



BHA/MA/Optum/Beacon Health Options Provider Quality Committee Meeting Minutes

**Friday, October 11, 2019
10:00 am to 11:30 am**

In attendance: Cynthia Petion, Steve Reeder, Stephanie Clark, Donna Shipp, Rebecca Frechard, Shannon Hall, Kim Erslane, Felix Dawson, Wendy Merrick, Laverne Johnson, Michelle Morgan, Barbara Trovinger, Angie Kent, Susan Steinberg, Jenny Howes, Scott Gloeffler, Regina Stanley, Roxanne Kennedy, Oleg Tarkovsky, Paris Crosby, Howard Ashkin, Scott Green, Scott Leffler, Karl Steinkraus, Emma Blass, Lisa Hadley

Phone attendance: There were 350 providers who dialed in by phone.

Topics & Discussion

BHA Update

- BHA announced training opportunities for mental health and substance use disorder treatment providers:
 - The National Drug Court Institute will hold a training on December 5 and 6 2019 at Spring Grove Hospital, Dix building. Registration is now open through the NDCI website <https://www.ndci.org/resource/training/treatment-provider-training/> This registration closes on November 15, 2019.
 - There will be a training on the cultural and linguistic competence and uses of the national class standards on November 1, 2019 at Temple Oheb Shalom in Pikesville. For more information regarding these trainings and upcoming webinars, please contact Cynthia Petion at Cynthia.petion@maryland.gov
 - BHA in partnership with ASAM is offering free ASAM Criteria training:
 - November 4, 2019 at the Maritime conference center in Linthicum Heights, MD (central).
 - December 3, 2019 at the Double Tree by Hilton in Annapolis, MD (southern)
 - December 12, 2019 at the Hilton Garden Inn Frederick, MD (Western)



- December 2, 2019 for the Eastern region location is being confirmed.
- Two additional ASAM trainings will be held for the central and southern regions in January 2020. All trainings will provide CEU's.

Medicaid Update

- ASO transition: The Board of Public Works (BPW) formally approved the selection of Optum as the new ASO for 1/1/2020. The meeting for approval was held on July 24, 2019. The final contract included an implementation period with an official start date of 9/1/2019.
- Optum, though affiliated with United Health Group, their business in Maryland is to perform for the Public Behavioral Health System as an Administrative Service Organization. The System providers see today, pre-transition, is still the same system. The Department designates the rules, regulations, in accordance with the State's agreement to CMS (Center for Medicare and Medicaid Services), as our federal partner, and designates medical necessity criteria, coding and rates. These things do not change based on which company performs as the ASO. Changes to the PBHS are only directed by MDH.
- Providers do NOT need to re-enroll with Medicaid with the exception of those due for re-validation, re-enrollment, new address location etc. – all the standard enrollment process remains with Medicaid.
- Providers DO need to register with Optum through their portal which is also called provider connect – so that the provider file is “turned on” to Optum and you will then be able to submit for authorizations and claims. It is essential that providers register with the new ASO – but also take this opportunity to review and update your information. Remember you CANNOT change provider address, add lines of business, etc. without making the change with MEDICAID (ePrep) but you can update some information via the portal and add appropriate contact information of staff to ensure you receive important emails from the Department.
- Optum will hold trainings for providers on their system and how to register with their platform and training dates will be shared as soon as they're available.
- While MDH understands the need to communicate transition information to the provider community, Provider Council needs to remain focused on the important issues with the current system and not neglect those topics by focusing on the upcoming ASO transition, however the November and December meetings will have time set aside for transition updates.
- Maryland Medicaid is working to complete the transition FAQ. The FAQ should be posted by next Friday with answers to some questions and will go out in a Provider Alert. If you have questions regarding the transition, you can send your questions to: mdh.bhasotransition@maryland.gov



- The link for the BH ASO transition is now live:
<https://mmcp.health.maryland.gov/Pages/Administrative-Service-Organization-Transition-Information-.aspx>

Beacon Health Options Update

- Beacon's office location has closed and the staff have all moved to work from home for the remainder of the year. They will continue answering emails, phone calls and attending meetings. There should be no disruption to the call center, authorizations or claims since these have historically been handled offsite. If anyone is experiencing any issues with reaching staff, please email Roxanne Kennedy at Roxanne.kennedy@beaconhealthoptions.com.

Provider Questions

1. Are providers allowed to bill Beacon for DUI Education?

DUI education is not reimbursable. Individuals that have been convicted of a DUI or referred by a District Court Judge or Administrative Law Judge in the Office of Administrative Hearing or who have applied for a new driver's license following revocation of their original license due to a substance related incident require DUI education. These are individually set by the provider and are self-pay. Individuals required to participate in DUI education receive a letter from the MVA with instructions for arranging an assessment with a BHA licensed provider. The assessment will determine if the individual will be required to successfully complete substance abuse disorder treatment in addition to the mandatory DUI education.

2. MDH recently published a transmittal, General Provider Transmittal No. 87, regarding the identification of rendering providers on claims. How does this affect LMSW and CSC-AD providers who cannot be enrolled in ePrep, but are being supervised?

This update was related to a transmittal about inpatient services with rendering providers on claims and only impacted RTC's and Hospitals.

3. Is the Provider Transmittal on new PRP billing requirements (PT 06-20) inclusive of RRP services?

This is a PRP service and the claims process would apply.

4. What caused the payment delay at the end of September? What steps have been taken to prevent the problem from recurring? [note: there were two



weeks in March 2019 where payments were delayed due to insufficient state funds, and MDH indicated that changes were in place.]

