

# BadgerCare Plus Program

Program Effective September 1, 2010

## Behavioral Health Provider Training Presentation

# Community Connect HEALTHPLAN

**CommunityConnect HealthPlan (CommunityConnect) will strive to make the right connections between members, providers and the community for our members' better health.**

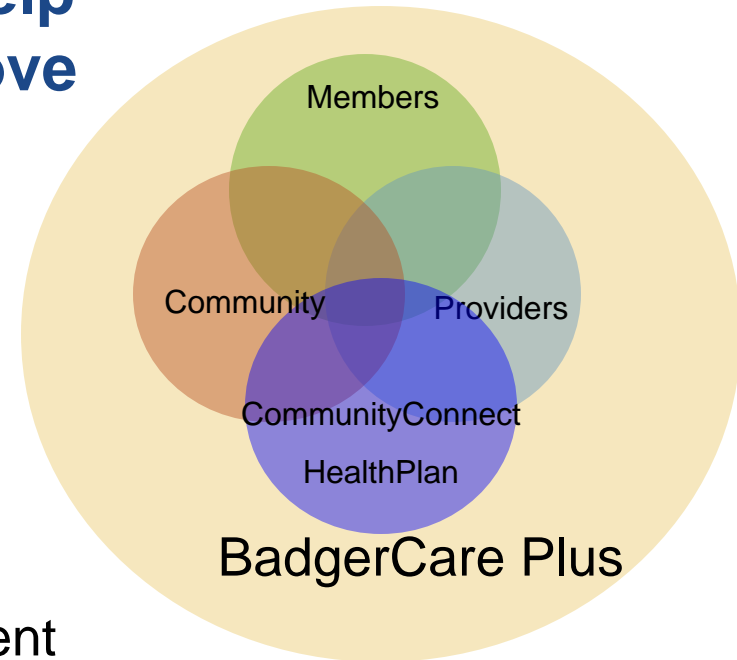
**CommunityConnect HealthPlan was selected by the Wisconsin Department of Health Services (DHS) to provide services to BadgerCare Plus members in southeast Wisconsin, beginning September 1, 2010**

## CommunityConnect HealthPlan

- Effective September 1, 2010
- Participating Counties - Kenosha, Milwaukee, Ozaukee, Racine, Washington, Waukesha
- BadgerCare Plus Plans:
  - Standard Plan (no co-pay) covers families with income at or below 200% of the Federal Poverty Level (FPL).
  - Benchmark Plan (co-pay based on service) covers families, self-employed parents, and caretakers with income above 200% of the FPL. The Benchmark plan provides more limited services than the Standard Plan.

## Connecting everyone involved to help BadgerCare Plus members improve health outcomes

- Teaming with Community Advocates to provide outreach to members
- Strive to develop strong collaborative relationships with our provider/partners
- Care Management / Disease Management programs to promote better health
- Develop best practices



## DHS Objectives

- Cost improvement
- Quality and outcomes improvement



## CCH Objectives

- Making a difference in the lives of the southeast region enrollees
  - Create health care efficiencies for BadgerCare Plus members
  - Implement a quality-based managed care program
  - Improve access to quality healthcare
  - Significantly improve quality of care and specific health care outcomes
  - Obtain innovative, results-oriented quality outcomes
  - Provide care that promotes health and wellness
- Our goal is to
  - Make fundamental differences in member health outcomes
  - Integrate provider partnerships
  - Enhance care coordination
  - Provide local service excellence

# Our Providers We Want To Work With You

**Provider  
Relationships**

**Network  
Optimization**

**Care  
Management  
+ Preventative  
Care**

**Better  
Health**

**Technology/ Data**

- Doctors' decisions essentially control almost 90 percent of health care spending\*
- Providers are one of our most powerful forces to influence our members – your patients
- We look at you as team members, not vendors
- Focus on the promotion of risk reduction and preventive care services through education on healthy lifestyle choices
- Increased awareness for early detection and treatment of disease
- Medical Home: An approach to providing comprehensive primary care - receive acute, chronic and preventive services

