

January 2021

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COVID-19 Vaccinations

According to the Centers for Disease Control and Prevention (CDC), vaccines for COVID-19 are becoming available in the United States.

Safety is a top priority. The U.S. vaccine safety system ensures that all vaccines are as safe as possible. After a vaccine is authorized or approved for use, many vaccine safety monitoring systems watch for adverse events (possible side effects). This continued monitoring can pick up on adverse events that may not have been seen in clinical trials. If an unexpected adverse event is seen, experts quickly study it further to assess whether it is a true safety concern. Experts then decide whether changes are needed in U.S. vaccine recommendations. This monitoring is critical to help ensure that the benefits continue to outweigh the risks for people who receive vaccines.

Who Gets Vaccinated First?

Healthcare personnel and residents of long-term care facilities should be offered the first doses of COVID-19 vaccines. Healthcare personnel include all paid and unpaid people who serve in healthcare settings and have potential for direct or indirect exposure to patients or infectious materials.



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Residents of long-term care facilities are defined as adults who live in facilities that provide a variety of services, including medical and personal care, to people who are unable to live independently.

Benefits of Getting a COVID-19 Vaccine

The CDC understands that some people may be concerned about getting vaccinated once a COVID-19 vaccine is available in the United States. While these vaccines are being developed as quickly as possible, routine processes and procedures remain in place to ensure the safety of any vaccine that is authorized or approved for use. Safety is a top priority, and there are many reasons to get vaccinated.

8 Things to Know about the U.S. COVID-19 Vaccination Program

- 1) The safety of COVID-19 vaccines is a top priority.
- 2) COVID-19 vaccination will help protect you from getting COVID-19. Two doses are needed.
- 3) Right now, CDC recommends COVID-19 vaccine be offered to healthcare personnel and residents of long-term care facilities.
- 4) There is currently a limited supply of COVID-19 vaccine in the United States, but supply will increase in the weeks and months to come.
- 5) After COVID-19 vaccination, you may have some side effects. This is a normal sign that your body is building protection.
- 6) Cost is not an obstacle to getting vaccinated against COVID-19.
- 7) The first COVID-19 vaccine is being used under an Emergency Use Authorization (EUA) from the U.S. Food and Drug Administration (FDA). Many other vaccines are still being developed and tested.
- 8) COVID-19 vaccines are one of many important tools to help us stop this pandemic.

For more information on these 8 things to know click [here](#).

The Centers for Disease Control and Prevention has a webpage with helpful information on several aspects of this disease. The website can be reached by clicking <https://www.cdc.gov/coronavirus/2019-ncov/your-health/index.html>.

January 2021—National Mental Wellness Month

NAMI (National Alliance on Mental Illness) has published a COVID-19 Resource and Information Guide on their website.

COVID-19 has resulted in an unprecedented crisis that affects not only our physical health and daily lives, but also our mental health. To address these needs, NAMI is committed to providing credible information and resources to help people navigate through this crisis. In this guide, you will find answers to questions ranging from how to manage anxiety during this difficult time, to how to access medication while in quarantine, to how to deal with the loss of a loved one to COVID-19.

Throughout their 40-year history, NAMI has fought stigma and discrimination that marginalizes people with mental illness and poses barriers to their well-being. Today, NAMI continues that proud tradition and stand in solidarity with those communities disproportionately affected by COVID-19 and Asian-American communities whose members have been subjected to unjust hostility in the wake of the pandemic.

In the pursuit of their mission, NAMI will continue disseminating fact-based information and dispelling myths. And most importantly — They remain committed to serving all.

A link to this Resource and Information Guide can be found by clicking [here](#).

