

Thank You

Thank you for joining us, we will get started in just a few minutes to allow others to call in.

Please make sure your line is muted.

To receive the slides shared today please email
COProviderRelations@BeaconHealthOptions.com



January RAE Roundtable

January 15, 2022

What is the RAE?

The RAEs are responsible for the health and cost outcomes for members in their region, as well as:

- Developing a network of Primary Care Medical Providers (PCMPs) to serve as medical home providers for their members,
- Developing a contracted statewide network of behavioral health providers,
- Administering the Department's capitated behavioral health benefit,
- Onboarding and activating members,
- Promoting the enrolled population's health and functioning, and
- Coordinating care across disparate providers, social, educational, justice, and other community agencies to address complex member needs that span multiple agencies and jurisdictions.

NORTHEAST HEALTH PARTNERS, LLC

FQHCs:



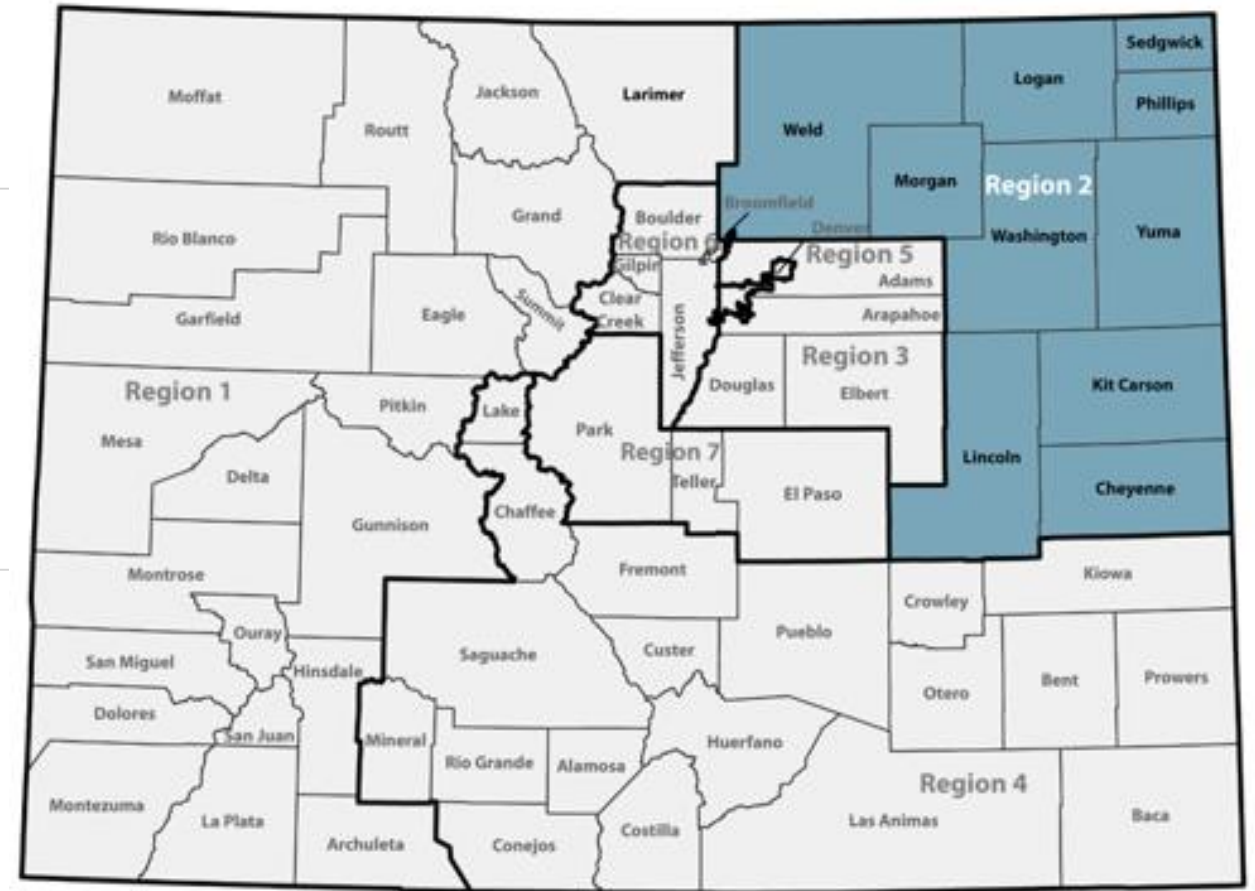
CMHCs:

