

AmeriHealth Caritas Louisiana  
 Provider Advisory Council (PAC) Meeting Minutes  
 Wednesday, April 27, 2022 11:00 a.m.

**Attendees:**

<b>Present from AmeriHealth Caritas Louisiana:</b>	<b>Guest Attendee:</b>
Kelli Nolan, Director Provider Network Ops, Provider Operations and Administration	Natalie Simmons, Director of Payor Relations, Ochsner Health
Clarence Grant, Director Provider Network Management, Provider Network Mgmt.	Jennifer Brown, Director of Clinical Ops, Peaceful Alternatives Counseling & Therapy
Gwen Matthews, Manager Provider Network Management, Provider Network Mgmt.	Les Tompkins, AVP Managed Care, Ochsner Health
Kenya Foster, Provider Communications Consultant, Communications	Leslie Irby, Nurse Practitioner, Red Stick Pediatrics
Rachel Weary, Director Marketing Clinical Population Health, Care Coordination Case Mgmt.	Lawanda Cole, Executive Coordinator, Peaceful Alternatives
Kursten Munson, Manager UM Review, Utilization Management	Linsey Klick, Registration Clerk/Patient Billing, Springhill Medical Center
Nancy Thibodeaux, Provider Network Analyst, Provider Operations and Administration	Katina House, Patient Financial Services Supervisor, Springhill Medical Center
Rhonda Baird, Director Quality Management, Quality Management	Angela Williams, Director of Clinical Services-Affinity Health Group
Ivelisse Bracetti, Manager Contact Center, Provider Services	Linda King, Insurance, SLMA
Nickole Washington, Supervisor UM Review, Utilization Management	Robert Terry, Director, Peaceful Alternatives Counseling & Therapy
Lori Payne, Mkt. Health Equity Program Director, Administration	Sharon Griffin, Business Office Manager, Springhill Medical Center
Stephanie Myers, Manager Public Policy, Public Policy Department	Rhonda Nickless, Licensing/Credentialing Specialist, North Oaks Health System
Wanda Gonzalez, Manager Contact Center, Member Services	Phyllis Verdin, Billing Manager, South Louisiana Medical Associates
Kathryn Cox, Supervisor UM Review, Utilization Management	Angela DeRoche, Credentialing, Thibodaux Regional Network Development Corp
LaKaley Tillery, Quality Performance Team Lead, Quality Management	Courtney Ratliff, Managed Care Coordinator, The Carpenter Health Network
Faye Colbert, Supervisor UM Review, Utilization Management	Candace Landreaux, Business Manager, Merakey
Thomas Godfrey, Director Operations & Administration, Administration	Melanie Richard, Credentialing Specialist, Calcasieu Urgent Care, LLC
Jeanine Plante, Director Pharmacy, Pharmacy Management	Maegan Denman, Director, LCMC Anesthesia
Ahmed Olayanju, Manager Provider Network Management, Provider Network Mgmt.	Robin Gaines, Care Coordinator, Care South
Carletta Howard, Manager Network Operations, Provider Ops & Admin	Sheneka Dunn, Patient Care Coordinator, CareSouth Medical & Dental
Grover Harrison, Director Community Education, Community Outreach	Jeff Mitchener, AVP Payor Relations, Ochsner
Bridgette Robertson, Manager Network Operations-Operations	Cherie Martin, Office Manager, Red Stick Pediatrics
Lakesha Dickerson, Manager UM Review, Utilization Management	Carol Robertson, Billing/Credentialing Supervisor, NW Louisiana Human Svcs. District
Kristine Grimmatt, Director Supplier Management, Purchasing	Elaine Ward, Director, UM and Rev Cycle Integrity, St Tammany Parish Hospital
Lucas Dominica, Enterprise Opt Program Director, Transformation Office	Eloisa Lopez, Quality Improvement Coordinator, CareSouth Medical and Dental
	Brenna Wallach, Manager of Payer Relations, FMOLHS
	Lynn Genusa, Licensure/Credentialing Specialist, North Oaks Medical Center
	Marsha Fisher, CEO, Pinnacle Community Care Services
	Kellie Thomas, Revenue Cycle Supervisor, Richland Parish Hospital-Delhi
	<b>Registered/Name not Listed on Zoom:</b>
	Pam Jenkins, Director, Springhill Medical Center
	Pamela Gallagher, CFO-Interim, SMC
	Torriano Lee, Owner, Red River Therapeutic Solutions LLC
	Latoya Hardy, House Manager, Angelicare Therapeutic Group Home
	Jackie Biddings, Medical Staff Coordinator, Morehouse General Hospital
	Giovanna Pringle, Director of Rev Cycle & Cred, No Aids Task Force/Crescent Care
	Carla Pellerin, Administrator, Fairview Treatment Center

