

# Empower Healthcare Solutions Provider Newsletter



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# This Season a Flu Vaccine is More Important than Ever!

Getting a flu vaccine is more important than ever during 2020-2021 to protect yourself, your family and your community from flu. A flu vaccine this season can also help reduce the burden on our healthcare systems responding to the COVID-19 pandemic and save medical resources for care of COVID-19 patients. September and October are good times to get a flu vaccine. The more people vaccinated; the more people protected. Do your part, get a flu vaccine this fall.

### **Know the Key Facts About Flu Vaccine**

Learn the facts. CDC recommends everyone 6 months and older gets a flu vaccine. Find answers to common questions about flu vaccines this season <u>here</u>.

#### **How to Prevent Flu**

CDC recommends 3 actions to prevent flu.

- 1. Get a flu vaccine,
- 2. Practice everyday preventive actions, and
- 3. Take antiviral medication to treat flu if your doctor prescribes them.

This season, follow these <u>prevention actions</u>, along with additional recommendations to prevent COVID-19.





#### **People Who are High Risk for Flu Complications**

Young children, pregnant women, people 65 years and older, and people with certain chronic health conditions are among those at high risk for flu complications. For more information on people at high risk, click <a href="here">here</a>. Take time to talk to our shared members about getting their flu vaccines.

**Reminder:** When providers are billing Empower Healthcare Solutions for flu vaccines please include the National Drug Code (NDC).

Excerpt: https://www.cdc.gov/flu/season/protect-your-health.html

# November is National Family Caregivers Month

Since at least 2000, presidents have designated November as National Family Caregivers Month to honor the more than 40 million caregivers across the country who support aging parents, ill spouses or other loved ones with disabilities who remain at home.

Adults of all ages are among the ranks of family caregivers, according to a 2015 study by AARP and the National Alliance for Caregiving. More than a third of caregivers were ages 50 to 64, about a quarter were 35 to 49, and another quarter were 18- to 34-year-olds.

Perhaps most surprising as America's population ages: 7 percent of family caregivers were age 75 or older, a share that has gone up steadily in the past two decades. Often the recipient is a spouse with dementia or heart disease who needs a high level of care for 34 hours or more a week, and the caregiver has been providing that help for more than five years.

#### **Isolation Issues**

Although a majority of caregivers told AARP researchers in 2019 that they had a friend or relative available to confide in and have contact with socially, almost 1 in 10 said they had no one to talk to about private matters and 1 in 5 said they had no one to call for help.

#### Lots of Balls in the Air

Most family caregivers must juggle their home lives with working a paid job and meeting the needs of the relatives or friends in their care. More than 60 percent of the caregivers surveyed in 2019 were working and about the same percentage were married.

#### A Labor of Love

Almost half of family caregivers are adult children caring for their parents. About 1 in 5 are wives or husbands caring for their spouses. (continued from Page 2)

### **Learn More about Caregiving**

Below are links put out through AARP with more information on caregiving.

- Gift ideas for the caregivers in your life
- Resources caregivers should know about
- Advocating for family caregivers

Excerpt: https://www.aarp.org/caregiving/home-care/info-2019/national-family-caregivers-month.html

#### **American Diabetes Month**

Every year, our community comes together to ring the alarm on the diabetes epidemic. For the millions who are at risk for it, it's a time to get educated, find resources and make sure others are aware of their risk, too.

Until we find a cure, we will find each other and lift each other up.

#### **Diagnosis**

According to Mayoclinic.org, symptoms of type 1 diabetes often appear suddenly and are often the reason for checking blood sugar levels. Because symptoms of other types of diabetes and prediabetes come on more gradually or may not be evident, the American Diabetes Association (ADA) has recommended screening guidelines. The ADA recommends that the following people be screened for diabetes:

- Anyone with a body mass index higher than 25 (23 for Asian-Americans), regardless of age, who has additional risk factors, such as high blood pressure, abnormal cholesterol levels, a sedentary lifestyle, a history of polycystic ovary syndrome or heart disease, and having a close relative with diabetes.
- Anyone older than age 45 is advised to receive an initial blood sugar screening, and then, if the results are normal, to be screened every three years thereafter.
- Any woman who has had gestational diabetes, is advised to be screened for diabetes every three years.
- Anyone who has been diagnosed with prediabetes is advised to be tested every year.

