

# **Commitment**<u>™</u> Communication

From your Provider Relations Team



Dear Providers:

Your NH Healthy Families Provider Relations team is committed to keeping you up-to-date on operational developments and new tools and information to make your jobs easier.

Commitment to Communication is designed to give you real time updates and results to changes, issue resolution and advancements coming from NH Healthy Families. Future letters and e-blasts will have this new brand.

## Following are a few milestones successfully completed over the past several weeks:

400 visits and counting!

 Starting July, 2018, our team has visited more than 400 provider offices, asking about your challenges and ideas for improvement. We hear you! Look for updates on specific changes made as a result of our visits with you.

Information and Tools for Premium Assistance Program (PAP) member transition

 Some of your PAP members will be transitioning from the Exchange into Medicaid. Our team has developed

- an educational flier that helps explain the transition. The flier appears in this issue, and includes important dates and frequently asked questions.
- A self-guided webinar that explains the PAP transition, how it happened and what it means to providers and members will be available to you next month.

# Finally, our new Provider Servicing Model is fully implemented!

Our Provider Servicing Model was developed to be provider-centric, offering a single-point-of-contact for you and your team. However, we want you to be aware that there are several individuals working at every level of our organization to ensure your satisfaction. In this issue, you'll find a Network Management Team sheet (on page 2) that will give you a snapshot of our team members, all available to you.

If you have an issue or idea to share, feel free to let us know. We appreciate your partnership!

In good health,

Jennifer Kent Weiner

Vice President, Network Management NH Healthy Families

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# Network Management Team



1-866-769-3085 NHhealthyfamilies.com

We have a multi-disciplined team of experts working in one New Hampshire location. We're providing the many layers of support you need to deliver the best quality of care for New Hampshire Medicaid beneficiaries. We're at your service!



#### **SENIOR MANAGEMENT**

#### Jennifer Kent Weiner

Vice President, Network Management 603-263-7298 Jennifer.K.Weiner@centene.com

#### **PROVIDER CONTRACTING**



#### Jennifer J. Michaleas Director, Contracting

603-263-7129 Jennifer.J.Michaleas@centene.com

PROVIDER



#### Nancy M. LaFosse

Manager, Behavioral Health Contracting 603-263-7294 Nancy.M.LaFosse@centene.com

#### Rachelle R. Fowler

Manager, Contracting 603-263-7231 Rachelle.R.Fowler@centene.com

#### Alison E. Dias

Senior Contract Negotiator
603-263-7205
Alison.E.Dias@centene.com

#### Stephanie J. Hanscom

Contract Negotiator
603-263-7159
Stephanie.J.Hanscom@centene.com

#### **NETWORK OPERATIONS**



#### Judy L. Tasker

Director, Provider Network Operations 603-263-7259 Judy.L.Tasker@centene.com

NETWORK



#### Sarah A. O'Connor-Willmott

Supervisor, Provider Network
603-263-7220
Sarah.A.OConnorWillmott@centene.com

#### Amanda S. Giannino

Manager, Reimbursement 603-263-7183 Amanda.S.Giannino@centene.com

#### Angela L. Clement

Quality Systems Analyst 603-263-7264 Angela.L.Clement@centene.com

#### Michelle A. Belyea

Business Analyst III
603-263-7161
Michelle.A.Belyea@centene.com

#### **PROVIDER RELATIONS**



#### Michelle M. Dodge

Director, Provider Relations
603-263-7254
Michelle.M.Dodge@centene.com



#### Barbara A. Muller

Provider Network Specialist I 603-263-4118 Barbara.A.Muller@centene.com

#### Elinor M. Wozniakowski

Provider Network Specialist II 603-263-7267 Elinor.M.Wozniakowski@centene.com

#### Jessica L. Johnson

Provider Network Specialist II 603-263-7173 Jessica.L.Johnson2@centene.com

#### Judy M. DiMauro

Provider Relations Specialist I 603-263-7276 Judy.M.DiMauro@centene.com

#### Karyn L. Mohn

Provider Relations Specialist I
603-263-7151
Karyn.L.Mohn@centene.com

#### Lori S. Dodge

Provider Relations Specialist II 603-263-7176 Lori.S.Dodge@centene.com

#### Michelle L. Reynolds

Provider Network Specialist I 603-263-4120 Michelle.L.Reynolds@centene.com



Susan A. Fitzgibbons
Manager, Vendor Management
603-263-7221
Susan.A.Fitzgibbons@centene.com

# Talk to your patients about breast cancer screening

October is Breast Cancer Awareness Month.
Among women, Breast Cancer is the second most common form of cancer. Each year in the United States, more than 200,000 women get breast cancer and more than 40,000 women die from the disease. Most breast cancers are found in women who are 50 years old or older, but breast cancer also affects younger women. About 10% of all

new cases of breast cancer in the United States are found in women younger than 45 years of age.

Breast Cancer screening is also one of the four key HEDIS measures for women's preventive care. The HEDIS measure evaluates the percentage of women ages 50–74 who had a mammogram at least once in the past 27 months. Women ages 50 and older should have a mammogram every one to two years. (Women who've had bilateral mastectomies are exempt.)

Consider speaking with your patients between ages 40-49 about when they should begin to get mammograms.



This line is available Monday through Friday from 8:00 a.m. to 5:00 p.m. The NH Healthy Families' Out-of-Network helpline provides the option for providers to contact a member of our Health Plan staff to assist with redirection to one of our network or preferred providers. A member of our staff is ready to assist you. Please call the NH Healthy Families' Out-of-Network helpline at 1-844-699-6840.



