



August 2021

This Issue:

- August is National Immunization Awareness Month
- Update on Organizational Changes
- Medical Record Documentation Audit
- Empower Prior Authorization List
- CC Reminders for IA's
- Provider Alerts
- Avoid Duplicate Claims
- Upcoming Webinars
- Resources
- Educational Opportunities
- Important Contact Information

Empower Healthcare Solutions
P.O. Box 211446
Eagan, MN 55121

Member Services: 866-261-1286 | TTY 711

Provider Services: 855-429-1028

Fax: 888-614-5168

Website: www.getempowerhealth.com

August is National Immunization Awareness Month

August is designated as the National Immunization Month which is an awareness campaign that aims to highlight the importance of immunizations across the different stages of life.

The CDC (Centers for Disease Control and Prevention) has published fact sheets to provide information about vaccine testing, safety, monitoring, and the process for establishing the U.S. Immunization schedule.

These materials are intended to help health care professionals keep up to date on vaccine topics. The sheets may also be distributed to parents wanting in-depth information on these topics after talking to their child's doctor. Most sheets include references and published scientific studies. These sheets can be found [here](#).

According to Provider Resources for Vaccine Conversations with Parents published by the CDC, patients and parents can feel more confident about vaccinating when everyone in the practice shares the same message. From the front desk to the exam room to checkout, everyone plays an important role in supporting vaccination. Adopt these best practices to ensure you never miss an opportunity to vaccinate.

1. Make patients and parents aware of your immunization policy.

When you ensure every patient and parent that visits your practice is aware of your immunization policy, you lay the foundation for effective vaccination recommendations.

2. Make vaccine resources easy to find.

Making immunization information readily available saves time by helping patients and parents get their questions answered before they meet with you.

3. Review each patient's vaccination status and prepare them to receive vaccines.

By assessing vaccination status at every visit, you can avoid missed opportunities to vaccinate and reinforce that vaccinations are important.

4. Make effective recommendations.

Research has shown an effective recommendation from a healthcare professional is the main reason parents decide to vaccinate.

5. Answer questions and address concerns.

Patients and parents are likely to have questions, even if they already plan to vaccinate. By welcoming and answering questions, you help patients and parents feel supported.

6. Implement procedures and policies that help staff support vaccination.

Effective administrative procedures, clear policies, and useful training programs equip your staff to support vaccination and work efficiently.

7. Schedule upcoming vaccinations before the patient leaves the office.

Checkout is a key opportunity to reinforce the importance of vaccination and plan for upcoming vaccines.

8. Remind patients and parents about upcoming vaccination appointments and missed appointments.

Ongoing communication is essential in making sure patients stay on schedule with vaccinations.



COVID-19 Vaccinations

All individuals age 12 years and older are eligible to receive the COVID-19 Vaccine. For more information click [here](#).

According to The Arkansas Department of Health COVID-19 Update, as of July 27, 2021, 10.95% of Arkansas population 12 and up are partially immunized. 40.92% of Arkansas population 12 and up are fully immunized.

Benefits of Getting a COVID-19 Vaccine

The CDC reports that COVID-19 vaccines are safe; they are effective; once you are fully vaccinated, you can start doing more; COVID-19 vaccination is a safer way to help build protection; and none of the COVID-19 vaccines can make you sick with COVID-19.

Go to the CDC website [here](#) to see the benefits of getting the COVID-19 vaccine.

Excerpts: www.cdc.gov/vaccines/hcp/conversations/your-practice.html; www.cdc.gov/vaccines/hcp/conversations/provider-resources-safety-sheets.html; www.healthy.arkansas.gov/programs-services/topics/covid-19-vaccination-plan; <https://experience.arcgis.com/experience/633006d0782bd5113a314f6268a/>; www.cdc.gov/coronavirus/2019-ncov/vaccines/vaccine-benefits.html

Update on Organizational Changes

Empower continues to work diligently towards a seamless organizational transition at the end of this year. As previously stated, there will be virtually no change to many core activities such as claim adjudication and payment processes. Our primary objective is a smooth changeover with no interruption to member and provider services. As always, we greatly appreciate your continued participation in, and support of, Empower Healthcare Solutions.

