



Fourth Quarter 2023 Provider Webinar

Housekeeping



- ▶ Please mute your phone.
- ▶ Please do not put this call on hold — we can hear your hold music.
- ▶ Please hold all questions until the end of the presentation.
- ▶ This presentation will be posted to the Arkansas Total Care website soon.

Disclaimer



- ▶ Arkansas Total Care has produced this material as an informational reference for providers furnishing services in our contract network and Arkansas Total Care employees, agents and staff make no representation, warranty, or guarantee that this compilation of information is error-free and will bear no responsibility or liability for the results or consequences of the use of this material.
- ▶ The presentation is a general summary that explains certain aspects of the program and is not a legal document.
- ▶ Although every reasonable effort has been made to assure the accuracy of the information within these pages at the time of publication, the program is constantly changing, and it is the responsibility of each provider to remain abreast of the program requirements. Any regulations, policies and/or guidelines cited in this publication are subject to change without further notice.
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Agenda



- ▶ Personal Caregiver ID
- ▶ New Payment Method: VCC
- ▶ Request for Reconsiderations or Claim Disputes
- ▶ Clinical & Payment Policies
- ▶ New Criteria Guidelines
- ▶ 340B Program Medical Billing
- ▶ Policy Updates
- ▶ Manage Vision Benefits
- ▶ Cultural Competency Training
- ▶ Fraud, Waste, and Abuse
- ▶ Provider Demographic Accuracy
- ▶ Contact Information

Join Our Email List Today



Receive current updates

Arkansas Total Care:

▶ ArkansasTotalCare.com/providers.html

For Providers

The best support is close to home. That's why Arkansas Total Care operates from your neighborhood. We partner with local services and providers. Our team brings over 20 years of healthcare experience. We look forward to continuing that dedication.

Every individual should live with respect and dignity. We will help our members to maximize their independence. We will also help and maintain members quality of life in their chosen setting.

If you are interested in joining us as a provider, please visit our [Become a Provider](#) page.

Arkansas Total Care provides the tools and support you need to deliver the best quality of care. Please view our listing on the left that covers forms, guidelines and helpful links.

Interested in getting the latest alerts from Arkansas Total Care? Fill out the form below and we'll add you to our email subscription.

Name *	Position Title *
<input type="text"/>	<input type="text"/>
Email *	
<input type="text"/>	
Phone Number *	
<input type="text"/>	
Group Name *	
<input type="text"/>	
Group NPI	
<input type="text"/>	
Tax ID	
<input type="text"/>	
<input type="submit" value="Submit"/>	

Login To Your Account

Access your secure provider information any time.

Abbreviations



Acronym	Definition
ARTC	Arkansas Total Care
EVV	Electronic Visit Verification
PHE	Public Health Emergency
FWA	Fraud, Waste, and Abuse
HCBS	Home- and Community-Based Services
NPI	National Provider Identification
PASSE	Provider-Led Arkansas Shared Savings Entity
SIU	Special Investigations Unit

Personal Caregiver ID



Personal Caregiver ID Updates



All Arkansas providers are required by the Arkansas Department of Human Services (DHS) to provide a caregiver Medicaid ID for every caregiver servicing members for personal care, attendant care, and respite services.

- ▶ Effective January 27, 2023, the caregiver Medicaid ID must be entered for every caregiver profile in HHAeXchange.
- ▶ The caregiver Medicaid ID should be entered in the Professional License Number field of the caregiver profile.
 - The Professional License Number is required when editing or adding a new caregiver and before saving the caregiver profile in HHAeXchange.
 - Failure to add an active and accurate Medicaid ID for each caregiver can result in delay in claim payment or denials.

Personal Caregiver ID cont'd



- ▶ To avoid claim denials, the caregiver effective date should be listed in HHAeXchange appropriately. You can submit these visits via HHAeXchange or a chosen third-party EVV system that aggregates with HHAeXchange.
- ▶ Claims received outside of the EVV system will be denied with the note:
“NO EVV VISIT MATCH FOR MEDICAID ID BILLED.”
- ▶ If you have any questions or concerns about this change, please contact Provider Services at 1-866-282-6280 (TTY: 711). You can also contact HHAeXchange at 1-855-400-4429.

Personal Caregiver ID cont.