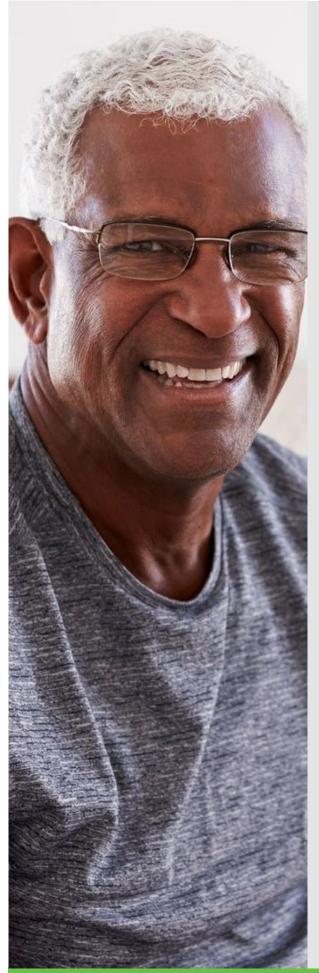
#### **Treatment**

Depending on what type of diabetes the patient has, blood sugar monitoring, insulin and oral medications may play a role in their treatment. Eating a healthy diet, maintaining a healthy weight and participating in regular activity also are important factors in managing diabetes.

For more information from Mayo Clinic, on treatment for diabetes click here.

Excerpt: https://www.diabetes.org/community/american-diabetes-month; https://www.mayoclinic.org/diseases-conditions/diabetes/diagnosis-treatment/drc-20371451





## **Avoid Claim Denials and Rejections**

Empower is committed to paying claims appropriately and timely. In the future there will be hard validation against the state file, so please ensure the following information is updated with Arkansas Medicaid and Empower.

- Provider name (as noted on current W-9 form)
- National Provider Identifier (NPI) does not apply to atypical providers
- Medicaid Identification Number does apply to atypical providers
- Tax Identification Number (TIN)
- Taxonomy code
- Physical location address
- Billing name and address (as noted on current W-9 form)

Please reach out to <u>Arkansas Medicaid Provider Enrollment</u> to ensure your information is up to date.

# Modifying a Claim Submitted on the Empower Portal

Beginning October 15, 2020, providers can submit claim adjustments to "finalized" Professional claims (CMS 1500) submitted on the Empower Provider portal.

Only claims originally submitted on the Empower Portal can be modified via the Portal.

**Please Note:** Providers are not able to VOID a claim on the portal.

A claim must be in the Finalized, Finalized/Payment, Finalized/Adjudication Complete status to modify claim.

When modifying a claim all information can be changed (i.e. correcting an existing service line, adding additional service lines, deleting service lines, adding and deleting file attachments). After a claim has been modified and submitted it will be processed. After modifying a claim, please allow 24 hours before checking the status. Claims in the Pending/In Process status contain remark codes that are subject to change and should not be considered final until the claim has reached the Finalized/Payment status.

**Also Note:** A claim can be modified more than once. However, the claim number will not change when a claim is modified.

### Outpatient – Emergency, Non-Emergency and Related Charges

#### **272.115 Observation Bed Billing Information**

Use code 760\* to bill for Observation Bed. One unit of service on the CMS-1450 (UB-04) outpatient claim equals 1 hour of service. Medicaid will cover up to 8 hours of hospital observation per date of service. Empower will cover up to 48 hours observation without a Prior Authorization.

When a physician admits a patient to observation subsequent to providing emergency or non-emergency services in the emergency department, the hospital may bill the observation bed code 760\* and the appropriate procedure code for emergency room 450\* (Z0646) or non-emergency room 459\*. Condition code 88 must be billed to indicate an emergency claim.

