



MCE/HCBS Provider Roundtable Discussions

April 2023



Agenda



**WELCOME AND
INTRODUCTION**



**VISION FOR
PATHWAYS/
MLTSS BASICS**



STRETCH BREAK



Q&A



**PURPOSE AND
STRUCTURE OF
TODAY'S EVENT**



**MCE
INTRODUCTION**



**ROUNDTABLE
DISCUSSIONS**



Welcome

Indiana Pathways for Aging



Indiana Pathways for Aging Implementation Team

Shannon Effler	Director of Care Programs
Karen McKinney	Indiana Pathways for Aging Director
Clarissa Loveall	Indiana Pathways for Aging Program Manager
Amy McConnell	Contract Compliance Manager
Daneida Dooley	Senior Contract Compliance Officer – United Healthcare
Shannon Sellers	Contract Compliance Officer - Molina
Shari Cline	Contract Compliance Officer - Humana
Alandria Cobb	Contract Compliance Officer - Anthem
Tamra Mitchell	Contract Compliance Analyst – all programs
Carol Sutton	Hoosier Care Connect Program Manager



Indiana Provider Experience Team

Darcy Tower	Director of Provider Experience
Ashton Driscoll	LTSS Sr. Provider Relations Specialist



Purpose and Structure of Roundtables

Purpose

To familiarize HCBS providers with Indiana Pathways for Aging

To provide an opportunity for HCBS providers and MCEs to meet face-to-face

For HCBS providers to have an opportunity to ask questions of the MCEs

To exchange contact information

Structure

- HCBS Providers: stay where you are - MCEs will come to you!
- Each MCE will host a discussion at your table for 20 minutes.
- This is your time to ask questions and learn about the MCEs.
- The MCE representatives will rotate tables until each MCE has visited with each group.
- Please try to keep voices down as much as possible to help with the noise level in the room.



Vision for Pathways

Indiana Pathways for Aging



Program Quality Goals

- ❖ **Person-Centered Services and Supports** – Develop service plans and deliver services in a manner that is person-centered, member-driven, holistic, involves caregivers, and addresses SDOH.
- ❖ **Ensuring Smooth Transitions** – Ensure continuity of care and seamless experiences for members as they transition into the Pathways program or among providers, settings, or coverage types.
- ❖ **Access to Services (Member Choice)** – Assure timely access to appropriate services and supports to enable members to live in their setting of choice and promote their well-being and quality of life.

LTSS Reform Objectives



75% of new LTSS members will live and receive services in a home and community-based setting



50% of LTSS spend will be on home- and community-based services

Who will be enrolled in the Pathways program?

- Hoosiers 60 or older and eligible for Medicaid (exclusions apply)
- Older Hoosiers who also receive Medicare and live in a nursing home, assisted living, or in their own homes



Member Support



Enrollment Services Vendor: To help members choose a managed care entity

Care Coordinator: To support member health care needs

Service Coordinator: To support member waiver needs

Care & Service Coordinators: Will assist with navigating both Medicaid and Medicare benefits

Ombudsman: To contact as an advocate for members and/or family members who may have a concern or complaint

MCE Care Coordination/Service Coordination



Will be responsible for coordinating full suite of member benefits – both Medicaid and Medicare



Provide a designated Service Coordinator (point of contact) for enrollees getting LTSS



Perform regular assessments, LTSS service planning, and medical care planning



Will have mandatory caseload sizes and requirements surrounding frequency of visits



Communicate regularly with member and providers



Will be required to have 50% of enrollees served by existing waiver care management entities

Service coordinators will offer the full range of HCBS services available based on preferences and needs

- *Adult Day Service*
- *Attendant Care*
- *Informal Caregiver Coaching and Behavioral Management*
- *Home and Community Assistance*
- *Respite Care*
- *Community Home Share Assisted Living*
- *Community Transition*
- *Home Delivered Meals*
- *Home Modification Assessment*
- *Home Modifications*
- *Integrated Health Care coordination*
- *Nutritional Supplements*
- *Participant Directed Attendant Care*
- *Personal Emergency Response System*
- *Pest Control*
- *Specialized Medical Equipment and Supplies*
- *Structured Family Caregiving*
- *Transportation*
- *Vehicle Modifications*



Indiana Pathways Additional Services

- Members will be given help to self-direct their services if they want.
- Members and caregivers will have access to a 24/7 nurse advice line.
- Access to a member services help line to understanding their benefits and assistance finding providers.