Name: Anderson Stephanie Team: Address: XXX XXX	Caregiver Code: WCP-1008 Agency: QA Provider 1 Languages:	Office: A BETTER DAY HOME CARE SERVICES INC Phone: DOB: XX/XX/XXXX ⓘ	Availability Updated: Caregiver Hours: H: 0 ⓘ V: 0
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Profile [Profile Log](#) [Print Profile](#)

Demographics [History](#)

* First Name: Stephanie	Middle Name:
* Last Name: Anderson	* Initials: SA
* Gender: F	* DOB: XX/XX/XXXX ⓘ H
* Caregiver Code: WCP-1008	Alt. Caregiver Code: 5008
Caregiver Mobile ID: ⓘ	Mobile Type: ⓘ
Enable Mobile Chat: ⓘ N/A	Mobile Device ID: ⓘ
Time & Att. PIN: 100008	Allow Caregiver to select the visit as a Community visit: ⓘ
Enable Mobile App Biometric Two Factor Authentication: ⓘ	Ethnicity:
SSN#: XXX-XX-XXXX ⓘ H	Country of Birth:
Rehire: No Rehire Date:	Picture:
Marital Status:	Secondary Offices: ⓘ
Dependents:	

Employment Info [History](#)

* Type: Employee H	* Status: Active H
* Employment Type: PCA, HHA, HSK, PA, HCSS, CNA, Other (Non Skilled), APC, HMK, ILST, PBIS, RESP, ESC, SDP, CBSA, COMP, PC, CH, SPC, SHHA, SHC	Reason:
* Application Date: 02/01/2021	Notes:
Hire Date: ⓘ	Employee ID:
First Work Date:	Team:
Last Work Date:	Location:
HHA/PCA Registry Number: 1081088888	Branch:
Professional License Number: 123456795	Contract: UHCT, WNCT, CCHQ, EVRC, CCQA
Referral Source:	Added/Checked Registry Date: 04/22/2022
NYC Registry checks:	NPI Number:
Exclusion/Verification Lists Checked On:	Referral Person:
Default Travel Method: ⓘ	Signed Payroll Agreement: No Date: ⓘ
	EVV Utilization: ⓘ
	Secondary Identifier: H Secondary Identifier Details

Change to Support

On July 1, 2023, the support@hhaexchange.com email address was removed. All support requests should be made via the HHAeXchange Client Support Portal. HHAeXchange developed the Client Support Portal in response to customer feedback for quicker access to support, more visibility on the status of support requests, and greater ease in managing the support request process. We recommend you begin using the HHAeXchange Client Support Portal today to take advantage of the improved experience, including:

- ▶ Faster support response
- ▶ Increased visibility of support request status
- ▶ Better communication
- ▶ Streamlined support request process



For questions regarding how to update information in the HHAeXchange system, contact HHAeXchange at 1-855-400-4429 or through the HHAeXchange Client Support Portal.

For plan-specific questions, contact Arkansas Total Care at 1-866-282-6280 (TTY: 711).

New Provider Payment Method



New Payment Method for Arkansas Total Care Providers



Arkansas Total Care is working to improve provider payment methods. To reduce the environmental impact of our payments and to enhance the provider experience, **all payments for Arkansas Total Care claims will be issued via Virtual Credit Card (VCC) beginning November 2023.**

The VCC program from Change Healthcare is a widely used payment option in healthcare that we are making available to our provider network.

Providers can also sign up for PaySpan Health to provide an innovative web-based solution for Electronic Funds Transfers (EFTs) and Electronic Remittance Advices (ERAs). This service is provided at no cost to providers and allows online enrollment.

Visit PaySpanHealth.com for more information.

Requests for Reconsideration or Claim Disputes

Requests for Reconsideration

Requests for reconsiderations are submitted when a provider disagrees with the original claim outcome (payment amount, denial reason, etc.).

Reconsiderations may be submitted using one of the following ways:

- ▶ Calling the Provider Services department
- ▶ Using the Provider Portal
- ▶ Using the Claim Dispute Form available on our [website](#) (preferred method)
- ▶ Sending a written letter that includes a detailed description of the reason for the request
 - To ensure timely processing, the letter must include sufficient identifying information, which includes, at a minimum, member name, member ID number, date of service, total charges, provider name, original EOP, and/or the original claim number found in Box 22 of the CMS 1500 form or Field 64 of the UB-04 form.

- ▶ Requests must be submitted within 180 days of the date of the original explanation of payment or denial for contracted providers.
- ▶ Written requests for reconsideration and any applicable attachments must be mailed to:

Arkansas Total Care
Attn: Request for Reconsideration
P.O. Box 8020
Farmington, MO 63640-8020

Claim Dispute — A provider disagrees with the outcome of the request for reconsideration.