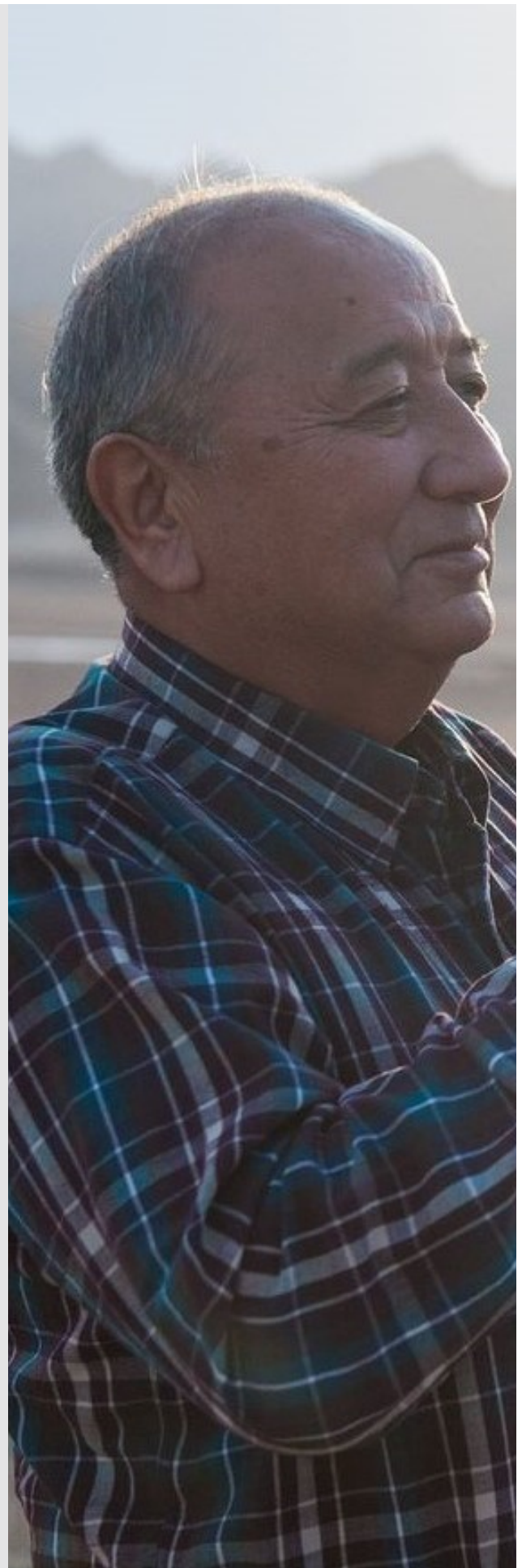
Excerpt: <https://www.nami.org/Support-Education/NAMI-HelpLine/COVID-19-Information-and-Resources>;

Prior Authorizations Honored for New Empower Members

For newly eligible members, Empower will honor all prior authorizations for the first 90 days or until the end of the authorization period. Please attach previous authorization letters in the portal for services that would need to be honored by Empower after the member transitions from another PASSE or from the state plan.

Reminder About Benefit Limits

Benefit limits will reset starting 1/1/21 for services that have available limits. Benefits must be exhausted prior to requesting an extension of benefits. Services that require a prior authorization must continue to be requested prior to rendering the service.





Medical Record Documentation Audits—Moved to February 2021

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

In accordance with the approximate timelines for this process, letters to the 10 Primary Care Physicians and the 10 Behavioral Health Physicians were mailed in December, followed by contacts with the providers by the Quality Department Staff. Letters requesting members' medical records for the audits are being sent to those identified providers in February with the expectation that records will be submitted to Empower within 14 calendar days of receipt of the request for records. The aggregated data reflecting the results of the audits will be shared this spring.

We are appreciative of the providers and their staff who are participating in and have responded in a timely manner to the requests made by the Quality Department in order to conduct these Medical Record Documentation Audits.

The 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.

Electronic Visit Verification (EVV) went into Effect with Empower December 4, 2020

Empower Healthcare Solutions (Empower) has partnered with HHAeXchange to facilitate Electronic Visit Verification (EVV) for our Personal Care providers. This is to fulfill a federal mandate effective January 1, 2021 that all Personal Care providers must submit EVV when billing for Personal Care health services.

***NOTE:** If providers have chosen to use a third party vendor, be sure you have completed the configuration questionnaire found on the HHAX website [here](#).

For more information on EVV and Claims Billing for Personal Care Providers [visit HHAeXchange](#) for FAQ's, info sessions, trainings, and integration.

