date, and document the services provided in the medical record in a timely manner.

How to use our interpretation services:

- Inform the member of his or her right to no-cost interpretation services.
- Make sure a phone is in the room or use a cell phone.

- Call Member Services at **1-888-756-0004**, 24 hours a day, seven days a week, with the member ID number, and Member Services will connect you to the necessary interpreter.
- Conduct the exam with the interpreter on the phone.

Interpretation services tips for providers:

- Speak directly to the patient, not the interpreter.
- Do not rush. Pause every sentence or two for interpretation.
- Use plain language. Avoid slang and sayings. Jokes do not always translate well.

Notification of Pregnancy (NOP) form

Supplement your reimbursement when a Notification of Pregnancy (NOP) form is completed and faxed to our Bright Start® department. We encourage providers to use our NOP form to collect pregnancy information from our members and forward the completed forms to us. The NOP form is available for download from our website and printable in English. Click the link below to access the form or copy and paste the address into your web browser: <https://www.amerhealthcaritasla.com/pdf/provider/resources/forms/notification-of-pregnancy.pdf>

Please fax the completed form to our Bright Start department at **1-888-877-5925**. If you need guidance on completing the Notification of Pregnancy form, or to inquire about a submission, please call **1-888-913-0327**.



Health conditions affecting minority populations

In a perfect world, every individual would have the opportunity to be as healthy as possible, to have access to care when needed, and to feel confident about the condition of their health. A person knowing that they have access to health care to maintain good health is the foundation of health equity. In the United States, there are certain populations who often have trouble accessing adequate care. Some of those populations include Native Americans and Alaska Natives, Asian Americans, Black/African Americans, Hispanic/Latinos, Native Hawaiians and other Pacific Islanders, members of the LGBTQIA+ community, socioeconomically disadvantaged populations, and underserved rural populations.

Due to the effects of systemic racism, bias, environmental factors, and social determinants of health, various minority groups may be more prone to certain health conditions. Native Americans and Alaska Natives have a high prevalence of and risk factors for mental health and suicide, unintentional injuries, obesity, substance use disorder, sudden infant death syndrome (SIDS), teen pregnancy, diabetes, liver disease, and hepatitis.

Some of the more prevalent factors that Asian Americans face include infrequent medical visits, language and cultural barriers, and lack of health insurance. Asian Americans are most at risk for health conditions such as cancer, heart disease, stroke, unintentional injuries (accidents), diabetes, chronic obstructive pulmonary disease, hepatitis B, HIV/AIDS, smoking, tuberculosis, and liver disease. Common health concerns that Black/African Americans incur include heart disease, high blood pressure, cancer, diabetes, stroke, peripheral artery disease, and sickle cell disease.

The most common health issues seen in the Hispanic/Latino community are obesity, diabetes, hypertension (high blood pressure), chronic kidney disease, chronic liver disease, and cancer. Among Native Hawaiians and other Pacific Islanders, some of the leading causes of death are cancer, heart disease, unintentional injuries (accidents), stroke, and diabetes. Other common health conditions and risk factors are hepatitis B, HIV/AIDS, and tuberculosis.

Members of the LGBTQIA+ community face unique health risks that include conditions such as cardiovascular disease, mental health disorders (anxiety and depression), diabetes, smoking, heavy drinking, obesity, and HIV/AIDS.

Those who are of lower socioeconomic status are at increased risk of premature mortality; the development of serious conditions such as coronary heart disease, diabetes, and depression; and other health outcomes at older ages, including disability and dementia. Rural Americans are more likely to die from heart disease, cancer, unintentional injury, chronic lower respiratory disease, and stroke.



Understanding the health concerns and conditions that minority populations may face lays the groundwork for closing gaps in care for these populations. It allows health care professionals to be aware of disparities, helping them to make informed decisions and prioritize the unique needs of the individual.