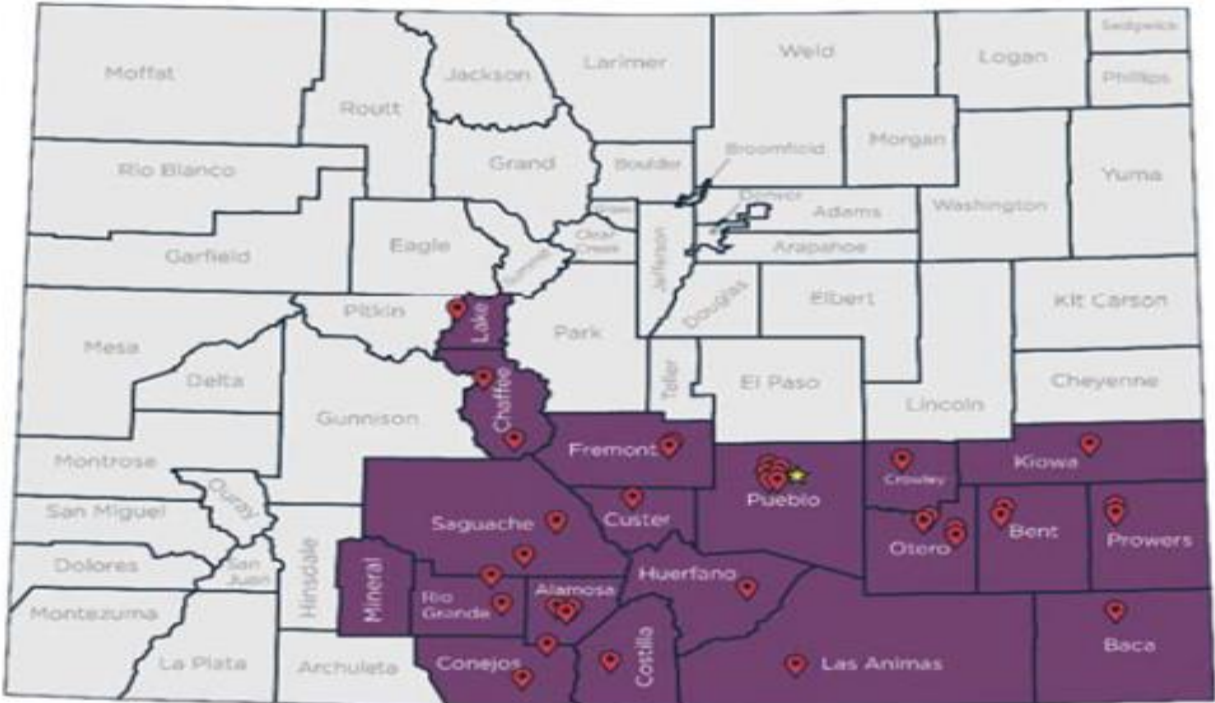


Administrative Service Organization:



Northeast Health Partners





What is a RAE Roundtable?

This is a monthly meeting where we share updates, provide information, training, and welcome your questions and discussion.

Feel free to share this invitation with colleagues who may also have an interest in attending.

Chapter

01

Welcome and Introductions

Thank you for joining
the RAE Roundtable



January 14, 2022

Agenda

- | | | | |
|-----------|---------------------------|-----------|--|
| 01 | Welcome & Introductions | 02 | Peer Specialist Training |
| 03 | Payment Standards | 04 | Access to Care Standards |
| 05 | Outpatient Authorizations | 06 | Availity |
| 07 | Updates | 08 | Reminders, Questions & Open Discussion |

Chapter

02

Peer Specialist Training



January 14, 2022

Chapter

03

Payment Standards

- Overpayments/Recoup
- No Balance Billing

Overpayments/ Recoup

Providers should routinely review claims and payments to assure that they have not received any overpayments. Beacon will notify providers of overpayments identified by Beacon, clients or government agencies.

Overpayments include, but are not limited to:

- Claims allowed/paid greater than billed
- Claims paid in error
- Inpatient claim charges equal to the allowed amounts
- Duplicate Payments
- Payments made for individuals whose benefit coverage is/was terminated
- Payments made in excess of amounts due in instances of third party liability and/or coordination of benefits

Subject to the terms of the provider agreement and applicable state and/or federal regulations, Beacon or its designee will pursue recovery of overpayments through:

- Adjustment of the claim or claims in question creating a negative balance reflected on the Provider Summary Voucher (claims remittance)
- Written notice of the overpayment and request for repayment of the claims identified as overpaid

Failure to respond to any written notice and/or request for repayment of identified overpayments in the time period identified in the notice/request is deemed approval and agreement with the overpayment; thereafter, Beacon will adjust the claim or claims in question creating a negative balance.