You may not bill 622\* or 250\*:

- A. Alone or in conjunction with only one another.
- B. With the non-emergency room procedure code 459\*.
- C. With an outpatient surgical procedure.
- D. Without code 450\*.

# 272.130 Outpatient—Emergency, Non-Emergency Charges

National Code	Revenue Code Description
450*	Emergency Room Coverage. Condition code 88 required.

### **Care Coordinator Quotes**

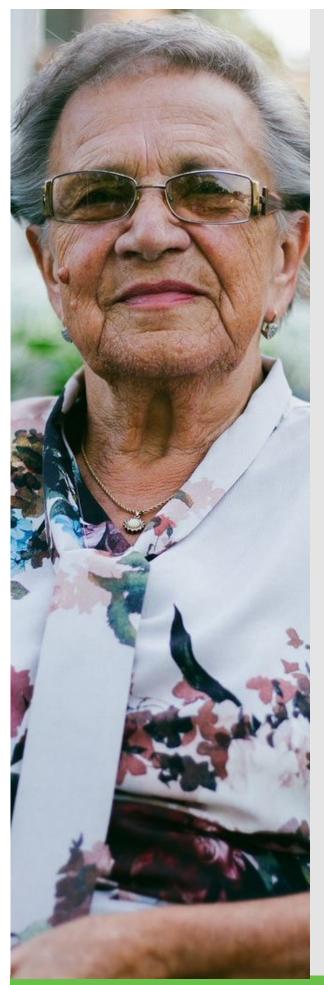
**Takeda Millet, LSW:** "My favorite part about helping members is knowing that as I help my members, I'm helping my community thrive. I see myself as a little piece to a greater puzzle helping meet the needs of extraordinary people."

**Carmen Schwantz:** "I am especially passionate about the behavioral health population." "Empower has taken it to a whole other level. Empower does just that, it Empowers me, as well as allows me to empower my members to live a better and healthier life."

**Shelia Wright:** "Compassion drives the DD Care Coordinator, from helping the member coordinate services, obtaining equipment, connecting them to resources, or just being a listening ear. The members can count on their DD Care Coordinator for support."



<sup>\*</sup>Revenue code



#### **Coronavirus Provider Alerts**

Empower is taking steps to prepare for the unique challenges related to the developing COVID-19 outbreak and resulting declared state of emergency in Arkansas. The uncertainty posed by a public health emergency can cause stress and anxiety among many individuals. Therefore, core to our plan is ensuring that members have access to routine and emergency services.

The following is a list of alerts related to COVID-19:

- Coronavirus Updated Laboratory Diagnostic Testing for COVID-19 8.12.20
- ♦ Coronavirus Use of Telemedicine Services for Substance Abuse Assessment 7.7.20
- ♦ Use of T2020 UA Supplemental Support Services 6.12.20
- Use of Well Checks for EIDT and ADDT providers during COVID-19 Outbreak 6.1.20
- ◆ Coronavirus Telemedicine Services to be Provided by FQHC and RHC 5.8.20
- Coronavirus Provider Alert Summary 4.27.20
- ◆ Coronavirus Additional Services Ready to Bill 4.23.20
- ◆ Coronavirus-FQHC & RHC Flexibilities in Service Provision 4.21.20
- Coronavirus-Additional Services Ready to Bill 4.17.20
- Coronavirus Services Ready to Bill 4.14.20
- ◆ Coronavirus Telemedicine Mental Health Diagnosis 4.14.20
- ◆ <u>Coronavirus Telemedicine Master Treatment Plan Services</u> 4.10.20
- ◆ Coronavirus Telemedicine Marital and Family Behavioral Health Counseling 4.10.20
- Coronavirus Telemedicine Crisis Intervention 4.10.20
- ◆ Coronavirus Mobile Clinics and COVID-19 Screenings 4.7.20
- ◆ Coronavirus EIDT/ADDT Nursing 4.7.20
- Coronavirus Autism EPSDT 4.7.20
- Coronavirus PT, OT, ST Assistant Telehealth 4.3.20
- Coronavirus Nurse Practitioners Telehealth 4.3.20
- ◆ COVID-19 Lab Fees 3-26-20
- Coronavirus Behavioral Assistance 3.24.20
- ◆ Coronavirus New Modifier for Supplemental Support Services 3.24.20
- ◆ Coronavirus PT, OT, ST Telehealth 3.24.20
- Coronavirus BH Telehealth 3.20.20
- Coronavirus Physician Telehealth 3.20.20
- Coronavirus Developmental Disability CES Waiver Billing 3.16.20
- ♦ COVID-19 CMS Codes 3.13.20
- Coronavirus Provider Voluntary Self-Report 3.13.20
- Coronavirus 3.12.20