- ▶ A claim dispute/claim appeal should be used only when a provider has received an unsatisfactory response to a request for reconsideration. If a dispute form is submitted and a reconsideration request is not located in our system, then the dispute will be considered a reconsideration.
- ▶ A claim dispute/appeal must be submitted using the Claim Dispute Form located on the Provider Resources page at [ArkansasTotalCare.com](https://www.arkansastotalcare.com). The form must be completed in its entirety.

The completed form may be mailed to the following address:

**Arkansas Total Care
Attn: Claim Dispute
P.O. Box 8020
Farmington, MO 63640-8020**

A claim dispute/appeal will be resolved within 30 calendar days. The provider who filed the dispute/appeal will receive a written letter detailing the decision to overturn or uphold the original decision.

Clinical & Payment Policies





Home Find a Doctor Contact

Contrast On Off a a a language

FOR MEMBERS

FOR PROVIDERS

CONTACT US

FOR PROVIDERS

Cultural Competency Training Attestation

Provider Relations

Login

Become a Provider

Provider Financial Support & Resources

Provider Training +

Pharmacy

Provider Webinars

Provider Resources -

Clinical & Payment Policies

Pre-Auth Check

Coding Tip Sheets And Forms

Provider News +

QI Program +

Clinical & Payment Policies

Arkansas Total Care Policies

To easily search for a policy, use the Ctrl+F (Command+F on Mac) function on your keyboard to search by keyword, policy number or effective date.

WHAT ARE CLINICAL POLICIES? +

WHAT ARE PAYMENT POLICIES? +

Arkansas Total Care Policies

ARTC CLINICAL POLICIES -



POLICY TITLE	POLICY NUMBER	EFFECTIVE DATE
25-hydroxyvitamin D Testing in Children and Adolescents (PDF)	CP.MP.157	January 1, 2022
Abaloparatide (Tymlos) (PDF)	CP.PHAR.345	March 1, 2022

New Criteria Guidelines



Updated Criteria Guidelines



- ▶ Arkansas Total Care has upgraded our criteria guidelines. The InterQual 2022 criteria set has been upgraded to the InterQual 2023 criteria set.
- ▶ InterQual 2023 is effective starting September 1, 2023.

To learn more about InterQual 2023, visit our [Clinical & Payment Policies](#) page at [ArkansasTotalCare.com](https://www.arkansasTotalCare.com).

340B Program Medical Billing

340B Program Medical Billing



Modifiers to use for Drugs Purchased Outside of Program

In April, Arkansas Medicaid implemented a change that mandated the use of 340B modifiers (JG or TB) for all 340B eligible non-pharmacy claim lines. If you participate in the 340B program, please be aware that you may use the following modifiers for drugs that are not purchased through the program:

Modifier U7 = Orphan Drugs

Modifier U7 UA = Other physician-administered drugs

If you have questions about this program, please reach out to our Provider Relations team at Providers@ArkansasTotalCare.com.

Policy Updates

New Personal Care Policy Effective January 1, 2024



Arkansas Total Care routinely implements and revises policies to ensure compliance with state and federal guidelines and align with current best practices.

The ARTC.UM.19 Personal Care Services Authorization policy outlines Arkansas Total Care's allowances for personal care services provided by a personal aide in a member's home and/or community. Arkansas Total Care will authorize reasonable and medically necessary personal care services for members so long as the services exist within the parameters set forth by the policy and the Arkansas Department of Human Services (DHS).

It is the provider's responsibility to ensure that all information submitted is an accurate and current representation of the member's needs. Instances in which information is not current or accurate could lead to investigation of potential fraud, waste, or abuse. Providers should review and adhere to the DHS Personal Care Provider Manual. The manual is available online at [HumanServices.Arkansas.gov](https://www.human-services.gov). Refer to Section 222.100 for important information on personal aide selection, training, and continuing education.

To view ARTC.UM.19 and other health plan policies, visit our [Clinical Coverage/Medical Policy Updates](#) page at [ArkansasTotalCare.com](https://www.ArkansasTotalCare.com).

Supportive Living Clinical Policy



- ▶ Arkansas Total Care amended our ARTC.CC.20 Supportive Living Criteria policy effective August 14, 2023. To view this and other policies, visit our [Clinical & Payment Policies](#) page.

