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 COPProviderRelations@BeaconHealthOptions.com
November
Provider Support Call
Agenda

01 Welcome & Introductions

02 Member Complaint and Appeal Process

03 Peak Website & Health Colorado Mobile App

04 Updates & Upcoming Events

05 Questions & Open Discussion
Welcome and Introductions

Please enter your name and email in the Q&A box
Chapter 02

Member Complaint and Appeal Process
Chapter 2.1

Appeals
Appeal Defined

• An **Appeal** is a review by the RAE of an Adverse Benefit Determination completed by an MD who was not part of the original denial.

• An **Adverse Benefit Determination** is the denial or limited authorization of a requested behavioral health service.

• There is only one (1) level of appeal for a member.
Items to Keep in Mind

An Appeal is a Health First Colorado member’s right to appeal the RAE’s action of a clinical denial. There is no provider Right to a Clinical Appeal in the State of Colorado. If a provider has a Claims Appeal, they will need to call 888-202-3332.

1. The member can designate a person to appeal on their behalf by filling out a Designated Client Representative Form. This is found on the website under Members/Complaint and Appeals.

2. The member has 60 calendar days from the date the denial letter is sent to request an appeal. This date is on the Adverse Benefit Determination Notice sent to the member.

3. A Standard Appeal will need to have the request in writing. An Expedited Appeal does not need to have the request in writing.

4. All appeal rights need to be exhausted prior to members requesting a State Fair Hearing, unless the RAE does not follow appeal timeframes.
Requesting an Appeal

The Deadline for appealing the Adverse decision is 60 calendar days from the Notice of Adverse Benefit Determination date.

Member/Guardian/DCR can call toll free or write:

Member Engagement Specialist
9925 Federal Drive, Suite 100
Colorado Springs, CO 80921

888-502-4185 (Health Colorado)
or
888-502-4189 (Northeast Health Partners)

The Member Engagement Specialist can help the Member with filing their appeal.
“Just the Facts”

• Remember, only the Member/Legal Guardian of Member under 15 has the right to request an appeal in Colorado. The Member can appoint anyone to be their Designated Client Representative (DCR). This person can be a family member, a service provider, or anyone else they choose to act on their behalf.

• Members can find an Appeal Guide, ROI or DCR form on our website: www.northeasthealthpartners.org or www.healthcoloradorae.com under the member tab/complaints and appeals.

• If a Member/Guardian/DCR requests an Expedited (quick) appeal, the MD for the RAE needs to make a decision if the standard appeal timeframes would jeopardize a member’s life, physical or mental health. If approved, the “appeal clock” starts ticking.
Continuation of Benefits During an Appeal or State Fair Hearing

If a Member wants services to continue during an appeal or State Fair Hearing, the Member must ask the RAE that their services continue. A provider cannot make this request on behalf of the Member.

The Member must make this request within ten (10) days from date they received the Notice of Adverse Benefit Determination letter or Upheld Appeal Decision letter. The Member may be liable for the cost of continued services if the appeal or SFH decision is upheld.

There is an Appeal Guide and State Fair Hearing Guide on the RAE’s website to provide to the Members.
Continuation of Services: Standards that must be met:

Standards for continuation of services during an Appeal or State Fair Hearing

• The service must have been ordered by an authorized provider
• The Member must ask to continue the service by calling their RAE within ten (10) business days

Standards for Continuation of Services during an Appeal

• The time period for the authorized service must not be over yet
• The services were denied, reduced, or stopped
• The Member has sixty (60) days from the date of the adverse benefit determination to file an appeal

Standards for Continuation of Services during a State Fair Hearing

• The previously authorized services were denied, reduced, or stopped
• The Member has 120 days from the upheld appeal decision to file a State Fair Hearing
• Services must have been continued during an appeal to request continuation of services during a SFH
State Fair Hearing (SFH)

- If members receive an Adverse Appeal Decision, they can request a State Fair Hearing before an Administrative Law Judge (ALJ). Members can have any representatives they would like at the SFH.

- Members/Guardians/DCRs have 120 days to request from Appeal Decision date to Request a State Fair Hearing. Members can ask the Member Engagement Specialist to help with requesting a SFH.

- Members need to contact Office of Administrative Courts to request a SFH.
  - 1525 Sherman Street, 4th Floor, Denver, CO 80203
  - 303-866-2000
Provider Appeals

Providers can contact the Claims Department at Beacon Health Options to appeal or challenge a Behavioral Health Service that was not paid for. The number for the Claims Department is 1-888-202-3332.

For Physical Health Claims Appeals, you will need to contact Health First Colorado at 1-844-235-2387.
Complaints
Complaint Defined

• Health First Colorado’s Member Handbook informs members: “You have a right to complain. This may also be called a grievance. You can complain if you are unhappy with your service or think you were treated unfairly. You cannot lose your benefits or coverage for filing a complaint.” That’s the Law!

• HCPF defines complaint as an oral or written expression of dissatisfaction about any matter other than an Adverse Benefit Determination.
Complaint

• If a Member raises an issue or concern about any aspect of treatment, they can file a complaint.

• A Member can designate a provider as a Designated Client Representative (DCR) to file a complaint on their behalf.

• Members cannot be punished for filing a complaint.

• Members can file a complaint verbally or in writing.

• Members/Guardians/DCRs can file a complaint at ANY TIME.
  • There is no time limit to file a complaint!

• Beacon follows 42 CFR.438 regulations in handling complaints.