Care Coordination—How We Can Help

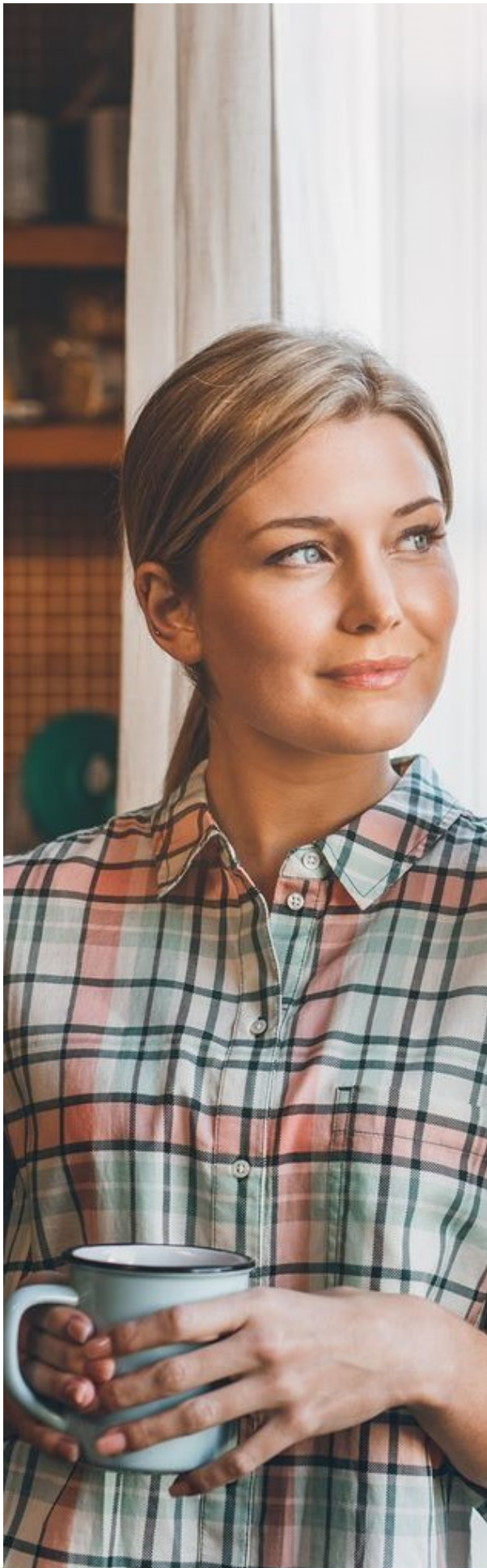
Care Coordinators help members with many different things. If a member is having difficulties with any of the following, please reach out to that member's Care Coordinator.

- ◆ Teach them more about their health needs
- ◆ Help with any needs they may have in their day to day life, such as helping them eat healthy food and exercise
- ◆ Work with their providers that give them medicine
- ◆ Work with their providers to coordinate care
- ◆ Make a plan of care that has all of their services listed
- ◆ Help find them services
- ◆ Help them find supports in their family and community
- ◆ Help them if they are in trouble or in crisis
- ◆ Provide guidance and support to the member
- ◆ Ensure that the member regularly follows up for prevention, wellness, and sick visits
- ◆ Ensure all members have active coverage
- ◆ Contact the member within 7 days of an ER, Urgent Care, or Hospital Admission
- ◆ Assist the member with discharge planning, prescription assistance, follow up appointments with their PCP and Specialty Providers.

Care Coordinators help with paperwork like Medicaid Renewals, ICF/ID Renewals, SNAP applications, SSI applications, Waiver packets, Group Home applications, HDC respite requests, provider research and transitions to a new provider.

For information on how to find a member's Care Coordinator or with questions reach out to the CareCoordination@empowerhcs.com email or call 866-261-1286.





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](#)
- ◆ [Coronavirus - Telemedicine Master Treatment Plan Services 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](#)

For earlier released Coronavirus Provider Alerts see Empowers website at the following link. <https://www.getempowerhealth.com/coronavirus/>

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

<https://www.healthy.arkansas.gov/>

Provider Alerts

Coronavirus: COVID-19 Vaccination Rates and Billing Codes— December 17, 2020

Effective December 8, 2020, Empower will be following the DMS COVID-19 Vaccination Rates and Billing Codes consistent with CMS's anticipated coverage of vaccination administration.

Empower will cover COVID-19 vaccination provided by:

- Physicians
- Nurse Practitioners
- Nurse Midwives
- Federal Qualified Health Centers
- Hospitals (outpatient)
- Pharmacies who are enrolled to provide vaccines
- Rural Health Clinics
- Arkansas Department of Health

The following codes and rates will be available for billing once that vaccine is distributed.

Code	Short Description	Labeler Name	Fee
91300	SARSCOV2 VAC 30MCG/0.3ML IM	Pfizer	\$.01
0001A	ADM SARSCOV2	Pfizer	\$16.94
0002A	ADM SARSCOV2	Pfizer	\$28.39
91301	SARSCOV2 VAC	Moderna	\$.01
0011A	ADM SARSCOV2	Moderma	\$16.94
0012A	ADM SARSCOV2	Moderna	\$28.39

To see a summary of all COVID-19 provider alerts for Empower, including billing information: https://docs.google.com/spreadsheets/d/1UhNQiFWv1dgg6C74x5tw5U2zMt1euaNlk2zAO2vxl_Y/edit?usp=sharing



Coronavirus: Extension of Benefit for Acute Crisis Units —December 17, 2020

Effective December 3, 2020, Empower will be following the DMS Extension of Benefit for Acute Crisis Units during the COVID-19 Public Health Emergency, suspending the Acute Crisis Unit benefit limits of 96 hours per encounter, one encounter per month, and 6 encounters per state fiscal year.