Psychiatric Residential Treatment Discharge Planning



Discharge planning should start upon admission. A final Discharge Plan must include:

- ▶ Member education specific to the diagnosis, including information on recognizing signs and symptoms
- ▶ Self-care with reminders and cues to use skills developed during treatment
- ▶ Integrated care, including follow-up appointments with scheduled dates/times and a release to send treatment records to all providers the member will be following up with
- ▶ Medication management
- ▶ Supports, roles and responsibilities, school transition, and any needed follow-up with the school to which the member will return
- ▶ Information on how to return to care if needed, including phone numbers and instructions
- ▶ A safety plan

The discharge plan will be sent to either the Care Coordination or Utilization Management department within one business day of discharge so that Arkansas Total Care can ensure the member/family are following up with the discharge instructions.

A training module can be found on our [Provider Training](#) page.

Active Treatment:

- ▶ Active treatment is defined as a minimum of 40 treatment hours per week, not including classroom time, five of which are conducted by a licensed mental health professional (LMHP), with a minimum of one being in an individual setting rather than a group setting.
- ▶ Included in the five hours per week by a LMHP, there should be a minimum of two family therapy sessions per month, as well as a weekly visit with the psychiatrist.

Incident Reporting:

All incidents should be reported to Arkansas Total Care in accordance with the standards outlined in the Arkansas Total Care Provider Manual. The DHS QA Incident Report form is available on the [Provider Resources](#) page of our website, under Reference Materials. List your facility in the HCBS provider field at the bottom of the form.

Send completed forms via secure email to Incident@ArkansasTotalCare.com.

Upcoming Changes to the Way We Manage Vision Benefits



Manage Vision Benefits



Effective January 1, 2024, Arkansas Total Care will assume the management of medical eye care services. We will be responsible for the following functions for medical eye care services:

- ▶ Contracting and credentialing
- ▶ Claim processing and appeals
- ▶ Provider services
- ▶ Provider partnership management
- ▶ Provider web portal
- ▶ Provider education and resource materials (e.g. provider manual, training)
- ▶ Prior authorization, retrospective utilization review, and medical necessity appeals
- ▶ Provider complaints

Engolve Vision will continue to manage routine eye care services and full scope of licensure optometric services for our members.

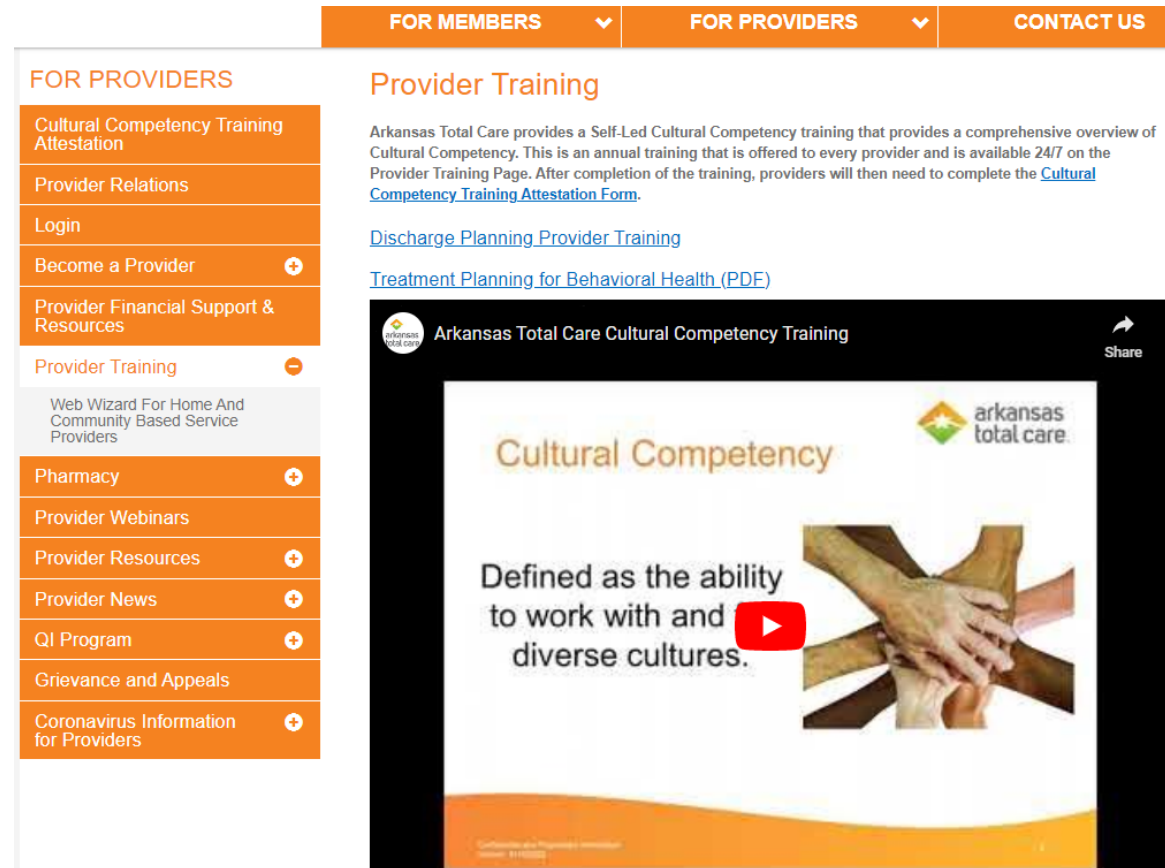
If you have any questions about these changes, please reach out to our Provider Relations team at Providers@ArkansasTotalCare.com or call us at 1-866-282-6280 (TTY: 711). You can also contact your Provider Relations Representative.