Any negative balance created will be offset against future claims payments until the negative balance is zeroed out and the full amount the overpayment is recovered.

If the *provider* disagrees with an overpayment recovery and/or request for re- payment of an overpayment, the *provider* may request Beacon to review in writing- the written request for review needs to be received by Beacon on or before the date identified in the notice of overpayment recovery or request for re-payment of an overpayment.

Please attach a copy of your written demand or request letter to your request for review and include the following information:

- *provider/participating provider's* name
- identification number and contact information
- *member* name, and number
- a clear identification of the disputed items to include the date of service and the reason the disputed overpayments are being contested.

Overpayment Recovery should be mailed to:

Beacon Health Options
1330 Amerigroup Way
Virginia Beach, VA 23464

No Balance Billing

Participating providers may not balance bill members for covered services rendered.

This means that the participating provider may not bill, charge or seek reimbursement or a deposit, from the member for covered services except for applicable member expenses, and non-covered services.

Participating providers are required to comply with provisions of Beacon's code of conduct where applicable, including, without limitation, cooperation with claims and billing procedures and participation in training and education.

Chapter

04

Access to Care Standards

Access to Care Standards

Emergency:	By phone within fifteen (15) minutes after the initial contact, including TTY accessibility; in person within one (1) hour of contact in Urban and suburban areas, in person within two (2) hours after contact in Rural and Frontier areas.
Urgent:	Within twenty-four (24) hours after the initial identification of need.
Outpatient Follow Up Appointments:	Within seven (7) days after discharge from a hospitalization
Non-urgent, Symptomatic Behavioral Health Services:	Within seven (7) days after the member's request

- **The RAE will not place Members on wait lists for initial routine service requests.**

Waiting Room Times

- A Health First Colorado member who arrives on time for their scheduled appointment shall wait no longer than fifteen (15) minutes to begin their scheduled appointment. If the appointment does not begin within fifteen (15) minutes, the member shall be offered the option of rescheduling for the next available appointment. Members shall be notified of the option to reschedule through a posted notice in the waiting area or by having the wait time policy reviewed with the member at the initiation of treatment.
- Members who were scheduled for prescriber services should be provided an appointment date that does not cause a delay or gap in their prescribed medication regimen. Members indicating urgent or emergent concerns should be provided an appointment that meets the access standards for urgent/emergency requests.

Practice Hours

Hours of Operation: Providers who serve Health First Colorado members shall offer hours of operation that are no less than the hours of operation offered to commercial enrollees. Beacon's Policy and Procedure Manual for Providers states provider operation shall include coverage from 8 a.m. to 5 p.m. Monday through Friday and emergency coverage 24 hours a day, seven (7) days a week.

Extended Hours of Operation: Extended Hours of Operation and covered service coverage must be provided at least two (2) days per week at clinic treatment sites, which should include a combination of additional morning, evening or weekend hours, to accommodate members who are unable to attend appointments during standard business hours.

Evening and/or Weekend Support Services: Members and families should have access to clinical staff over evenings and weekends, not just an answering service or referral service staff

Out of Office Coverage

Participating providers should provide notification of extended leave by:

- Contacting their regional provider relations team via email (coproviderrelations@beaconhealthoptions.com). OR
- The Beacon National Provider Services Line (1-800-397-1630) to inform Beacon of any unavailability or absence.
- Upon return, participating providers should contact provider relations

Chapter

05

Outpatient Authorizations

Reminder

Updates – Outpatient Authorization Requirements

Services up to session 25 do not require an authorization.
Sessions 26+ require an authorization.

Reminder! Sessions are counted fiscal year (7/1 – 6/30)

Any authorizations you had for members expired 6/30/2021 & the new count began July 1, 2021.

Chapter

06

Availity

Availity Essentials

Prepare for the upcoming transition to Availity Essentials

The Availity Essentials Portal is a secure claims portal where providers can check eligibility and benefits, manage claims and complete other secure administrative tasks for Beacon. Beacon is partnering with Availity Essentials to help eliminate the need for paperwork and phone calls.

The Availity Essentials portal (www.availity.com) is an online, multi-payer portal that gives providers, hospitals and other healthcare professionals access to multiple payer information with your own secure user ID and password. You can find many important resources on the Availity Essentials Portal to assist with your claims processing needs, including but not limited to: eligibility and benefits inquiries, claims status inquiries and submissions.