Compliance Team

The State maintains a formal compliance program to regulate internal processes and external partners to ensure consistency with state and federal requirements.

Source documents:

- ✓ Federal and State Laws
- ✓ Scope of work for Indiana Pathways for Aging
- ✓ Bulletins
- ✓ Banners
- ✓ Provider Modules
- ✓ MCE Policy & Procedures Manual
- ✓ Subject Matter Experts



Providers are Key Partners



Provider Network Management

- ❖ MCEs will contract with providers of all types.
 - ❖ This process is separate from Indiana Medicaid provider enrollment
- ❖ Certification process will be consistent with established state/waiver requirements.
- ❖ MCEs must demonstrate provider network adequacy to ensure sufficient member choice.
- ❖ MCEs will have reporting requirements to monitor provider network and member access.
- ❖ Program Integrity will monitor for fraud, waste, and abuse.
 - ❖ This includes MCEs and Providers

Provider Support

- Provider assistance is available.
- Provider training will occur with each MCE's system.
- Requirements for timeliness will be outlined.
 - A) provider claims submissions to MCEs
 - B) MCE payments to providers
- Appeals process for claims denial will be explained.

Provider Education

- Previously recorded MLTSS education sessions, and the slides from today's session, can be found here:
- <http://www.advancingstates.org/long-term-services-and-supports-provider-training>



LTSS Provider Training Materials

- [Download the syllabus](#)
- Indiana Managed LTSS 101 Materials (4/19/2022)
 - [Managed LTSS 101 Meeting Recording](#)
 - [Managed LTSS Slides](#)
- 11/9/22: [Assisted Living Provider Education Presentation](#)

Managed Care Webinars

9/28/22: A Look into the Future: Managed Long-Term Services and Supports

- [Webinar Recording](#)
- [Presentation Slides](#)

10/12/22: Managed Care 101

- [Webinar Recording](#)
- [Presentation Slides](#)

10/19/22: MLTSS Contracting

- [Webinar Recording](#)
- [Presentation Slides](#)



MCE Introduction



MCE Presentations



Indiana Pathways for Aging

Hoosiers serving Hoosiers

WE ARE A TRUSTED PARTNER



Serving Hoosiers



Serving Indiana Medicaid



Currently served

WE ARE INVESTED



Since 2015, we have invested more than **\$41 million dollars** in Indiana through our Indiana Medicaid Health Plan and the Anthem Foundation.

THIS IS OUR COMMUNITY



We are committed to the health and well-being of all Hoosiers:

★ **22,500 employee volunteer hours** since 2020

THIS IS OUR COMMITMENT



- We will walk alongside members and providers.
- We will simplify the member and provider experience.
- We will support member choice and connectivity to their communities.

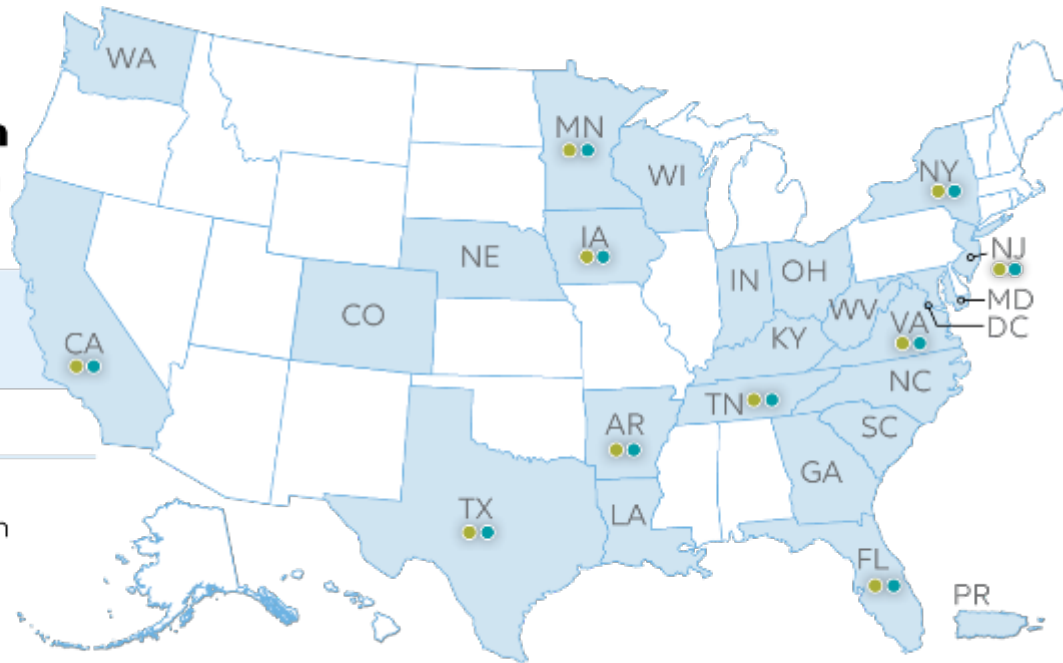
Experience and success with specialized populations