Medical Record Documentation Audit

During the weeks of July 19 to July 30, 2021, result letters and individual scorecards were sent to all Primary Care and Behavioral Health Providers who were chosen to participate in the 2020 Empower Medical Record Documentation Audit.

Information about the upcoming 2021 Empower Medical Record Documentation Audit will be sent out within the next couple months. Stay tuned!



Empower Prior Authorization List

Empower is excited to announce that we now have a Searchable Prior Authorization list. This tool can be used to check a CBT code and see if it requires a Prior Authorization.

Key Lookup Information:

* Any services related to any type of inpatient admission require authorization.

** Any services rendered by a non-contracted provider require authorization unless related to emergency services.

*** DME codes should follow requirements outlined on the Empower Quick Reference Guide.

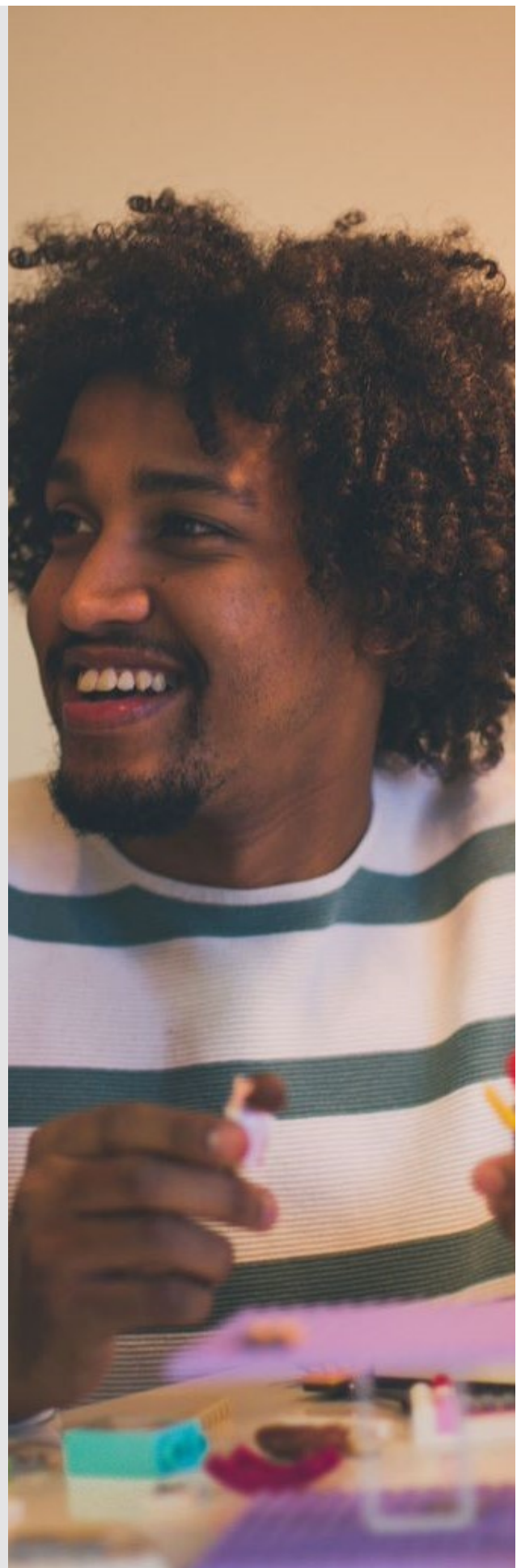
**** Please follow benefit limit guidelines regarding codes requiring an extension of benefit.