Prepare for the upcoming transition to Availity Essentials

On March 1, 2022, [Availity Essentials](#) will become the preferred multi-payer portal of choice for submitting the following transactions to Beacon Health Options (“Beacon”):

- ☐ **Claim Submissions** (Direct Data Entry Professional and Facility Claims) applications or EDI using the Availity EDI Gateway
- ☐ Eligibility & Benefits
- ☐ **Claim Status**

In mid-December 2021, you should have received an e-communication from Beacon that contained two documents: a cover letter and FAQ document. The FAQ document, which is included in this email for reference, provide important information and resources about the upcoming transition to Availity Essentials. Please review the FAQ document carefully.

Availity Essentials will offer live training sessions for Beacon providers in early 2022. We will communicate training dates to you via email in late January 2022.

Prepare for the upcoming transition to Availity Essentials

For additional resources, please visit the [Availity Essentials Provider Resources](#) page.

If you have additional questions about the transition, please contact Beacon's National Provider Services Line at 1-800-397-1630 between 8 a.m. and 8 p.m. ET, Monday through Friday.

If you have questions specific to Availity Essentials, contact Availity Client Services at 1-800-282-4548, 8 a.m. to 8 p.m. ET, Monday through Friday.

Availity Essentials Resources

If you need more registration help, check out these online resources:

Register and Get Started with Availity Essentials' Online Portal:

https://apps.availity.com/availability/Demos/LP_AP_GetStarted/index.html#/

A step-by-step guide with easy-to-follow screenshots to assist with the registration process:

https://apps.availity.com/availability/Demos/Availity_Portal_Registration.pdf

Availity Essentials website: <https://www.availity.com/> *Information You Will Find Here:* Overview of the type of services provided, training and education **Availity Essentials Provider Portal:**

<https://apps.availity.com/availability/web/public.elegant.login> *Information You Will Find Here:* Eligibility and benefits, claims status tracking, reporting and dashboards

Availity Essentials Resources

Availity Essentials Reference Guide for New Users:

https://www.availity.com/documents/Welcome_New_User.pdf

Information You Will Find Here: A list of action items to help you get started with your new Availity Essentials account

EDI Welcome App: <https://apps.availity.com/web/welcome/#/>

Information You Will Find Here: Information on how to submit EDI transactions in the system and how to sign up for Availity Essentials EDI Clearinghouse

Availity Essentials Training Resources: <https://www.availity.com/training-and-education>

Information You Will Find Here: Tools and topics that are relevant to providers, including eligibility, claims, and compliance

Availity Essentials Training Microsite:

https://apps.availity.com/availability/Demos/LP_AP_GetStarted/index.html#/

Chapter

04

Updates

- *New Coding Manual*
- *Telehealth 02 and 10
Place of Service*
- *SUD Provider Manual*

New Uniform Services Coding Standards

Effective January 1, 2022 the Uniform Services Coding Manual updated.

Please access the link below for the most current version & review the full revision document:

<https://hcpf.colorado.gov/accountable-care-collaborative-phase-ii-provider-and-stakeholder-resource-center>

Recap of impactful changes:

- ✓ Merged OBH and Medicaid Coding pages to create one (1) page for each code
- ✓ Created an OBH –only Coding Page Section at the end of the merged pages
- ✓ Moved the SUD Benefit Pages into alphanumeric order within the coding manual
- ✓ Added POS (Place Of Service) 10 to the POS list and noted in the Telemedicine guidance section
- ✓ Added a definition of Medical Necessity in Section II

Telehealth Place of Service (POS) 02 and 10

Place of Service (POS) Code	Place of Service Name	Place of Service Description
02	Telehealth Provided Other than in the member's Home	Patient is not located in their home when receiving health services or health related services through telecommunication technology.
10	Telehealth Provided in the member's Home	Patient is located in their home when receiving health services or health related services through telecommunication technology.