Anthem Affiliates Coordinate Care for More Than 11.1 Million Medicaid Members in 27 Markets

416,000 members with MLTSS services in 10 states

KEY

- I/DD with MLTSS
- ABD/SSI with MLTSS carve-in



- 24 years of experience, including extensive experience **implementing managed long-term services and supports (MLTSS) delivery models**
- **87%** of the more than 416,000 individuals receiving **MLTSS who live a home and community based setting**
- More than **5,000** affiliates' associates are trained in **person-centered thinking**, including 19 person-centered trainers and mentors

Anthem proudly aligns with best practice philosophies in MLTSS, such as Person-Centered Thinking, Employment First, and Technology First.

Ensuring success of home and community based services (HCBS) providers

Application/Contracting

Go-Live Support



Joining our network is easy!



Getting started:

- Anthem's Contracting team will contact providers to begin the application process upon state approval.
- You will have an assigned contact to assist with any questions and to collect supporting documentation until your application is complete and submitted.

Provider application:

- Gathers essential information to ensure a smooth onboarding process.
- Will be processed within 30 calendar days of receipt.

Resources:

- Anthem HCBS provider FAQ
- Provider application helpline — Indiana Pathways for Aging
 - Phone: **833-310-3775** (8 a.m. to 5 p.m. Eastern time)
 - Email: INMLTSSProviderRelations@anthem.com

The screenshot shows the Anthem Indiana Providers website. At the top left is the Anthem logo with a cross and shield icon, followed by the text "Indiana Providers". To the right are navigation links: "Resources", "Claims", "Patient Care", and "Eligibility & Pharmacy", each with a dropdown arrow. Below the navigation is a large heading "Welcome, providers!" with a green underline. Underneath is a white box containing the text: "Resources that help healthcare professionals do what they do best — care for our members." followed by "At Anthem Blue Cross and Blue Shield (Anthem), we value you as a provider in our network. That's why we've redesigned the provider site to make it more useful for you and easier to use." Below this is another line of text: "Interested in joining our provider network? We look forward to working with you to provide quality services to our members." At the bottom of this white box is a blue button with the text "Join our network". Below the white box are two links: "Provider Helpful Tips" and "Provider Enrollment Frequently Asked Questions".

Anthem's application and contracting process



Application and contracting support:

- Anthem will reach out to the provider via phone and email to begin the application process, upon state approval.
- The provider will provide all application essentials to complete Anthem's application process.
- Anthem will process all applications within 30 calendar days of receipt of a complete application and signed contract.
- Anthem will be notified upon receipt of the application and/or signed contract and will reach out to the provider directly to review and confirm documents received.
- If a provider has questions about the application or if they would like to initiate the application process, they can contact Anthem at:
 - Phone: **833-310-3775** (8 a.m. to 5 p.m. Eastern time)
 - Email: INLTSSProviderInquiries@anthem.com

Application essentials:

- A copy of certification documents verifying that the provider is approved/certified through the Division of Aging and Indiana Medicaid
- Provider's primary email address and signatory name (if we do not already have this on file)
- Copy of Secretary of State letter authorizing provider to do business in the state of Indiana
- Copy of current *Certificate of Insurance (COI)*
- Copy of current *W-9* form