The issues that occurred in March were due to the claims volume being paid out being larger than the funding that was in the bank accounts. The state took great steps to increase the amount of dollars in both the State and Medicaid bank accounts to ensure that issue would not reoccur. The issues in September are due to the high claim line volume, which impacts the length of time it takes to process the weekly check-runs. Last week alone, Beacon saw an influx of over \$6 million dollars' worth of claims coming through our systems likely as a result of reconciling claims prior to the transition. Beacon is monitoring the weekly inventory and trying to mitigate timing issues by strategically planning when we complete claims rework and adjustment work. However, we expect that this volume will continue to climb towards the end of the contract and we will also ensure that we are communicating any delays as proactively as possible.

- 5. There has been a growing delay in posting Provider Alerts online. As of October 2, the most recent alert posted was September 13. Timely posting is helpful to ensure dissemination.**

Beacon heard last Provider Council that there was a delay in posting on the website and put in new review process to ensure the website is appropriately updated. As of last week, Beacon was caught up through September 30, 2019. As a reminder to providers there are two separate communications that go out, one is a Provider Alert that is truly just an alert and the other is a Department Transmittal. If you are looking for Department Transmittals you have to scroll down to the bottom of the alert page to find them. If you are still unable to see the updated material, you may need to clear out your browser cache so that the most recent version of our website is populating. Please note that there can be a delay depending on how many alerts need to be posted on the website and the availability of our web team, but all documents should be published within 14 business days. Currently, our average the turnaround time has been about one to three days. If you are unable to find an alert or any other item you are looking for on the website please email marylandproviderrelations@beaconhealthoptions.com and someone will assist you in locating that documentation.

Optum Introductions

1. Scott Green as the Chief Executive Officer.
2. Dr. Lisa Hadley as the Chief Medical Officer



3. Emma Blass as the Communications Director
4. Karl Steinkraus as the Director of Provider Relations

Additional Provider Questions

- 1. Is Optum's website going to absorb the archives of transmittals and alerts?**

Yes, they will be archiving the historical Provider Alerts and Transmittals.

- 2. Are level I substance use providers able to bill for services offsite such as home of a client, a relative or at a circuit court?**

This is an office based service with the exception of schools and nursing homes only.

- 3. Question regarding the PRP Transmittal that came through about billing. If all of the PRP's submit on Feb 1, 2, 3rd how quickly will those claims be turned around?**

The effective date for the change is 1/1/2020. In Optum's system, providers will be able to submit encounters as they occur but if they submit the claim prior to the beginning of the next month it will be pended for payment as of the first day at the conclusion of the previous month. Even if providers submit their encounter data with the claim submission, adjudicated claims would be slated to pay at the next pay cycle.

Under the current system, the ASO spends excessive resources reversing claims then re-adjudicating claims based on updated encounter data. The new process of submission after the services have been rendered should eliminate the need for this re-work and help ensure that providers are paid accurately and timely with limited need to retract funding in future months.

- 4. The Optum claim payment system is it more commercial based or focused more as an MMIS system?**

The system is being configured to mirror an MMIS system.

- 5. What kind of work is being done to look at Maryland customized services and making sure Optum's billing system can handle that related to residential crisis or braided services?**



Optum and the State are working through the system build. More to come on this concern.

6. What is going to happen with the credentialing process? If we have providers to credential as of today's date, do we continue to use E-prep?

Yes, providers continue to enroll via ePrep. Provider enrollment process does not change. Providers do need to "register" with Optum, just as you did with Beacon to activate your provider to receive authorization and claims payment.

7. Why are claims past 30 days not being processed as a whole, but instead in parts?

This is a provider specific question, please email marylandproviderrelations@beaconhealthoptions.com with some specific examples.

8. Will there be any changes in the SGAM funding?

No, there will be no changes to the SGAM funding

9. Will the process for Vocational and Target Case management authorizations remain the same?

These processes will remain the same.

10. Will the new Optum system be able to match up the 2016 and 2018 claim?

If this is a provider specific question, please send separately. All relevant claims history will be transferred to Optum, but paid claims live in MMIS/MMIS archives.

11. I would like to know more about the EHR side of this transition. Our EHR currently interfaces directly with BHO. Is there someone (IT dept.) that we can contact to begin the interfacing process (i.e. - what format do claims need to be in electronically) in order to be paid?

Information related to EHRs will be issued when available.

12. After the transition can we continue to do the retro billing for FY2019?

Yes, Maryland Medicaid rules allows providers a year from the date of service to submit claims. Historical and active authorization files are being transferred from Beacon to Optum.



13. Will SUD locations need to register with OPTUM in order to receive a Training Schedule of how to submit authorizations and other requests, etc.? When will this training start?

Yes, training will be available and notice will be issued by Optum. More to come on this.

14. Can we have point of contact information for ABA / mental health services? Our point of contacts with Beacon are Peter (Josh) Carlson and Sara Daugherty. The ABA team for beacon have been and are very responsive in assisting us with our needs. Are they part of the transition?

Continue to reach out to Josh and Sara at this time. The transition to Optum occurs 1/1/2020 and staff contacts will be made available at that time.

15. Can you communicate a minimum amount of time as to how much time providers will have to train prior to the transition?

There will be at least one month of training prior to the transition on January 1, 2020.

16. Who should we contact to get PRP authorizations approved in a timely manner?

Beacon's clinical director spoke at the last meeting to let providers know that with the transition there has been a loss of some clinical staff. Beacon has set up mandatory overtime so clinicians can work on PRP authorizations. If there are specific authorizations that you have submitted and need expedited, please email Joana Joasil and she will work with her clinical team to prioritize. You can reach Joana Joasil at joana.joasil@beaconhealthoptions.com

17. Are there going to be any major changes that will be different from previous transitions?

While no major changes are planned, the Department is working to update and clarify policy which supports the functionality of the PBHS.