

Commitment to Communication

From your Provider Relations Team



nh healthy families™

Announcing Upcoming Managed Care Organization Contract Changes

NH Healthy Families would like to announce some of the upcoming changes being implemented in accordance with the continuation of our Managed Care Organization contract with the New Hampshire Department of Health and Human Services effective September 1, 2019.

These changes will be detailed in the NH Healthy Families' Provider Manual and Billing Manual upon approval by DHHS. Please continue to monitor our website for updates.

CARE MANAGEMENT

- All members will be asked to complete a new screening tool that was created in conjunction with DHHS and other MCOs. Results of the screening will be available to view in the provider portal within seven (7) days of completion.
- Members in care management will require collaboration from the member's PCP and providers for care plan development. These will be available within twenty-four (24) hours of completion on the provider portal.
- All members, upon completion of the Health Risk Screening, will be supported in arranging a wellness visit with their PCP. This visit should include screenings for physical and mental health conditions, depression, mood, suicidality, and substance use disorders.

BEHAVIORAL HEALTH

- All Pediatric Providers will be required to complete Ages and Stages Questionnaires including PHQ and SBIRT on their members.
- Providers/Programs must actively support and promote the delivery of Peer Recovery Support Services in a variety of settings.
- Members with an ACT service team need to be seen within twenty-four (24) hours of being discharged from New Hampshire Hospital.
- All members with Substance Use Disorder (SUD) must receive clinical evaluations within three (3) business days of admission.
- Providers must complete a plan of safe care for babies born with Neonatal Abstinence Syndrome (NAS) in collaboration with NH Healthy Families and the family/caregivers.

BEHAVIORAL HEALTH, CONT.

- If NH Healthy Families is unable to make contact with a member related to SUD within three (3) business days, NH Healthy Families will request the treating provider to make contact with the member within twenty-four (24) hours.
- NH Healthy Families will provide free online training for providers to qualify for the waiver to prescribe buprenorphine.
- Please be on the lookout for exciting new and informative courses related to Behavioral Health!

CLAIMS

- Secondary UB-04 claims with dates of service September 1, 2019, and after will be reimbursed at the member's responsibility regardless of the Medicaid allowed amount.
- Claims billed with dates of services September 1, 2019, and after will be subject to one hundred and twenty (120) days timely filing deadline.

PROVIDER RELATIONS

- There will be revised access standards for PCPs, Specialists, Mental Health, and Substance Use Disorder providers.
- Please be on the lookout for forthcoming opportunities for training!

PHARMACY

- Effective September 1, 2019, NH Healthy Families will be moving towards a Uniform Preferred Drug List (PDL) that aligns with DHHS and other MCOs.

GRIEVANCES AND APPEALS

Member Grievances:

- A member grievance resolution may be extended by up to fourteen (14) calendar days if the member requests the extension, or if we determine there is need for additional information and that the delay is in the member's interest.

Member Appeals:

- Oral appeal requests will be handled as appeals and they will be acknowledged in writing.
- A provider acting as an authorized representative cannot request a member's continuation of benefits pending appeal even with the member's written consent.

GRIEVANCES AND APPEALS, CONT.

- NH Healthy Families will offer peer-to-peer review support, with a like clinician, upon request from a member's provider prior to the appeal decision.
- NH Healthy Families will make reasonable efforts to give the member prompt oral notice of an expedited appeal resolution extension. The specifics are outlined in the Member Handbook.

Provider Appeals:

- For claims with dates of service on or after September 1, 2019, providers may submit a written request for a claim appeal, along with any supporting evidence or documentation, within thirty (30) calendar days of receiving the Evidence of Payment, which serves as a Notice of Action.
- A provider must submit a written request for an appeal within thirty (30) calendar days of:
 - The date of our written notice advising the provider of the adverse action to be taken; or
 - The date on which we should have taken a required action and failed to take such action.
- NH Healthy Families will confirm receipt of the appeal in writing within ten (10) business days.
- NH Healthy Families will offer peer-to-peer review support, with a like clinician, upon request, from providers prior to the appeal decision.
- NH Healthy Families will resolve provider appeals through written notice within thirty (30) calendar days of receipt.
- If the appeal resolution results in the adverse action being upheld, the provider has a right to request a State Fair Hearing. The State Fair Hearing process will be outlined in our resolution notice.

Provider Complaints:

- A provider may file a complaint within ninety (90) calendar days of the date of incident.
- NH Healthy Families will confirm receipt of the complaint in writing within ten (10) business days.
- NH Healthy Families will resolve all provider complaints through written notice within forty five (45) calendar days of receipt. Clinically urgent complaints are resolved no later than three (3) calendar days after receipt.