\* Boston Globe, July 21, 2008

- Physician Services
- Acute Inpatient/Outpatient Hospital Services
- Behavioral Health Services
- Ancillary Services
- HealthCheck Screenings for Children
- Dental - administered by Southeast Dental Associates
- Vision - administered by March Vision Services
- Non Emergency Transportation - administered by Medical Transportation Management

\*Refer to related provider materials for full listing of benefits

## Services covered under *ForwardHealth*\*

- Prescription Drugs
- Home Infusion Medication
- Chiropractic Services
- Targeted Case Management Services
- Prenatal Care Coordination (PNCC)
- Community Support Program (CSP) Services
- Comprehensive Community Services

*\*Claims for these services are submitted to ForwardHealth*

## Joe Garten, Ph.D.

Director of Behavioral Health State Sponsored Business Operations

317-287-2920

## Letitia Jackson, MS., EdS, LMHC

Manager of Utilization/Care Management

317-287-2574

## Christina Hurt, LCSW

Provider Support Manager

317-287-2855



**Prior Authorizations: 877-471-6656**

## **Tiered Case Management Program**

- **Tier I** is Call Center and Outreach calls to members
- **Tier II** is an increased level of interaction with the member to assist with referral to provider or level of care and problem-solving with the member for any obstacles to receiving care or treatment
- **Tier III** Intensive Case Management offers reactive interventions on an episodic basis or triggered by long length of stay, medical and behavioral health co-morbidity, and/or multiple admissions

## **Disease Management Programs**

- Co-Existing Depression and Anxiety Program (CODA)
- Maternity Depression Program (MDP)

## **Follow up after Hospitalization**

## **Partnering with Providers and Community**

## MH Tier 1-2

- Inpatient event
- Provider referral
- UM/CM
- CODA, MDP, Medical Home/OB

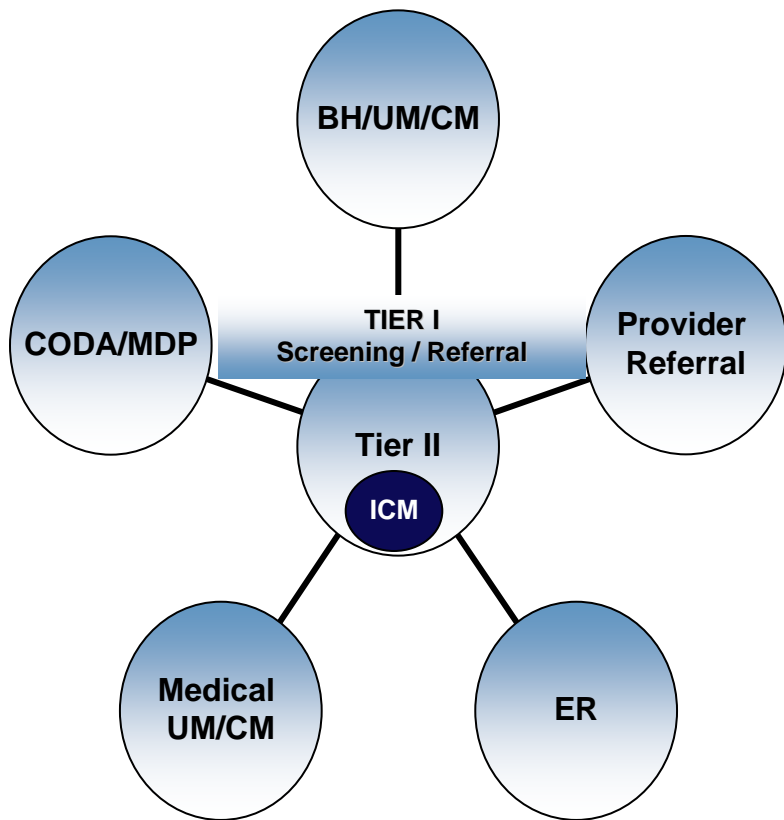
## MH Tier 3

- 2 Inpatient events in past 6 months
- Tier II Referral
- Intensive Case Management
- CODA, MDP, Medical Home/OB