You're IN! Welcome to the Anthem team



Go-live support:

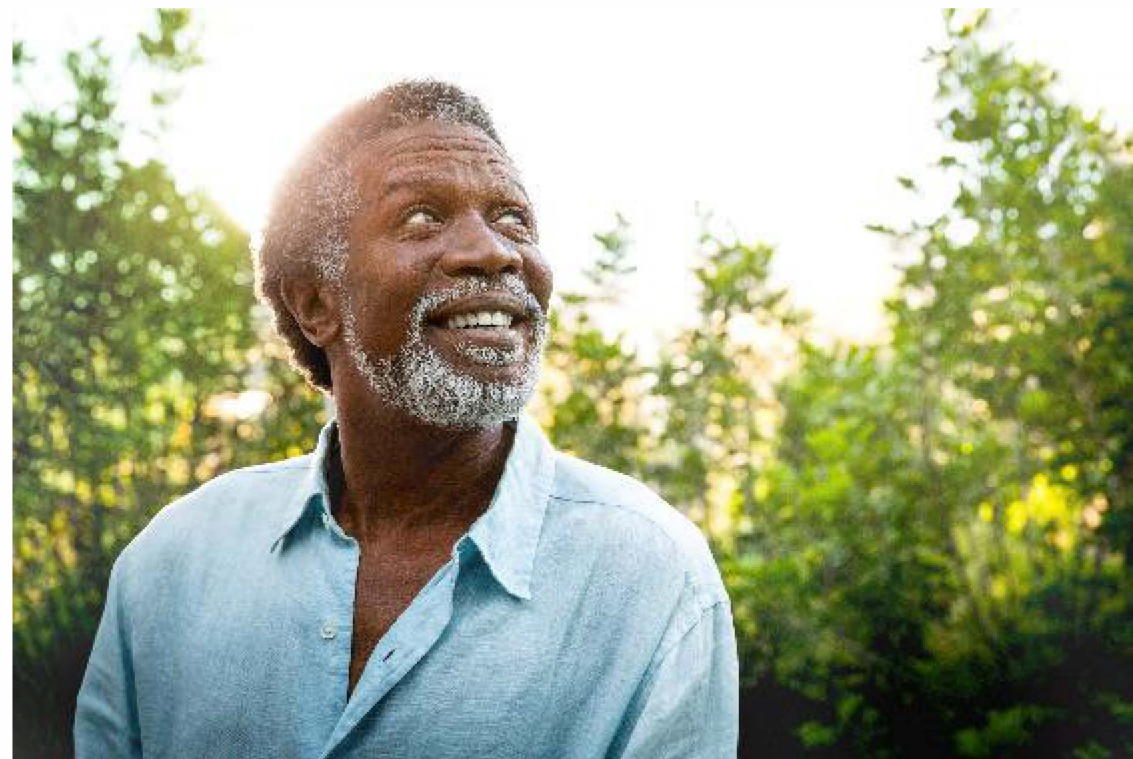
- **Dedicated Provider Relations representative:** Long-term services and supports (LTSS) providers will be assigned a local and dedicated Provider Relations representative, equipped with the expertise to offer comprehensive support and resources. Leading up to implementation, they will offer in-person or virtual support to include individualized training, resources, and tools dependent on your needs and preferences.
- **Monthly office hours:** We will offer virtual monthly office hours where providers may connect with Anthem's LTSS Provider Relations team to get answers to questions or seek technical assistance in preparation for implementation.
- **LTSS provider webinars:** We will host monthly webinars covering a variety of LTSS provider-focused topics designed to support you in the Pathways for Aging implementation.

Anthem provider essentials:

- Anthem's Indiana Pathways for Aging Implementation Quick Reference Guide
- Anthem's Indiana Pathways for Aging Provider Manual
- Registration for claims submission
- Enrollment in electronic funds transfer
- Anthem's comprehensive Training Support, to include topics such as:
 - Claims and billing
 - Authorizations
 - Person-centered planning
 - Accepting referrals
 - HCBS settings rule
 - Workforce development
 - Value-based programs

Key take aways

- All providers will have a dedicated Anthem contact to support them from application to go-live and beyond.
- Anthem will contact providers to initiate the application process, upon state approval.
- If providers have questions, they may contact Anthem at:
 - Anthem application helpline: **833-310-3775** (8 a.m. to 5 p.m. Eastern time)
 - Email: INMLTSSProviderRelations@anthem.com
- Providers will have access to comprehensive trainings, tools, and resources to support their success in the Indiana Pathways for Aging program.





