PROVIDER BULLETIN

News and Updates on the Louisiana Medicaid Provider Portal

This Provider Bulletin was developed to answer questions and address concerns providers may have regarding Medicaid's new enrollment and eligibility system. Launched on November 13, 2018, the new system includes a new Provider Portal that replaces the former Facility Notification System (FNS) as **the primary way providers manage documentation requirements**. *The Self-Service Portal can be accessed at* https://sspweb.lameds.ldh.la.gov/selfservice/.

New "Strike Team" Tasked with Response to Customer Inquiries

Medicaid has established a new "strike team" tasked with providing immediate response to the eligibility and enrollment issues of Medicaid recipients and their families. The team is comprised of leads from each of the eight Medicaid regions who will manage each inquiry through to resolution.

The process will be seamless for recipients, who will continue to seek assistance through their normal avenues including their Medicaid analyst, Medicaid regional office staff and the toll-free customer service hotline. Staff working in these areas have been trained to triage concerns and escalate to the strike team. The strike team member will be the primary contact for the recipient. They will make direct contact with the recipient within two hours of the inquiry, provide updates on progress for issues that are not quickly resolved and report back to the recipient at resolution.

In cases involving system changes, the team lead may assign management of the recipient's issue to a regional Medicaid analyst. The team lead will remain in constant contact with the analyst until the inquiry is resolved and the recipient notified.

Eligibility and Enrollment System Enhancements for Long Term Care

The implementation period for any new technology, particularly one as large and complex as the new eligibility and enrollment system, includes the built-in expectation that regular system modifications will be necessary to address issues and execute identified areas of improvement. Since go-live in November, Medicaid has continuously monitored system performance and made enhancements in response to observations of issues or direct feedback from users.

Below is an overview of system improvements, both past deployments and those planned for future implementation:

Nursing home facility and provider impacts
Medicaid has scheduled a number of system enhancements that will make it even easier for nursing home facilities, long term care (LTC) providers and their clients to process forms and enter information. Earlier this month, we updated Patient Liability Income (PLI) tables relating to date of death, community spouse and situations where waiver and LTC benefits overlap in the same month. Later this month, we will update correspondence showing different PLI amounts for vendor payments in certain scenarios, such as months where LTC and waiver benefits overlap.

Benefit calculation and financial improvements
We will be updating benefit calculation worksheets with recent formula changes to improve eligibility determination for applicants and the processing times of enrollees' benefits. These updates will have the following impacts:
- Children's Choice Waiver (CCW) payments will be calculated each month so that vendors will receive payments on time.
- PLI amounts will be calculated for households seeking Medicaid coverage retroactively.
- Payments will be processed timely for nursing homes regardless if a client passes away during residency.

Updates for enrollees

Several upcoming system enhancements will improve LTC enrollees' system access, ease of use and access to benefits. These include:

- Sending enrollees requests for information when income/resources cannot be verified; and
- Ensuring LTC enrollees receive retroactive coverage for the months they were eligible.

Back-end technical enhancements

Several technical enhancements are planned to improve system functionality. Though most of these will not be visible to LTC system users, they will improve eligibility and enrollment capabilities for enrollees, providers and facilities alike. These enhancements include:

- Enabling Medicaid recipients to have more than one nursing home facility listed on their case;
- Creating new fields to provide more client detail on applications, thus improving data accuracy and eligibility results; and
- Invalidating various error messages that cause lag times in application processing.

CLARIFICATION: Long Term Care and Cost of Living Adjustment Notification

In the January 7 edition of the Provider Bulletin, Medicaid responded to inquiries from providers regarding notification around annual cost of living adjustments (COLA). As we noted in the story, the process for notification is unchanged from the legacy system – recipients still receive notice (often referred to as the 18 LTC form) **only** when there is an income change. Providers are also sent a copy of this notice when it goes out to the recipient.

While this information is accurate, we are aware that there were instances where providers still received recipient notices, even when there was no change. In these situations, the notices were manually mailed by a Medicaid long term care case worker, at the request of the provider. This is not standard protocol for Medicaid staff and, as with our legacy system, there is no automated way to generate such notices.

Please keep in mind, the system implementation that took place mid-November has delayed the COLA processing some. Most of this work has been completed (approximately 11,000 notices have been mailed), but as with prior years, there are still some reviews to be done on individual cases. There are approximately 7,000 notices pending mailing as they are under review.

If you feel that one of your patients should have received a COLA notice, please reach out to your regular contacts within the Louisiana Department of Health and we will research and determine if they are in the pending review queue.

Frequently Asked Questions

Q: I work for a nursing home. Who can assist me with escalating any issues I have with the new eligibility and enrollment system?

A: You should continue to use your regular contacts within Medicaid, the Office of Aging and Adult Services (OAAS) and the Office for Citizens with Developmental Disabilities (OCDD). Medicaid has internal processes and procedures to triage the most urgent concerns and provide you with the answers you need quickly and accurately. Your liaison within the proper agency will make sure your item is escalated to the dedicated resources and handled as high priority.

Q: My patients report being disconnected from the Medicaid customer service hotline. Is there an issue?

A: Medicaid is aware callers to our customer service hotline at 1-888-342-6207 have been disconnected due to "high call volume." Medicaid has a limited number of incoming lines available, and when we get more calls than lines, a caller will be disconnected. Effective Monday, January 14, all calls over the limit will automatically transfer to our back-up call

center handled by our enrollment broker. Additionally, any calls exceeding an eight minute wait time will automatically transfer as well. The enrollment broker call center line is staffed by trained eligibility representatives. Callers can get assistance with many of the same tasks as the other number, including assistance with taking applications. They can also seek assistance via email at medweb@la.gov.

Q: Where can I go for help?
A: News and updates on the Provider Portal, including training and a portal user guide, can be found here: http://ldh.la.gov/index.cfm/page/3497. You can also e-mail MedicaidEligibilitySystemsHelp@la.gov for assistance.

Important Notices

Important notices about the new system and training on how to navigate the provider portal can be found at our website dedicated to Medicaid system changes here.

IMPORTANT LINKS
Self-Service Portal – https://sspweb.lameds.ldh.la.gov/selfservice/
Provider Portal Assistance – MedicaidEligibilitySystemsHelp@la.gov
Medicaid Eligibility and Enrollment Web – http://ldh.la.gov/index.cfm/page/3497
Medicaid Customer Service – **1-888-342-6207** | medweb@la.gov
Provider Forms – https://www.lamedicaid.com/provweb1/Forms/forms.htm
& http://ldh.la.gov/index.cfm/page/1278