Resources for providers

1. "Minority Health & Health Disparities," National Institute of Allergy and Infectious Diseases, September 25, 2023, <https://www.niaid.nih.gov/research/minority-health-disparities>.
2. "American Indian/Alaska Native Health," U.S. Department of Health and Human Services Office of Minority Health, February 24, 2023, <https://minorityhealth.hhs.gov/american-indianalaska-native-health>.
3. "Asian American Health," U.S. Department of Health and Human Services Office of Minority Health, February 24, 2023, <https://minorityhealth.hhs.gov/asian-american-health>.
4. "7 Common Health Concerns African Americans Should Monitor," CentraState Healthcare System, February 1, 2022, <https://www.centrastate.com/blog/7-common-health-concerns-african-americans-should-monitor/>.
5. "Common Hispanic Health Issues," Northwestern Medicine, <https://www.nm.org/healthbeat/healthy-tips/common-hispanic-health-issues>.
6. "Native Hawaiian and Pacific Islander Health," U.S. Department of Health and Human Services Office of Minority Health, February 24, 2023, <https://minorityhealth.hhs.gov/native-hawaiian-and-pacific-islander>.
7. Ning Hsieh and Matt Ruther, "Sexual Minority Health and Health Risk Factors," *Intersection Effects of Gender, Race, and Sexual Identity, Am J Prev Med*, Vol. 50, No. 6, June 2016, pp. 746 – 755, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4875806/>.
8. Andrew Steptoe and Paola Zaninotto, "Lower Socioeconomic Status and the Acceleration of Aging: An Outcome-Wide Analysis," *PNAS*, Vol. 117, No. 26, June 15, 2020, pp. 14911 – 14917, <https://www.pnas.org/doi/10.1073/pnas.1915741117>.
9. "About Rural Health," Centers for Disease Control and Prevention, November 28, 2023, https://www.cdc.gov/rural-health/php/about/?CDC_AAref_Val=https://www.cdc.gov/ruralhealth/about.html.
10. "6 Examples of Health Disparities and Potential Solutions," University of Southern California, Price School of Public Policy, November 17, 2023, <https://healthadministrationdegree.usc.edu/blog/examples-of-health-disparities>.



Behavioral Health Member Experience survey results

Each year, the Louisiana Department of Health conducts surveys of adult and child members who receive behavioral health services through their Managed Care Organization (MCO). The 2023 Behavioral Health Member Experience survey was conducted from July to September 2023. The adult and child Behavioral Health Member Satisfaction surveys include one global rating question, one composite measure, and eleven individual item measures. The global measure (also referred to as a global rating) reflects overall member experience with the health plan. The composite measure is a set of questions grouped together to address a specific aspect of care (e.g., How Well People Communicate).

The individual item measures are individual questions that look at different areas of care (e.g., Cultural Competency or Helped by Counseling or Treatment). Each MCO received individual results that were also compared to the statewide average.

Overall rating of health plan

Adult members who received behavioral health services gave AmeriHealth Caritas Louisiana an overall rating of health plan score of 58.93%. The 2023 state average was 58.96%. Parents or guardians of child members who received behavioral health services gave AmeriHealth Caritas Louisiana an overall rating of health plan score of 64.29%. The 2023 state average was 62.67%.

Results of adult surveys

On the How Well People Communicate composite measure, AmeriHealth Caritas Louisiana scored 92.44%, compared to the state average of 90.06%. Of members surveyed, 73.65% responded they were helped “a lot” by the counseling or treatment they received (67.65% state average). When asked

how difficult it was to get counseling or treatment, 81.33% of AmeriHealth Caritas Louisiana members responded it was not a problem, compared to the 77.08% state average. These results indicate most members who receive behavioral health services think the services are accessible and helpful for managing their needs.

Results of child surveys

On the How Well People Communicate composite measure, AmeriHealth Caritas Louisiana scored 93.49%, compared to the state average of 92.54%. Of members surveyed, 70.83% responded they were helped “a lot” by the counseling or treatment they received (58.20% state average). Child members were also asked how difficult it was to get counseling or treatment, to which 85.92% responded it was not a problem. The statewide average was 77.36%.