## AOD Tier 1-3

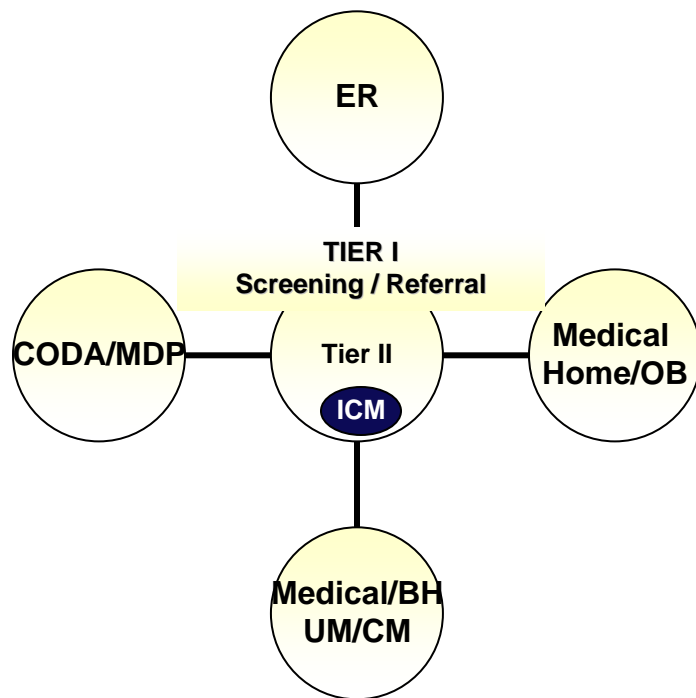
- Medical IP with secondary SA
- Provider referral
- ER visit with Sa diagnosis
- Medical care management
- Medical Home/OB





## Mental Health

## Substance Abuse



- Provide a continuum of care management from initial contact to coordination of care and interventions
- Care Managers within the Utilization Management department support Behavioral Health Services
  - Both teams are co-located to allow for prompt and thorough coordination of care
  - They share the same medical information system
  - Medical case managers refer members to behavioral health for coordination of care within our tiered Case Management Program
  - An innovative and integrated approach with medical exists for those members with both behavioral health and medical problems as well as members with substance abuse difficulties
- A specialized program for assisting members with alcohol and other drug difficulties exists with behavioral health/medical triage, outreach to members, and coordination of care
- Behavioral Health case managers work closely with PCPs, specialist, behavioral health providers, members, and community resources to
  - Integrate care
  - Assist the member secure the necessary community support
  - Educate members and their family on services available within their community



- **Provides a pathway for members enrolled in medical disease management or medical case management an avenue for early identification of co morbid depression**
- **Provides in depth Depression and Anxiety Screening for members with chronic medical conditions**
- **Offers education and resources for the appropriate behavioral health services**
- **Ensures treatment compliance and coordination of care between diverse treatment team**

- The Maternal Depression Program's goal is to provide depression screenings, education and support to members during pregnancy and following delivery
- We work with the medical homes to assist members who are experiencing difficulties with chronic mental health and/or substance abuse disorders
- The program works to identify, triage, and enroll women in two distinct but coordinated behavioral health programs
  - Tiered Behavioral Health Case Management
  - Maternal Depression Programs
- All medical home members will be screened for perinatal and postpartum depression
  - Both perinatal and post-partum screening for depression will include the use of Patient Health Questionnaire 2 (PHQ-2) and/or the Patient Health Questionnaire 9 (PHQ-9) to assess the severity and level of depression.
- Members will be eligible for the programs if they have a chronic behavioral health disorder such as Schizophrenia, Bipolar, Major Depression, and other chronic mental disorders
- Coordination of Care is a key piece of this comprehensive program