Cultural Competency Trainings



Cultural Competency Trainings

- ▶ This course details how to service the member's healthcare needs in a culturally competent manner
- ▶ Arkansas Total Care now provides self-led trainings for providers to complete at their leisure.



The screenshot shows the Arkansas Total Care website interface. At the top, there are three navigation tabs: 'FOR MEMBERS', 'FOR PROVIDERS', and 'CONTACT US'. The 'FOR PROVIDERS' tab is active. Below the navigation, there is a sidebar menu with the following items: 'FOR PROVIDERS', 'Cultural Competency Training Attestation', 'Provider Relations', 'Login', 'Become a Provider', 'Provider Financial Support & Resources', 'Provider Training', 'Web Wizard For Home And Community Based Service Providers', 'Pharmacy', 'Provider Webinars', 'Provider Resources', 'Provider News', 'QI Program', 'Grievance and Appeals', and 'Coronavirus Information for Providers'. The main content area is titled 'Provider Training' and contains the following text: 'Arkansas Total Care provides a Self-Led Cultural Competency training that provides a comprehensive overview of Cultural Competency. This is an annual training that is offered to every provider and is available 24/7 on the Provider Training Page. After completion of the training, providers will then need to complete the [Cultural Competency Training Attestation Form](#).' Below this text are two links: 'Discharge Planning Provider Training' and 'Treatment Planning for Behavioral Health (PDE)'. A video player is embedded in the content area, showing a slide with the text 'Cultural Competency' and 'Defined as the ability to work with and diverse cultures.' The video player has a play button and a 'Share' icon. The slide also features the Arkansas Total Care logo and an image of hands stacked together.

Cultural Competency Training Attestation



Home Find a Doctor Contact

Contrast On Off a a a language

- FOR MEMBERS
- FOR PROVIDERS
- CONTACT US

FOR PROVIDERS

Cultural Competency Training Attestation

- Provider Relations
- Login
- Become a Provider
- Provider Financial Support & Resources
- Provider Training
- Pharmacy
- Provider Webinars
- Provider Resources
- Provider News
- QI Program
- Grievance and Appeals
- Coronavirus Information for Providers

Cultural Competency Training Attestation

Cultural Competency Trainings needs to be completely every year. Providers who have completed the Cultural Competency Trainings can complete the form below.

Practice Name *

TIN *

Practitioner Name *

Practice Phone Number *

What type of training did you attend? *

Attended an ARTC presented webinar

Attended another Cultural Competency training

The year attestation completed *

Check Box for attestation*

Attest

Electronic Signature *

Fraud, Waste, and Abuse



Fraud, Waste, and Abuse (FWA)



- ▶ Arkansas Total Care takes the detection, investigation, and prosecution of fraud, waste, and abuse very seriously and has a FWA program that complies with federal and state laws.
- ▶ We routinely conduct audits to ensure compliance with billing regulations.
- ▶ The Centene Special Investigations Unit (SIU) performs retrospective audits, which may result in taking actions against providers who commit fraud, waste, and abuse.

Fraud, Waste, and Abuse cont'd



Actions may include but are not limited to:

- ▶ Remedial education and/or training to prevent the billing irregularity
- ▶ More stringent utilization review
- ▶ Recoupment of previously paid monies
- ▶ Termination of provider agreement or other contractual arrangement
- ▶ Civil and/or criminal prosecution
- ▶ Any other remedies available to rectify

Some of the most common FWA submissions seen are:

- ▶ Unbundling of codes
- ▶ Up-coding services
- ▶ Add-on codes without primary CPT
- ▶ Diagnosis and/or procedure code not consistent with the member's age and/or gender
- ▶ Use of exclusion codes
- ▶ Excessive use of units
- ▶ Misuse of benefits
- ▶ Claims for services not rendered

If you suspect or witness a provider inappropriately billing or a member receiving inappropriate services, please call our anonymous and confidential hotline at 1-866-685-8664

Provider Demographic Accuracy

Provider Demographic Accuracy



Help us ensure that the information provided to members for your service location is up to date!