As we execute our plan, we will keep you updated via alerts, our website, and our Facebook page. Please click here for the most up to date information regarding COVID-19.

For Up to Date and Additional Key Information regarding COVID-19:

#### CDC

https://www.cdc.gov/coronavirus/index.html

Arkansas Department of Health <a href="https://www.healthy.arkansas.gov/">https://www.healthy.arkansas.gov/</a>

# **Medical Record Documentation Audits**

Empower Healthcare Solutions is in the process of launching its first Provider Medical Record Documentation Audits. These Medical Record Documentation (MRD) Audits will be conducted with Primary Care Physicians (PCPs) and Behavioral Health Physicians in the Empower network.

These audits are an integral part of Empower's Quality Improvement process, which seeks to improve member care and treatment outcomes. The audits are conducted with the intent of improving the quality of providers' medical recordkeeping and assuring that providers comply with state and federal regulations and other established standards, such as the Empower Provider Manual. [Note: These MRD audits will not review for the medical necessity of services provided.]

# **Checklists for Medical Record Documentation Audits**

An audit checklist that will be utilized for review of the documentation in the member records has been developed for the PCP records and a different checklist for the Behavioral Health Physician records. The Checklists can be found on the Empower website; <a href="https://www.getempowerhealth.com">www.getempowerhealth.com</a>, soon.

The checklists were developed utilizing standards identified in:

- Manual for Empower Healthcare Solutions Providers:
- Arkansas DHS Manuals;
- Federal and state requirements (such as HIPAA and CMS standards; Arkansas Child and Adult Maltreatment Acts);
- NCQA standards, best clinical practices, and Empower Clinical Practice Guidelines; and
- National Accreditation standards

All documentation in the member's medical record for which the identified physician has medical responsibility may be reviewed as part of the audit. For example, if the selected Behavioral Health Physician provides services in an outpatient behavioral health program and is, therefore, medically responsible for all of the member's behavioral healthcare, documentation of all services provided to the member are subject to review (not just the physician's).

(continued on Page 8)



#### **Revised Medical Record Documentation Audit Timeline**

The Timeline for the MRD audit process has been revised. [See revised Timeframes below.]

In mid-December, Providers who have been selected via a random sampling will receive a notification letter telling them that they have been selected to participate in the MRD Audit. The letter will include a copy of the applicable MRD Audit Checklist (based upon provider type) that will be utilized, an explanation of the MRD Audit process, and information regarding record submission. In the week following the mailing of the Notification Letters, Empower will reach out to those providers in order to obtain the contact information for the staff persons who will be responsible for providing requested records to Empower and the method that the provider plans to use to submit records.

At the beginning of January 2021, providers will receive a list of five (5) members whose records will be audited and a list of the requested documentation. Requested records must be submitted to Empower within fourteen (14) calendar days.

Providers may submit or give access to records utilizing several methods: secure email; direct access to the provider's electronic medical records for the identified members; or fax. In addition, Empower is working to establish a Secure File Transfer Protocol option, which will allow providers to upload records to a secure server.

Feedback will be given to each provider whose records have been reviewed, but results from individual provider audits will not be published. Empower will aggregate the results of all record audits and review the data analysis of aggregate findings in order to identify key processes for quality improvement.

Information that is more specific, including FAQ's, will be provided throughout the process via the Empower website, this newsletter, and/or provider trainings. Watch the Empower website for updates.