Areas for improvement

While most members surveyed gave the plan a positive overall rating, AmeriHealth Caritas Louisiana has developed a comprehensive Quality Improvement Plan that aims to increase individual item scores and the overall rating of health plan metric. AmeriHealth Caritas Louisiana’s biggest area for improvement is in the Help Finding Counseling or Treatment category, where only 34.38% of adults responded yes to a question assessing the health plan’s assistance with finding a new counselor or treatment provider. For child members, only 30.77% answered yes to the same question. Both scores were below the state average of 47.04% for adults and 41.85% for children. AmeriHealth Caritas Louisiana’s comprehensive Quality Improvement Plan includes steps the plan can take when members express a need to locate a new behavioral health treatment provider.



Close the year strong by closing cancer screening gaps in care

As the end of 2024 approaches, take a moment to reflect on how you can impact patient health outcomes. Quarter 4 is the perfect time to close care gaps, like those for cancer screenings, to ensure our patients receive the preventive services needed to stay well.

- **Cervical cancer screenings:** Women ages 21 – 65 should have regular Pap or HPV tests. Depending on the type of test performed and previous results, cervical cancer screenings are recommended every three to five years. If patients are due, you can perform a screening or assist with scheduling to protect against cervical cancer.
- **Breast cancer screenings:** Women ages 40 – 74 should receive a mammogram every two years. If your patients are due for this screening, now is the time to reach out and schedule their appointment.

- **Colorectal cancer screenings:** For adults ages 45 – 75, colorectal cancer screenings are crucial. Whether through stool-based tests, sigmoidoscopy, or colonoscopy, ensuring patients complete these screenings before year-end could reduce mortality by detecting cancer at an early stage, when therapy and treatment is more effective.

Early detection through screenings is vital to improving outcomes. As a trusted health care provider, you can ensure these cancer screenings are completed in a timely manner.

There is still time to make a significant impact — let's finish the year strong, together!

Sources:

United States Preventive Services Task Force, <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics>.

Centers for Medicaid & Medicare Services, “2024 National Impact Assessment of the Centers for Medicare & Medicaid Services (CMS) Quality Measures Report,” 2024, <https://www.cms.gov/files/document/2024-national-impact-assessment-report.pdf>.



Behavioral Health Claims and Billing training

AmeriHealth Caritas Louisiana is pleased to offer network providers web-based training on Behavioral Health Claims and Billing.

In this training we will discuss:

- Louisiana Medicaid Provider Enrollment Rebaseline — IB 24-22
- NaviNet (AmeriHealth Caritas Louisiana's secure provider portal)
- Changes to behavioral health coverage
- Behavioral health services requirements for billing/Specialized behavioral health services fee schedule (SBH_FS)
- Evidence-based practices
- Top denials for behavioral health claims

Registration is required. To register for any of the training dates, please go to **Behavioral Health Claims and Billing training registration**.

Tuesday, November 19, 2024, at 2 p.m.

Top Denials and Tips on How to Resolve Them training

AmeriHealth Caritas Louisiana is pleased to offer network providers this web-based training.

In this training we will discuss:

- The difference between a rejection and a denial
- Top denial codes and tips on how to resolve them
- Additional resources
- Registration is required. To register for any of the available training dates, please go to **Top Denials and Tips on How to Resolve Them**, click the dropdown icon by the Date & Time header, and select your preferred session date.

Cultural competency training

AmeriHealth Caritas Louisiana is pleased to offer network providers web-based cultural competency training.

We will discuss:

- Culturally and Linguistically Appropriate Services
- Health Equity



The webinar will take place on:

DATE: Wednesday, November 20, 2024

TIME: 1 p.m.

REGISTRATION LINK:

https://amerihealthcaritas.zoom.us/meeting/register/tJEpduqtpzwtHtCH74z2yoYb_LGnap4-z0_X#/registration

Registration is required. Please register in advance for your desired training date.



Questions?

If you have questions about any content in this provider update, please get in touch with your Provider Account Executive or call Provider Services at **1-888-922-0007**.



AmeriHealth *Caritas*[™]

Louisiana

www.amerhealthcaritasla.com