- **Members may have behavioral health needs beyond the scope of the Maternal Depression Program and are eligible for the Behavioral Health Case Management Program**
- **The behavioral health care manager will work closely with the “Clinical Team”**
- **Based on the Tiered Case Management Format**
- **The Medical Home “Clinical Team” will conduct clinical staffing as needed to develop treatment/care plans, develop community resources, and engage the member in treatment**
- **Members can and will move to the various tier levels based on need.**

- **Prior authorization is required for all facility-based services, which include:**
  - Inpatient
  - Partial hospital programs (PHP)
  - Intensive outpatient service (IOP)
  
- **Prior authorization is required for all outpatient office visits**



## Services that DO NOT require Prior Authorization for In-Network Providers

- **Emergency Services**
  - Please notify CommunityConnect of admissions within 24 hours or the next business day of inpatient admissions

To request a prior authorization contact us at

**1-877-471-6656**

Please have the following information available

Member name and ID number

- Diagnosis with ICD-9 code
- Procedure with the CPT and/or HCPCS code
- First date of outpatient service or date of hospital admission
- Specialist or name of attending physician
- Clinical information supporting the request



You can also fax your request to

**1-877-471-6658**



## **Non-urgent review requests**

- Completed within 14 calendar days from the request

## **Urgent review requests**

- Completed within 72 hours from receipt of the clinical information necessary to render a decision

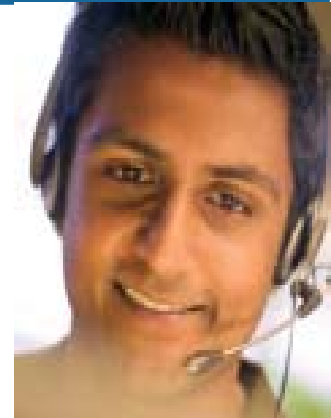
## **Concurrent inpatient reviews**

- Completed within 24 hours of receipt of clinical information, or sooner

## **Committed to providing excellent customer service to providers**

Reach our Provider Services Call Center Monday – Friday 8 a.m. to 5 p.m. CST

**1-877-350-6074**



## **Reach our Utilization Management for Behavioral Health Services 24/7**

**1-877-471-6656**

Web Portal ~ [www.CommunityConnectHealthPlan.com](http://www.CommunityConnectHealthPlan.com)

## Options to Verify Member Eligibility

### ForwardHealth website - [www.ForwardHealth.wi.gov/](http://www.ForwardHealth.wi.gov/)

- Secure area offers real-time member enrollment & eligibility verification for all ForwardHealth programs
- Used to determine the benefit plan(s) in which the member is enrolled, as well as state-contracted managed care programs (for BadgerCare Plus members)
- Available 24/7

### ForwardHealth WiCall - 1-800-947-3544

- Enrollment verification
- Available 24/7

### CommunityConnect Provider Services Call Center - 1-877-350-6074

- Verify enrollment and benefits for CommunityConnect members (Coming Soon!)
- Available 8:00 a.m. to 5:00 p.m. CST Monday - Friday