	Danielle Edwards, RN, UM Manager, St Tammany Health System
	Jaunice Moses, Administrator, Life Changing Solutions LLC
	Kimberly Borman, Owner, Southern Louisiana Behavior Consultants, LLC
	Sherice Forte, Senior Provider Data Analyst, Verity HealthNet
	Mary Talbert, Owner, Talbert's Medical Billing

AGENDA ITEM	DISCUSSION			
-------------	------------	--	--	--

<b>I. Call to Order</b>	<p><b>Kenya Foster, Provider Communications Consultant-Communications</b>, reviewed the housekeeping for the meeting beginning at 11:01 a.m. (CST) and introduced <b>Bridgette Robertson, Manager Network Operations-Operations</b>, as the chair of the meeting and Bridgette welcomed everyone to the second PAC Meeting of 2022 virtually via Zoom</p>	CONCLUSION / RESULTS	ACTION STEPS / PERSON RESPONSIBLE	DATE DUE																														
<b>II. Agenda and Attendance</b>	<p><b>Bridgette Robertson, Manager Network Operations-Operations</b>, presented the agenda and organizations in attendance list for the meeting.</p>																																	
<b>III. 2021 Plan Year Provider Satisfaction Survey Results</b>	<p><b>Bridgette Robertson, Manager Network Operations-Operations</b>, informed providers of the following results of the survey:</p> <table border="1" style="margin-left: 40px; width: 60%;"> <thead> <tr> <th>Category</th> <th>ACLA's Score (Excellent/Very Good/Good)</th> <th>Other MCO's Score (Excellent/Very Good/Good)</th> </tr> </thead> <tbody> <tr> <td>Provider Education</td> <td>86%</td> <td>82%</td> </tr> <tr> <td>Quality Management</td> <td>86%</td> <td>86%</td> </tr> <tr> <td>Care Management</td> <td>84%</td> <td>86%</td> </tr> <tr> <td>Provider Relations</td> <td>83%</td> <td>80%</td> </tr> <tr> <td>Pharmacy Services</td> <td>82%</td> <td>83%</td> </tr> <tr> <td>Provider Resources</td> <td>80%</td> <td>79%</td> </tr> <tr> <td>Network/Provider Resources</td> <td>80%</td> <td>81%</td> </tr> <tr> <td>Utilization Management</td> <td>79%</td> <td>80%</td> </tr> <tr> <td>Claims Processing/Claims Reimbursement</td> <td>79%</td> <td>79%</td> </tr> </tbody> </table> <p>Bridgette also reviewed provider disputes definition, categories, how to file a claim dispute, time frames for first level and second level disputes, independent review process, arbitration process, and finally quality metrics.</p>	Category	ACLA's Score (Excellent/Very Good/Good)	Other MCO's Score (Excellent/Very Good/Good)	Provider Education	86%	82%	Quality Management	86%	86%	Care Management	84%	86%	Provider Relations	83%	80%	Pharmacy Services	82%	83%	Provider Resources	80%	79%	Network/Provider Resources	80%	81%	Utilization Management	79%	80%	Claims Processing/Claims Reimbursement	79%	79%			
Category	ACLA's Score (Excellent/Very Good/Good)	Other MCO's Score (Excellent/Very Good/Good)																																
Provider Education	86%	82%																																
Quality Management	86%	86%																																
Care Management	84%	86%																																
Provider Relations	83%	80%																																
Pharmacy Services	82%	83%																																
Provider Resources	80%	79%																																
Network/Provider Resources	80%	81%																																
Utilization Management	79%	80%																																
Claims Processing/Claims Reimbursement	79%	79%																																

<b>IV. Care Management Benefits</b>	<p><b>Kenya Foster, Provider Communications Consultant-Communications</b>, presented the first portion of Care Management Benefits up to the Mindoula section and then <b>Rachel Weary, Director Marketing Clinical Population Health-Care Coordination Case Management</b>, presented starting with Mindoula and the rest of Care Management Benefits with the following points:</p> <ul style="list-style-type: none"> <li>• ACLA uses NCQA population health framework to match members to the level of support needed to address their medical, behavioral, and social needs</li> <li>• Disease management for: <ul style="list-style-type: none"> <li>○ Asthma</li> </ul> </li> </ul>			
-------------------------------------	--	--	--	--