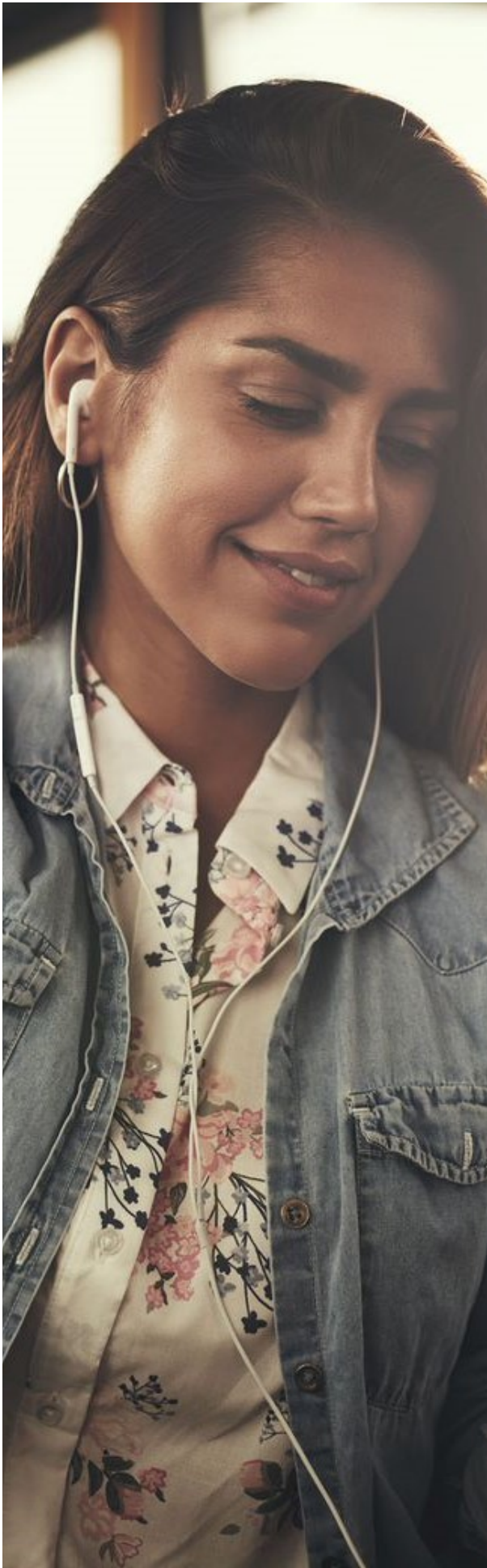
To search for a code: Hit CTRL+F keys on your keyboard then type the code or keyword.

This tool can be found on our Website, www.getempowerhealth.com on the provider's home page under "In the Spotlight"; under the drop down for providers; and on the Forms & Resources Page under Prior Authorization Resources.

Care Coordination Reminders for Independent Assessments (IA's)

- Care Coordinators (CC) assist with scheduling member appointments for the Independent Assessment with Optum
 - ◇ Contact the CC to assist with scheduling the IA with Optum
 - ◇ You can reach the CC by calling 866-261-1286 or emailing CareCoordination@empowerhcs.com
 - ◇ To assist the member with scheduling the IA, contact Optum at 1-844-809-9538
- Members must participate and complete the Independent Assessment with Optum to remain PASSE eligible
 - ◇ Annually for BH Members





Care Coordination Reminders (continued from Page 4)

- Members with incomplete assessments have an updated expiration date of 12/31/21. This is due to the Federal Public Health Emergency that expires on 12/31/21.
 - ◇ Members will need to complete the IA prior to 12/31/21, or risk losing PASSE eligibility and their PASSE benefits that includes the member's Tier 2 and Tier 3 services

Provider Alerts

7/8/21—Identifi Portal Updates

The Empower Identifi portal has recently undergone some updates. Care Notes can be used to communicate pertinent information regarding the services being requested. Care Notes will be required when creating a request for an authorization or adding a new review line from the Identifi portal. A message will display, "Please provide any additional information in a care note and indicate if additional clinical records for this request will be faxed to the UM department".

Please note Care Notes cannot be voided by Identifi users. If a provider has the need for Care Notes to be voided they can add a new Care Note to request a void or contact the Utilization Management team for assistance.