<https://providers.anthem.com/in>

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc., independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. Providers who are contracted with Anthem Blue Cross and Blue Shield to serve Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect through an accountable care organization (ACO), participating medical group (PMG) or Independent Physician Association (IPA) are to follow guidelines and practices of the group. This includes but is not limited to authorization, covered benefits and services, and claims submittal. If you have questions, please contact your group administrator or your Anthem network representative.

INBCBS-CD-023034-23 April 2023

Humana

Healthy Horizons[®]
in Indiana

Indiana Pathways for Aging Program

MCE & HCBS Provider Roundtables
April 2023

Humana[®]



Humana Brings Over 60 Years of Experience Improving Health Outcomes

Humana companies and their various businesses serve more than **17 million** members across the country.



Founded in 1961 as a **nursing home provider**



Evolved and grew into one of the nation's largest **Medicare providers**



Expanded into **managed care** leveraging our provider experiences



Continuously adapts to the needs of the **members and communities we serve**

1961



2023



Humana is honored to serve Hoosiers statewide for over 40 years and counting



Today, Humana covers **more than 350,000 lives in Indiana** across all lines of business, including some of your current patients and residents eligible for both Medicare and Medicaid.



Humana has forged, and continues to build, innovative local community partnerships in Indiana focused on addressing priorities, such as **health equity and workforce development**.



Humana **employs 2,600 Indiana-based associates** with a deep understanding of the state's needs and long-standing relationships with Indiana providers and community-based organizations.



Humana works closely with **home and community-based services (HCBS) providers** in other Medicaid markets, giving us the experience to support you all in your transition to and success in the Indiana Pathways for Aging Program

Humana's values underpin our person-centered model, empowering and enabling Hoosiers to age in the setting of their choice

At Humana, we are:



Caring

Caring is everything. It's who we are, it's how we work, it's the business we are in.



Curious

Because we care, we are always **curious** to learn how to better serve our members and better support our fellow associates.



Committed

With conviction to our purpose, we are **committed** to differentiate and sustain our business for the future

We are committed to:



Robust **person-centered, equitable** clinical care and service delivery



Working with **key community organizations**, including area agencies on aging



Deep provider **partnerships**

Humana's innovative programs improve members' lives



Supporting Caregivers: Connecting informal caregivers to needed resources



Workforce Development: Coordinated strategy for LTSS direct service worker recruitment and retention



Aging in Place: Helping members remain in the setting of their choice

Humana deploys a Concierge Provider Services team in Indiana to enable a transparent and seamless provider experience



HCBS providers are essential in delivering person-centered care to Hoosiers in their communities



DEDICATED AND LOCAL SUPPORT

Every HCBS provider will have a dedicated provider relations representative with experience in long term services and supports to help you do business with Humana.



EASE OF DOING BUSINESS

Our processes are developed to be clear and intuitive. We will educate you on how to submit claims, manage authorizations, and more!



ACCESSIBLE TOOLS AND RESOURCES

We will help you access Humana tools and resources, as well as partner with you to help you thrive in the Indiana Pathways for Aging program.

Introduction to Molina Healthcare of Indiana



Welcome to Molina Healthcare of Indiana

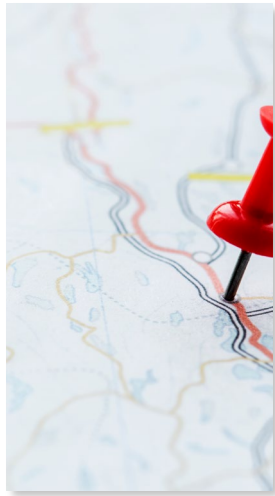


On behalf of all of us at Molina Healthcare of Indiana, we are pleased to welcome you to our provider network and our health plan. As some of you know, Molina Healthcare is a national company that serves more than 5 million members across 20 states. While our scope is vast, we also have strong local roots in Indiana.

