AmeriHealth Caritas Louisiana
Provider Advisory Council (PAC) Meeting Minutes
Wednesday, February 19, 2020 11:00 a.m.

Attendees:	
Present:	**Guests:**
Kelli Nolan, Director – Provider Network Operations	Julie Widmer-Brentwood Hospital
Lee Reilly, Director Practice Transformation-Corporate Provider Network Management	Frank Folino-DePaul Community Health Centers
Charleen Gauthreaux-Manager-Provider Network Management	Stacy Robinson-Willis-Knighton Physician Network
Rodney Wise-Market CMO-Administration	Les Tompkins-Ochsner Health System-Shreveport
Amelia Ringheim-Community Care Manager-Case Management	Rosa Bates-Northwest Louisiana Human Services Distric
Chris McNeil-Program and Innovation Analyst-Administration	Carol Robertson-Billing/Credentialing Supervisor
Nancy Gervais-Community Health Navigator Sr-Community Outreach	Angela Nichols-Young-Healthy Services
Tricia Grayson-Director Communications and Marketing-Communications	Tilman Watkins-Healthy Services
Jana Blaylock-Quality Perform Specialist Clinical-Quality Management	Allyson Allums-South Ouachita Clinic/Riverbend Rehabilitation Hospital
Terry Lambert-Provider Network Account Executive II-Provider Network Management	Matt Wheeler- Willis Knighton
	Yomeka Evans-Brighter Future Counseling Services
	Juanice Moses-Life Changing Solutions

AGENDA ITEM	DISCUSSION			
I. Call to Order	Kelli Nolan, Director – Provider Network Operations – Welcomed everyone and called the meeting to order shortly after 11:00 a.m. (CST) at the Shreveport Wellness Center.	CONCLUSION / RESULTS	ACTION STEPS / PERSON RESPONSIBLE	DATE DUE
	Lunch was served and introductions were performed.			

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II. Purpose of PAC	Kelli Nolan presented PAC's Purpose: PAC's Purpose: • A forum for providers to give input on ACLA clinical policy and development. • It will promote collaborative efforts to enhance services, provider satisfaction and the whole member/provider experience. • Promote data sharing and value based strategies. Kelli Nolan presented PAC's Goals: • Identify feedback from providers to set standards for utilization of reporting tools to improve outcomes of attributed members for providers to continue qualifying for program participation. • Gather feedback to assess standards set for reporting tools to ensure data is demonstrating meaningful outcome reporting. • Contribute to the development, implementation, and review of provider education strategies and efforts. This will include input from provider on training topics, provider education materials, dates/locations of provider education workshops and events. • Demonstrate compliance with NCQA and HEDIS standards for involving members by identifying and prioritizing opportunities for improvement.			

III. Credentialing Follow-Up	Kelli Nolan reported the Credentialing Follow-Up
	• ACLA required to complete credentialing within 60 days of receipt of a completed credentialing application.
	• ACLA has no more than 30 days after the receipt of updated provider information to update systems and reflect in provider directory.
	• Current timeframes are:
	  o Review and Validation-24 days on hand
	  o Approve-12 days on hand
	  o Load of approved provider into the claims processing system-8days on hand
	• Since the last PAC:
	  o Centralized ownership of processes and assigned a lead.
	  o Re-organized review team and added two additional staff
	  o Reassigned validation/audit oversight to separate team.
	  o Improved job aids to enable faster processing, increased transparency and visibility and alignment of network provider types/specially types/payment mapping.			

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IV. Data sharing to Achieve Performance Goals and Improve Quality Outcomes	Charleen Gauthreaux discussed:
	• Clinical Data Exchange
	• PerformPlus-Program and Components
	   o Program Design
	   o Balanced Quality and Cost Efficiency incentives
	   o Bonus Pool
	   o Population Health
	   o Cost and Efficiency:
	• Quality Enhancement Program (QEP) for primary care physicians who qualify with 50 or more members on their panel.
	• Perinatal Quality Enhancement Program (PQEP) for perinatal providers who qualify with 15 or more deliveries.
	• NaviNet Provider Portal
	• NaviNet Reports
	• Equipping Provides with Information
	• NaviNet-PCP Performance Report Card
		It was questioned how can a BH provider know that the member is receiving other BH services since BH clinical data is not shared?	Charleen Gauthreaux will research this and report back at the next meeting.	

V. Integrated Health Care Management	Amy Ringheim discussed:
	• Integrated Health Care Management ((HCM)
	   o How IHCM works with providers to coordinate care and improve access to appropriate services:
	      ❖ To proactively identify members for outreach and assistance with managing comprehensive health care needs
	      ❖ Multiple support teams and tools available to assist in outreaching to and educating members, as well as clinical resources for providers in their care management
	      ❖ Initiate relationships between member, ACLA clinical teams and community resources
	      ❖ The "Let us Know" program is a program to collaborate with the provider community in the engagement and management of our chronically ill members.
	   o Ways for providers to "Let us Know" about chronically ill members:
	      ❖ Fax the "Let us Know" Member Intervention Request form to the Rapid Response and Outreach Team.
	      ❖ Refer the patient for care management to our Rapid Response Outreach Team as well.
		Kelli Nolan pointed out that the "Let us Know' form can be used for anything the provider needs assistance with regarding a member.		

