

Administrative Simplification Meeting Minutes

Friday, November 16, 2018 ■ 10:00am - Noon ■ LDH, Bienville Room 173

Conference Number: 1-888-636-3807 Access Code: 9600158

Attendees:

Provider Community: Christopher Vidrine, Sherry Poss, Michelle Kulpa, Dana Johnson, Bret Talbot, Greg Ivey, Ashley Politz, Shan McDaniel, Karen Lambert; Deirdre Davis, Robert Stern, Rebecca Rogues, Greg Waddell, Berkley Durbin

Aetna: Mark Grippi, Jodi Carter Jones,

Healthy Blue: Dexter Trivett, Annie Garnier

AmeriHealth Caritas: Sherry Wilkerson, Kelli Nolan, Greg

Louisiana Healthcare Connections: Joe Sullivan, Kendra Case, Candace Campbell, Russell Politz, Dr. Wallace

United Healthcare: Monica Thurmond, Natalie Holt-Simmons, Yolanda Hubbard, Susan Mieras

Louisiana Department of Health: Whitney Martinez, Deidra Hickman, Kayla Gourgues, Cordelia Clay, Helen Prett

Single Source Credentialing

- Nothing new to report; still working on contract between LDH, Verysis and legal. It will soon go to CMS and OSP per execution. Anticipating summer 2019 deployment. Email Kate Stewart, Whitney or Michael with any questions.

Provider Directories

- Third, quarter secret shopper results will be going out to the MCOs. IPRO is now under contract to do future audits. IPRO will not conduct secret shopper calls initially, but instead state they are calling from LDH. Whitney reminded providers to please be a part of the process and make sure the directories are as accurate as possible. The directories should be updated with any new or changed information within 10 days, if not, the provider needs to contact the MCO again.

Well Woman Policy Update

- Changes will be effective December 1st to allow 2 preventive visits per year for women. The IB has officially gone out. The professional services manual will be updated. Provider manual spells out what should be included in well woman visit so there are no duplication of services.

Sterilization Form "Patch"

- The sterilization form patch will need to be present for all parties billing. Federal regulations are very specific as to what is needed. The department will send out Dr. Mehta's tool kit and she would like feedback from both providers and the MCOs. Bringing back to legal to ask for clarity though.

Independent Review Update

- The department has received 45 request and 36 were sent to the independent reviewers. We are contracted with MLS for medical necessity reviews. Their turnaround time is 3-5 days. Whitney reminded the MCOs that regardless if the reviewer sides with them or the provider the MCO pays the independent reviewer. The provider is required to pay the MCO within 10 days

PAC Meeting Update

- The next PAC meeting is November 29th. We combined 13-2 and 12-27 but still have internal people reviewing it and have been working on the 182 report to see what it looks like to line up with the IB.

J Code Drug Fee Schedule Update

- Our coding and fee schedule group loaded the fees. Once all the MCOs update, any recycled claims have or will be completed by 11/22/2018.

Patient Assignment Meeting

- Internal meetings with providers and the MCOs have occurred. Erin C and Lauren will be sending out core things about these meetings. The MCOs and the department spoke about patient assignment and doing claims analysis and we were very pleased with the responses from the MCOs.

Single PDL

- Jen and Mel in pharmacy are still moving forward. They did take down notice of intent for January 2019. The pharmacy facts are on the website and it is updated every Friday.

DRG

- LDH will delay implantation of DRGs from 01/01/2019. In recent weeks we discovered critical issues that need resolving. We will be working with the hospitals over the next several weeks to resolve these issues with a new aim of a 07/01/2019 start date.

LaMEDS

- Kayla talked to Rebecca Harris who is the section chief in eligibility; issues came up with processing applications or uploading newborn forms or documents. Those issues have been resolved. She did provide some contact info for any issues that may come up and email Rebecca for any issues. For providers not pre- registered they must have an authorized rep from their practice so that LDH can verify that the provider works there.

Open Discussion

- Dr. Buras is having issues with incentive payments regarding HEDIS criteria, which is every 6 weeks before 18 months. If child misses any appointments then they will have to catch up on visits. Dr. Buras wants the edit off the program so that he can stay in line with HEDIS criteria. WPM will put Dr. Buras in touch with Erin Campbell in Quality. Greg Ivey and Dr. Buras are having issues with vision and ear lavages being paid at the correct fee schedule. The department is looking into this for them.

Wrap Up and Next Steps