This short introduction will give you a high-level explanation of who we are and how best we can partner with you to care for our members.

We look forward to years of serving both you and our members!

Sincerely,
John Barth
President/CEO, Molina Healthcare of Indiana



Molina's Mission and Vision



Our Vision

At Molina Healthcare, we improve the health and lives of our members who are covered by government programs. To us, it's not just a line of business – **it's our only business.**



Our Mission

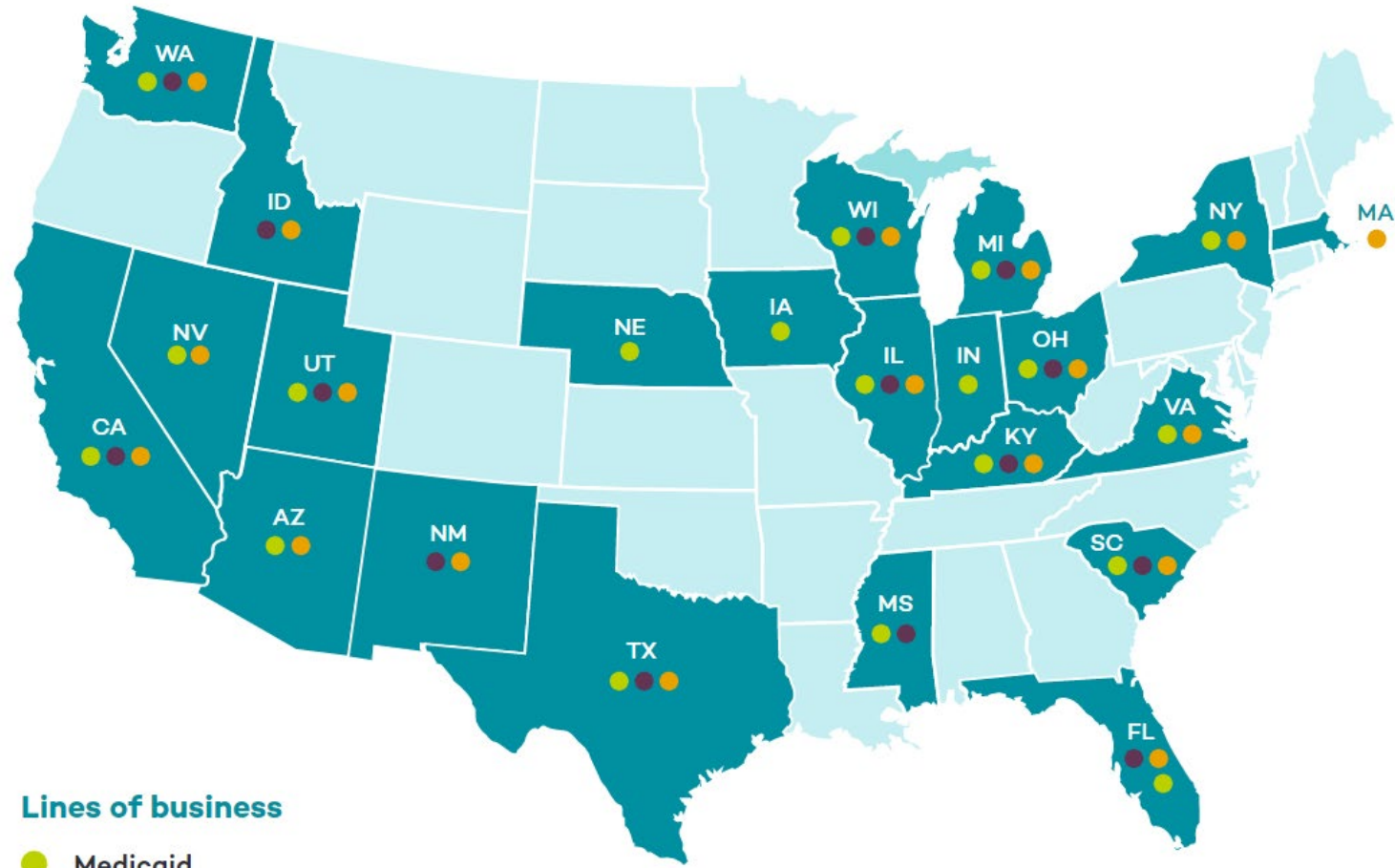
- Be the partner and plan of choice
- Be the low-cost leader in government programs
- Provide effective, high-quality, appropriate access to care
- Provide reliable services
- Offer a seamless experience



Our Values

- Member-focused care
- Provider-focused partnerships
- A community approach to holistic care
- High-quality care and population health
- Operational and service excellence

Molina National Footprint



Lines of business

- Medicaid
- Marketplace
- Medicare

We want to partner with you! All of you!