Medical Record Documentation Audit Activities	Approximate Dates
Provider Information Providers informed of the launch of Medical Record Documentation Audits (MRDAs) and the Audit Checklists via Provider Newsletter, Provider Alert, and Empower Website	October 2020 and Ongoing
Checklists Posted on Website	November 2020
Provider Training Training opportunities for providers, with focus on providers who have been chosen for MR audits	October 21, 26, and 30, 2020 and January 7, 2021
Provider Notification Letter  Letters sent to Providers who have been randomly selected for MRDAs with Checklist and methods of record access/submission	Week of 12/14/2020 through 12/18/2020
Follow-Up Calls to Providers  Phone calls to providers selected for MRDAs (following mailing of Notification Letters) to obtain contact information for provider staff who will be providing records	Week of 12/14/2020 through 12/18/2020
Provider Notification Letter of Selected Member Records  Letters sent to Providers identifying the members whose records will be audited, the list of record documentation to be submitted, and submission process	1/4/2021
Submission of Member Records Due (14 calendar days)	1/18/2021
2 <sup>nd</sup> Request for Missing Records	1/19/2021
Submission of Missing Records Due	1/22/2021
Audits of Submitted Records	January and February 2021
Audit Results Shared	Spring 2021

# **COVID-19 and Other Communicable Diseases: Potential Quality of Care Review**

The Quality Management Department is launching a Potential Quality of Care (QOC) review of Empower providers' policies and practices relative to COVID-19 and other communicable diseases. This review is a part of Empower's Quality Improvement process, which seeks to improve member care and treatment outcomes. Empower Staff and Providers have the responsibility to ensure the health and safety of individuals who are enrolled in the Arkansas Medicaid PASSE program and review concerns that place the health and safety of members at risk.

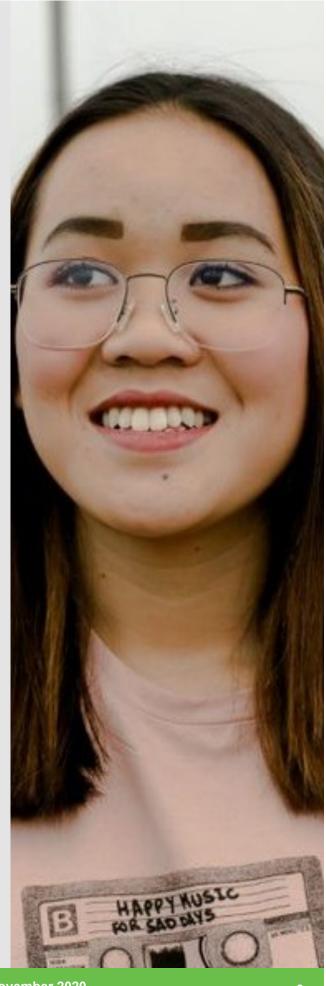
Because of the COVID-19 pandemic, Empower understands that our members are at risk of contracting the disease, as we have seen increasing numbers of our members with diagnoses of COVID-19. As with any communicable disease, our members are placed at risk by many factors, some of which include residing in group homes and facilities and staff coming and going from members' homes and facilities in which they are receiving services.

With this heightened awareness and risk, Empower wants to insure that providers have:

- Policies, procedures, protocols, and mitigation plans to prevent the spread of COVID-19 (and other communicable diseases) when there is a positive identification of provider staff or members
- Policies, procedures, and plans to insure the continuation of treatment services for members when face-to-face contact is not recommended.

For the *initial* phase of this potential QOC review, Empower is sending letters requesting related policies, procedures, and plans to **Psychiatric Residential Treatment Facilities and Intermediate Care Facilities.** The letters will provide the details of the information that providers are asked to submit to Empower.

Empower appreciates the work and efforts made by our providers to ensure the health and safety of our members and your staff! Thank you!





### **Credentialing Reminder**

Full Credentialing is required by Empower Healthcare Solutions and must be completed by January 1, 2021.