	<ul style="list-style-type: none"> <li>○ Cardiovascular Disease</li> <li>○ Chronic Obstructive Pulmonary Disease</li> <li>○ Chronic Pain</li> <li>○ Diabetes</li> <li>○ HIV</li> <li>○ Hepatitis</li> <li>○ Obesity (Adult/Pediatric)</li> <li>○ Sickle Cell Disease</li> <li>○ Maternity</li> <li>● Enhanced Programs: <ul style="list-style-type: none"> <li>○ Community Care Management Team</li> <li>○ Heart Healthy Program</li> <li>○ Make Every Calorie Count Program</li> </ul> </li> <li>● Vheda-Telehealth Platform <ul style="list-style-type: none"> <li>○ Delivers Digital Mobile Disease Management and data analytics for Uncontrollable Diabetes, Congestive Heart Failure, Hospitalizations and/or ER visits.</li> <li>○ Goals to improved medication compliance, reduce readmissions, reduce ER visits, and achieve glucose control and blood pressure monitoring</li> <li>○ Interventions with 1:1 coaching, text messaging via iPhone, scheduling appt. reminders, biometric device access, data collection and trend reports, educational videos for the member via their iPhone, and unlimited texting, calls and data plans</li> </ul> </li> <li>● 24-Hour Face-to-Face Care for behavioral health care <ul style="list-style-type: none"> <li>○ MIndoula provides coordination to high risk patients with diagnosis of SPMI (Schizophrenia, Bipolar, Depression) <ul style="list-style-type: none"> <li>➢ Goals are to increase use of PCP services, improve access to BH providers, adherence to medical and/or BH treatment plans, increase relationships with medical and BH providers, improve access to community-based services and increase engagement with ACLA Integrated Health Care Management (IHCM)</li> <li>➢ Interventions provide 24/7 virtual psychosocial support and skills training, identify and close care gaps arising from barriers to care, address social determinants and connect to community base programs (member face-to-face visits)</li> </ul> </li> </ul> </li> <li>● Embedded Case Managers – Opportunity <ul style="list-style-type: none"> <li>○ Complete on-site assessment and collaborate with Care Managers, Utilization Management, or Medical Director regarding discharge needs</li> </ul> </li> <li>● How to refer members to IHCM through the “Let Us Know” program which is a partnership between ACLA and the provider community to collaborate in the engagement with and management of our chronically ill members: <ul style="list-style-type: none"> <li>○ Fax the “Let Us Know” Member Intervention Request form to the Rapid Response and Outreach Team at 1-866-426-7309</li> <li>○ Or refer you patient to care management by calling Rapid Response and Outreach Team at 1-888-643-0005</li> </ul> </li> </ul>			
<b>V. Provider Claims Services</b>	<p><b>Ivelisse Bracetti, Manager Contact Center, Provider Services</b>, informed the attendees of the following provider dissatisfactions received through the Contact Center and implemented resolutions:</p> <ul style="list-style-type: none"> <li>● Dissatisfactions: <ul style="list-style-type: none"> <li>○ Have more staff available to answer calls and that the staff would be more knowledgeable about coverage, denial processes, etc.</li> <li>○ Need extensive training of staff to avoid being forwarded from one representative to another.</li> <li>○ Research info when the providers call in order to process the claims correctly.</li> </ul> </li> <li>● Implemented Resolutions:</li> </ul>			