- ▶ This can be through credentialing, rosters, provider data change forms and third-party vendor requests, such as LexisNexis.
- ▶ Maintaining correct clinic information ensures our members can locate the providers they need through the Arkansas Total Care provider directory.
- ▶ Changes can be submitted through the Secure Provider Portal or by submitting a provider data change form to ArkCredentialing@centene.com.
- ▶ Changes can include, but are not limited to:
 - Adding or removing a location
 - Updating your phone number
 - Removing inactive practitioners
- ▶ We are required to report directory accuracy to the state.

Key Contacts

Key Contacts



Department	Phone/Website	Fax/Email
HHAeXchange Support	1-855-400-4429	HHA Client Support Portal
TurningPoint	501-263-8850 Toll-free: 1-866-619-7054	501-588-0994
NIA Advanced Imaging (MRI, CT, PET)	1-866-500-7685 RadMD.com	N/A
Envolve Vision	1-844-280-6792 VisionBenefits.EnvolveHealth.com	N/A
EDI Claims Assistance	1-800-225-2573 ext. 6075525	EDIBA@centene.com

Need to Contact Us?

Provider Services Call Center



First line of communication

Arkansas Total Care
Provider Services Call Center

- ▶ 1-866-282-6280 TTY: 771

**Representatives are available
Monday through Friday, 8AM
to 5PM (Central Standard Time)**

Provider Service Representatives can assist with questions regarding:

- ▶ Eligibility
- ▶ Authorizations
- ▶ Claims
- ▶ Payment inquiries
- ▶ Negative Balance reports
- ▶ Appeals
- ▶ Check Re-issue
- ▶ Secure Portal Password reset

Provider Inquiries



- ▶ After speaking with a Provider Services Representative, you will receive a reference number, which will be used to track the status of your inquiry.
- ▶ If you need to contact your assigned Provider Relations Representative, you must have the following when submitting an email inquiry:
 - Reference number assigned by the Provider Services Call Center
 - Provider Name
 - Tax ID
 - National Provider Identifier (NPI)
 - Summary of the issue
 - Claim numbers (if applicable)

FOR MEMBERS FOR PROVIDERS CONTACT US

FOR PROVIDERS

- Login
- Become a Provider**
- Pharmacy
- Provider Webinars
- Provider Resources +
- Provider News
- Grievance and Appeals
- QI Program +

Become A Provider

Thank you for your interest in participating with Arkansas Total Care. We are excited for the chance to work with you to provide high-quality care.

If you are interested in joining our network call toll free 1-844-631-6830 or fill out the form below.

As a Arkansas Total Care provider, you can rely on:

- A comprehensive approach to care for your patients through disease management programs, healthy behavior incentives and 24-hour toll-free access to bi-lingual registered nurses
- Initial and ongoing provider education through orientations, office visits, training and updates
- A dedicated claims team to ensure prompt payment
- Minimal referral requirements and limited prior authorizations
- A dedicated provider relations team to keep you informed and maintain support in person
- The ability to check member eligibility, authorization and claims status online

Healthcare collateral for your patients (e.g., information about our benefits and services) at your office

Legal Practice Name or DBA * Specialty *

Practice Address *

To join our network, select **Become a Provider** from the **For Providers** tab on our [website](#). You must currently be a participating Arkansas Medicaid provider.

Contracting Department



Phone Number: 1-844-631-6830

Hours of Operation: 8 a.m.–4:30 p.m. CT



If you know your party's extension



Ambetter



Wellcare by Allwell



Arkansas Total Care



To repeat prompts



Provider Contracting Email Address: ArkansasContracting@centene.com

Regular contracting inquiries and contract requests

Credentialing



Credentialing Department

Phone: 1-844-263-2437

Fax: 1-844-357-7890



Provider Credentialing Email:

ArkCredentialing@centene.com

Questions?



Please submit any questions by using the Q&A feature in Zoom

OR



Send an email with “Provider Webinar” in the subject line to:

Providers@ArkansasTotalCare.com



Thank you for joining us!