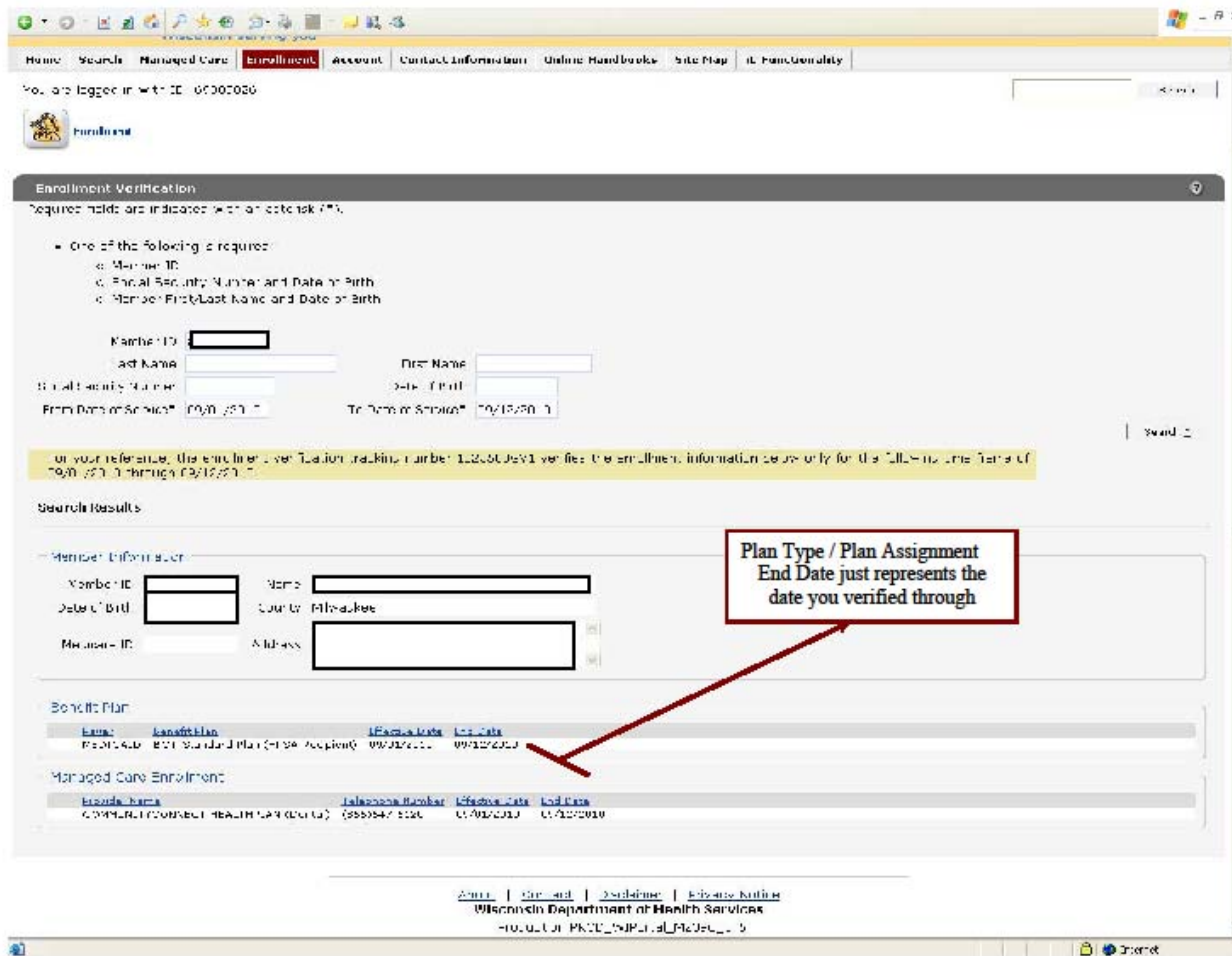
### CommunityConnect website - [www.CommunityConnectHealthPlan.com](http://www.CommunityConnectHealthPlan.com)

- Secure website for eligibility and benefits plan verification
- Available 24/7



**State of Wisconsin Member Identification Card**

Issued by the State of Wisconsin  
Members must present during each visit



Home | Search | Managed Care | **Enrollment** | Account | Contact Information | Online Handbooks | Site Map | IT Home/Utility

You are logged in with ID: 07007086

**Enrollment Verification**

Required fields are indicated with an asterisk (\*).

- One of the following is required:
  - Member ID
  - Federal Security Number and Date of Birth
  - Member First/Last Name and Date of Birth

Member ID:   
 Last Name:  First Name:   
 Social Security Number:  Date of Birth:   
 First Date of Service: 09/01/2011 To Date of Service: 09/15/2011

By your reference, the enrollment verification number 12250J6V1 verifies the enrollment information securely for the calendar time frame of 09/01/2011 through 09/15/2011.