Add Outpatient/Home Request



Step 1
Enter Request Details



Step 2
Add Outpatient/Home Review(s)



Step 3
Enter Supporting Documentation

Add Care Note (Required)

ACTIVITY DATE *

06/01/2021 01:37:44 pm

ACTIVITY CATEGORY *

Select Activity Category

ACTIVITY ACTION *

Select Activity Action

ACTIVITY WITH

Select Activity with

RESPONSE

Select response

TIME SPENT ON ACTIVITY

hour(s) minute(s)

CARE NOTES

Signature

⚠ Please provide any additional information in a care note and indicate if additional clinical records for this request will be faxed to the UM department

Upload Received Document (Optional)

Provider Alerts (continued from Page 5)

To ensure efficient communication with provider, phone and fax numbers will now be mandatory fields on authorization requests. The authorization types and providers impacted by this update are listed below:

- Inpatient Auth Request: - Requesting Provider, Facility, Attending Provider
- Outpatient Auth Request: - Requesting Provider, Facility/Vendor, Rendering Provider
- DME Auth Request: - Requesting Provider, Vendor

LOUIS LOUIS IV LOUIS II THORACIC SURGERY (CARDIOTHORACIC VASCULAR SURGERY) NP11194818387			
ADDRESS 1 * 5200 BURNET AVE			
ADDRESS 2			
CITY *	STATE *	ZIP	
CINCINNATI	OHio	45229	
TIN *	PHONE NUMBER *	FAX NUMBER *	
211405015			

7/30/21—Empower Prior Authorization List

Empower's searchable Prior Authorization list is now available on the Empower website. It can be found here <https://s18637.pcdn.co/wp-content/uploads/sites/17/Empower-Prior-Authorization-List.xlsx>.

Providers can also find it at <http://www.getempowerhealth.com>



The Prior Authorization list will open in a search Excel Format. Please note the following Key Lookup Information:

1. Any services related to any type of inpatient admission require authorization
2. Any services rendered by a non-contracted provider require authorization unless related to emergency services
3. DME codes should follow requirements outlined on the Empower Quick Reference Guide
4. Please follow benefit limit guidelines regarding codes requiring an extension of benefit



7/30/21—Empower Provider Handbook— Now Available

Empower's Provider Handbook has been updated to keep you and your staff informed of operational policies and procedures. The Empower Provider Handbook is available on the Empower website at <http://www.getempowerhealth.com> under the Provider Tab—Provider Handbook. We recommend bookmarking this page.

8/2/21— Update: EVV Previously Announced Billing Cutoff Date of 8/1/21 No Longer in Effect

The previously announced billing cutoff date of 8/1/21 is no longer in effect. At this time providers are able to continue billing through the Empower Portal for Personal Care services, however, Empower encourages providers to begin billing through HHAeXchange (HHAX) as soon as you are able as to not affect payment processing.

In compliance with the 21st Century Cures Act Mandate, Empower Personal Care visits must be electronically verified for:

- Type of service
- Date of service
- Location of service
- Individual receiving the service
- Caregiver or aid performing the service
- Time service begins and ends
- Claim submission for personal care services

If you are using your own third party EVV system, please complete the [Provider Portal Questionnaire](#) and reach out to edisupport@hhaexchange.com as soon as possible to complete your integration. Details about file specifications and integration steps are at <https://link.zixcentral.com/u/1b498d6a/woKYvNk-6xGbalSHYVsSiw?u=https%3A%2F%2Fhhaexchange.com%2Far%2F> on the "EDI Process" tab.

The Quick Visit Entry function is to enter visits into HHAX for generating claims and to comply with the mandate. Please refer to the [Quick Visit Entry Process Guide](#) for more details.

If you need assistance logging in or have any questions about the provider portal, please contact support@hhaexchange.com.



Avoid Duplicate Claims

Empower is required by state and federal regulations to capture specific data regarding services rendered to its enrollees. Providers must adhere to all billing requirements to ensure the timely processing of claims. When required data elements are missing or invalid, claim will be rejected or denied by Empower for correction and resubmission. Duplicate procedures are defined as procedures billed more than once on the same date of service.

Claims Questions

Before submitting a duplicate claims, if you have questions regarding a claim you may contact Empower Provider Services at 855-429-1028 between 8:00 am and 5:00 pm CT to address the issue or question. Always record your reference number or ticket numbers and the representative's name. If a resolution cannot be reached, complete the [Claim Inquiry form](#) and reach out to your provider relations manager for assistance at EmpowerHealthcareSolutionsPR@Empowerhcs.com. Include all relevant documentation related to the claim inquiry to ensure expedited response.