	<ul style="list-style-type: none"> <li>○ Contact Center hired additional staff</li> <li>○ All agents have been trained in all components of Provider Claims Services</li> <li>○ Ongoing training is provided to all Provider Claim Services agents to assist with proper call handling</li> <li>○ All agents were provided additional training on claim processing and claims research to ensure information provided was accurate</li> </ul>			
<b>VI. Provider Network Management</b>	<p><b>Gwen Matthews, Manager Provider Network Management, Provider Network Mgmt.</b> reviewed Provider Network Management’s role, the Account Executive responsibilities and the Account Executive Territory Map:</p> <ul style="list-style-type: none"> <li>● Provider Network is responsible for building and maintaining a robust Provider Network for members and is also responsible for negotiating provider contracts to assure our Network can treat the full range of Medicaid covered benefits for our members.</li> <li>● Account Executives function is to advise and educate ACLA’s providers and can help providers become familiar with policies, processes and ACLA’s initiatives.</li> <li>● Account Executives will respond to email and phone calls within 3 business days of receipt. If a provider is having issues reaching their account executive, they can send a message to the network email: <a href="mailto:network@amerihealthcaritasla.com">network@amerihealthcaritasla.com</a></li> <li>● Account Executives are back in the field, providers should start seeing visits soon and receiving phone calls to set up visits.</li> <li>● Reminder to providers to register on Medicaid Portal.</li> </ul>			
<b>VII. Utilization Management</b>	<p><b>Lakesha Dickerson, Manager UM Review, Utilization Management,</b> talked about the UM processes and how providers can get their requests in to get a timely response:</p> <ul style="list-style-type: none"> <li>● To initiate a prior authorization (PA), providers must call (1-888-913-0350) or fax (1-866-397-4522) the UM department or submit a request through NaviNet.</li> <li>● The requests must include: <ul style="list-style-type: none"> <li>○ Patient symptoms, past clinical history, and prior treatment info</li> </ul> </li> <li>● Ordering provider is responsible for obtaining a PA number for the request</li> <li>● ER, observation care, and IP imaging procedures do not require PA</li> <li>● PA lookup tool is on our website to see if a code requires a PA (Screen shot was presented to show the providers the tool)</li> <li>● NaviNet request must have member’s name, DOB, member ID (Plan or Medicaid) and provider contact info, if all are not included could result in a delay in processing the request</li> <li>● Turnaround times depend on the type of review: <ul style="list-style-type: none"> <li>○ Concurrent-1 calendar day</li> <li>○ PA (standard)-14 calendar days</li> <li>○ PA (expedited)-3 calendar days</li> <li>○ Retrospective-30 calendar days</li> </ul> </li> </ul>			
<b>VIII. NCQA HEDIS Equity Measures</b>	<p><b>Lori Payne, Mkt. Health Equity Program Director, Administration,</b> presented NCQA HEDIS Equity Measure for 2022 as follows:</p> <ul style="list-style-type: none"> <li>● Measures for 2022: <ul style="list-style-type: none"> <li>○ COL-Colorectal Cancer Screening</li> <li>○ CBP-Controlling Blood Pressure</li> <li>○ HBD-Hemoglobin A1c Control for Patients with Diabetes</li> <li>○ PPC-Prenatal and Postpartum Care</li> </ul> </li> </ul>	Lori asked if there were any providers present that service rural areas	Robin Gaines asked how long does it take for a Case Manager to respond to inquiry on a patient.	

	<ul style="list-style-type: none"> <li>○ WCW-Child and Adolescent Well Care Visits</li> <li>● Rural Provider Focus <ul style="list-style-type: none"> <li>○ Use demographic data to assess existence of disparities</li> <li>○ Quality improvement efforts toward care delivery that addresses demographic needs, social determinants of health</li> <li>○ Provider Education on equity measures and related disparities</li> <li>○ Info on barriers to care, SDOH, and how ACLA can help to improve services to disparate rural populations</li> </ul> </li> </ul>		<p>Rachel Weary responded and said they should receive an immediate response because Rapid Response Team is available at all times. If it is known who the Case Manager is for the patient, Rapid Response may be contacted and they will transfer the call to the Case Manager. Goal is to respond within 24 hours.</p> <p>Sharon Griffin with Springhill Medical Center responded to Lori's questions and said they service rural population.</p>	
<b>IX. Open Discussion</b>	Bridgette Robertson asked if anyone had additional questions or feedback.		No questions or feedback.	
<b>X. Adjournment</b>	<p>Bridgette Robertson adjourned the meeting at 11:52 am (CST).</p> <p><b>The next meeting is on Wednesday, July 27, 2022 (location unknown at this time).</b></p> <p>Respectfully submitted by:</p> <p>Kelli Nolan, Director Provider Network Operations      Date  _____ <i>Kelli Nolan</i> _____      5/04/22 _____</p> <p>Recorder:</p>			

	<p>Nancy Thibodeaux, Provider Network Analyst, Provider Network Operation</p> <p><i>Nancy Thibodeaux</i></p>			
--	--	--	--	--

\_\_\_\_\_