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VI. Behavioral Health Updates Trainings for 2020	Chris McNeil presented:
	• Behavioral Health Updates and Trainings for 2020
	  o Trainings include:
	    ❖ CALOCUS/LOCUS
	    ❖ Treatment Planning, Clinical Documentation, ROI, and Member Rights and Responsibilities
	    ❖ Screening, Brief Intervention, and Referral to Treatment (SBIRT)
	    ❖ Medication Assisted Treatment (MAT)
	    ❖ Audit Tool
	
	  o Project ECHO-Case based learning initiative utilizing case conferencing technology to disseminate specialty care knowledge, address complex care issues, and aid with resource identification
	  o ABA Services-Current discussions are ongoing involving LDH and other MCOs
	  o Crisis Stabilization Centers
	  o CPST/PSR Services
	  o 0-5 Evidenced Based Practices
	  o Screenings for Integration of Care- Incentives for BH and PH providers			

VII. 2020 Provider Trainings	Tricia Grayson discussed:
	• Online provider education opportunities available now (e-modules):
	  o Anxiety Disorders
	  o Physician's' Practical Guide to Culturally Competent Care
	  o ADHD
	  o Depression
	  o HEDIS Plus Provider Training
	  o Opioid Use Disorder
	  o PCP Working in Mental Health Settings: Improving Health Status in Person with Mental Illness
	• Trainings available at Community Wellness Centers:
	  o Evidence-based practices
	• Training webinars:
	  o ASAM Treatment of Opioid USE Disorder
	  o Navinet
	  o Top Denials
	  o CALOCUS/LOCUS
	  o Treatment Planning and Documentation and ROI
	  o Access and Availability
	  o HEDIS
	  o FQHC/RHC Providers
	  o Prior Authorization Process			

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	o BH Claims
	o Cultural Competency
	o Value-Based Contracting
	o Provider Resources
	• Online Resources
	   o News and Updates
	   o Provider Quick Reference Guide
	   o Provider demographic validation and directory review info
	   o Provider manual
	   o Claims Filing Instructions
	   o Member Handbook
	   o Provider rights and responsibilities
	   o Clinical guidelines
	   o Provider directory
	• Partnering/Collaborating with Providers by providing:
	   o Health education materials
	   o MCO participation stickers
	   o Information on benefits and services
	   o Targeted text/phone outreach to members to encourage appointment scheduling (Wellness Days)
	   o Community Wellness Centers for our members offering targeted services:
	     ❖ New member orientation
	     ❖ SDOH and health needs assessments (HNA)
	     ❖ Chronic-condition self-management
	     ❖ Provider trainings
	     ❖ Peer support groups
	     ❖ Physical activity classes
	     ❖ Financial management			

VIII. Community Outreach & Community Navigator	Nancy Gervais introduced the different areas of the Community Education Team (CET) and their respective services to ACLA members:
	• Community Health Worker-Community Educator (Physical Health)
	   o Disability Advocate Program
	   o IHCM Rapid Response
	   o Bright Start
	   o Intervention Methods
	
	• Community Health Navigator-Peer Support Specialist (Behavioral Health)
	   o BH-IP
	   o Justice Involved
	   o 7/30 Day Follow up
	   o Intervention Methods			

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	• Goals of CET:
	  ○ Create transparent relationships with members by engaging, supporting and assisting them and advocating for their needs
	  ○ Coordinate services between member, provider and support network
	  ○ Initiate relationships between member, ACLA clinical teams and community resources
	  ○ Educate member on recover principals, healthy lifestyle choices, social functioning and peer relationship building			

IX. Quality Department	Jana Blaylock represented the Quality Department and reiterated what was already discussed regarding HEDIS and the Provider Plus Training which the Quality team manages as well as the Medical Management Review (MMR) process. This process is separate from HEDIS and is mandated by the state of Louisiana for ACLA to participate with the providers in this process.			
X. Open Discussion and Provider Feedback	Nancy Gervais mentioned the problem when they are unable to obtain transportation with SET and have to use Uber or a friend to take them and they want to get reimbursement. They can contact Bridgette Robertson manager over Member Grievances. They also can contact Rapid Response if they are having issues with getting transportation via SET. . The question was brought up about families that cannot obtain transportation during the day and have to have family or friends take them in the evening after work and end up having to go to the Emergency Room. How does education work for this? Outreach to find out why members are going to ER. Is ACLA working with the cities to see if there is public transportation for these members? Terry Lambert commented that if it's a discharge that it is priority and in the contract with SET it is required for them to provide transportation. If they are not doing so, let Millissa Harrison (Account Executive) know and she can share in the meetings with SET. They should also call Member Services as well to document the issue.		Kelli Nolan will research the questions about transportation for answers.	

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III. Adjournment	The meeting adjourned at 1:07 pm (CST). **The next meeting is on May 15, 2020 at the New Orleans Wellness Community Center.**			

Respectfully submitted by:

Kelli Nolan, Director, Provider Network Operations   3-4-20

Date

Recorder:

Nancy Thibodeaux, Provider Network Analyst, Provider Network Operations