- **Pay Fast and Right**
- **Support Workforce Development**
- **Pay for Quality and Collaboration**
- **AAA Collaboration**

Molina Direct Provider Contracting Line - 1-877-902-1207

Thank You





UnitedHealthcare Community Plan of Indiana

HCBS Provider Roundtable

April – May 2023

United
Healthcare®



Agenda

1. History of UnitedHealthcare
2. UnitedHealthcare in Long Term Services and Support
3. Innovation in Long Term Services and Support
4. Other activities

United
Healthcare®



History of UnitedHealthcare

History of UnitedHealthcare

- Nationally, UHC has delivered Medicaid services for 48 years.
- In 1975 the first UHC program was implemented in Indiana.
- UnitedHealthcare refers to the UHC Medicaid and D-SNP plans as the UnitedHealthcare Community Plan.
- In 2021 UHC implemented the Indiana Medicaid Hoosier Care Connect Program which currently has 5,600 members.
- Our Indiana-based leadership team has robust knowledge of Managed Medicaid with a combined 450 years of health care experience.

Helping Hoosiers thrive



BY IMPACTING

- Care centered on member choice
- Quality & equitable outcomes
- Provider & workforce support
- Member & caregiver experience

WITH SOLUTIONS THAT ARE

- Integrated
- Equitable
- Innovative
- Person-centered
- Cost-effective





UHC in LTSS

	AZ	CA	CO	DC	DE	FL	GA	HI	IA	IN	KS	KY	LA	MA	MD	MI	MO	MS	NC	NE	NJ	NV	NY	OH	OK	PA	RI	TN	TX	VA	WA	WI
LTSS	✓			✓		✓		✓			✓			✓							✓			✓				✓	✓	✓		
ABD	✓	✓	✓			✓		✓		✓	✓	✓	✓		✓	✓		✓		✓	✓	✓	✓	✓		✓	✓	✓		✓	✓	✓
D-SNP	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Helping Hoosiers Thrive with Experience

UHC has partnered with states for over 35 years, transforming the experience of people who need LTSS services.

Today, UHC provides managed care to almost 8 million individuals in 32 states plus Washington DC.

UHC has LTSS programs in 10 states and Washington DC serving 350,000 lives.

Our current Indiana D-SNP program serves 28,000 members.








LTSS Innovative Programs

LTSS Innovative Programs

UnitedHealthcare is committed to offering innovative programs that cover major needs of this population.

-  To combat social isolation:
 - ❖ Companion Pets-Joy for All
 - ❖ Postbooks

-  To aid in SDoH (Social Determinants of Health)
 - ❖ Farmbox
 - ❖ Mom's Meals

-  Helping Hoosiers live Healthier lives
 - ❖ Transitional Support Fund
 - ❖ Caregiver Home
 - ❖ Divvy Dose





Community Involvement

Our Commitment to Indiana Workforce Development

We are launching several programs specifically dedicated to Indiana's workforce and targeted at expanding access to roles critical to the Pathways program.

- Direct Service Worker Assistance Program- A program to assist DSWs with funding for childcare, car repairs, gas money, financial well-being and other needs that may hinder their ability to fully invest in their professional lives.
- Ivy Tech Community College Partnership- A Direct Service Worker Pathway program to train and prepare new generations of Direct Service Workers (DSWs) following high school.
- HealthLinc- A medical-legal partnership offering free civil legal assistance to eligible members. Some services include support to establish power(s) of attorney or advance directives.





Questions?

Thank you!

**United
Healthcare®**



Stretch Break



Roundtable Time

Q & A

Thank you for attending!