# Credentialing for BH and DD Facilities and Independent Practitioners

To start the credentialing process for your facility, please reach out to <a href="mailto:empower.network@empowerhcs.com">empower.network@empowerhcs.com</a>.

To credential for BH and DD Independent Practitioners click <a href="here">here</a> and follow the instructions.

#### **Credentialing for Medical Providers**

To credential or for questions, regarding Credentialing for Medical Providers please contact Annie Daniell at (870) 675-8574 or <a href="mailto:adaniell@accesshealth.services">adaniell@accesshealth.services</a>.

For general questions about the credentialing process please contact Empower Provider Relations at empowerhealthcaresolutionsPR@empowerhcs.com

#### **Resources:**

Stay in the know with these useful links!

#### **Empower Resource Links:**

**Provider Alerts** 

Provider Billing FAQ

**Quick Reference Guide** 

**Clinical Practice Guidelines** 

Provider FAQ

Empower Ethix360

Provider Handbook

#### **Arkansas DHS Resource Links:**

DMS: PASSE

Office of PASSE Ombudsman

**PASSE Information for Providers** 

**Provider Enrollment** 

## **Educational Opportunities**

The following is a list of available trainings offered by Empower Healthcare Solutions:

- Community and Employment Supports (CES) Waiver: The PCSP, Justification for Services, and Things to Know when Submiting for Authorization
- Acute and Psychiatric Residential Treatment
- Community and Employment Supports (CES) Waiver: An expansive overview of services, descriptions, and codes
- Assisting Providers with Independent Assessments at Empower
- Care Coordination Overview
- Person Centered Service Plan
- Incident Reporting for Empower Providers
- Empower Provider Orientation
- InterQual and Medical Necessity Evaluations

- Arkansas InterQual Inpatient Provider Training
- Provider Portal: Prior Authorization and Claims
- Psychiatric Residential Treatment and Intermediate Care Facilities (ICF)
- Inpatient Authorizations: Navigating Identifi and Medical Necessity
- Outpatient Services and Home and Community Based Services
- Personal Care Services
- Overview of Physical Therapy, Occupational Therapy, Speech Therapy, and Day Treatment Services
- Developmental Disabilities Services

To access a training slide deck click <u>here</u> and go to Educational Opportunities.

For more information or to schedule a training for your organization, please contact empowerhealthcaresolutionsPR@empowerhcs.com

## **Upcoming Webinars**

**Provider Orientation**—This webinar will cover Empower related information including provider responsibilities, provider resources, member rights and responsibilities, eligibility, covered services, utilization management, care coordination, claims submission, quality improvement, the Empower portal, and more.

Provider Orientation				
Tuesday, November 17, 2020	10:00 am—11:30 am	Register Here!		
Tuesday, December 15, 2020	10:00 am—11:30 am	Register Here!		

**Medical Record Documentation Audits—**This webinar will cover the 2020 launch of the Empower Quality Medical Record Documentation Audits, including the checklist that will be utilized in the audits and the process and timelines for providers.

Medical Record Documentation Audits				
Thursday, January 7, 2021	1:00 pm—2:00 pm	Register Here!		

### **Important Contact Information**

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**Provider Relations** 

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SIU@beaconhealthoptions.com

**Utilization Management** 

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**Appeals** 

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To visit our website please go to: <a href="https://www.getempowerhealth.com">www.getempowerhealth.com</a>

On our website you will find:

- Clinical Practice Guidelines
- Contracting with Empower
- Cultural Competency Plan
- Forms and Resources
- Incident Reporting
- Provider Alerts
- Provider FAQ
- Provider Billing FAQ
- Provider Handbook
- Provider Portal
- Pharmacy Provider Guideline

Please feel free to share this newsletter.

If you would like to receive the newsletter, provider alerts, or training information please register for the provider distribution list at the following link.

Provider Signup

<u>Division of Medical Services</u>
(DMS)
toll-free numbers:

Beneficiary Eligibility

Beneficiary Coverage 800-482-5431

800-482-8988

Office of PASSE Ombudsman 844-843-7351