To see the DMS memorandum click here:

https://humanservices.arkansas.gov/images/uploads/resources/Memorandum_DMS-45_Extension_of_Benefit_Acute_Crisis_Unit.Final_.docx

The allowable code for this rule suspension is:

- Acute Crisis Unit
 - ◆ H0018 U4

Prior Authorization and Extension of Benefits — November 24, 2020

Prior Authorizations:

Some services require a prior authorization from Empower for reimbursement to be issued. Please see Empower's [Quick Reference Guide for Key Contact Information and Prior Authorization](#) for a list of services that require a Prior Authorization.

A Prior Authorization is based on Medical Necessity and should be requested before a service is provided. Requests for prior authorization will not be backdated. It is up to the provider to submit documentation to support Medical Necessity.

Extension of Benefits:

Some services have yearly benefit limits available before an Extension of Benefits request is required. Please see Prior Authorization Resources on Empower's [Forms and Resources](#) page for benefit limits. Extension of benefits is based on Medical Necessity and can be requested up to 365 days after the date of service. It is up to the provider to submit documentation to support Medical Necessity.

*** Please Note:** If a service has a weekly maximum and a provider needs to exceed that maximum, a **Prior Authorization** review of Medical Necessity will be required prior to service delivery; even if the service allows an extension of benefits for the annual maximum.

Waiver of Prior Authorization for Post-Acute Transfers — December 17, 2020

Beginning December 4, 2020, Empower Healthcare Solutions no longer requires Prior Authorizations (PA) for the first 14 days for members transferring from hospitals to post-acute facilities, skilled nursing facilities, and acute inpatient rehabilitation facilities. Additional days will require a PA on or prior to the 14th day. This follows the Arkansas Insurance Department recommendation in an effort to eliminate unnecessary delays for members related to COVID hospitalizations. This will remain in place until further notice or until the public health emergency ends.

Annual Benefit Limits for Waiver Codes — January 7, 2021

Benefit limits for CES waiver services remain effective and are in place for calendar year 2021. The following services have a combined annual benefit limit of \$3690 per calendar year:

- Supplemental Support Services (T2020/UA),
- Specialized Medical Supplies (T2028), and
- Community Transition Services (T2020 UA/U1).

A Prior Authorization (PA) has to be approved before services can be rendered and paid by Empower. Once this benefit limit is exhausted an extension of benefits (EOB) is not available.

Please note that medical supplies and products covered under the state plan should not be submitted under waiver. Please see Medicaid regulations for DME as well as Empower's Provider Alert <https://s18637.pcdn.co/wp-content/uploads/sites/17/Provider-Alert-02-07-20-DME-Codes-Ending-in-99.pdf> related to expanded miscellaneous codes available under DME. Please also reference the Medicaid manual related to pharmacy coverage.

Benefit limits for other CES Waiver services can be found at <https://s18637.pcdn.co/wp-content/uploads/sites/17/Waiver-Codes-for-2020.pdf>

Resources:

Stay in the know with these useful links!

Empower Resource Links:

[Evv](#)

[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](#)



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 empower.network@empowerhcs.com.

To credential for BH and DD Independent Practitioners click [here](#) 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 adaniell@accesshealth.services.

For general questions about the credentialing process please contact Empower Provider Relations at 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, January 19, 2021	10:00 am—11:30 am	Register Here!
Tuesday, February 16, 2021	10:00 am—11:30 am	Register Here!
Tuesday, March 16, 2021	10:00 am—11:30 am	Register Here!
Tuesday, April 20, 2021	10:00 am—11:30 am	Register Here!
Tuesday, May 18, 2021	10:00 am—11:30 am	Register Here!
Tuesday, June 15, 2021	10:00 am—11:30 am	Register Here!

Empower Quality Incentive Program for Medical and Surgical Hospitals —

Please join us for Empowers Quality Incentive Program (QIP) for Medical and Surgical Hospitals. This webinar will cover the quality indicators Empower will use to incentivize and reward providers for providing quality care.

Empower Quality Incentive Program for Medical and Surgical Hospitals		
Friday, January 15, 2021	9:00 am—10:00 am	Register Here!

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 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

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Provider Relations empowerhealthcaresolutionsPR@empowerhcs.com	
Special Investigations Unit SIU@beaconhealthoptions.com	
Utilization Management utilizationmanagement@empowerhcs.com	
Appeals AR_Appeals@empowerhcs.com	
Improvement Program for PCP's 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