**Search Results**

**Member Information**

Member ID:  Name:   
 Date of Birth:  County: Milwaukee  
 Member ID:  Address:

**Benefit Plan**

Plan Name	Benefit Plan	Federal State	Enr Date
ESM-STD	ESM Standard Plan (HSA Option)	09/01/2011	09/15/2011

**Managed Care Enrollment**

Enrollment Name	Telephone Number	Effective Date	End Date
COMMUNITYCONNECT HEALTH PLAN (HSA)	(955)847-1124	01/01/2010	01/31/2010

Home | Forward | Enrollment | Electronic Billing  
 Wisconsin Department of Health Services  
 Product ID: PKCE\_SMP\_Plan\_Assign\_5

A printed copy of this page is available in your reference materials

- **Electronic Data Interchange**
- **Paper**
  - CMS-1500(08/05) = professional and ancillary services
  - CMS-1450/UB04 = hospital and institutional services
- **Submit claims within the timely filing limits outlined in your Participating Provider Agreement**
- **Bill claims with the member's ForwardHealth ID Number**
- **When submitting claims include:**
  - Tax ID
  - NPI, where applicable
  - Zip Code + 4 digit
  - Taxonomy
  - POA Diagnosis (Present on Admission)

Submit claims and correspondence to:  
**CommunityConnect Health Plan**  
PO Box 3157  
Eau Claire, WI 54702-3157  
or via fax to  
1-715-836-7683

CommunityConnect Payor ID Number is **95192**

**CommunityConnect works with the following clearing houses for electronic claims submissions**

- Emdeon
- SDS (Smart Data Solutions)
- Cvikota Company
- Relay Health
- SSI Group, Inc



Please note:

- Providers are not required to utilize a clearing house on this list
- CommunityConnect does not charge claim submission fees for direct connections
- Clearing houses may charge a fee ~ it is the provider's responsibility to discuss these potential fees with the clearing house

**CommunityConnect encourages electronic billing whenever possible**

For questions regarding electronic billing or to arrange a test-run, contact the Provider Services Call Center

## Interpreter services can be arranged via the Provider Services Call Center

- Telephone interpreters
  - Administered currently through the Provider Services Call Center or by Lexicon International
- Face-to-face and sign language interpreters
  - Administered currently by CulturaLink
- TTY services for hearing impaired members



## **Phase 1: Milwaukee County North**

DHS mailing July 19<sup>th</sup> for a September 1<sup>st</sup> effective date

## **Phase 2: Milwaukee County South**

DHS mailing August 19<sup>th</sup> for a October 1<sup>st</sup> effective date

## **Phase 3: Racine, Kenosha, Waukesha, Washington, and Ozaukee Counties**






DHS mailing September 18<sup>th</sup> for a November 1<sup>st</sup> effective date



## Participating Counties

- Kenosha
- Milwaukee
- Ozaukee
- Racine
- Washington
- Waukesha

### Legend

-  CCH Service County
-  Interstate Hwy
-  Urban Area
-  U.S. Hwy
-  City: Pop. > 15,000

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June 11, 2010

**Community Advocates is a local organization that provides specialized services and advocacy to help individuals and families to meet their most basic needs.**

**CommunityConnect has contracted with Community Advocates as our member “outreach connectors”**



**COMMUNITY  
ADVOCATES**

Where Meeting Basic Needs  
Inspires Hope

**Advocates Eligibility/Enrollment** - Receive referrals from Call Center to perform face to face outreach out to members with no current phone number or who may have changed address.- Educate members on to update their demographic information with economic support workers and ForwardHealth portal.-Report eligibility and enrollment issues to the Call Center for resolution.

**Benefits** - receive and act on referrals from Call Center to outreach to families to complete Welcome Call education and mini HRA.- refer and assist members with calls to the Call Center to obtain information about specific benefit questions.- Accept and act on referrals from DM and Case Management to assist members in obtaining preventive services such as HealthCheck and Immunizations.

**Social Barriers to Care** - Receive and act on issues social barriers to care such as housing, economic, child care and legal issues.

**Community Outreach** - Work with Lead Advocate and other community based organizations to support programs and activities which promote improved health outcomes for members and the community.