SUD Provider Manual

*Reminder

If you are an SUD provider, there is an SUD Provider Manual that can be found on the RAE websites at:

[Substance Use Disorder Expanded Benefit | Northeast Health Partners](#)
[Substance Use Disorder Expanded Benefit | Health Colorado](#)



- › SUD Initial Service Authorization Request Form
- › SUD Expanded Benefit Toolkit
- › SUD Expanded Benefit FAQ
- › HCPF SUD Expanded Benefit Web Page
- › Stay Informed with SUD updates from HCPF
- › SUD Provider Manual – July 2021



- › SUD Initial Service Authorization Request Form
- › SUD Expanded Benefit Toolkit
- › SUD Expanded Benefit FAQ
- › HCPF SUD Expanded Benefit Web Page
- › Stay Informed with SUD updates from HCPF
- › SUD Provider Manual – July 2021



Chapter

05

Reminders, Questions & Open Discussion

Stay Up To Date

Every 2 weeks we provide a Newsletter including upcoming webinars, events, updates, and resources.

Be sure to check out the Inspire Wellness newsletter!!

It's easy to join our mailing list!

Just send your email address
by text message:

Text
BEACONHEALTH
to **22828** to get started.

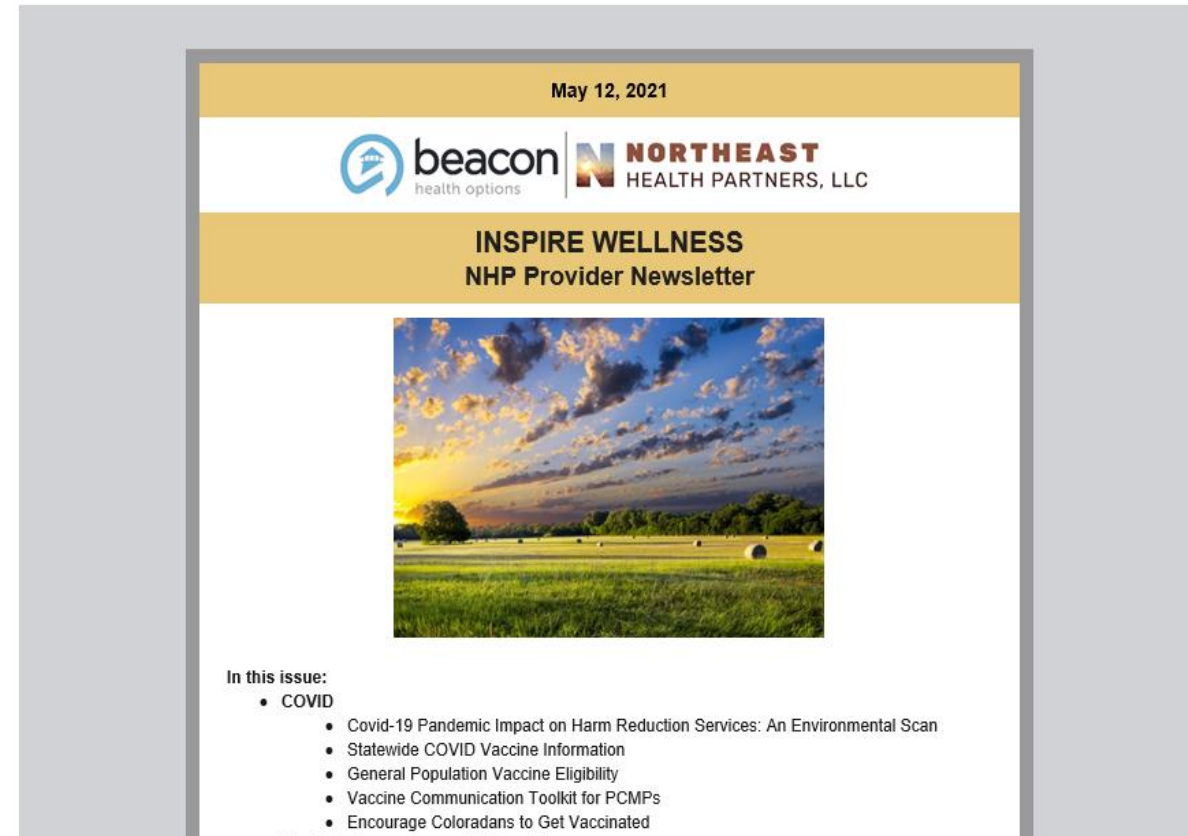


Message and data rates may apply.

Wed 5/12/2021 7:02 AM

Beacon Health Options Provider Relations <coproviderrelations@beaconhealthoptions.com>

NHP Provider Newsletter 5.12.2021



Upcoming Trainings

**The Next RAE Roundtable – The 2nd Friday of the
month
February 11, 2022 @ 11am**

Thank You

Contact Us




 888-502-4189

 www.northeasthealthpartners.org

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 <https://www.facebook.com/northeasthealthpartners.org/>

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