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, August 17, 2021	10:00 am—11:30 am	Register Here!

ACES Awareness Presentation—This presentation will provide an overview of the Adverse Childhood Experiences (ACEs) tool and the importance of recognizing how adverse childhood experiences and trauma impact overall health and outcomes for adults. Invitations will be sent out by AFMC who will be presenting this webinar. Recommended audience is Clinicians, Case Managers, Mental Health Professionals, Clinical Directors and Nurses for Psychiatric Residential Treatment Facilities.

ACES Awareness Presentation		
Thursday, August 26, 2021	11:00 am—12:00 pm	Invitations for this training date will be sent by AFMC
Thursday, November 18, 2021	11:00 am—12:00 pm	Invitations for this training date will be sent by AFMC
Thursday, February 24, 2022	11:00 am—12:00 pm	Invitations for this training date will be sent by AFMC

Resources:

Stay in the know with these useful links!

Empower Resource Links:

[Electronic Visit Verification](#)

[Provider Alerts](#)

[Provider Billing FAQ](#)

[Quick Reference Guide](#)

[Clinical Practice Guidelines](#)

[Provider FAQ](#)

[Empower Ethix360](#)

[Provider Handbook](#)

[Provider Quality Improvement Activities](#)

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:

- Cultural Competency
- Community and Employment Supports (CES) Waiver: The PCSP, Justification for Services, and Things to Know when Submitting 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 [here](#) and go to Educational Opportunities.

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

Important Contact Information

Provider Services

855-429-1028

Member Services

866-261-1286

Empower Chief Executive Officer

Mitch Morris

Mitch.Morris@empowerarkansas.com

Empower SVP Health Management Services

Sylvia Sherrill

Cell: 501-539-1198

Sylvia.Sherrill@empowerarkansas.com

Empower Chief Compliance & Legal Officer

Suzanne Tipton

Office: 501-539-2688

Suzanne.Tipton@empowerarkansas.com

Vice President Client Partnerships

Melissa Ortega

Office: 501-707-0919

Melissa.Ortega@empowerhcs.com

Clinical Director, BH Director

Jamie Ables

Office: 501-707-0961

Jamie.Ables@empowerhcs.com

Clinical Director, Developmental Disabilities

Harold Watts

Office: 501-707-0925

Harold.Watts@empowerhcs.com

Clinical Director, UM

LaTosha Brown

Office: 501-707-0969

LaTosha.Brown@empowerhcs.com

Manager, Provider Relations

Shelly Rhodes

Cell: 501-813-9031

Shelly.Rhodes@empowerhcs.com

Provider Relations Managers

Janna Brown

Cell: 501-813-9033

Janna.Brown@empowerhcs.com

Debbie McGilton

Cell: 501-353-5796

Debbie.Mcgilton@empowerhcs.com

Jamila Phillips

Cell: 501-366-2906

Jamila.Phillips@empowerhcs.com

Care Coordination

carecoordination@empowerhcs.com

Provider Complaints and Grievances

providercomplaints@empowerhcs.com

Contracting

empower.network@empowerhcs.com

Incident Reporting

incident.reporting@empowerhcs.com

Provider Relations

empowerhealthcaresolutionsPR@empowerhcs.com

Special Investigations Unit

SIU@beaconhealthoptions.com

Utilization Management

utilizationmanagement@empowerhcs.com

Appeals

AR_Appeals@empowerhcs.com

Improvement Program for PCPs

EmpowerPIP@Empowerhcs.com

Quality Incentive Program for Medical/Surgical Hospitals

EmpowerQIP@Empowerhcs.com



To visit our website please go to:

www.getempowerhealth.com

On our website you will find:

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

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](#)

Division of Medical Services (DMS)

toll-free numbers:

Beneficiary Eligibility
800-482-8988

Beneficiary Coverage
800-482-5431

Office of PASSE Ombudsman
844-843-7351