• Beacon considers complaints as “failing forward.” WHY?
What Happens When a Complaint is Filed?

• A letter is sent to the Member within two (2) business days that acknowledges receipt of the complaint.

• The complaint investigation will be completed within fifteen (15) business days of the day they filed the complaint. A one-time fourteen (14) day extension can be requested by the Member or the RAE if it benefits the Member.

• A complaint resolution letter will be sent to the Member explaining the results of the investigation.

• If the Member does not agree with the results of the investigation, they can ask for a “Second Level Review”. This review is completed by the Colorado Department of Health Care Policy and Financing, Medicaid Managed Care Contract Manager. The results of this review are final.

• The Member also has the right to ask for a review by contacting the Ombudsman for Health First Colorado Managed Care.
Where do you direct Members to Make a Complaint?

Member/Guardian/DCR can call or write:

Member Engagement Specialist
9925 Federal Drive, Suite100
Colorado Springs, CO 80921

888-502-4185 (Health Colorado)
or
888-502-4189 (Northeast Health Partners)

A Complaint Guide can be found on our websites:
www.northeasthealthpartners.org or
www.healthcoloradorae.com under the member
tab/complaints and appeals.

**How to File a Complaint Posters available
upon request. Please contact the Member
Engagement Specialist.**
Failing Forward

People who fail forward are able to see errors or negative experiences as a regular part of life, learn from them and then move on. --John Maxwell.
Chapter 03

Peak Website & Health Colorado Mobile App
Peak Website and the Health Colorado Mobile App

Members can:

• Create a free account at co.gov/peak to access their benefits and information online.

• Download the free mobile app to access their benefits and information on their phone.

***Member must create an account at co.gov/peak before they can sign in to the app***
Chapter 04

Updates & Upcoming Events
Provider Handbook Updated!

Beacon’s Policy and Procedure Manual for Providers, Health First Colorado that applies to Health Colorado, Inc. (Region 4) and Northeast Health Partners (Region 2) has been updated.

You can download the entire document by visiting the Providers page and selecting Provider Handbook and Policies on the following links:

Northeast Health Partners at https://www.northeasthealthpartners.org/
Health Colorado at https://www.healthcoloradorae.com/

Important changes: Member’s rights to make a complaint and request an appeal or a State Fair Hearing on pages 73-80.

Should you have questions, please contact Provider Relations at Coproviderrelations@beaconhealthoptions.com
Headspace for Healthcare Professionals

Headspace is offering all US healthcare professionals who work in public health settings **free access to Headspace Plus through 2020**.

Headspace wants to be here for you and support you as best we can. Helping you be kind to yourself, and your own health, during this difficult time.

If you are a healthcare professional, **you can redeem your subscription using your National Provider Identifier (NPI) and email address**. Or, if you are a nurse and you don’t have an NPI, you can provide your organization information to verify your credentials.

SUD Benefit Expansion Provider Forum

SUD Expanded Benefit Provider Forum For all Substance Use Disorder Providers

Please join Health Colorado, Northeast Health Partners, Signal & AspenPointe’s Managed Service Organizations as we continue to navigate the expansion of the SUD Medicaid benefit. This will be a monthly forum. Collectively we will share updates & information as well as providing a time for you to ask your questions.

Tuesday, November 17, 2020

10:30am-11:30am

ZOOM information:
https://link.zircentral.com/u/7f719509/SMNeuV_Ml6xGfqQLpW9GfSw?u=https%3A%2F%2Fbeaconhealthoptions.zoom.us%2Fp%2F976225b09910%3Fpwd%3DWWprFZFRtXcYVWf2OWJ1R1NPUT09

Call in #: 1-669-900-6833

Webinar ID: 976 2250 9910

Passcode: 311381

Feel free to share this invitation with anyone interested in attending.
2020 Behavioral Health Needs Assessment – Conducted by the Colorado Office of Behavioral Health

The Colorado Department of Human Services (CDHS), Office of Behavioral Health (OBH) partnered with Health Management Associates, Inc. (HMA) to conduct a statewide behavioral health needs assessment.

To see the full assessment visit https://www.colorado.gov/pacific/cdhs/BHneeds2020

FIGURE 1: PERCENT OF BEHAVIORAL HEALTH VISITS AMONG ALL ED VISITS, 2015 TO 2019

SOURCE: COLORADO HOSPITAL ASSOCIATION, EMERGENCY DEPARTMENT DATA, 2015-2018
Upcoming Webinars Hosted by National Council for Behavioral Health

November 17 (3-4 p.m. ET): Avoiding COVID-19 Burnout: Self-care and Resiliency

November 18 (12-1 p.m. ET): Wellbeing Wednesdays: Episode 1
How will health care policy change in the next administration, and how will those changes affect you? Join us for an online discussion on November 18 (12-1 p.m. ET) to find out!

November 18 (3-4 p.m. ET): Advancing Integration in Community Behavioral Health

November 19 (1-2 p.m. ET): How the Elections May Impact Behavioral Health Providers

December 7 (10 a.m. - 2 p.m. ET): Virtual Motivational Interviewing Training

December 18 (2:30-3:30 p.m. ET): Preparing Youth/Families for Transition to Adult Care

To register or for more information visit www.thenationalcouncil.org/events-and-training/webinars/
Join Our Mailing List

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.
Chapter 04

Questions & Open Discussion
Thank You

Contact Us

888-502-4189
www.northeasthealthpartners.org
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https://www.facebook.com/northeasthealthpartners.org/

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