**Cultural Awareness** - Provide ongoing education to Lead Advocate, CRC and Call Center staff in order to provide cultural awareness of the Southeastern Wisconsin communities and neighborhoods.

**Health Education and Promotion** - Provide face to face connections to members in order to support CommunityConnect health promotion and care management programs.



- **Online at [CommunityConnectHealthPlan.com](http://CommunityConnectHealthPlan.com)**
  - Provider Communications
  - Updates and Announcements
  - Provider Training Updates
  - Provider Directory
  - Provider Manual
  - Resource Guides
  - Note that the CommunityConnect website continues to evolve. Check back frequently!
  
- **Provider Services Call Center at [1-877-350-6074](tel:1-877-350-6074)**
  - Member Eligibility and Benefits
  - Claims Status
  - EDI Information

**Member Handbooks** are available in multiple languages, as well as large print and Braille, when requested. Handbooks can be requested through the Member Advocate Call Center.

**Members will receive a Member Handbook upon enrollment.**





## The **Provider Directory**

lists providers contracted with CommunityConnect HealthPlan and includes the provider address, telephone number and languages they speak.

## The **Electronic Provider Directory**

is updated monthly and is posted to our Website at [www.CommunityConnectHealthPlan.com](http://www.CommunityConnectHealthPlan.com)

**Provider Services Call Center**

1-877-350-6074  
Fax: 1-715-836-7683  
P.O. Box 3157  
Eau Claire, WI 54702-3157

**Member Advocate Call Center**

1-888-279-1227  
TTY: 1-800-947-3529  
P.O. Box 3157  
Eau Claire, WI 54702-3157

**MedCall 24-Hour Nurse Help Line**

1-877-309-4884  
TTY: 1-800-368-4424

**Nonemergent Transportation -  
MTM**

1-888-409-6878  
TTY: 1-800-947-3529

**Behavioral Health Services**

1-877-471-6656  
TTY: 1-800-947-3429

**Website Assistance**

1-877-350-6074

**Women, Infants and Children  
(WIC) Program**

1-800-722-2295

**Vision Services – MARCH Vision**

1-888-493-4070  
TTY: 1-877-627-2456

**Dental Services - SEDA**

1-877-389-9870  
TTY: 1-800-947-3529

**Pharmacy**

*Provided directly by the state of  
Wisconsin ForwardHealth*  
1-800-362-3002

**Eligibility and Enrollment**

*Provided by ForwardHealth:*  
[www.ForwardHealth.wi.gov/](http://www.ForwardHealth.wi.gov/) or  
WiCall AVR: 1-800-947-3544

State Medicaid HMO  
Enrollment Specialist  
1-800-291-2002

**Prior Authorization & Case  
Management**

1-877-471-6656  
Fax: 1-877-471-6658

**Claims and Billing & Claims  
Appeals**

1-877-350-6074  
Fax: 1-715-836-7683  
P.O.Box 3157  
Eau Claire, WI 54702-3157

For questions regarding  
electronic billing, please contact  
our EDI Specialist at  
1-877-350-6074

**Our payor ID for electronic  
claims submission is 95192.**

**Member Grievances and Appeals**

Fax: 1-866-387-2968  
E-mail [sspga@wellpoint.com](mailto:sspga@wellpoint.com)  
*(Be sure to include "SECURE"  
in the subject line.)*

**Credentialing/Recredentialing**

1-800-516-7587  
To request a provider  
application: 1-888-599-1771

## CommunityConnect HealthPlan

**CALL TOLL FREE**

**Provider Services Call Center**

**1-877-350-6074**

YOUR LOCAL PRESENCE

**Bruce Kruger**

**Director, Medicaid Field Operations, Wisconsin**

**[Bruce.Kruger@WellPoint.com](mailto:Bruce.Kruger@WellPoint.com)**

**(262) 389-5034**



*Thank you for your time*

*We look forward to working  
with you*

CommunityConnect HealthPlan is the trade name used by CompCare Health Services Insurance Corporation for its insurance policies offered through the BadgerCare Plus program.