# Updated Complaints/ Grievances and Medical Necessity Appeals Contact Information

Thank you for your continued partnership with Ambetter from NH Healthy Families. In order to ensure that we can properly address complaints, grievances, and medical necessity appeals, please make note of the following information.

Sending non-claim related Complaints/Grievances and Medical Necessity Appeals to the incorrect address may cause a delay in review. To avoid any possible delays, please refer to the below information to clarify where your documents should be sent.

Non-claim related Complaints/Grievances and pre-service

Medical Necessity Appeals should be sent to:

Ambetter from NH Healthy Families
ATTN: Grievance and Appeals Department
2 Executive Park Drive
Bedford, NH 03110

Provider Grievances and Appeals should be sent to:

Ambetter
Attn: Claim Disputes
PO Box 5000
Farmington, MO 63640-5000

If you have any questions about this, or any aspect of doing business with Ambetter from NH Healthy Families, please contact Provider Services at **1-844-365-1278**.

# We're Heres Guiding you through the Ambetter PAP member transition to the Medicaid Care Management Progress

Care Management Program.

FOR YOUR **PREMIUM ASSISTANCE PROGRAM PATIENTS** ONLY

Starting January 1, 2019, Ambetter Premium Assistance Program will become NH Healthy Families Medicaid Care Management Program.

Plan Name for PAP members today:

Premium Assistance Program





Plan Name for PAP members on January 1, 2019:

Medicaid Care Management Program





### Benefits to Members:

From November 1, 2018 to December 28, 2018, members will have the option to choose a Managed Care Organization.

- Members can keep their doctors
- No disruption in coverage
- Reduced copays
- Same NH-based staff
- Continuation of My Health Pays® rewards program
- Addition of CentAccount® healthy rewards program

Click here for a list of **Frequently Asked** Questions (FAQs).

More questions? Contact us today.

# CoverMyMeds Prior Authorization Streamlining

## Requesting Electronic Prescription Drug Prior Authorization Using **CoverMyMeds**®



2 Executive Park Drive Bedford, NH 03110

Ambetter from NH Healthy Families is streamlining the prior authorization (PA) process for providers and pharmacists by offering CoverMyMeds for electronic prior authorization requests.

CoverMyMeds streamlines the medication PA process and provides a fast and efficient way to complete PA requests online. Benefits of using CoverMyMeds include:



- Elimination of telephone calls and faxes, saving up to 15 minutes per PA request.
- Renew previously submitted PA requests.
- Complete pharmacy-initiated requests electronically.
- Secure and Health Insurance Portability and Accountability Act (HIPAA) compliant.

#### **HOW TO USE COVERMYMEDS**

#### To use CoverMyMeds, providers should follow these steps:

- 1. Log in: Go to covermymeds.com and register for a free account, or log in to your existing CoverMyMeds account.
- 2. Start a new request: Click New Request, enter the drug name and the BIN, PCN and Rx Group from the patient's insurance card for the best results. If unavailable, enter the patient's plan or pharmacy benefit manager (PBM). Select the appropriate form and click Start Request.
- 3. Complete the request: Enter all demographic fields marked with a "Required" flag and click Send to Plan. Complete the returned list of patient-specific, clinical questions and click Send to Plan again to complete the request.
- **4. Con irmation:** Once the request has been reviewed, the determination will appear in your CoverMyMeds account.

#### **ADDITIONAL INFORMATION**

If you have questions regarding the information contained in this update, contact: CoverMyMeds at **1-866-452-5017,**Monday through Friday, 8:00 a.m. to 11:00 p.m. Eastern Time (ET), and from 8:00 a.m. to 6:00 p.m. ET on

Saturday, or visit <a href="https://www.covermymeds.com/epa/envolverx">www.covermymeds.com/epa/envolverx</a>. Providers may also contact their Provider Network Specialist with any questions or concerns.

# Availability ofour **Providers**

The availability of our network practitioners is essential to member care and treatment outcomes. We evaluate the performance in meeting these standards and appreciate you working with us to accommodate our members' clinical needs. In order to ensure appropriate care, we have adopted the availability standards below. Thank you for complying with these guidelines and providing the highest quality care for our members.

TYPE OF APPOINTMENT	SCHEDULING TIME FRAME
Transitional care after inpatient stay (medical or behavioral)— PCP, specialist or CMHC	Within 7 calendar days of discharge
Transitional care after inpatient stay (medical or behavioral)—home care	Within 2 calendar days of discharge—must be ordered by PCP, specialty care provider or as part of discharge plan
PCP non-symptomatic office visit	Within 30 calendar days of request
PCP non-urgent, symptomatic visits	Within 10 calendar days of request
PCP or other provider urgent, symptomatic office	Within 48 hours
Specialist Routine	Within 45 days of the request
Specialist Urgent	Within 48 hours of the request
Mental health providers	Care within 6 hours for a non-life threatening emergency; care within 48 hours for urgent care; appointment within 10 business days for a routine office visit
Post discharge from New Hampshire Hospitals	Contact with community mental health center within 48 hours of psychiatric discharge from a New Hampshire hospital and follow-up appointment to occur within 7 calendar days
Private hospital psychiatric discharge	Follow-up appointment within 7 calendar days
Emergency providers (medical and behavioral)	Immediately (24 hours a day, 7 days a week) and without prior authorization Primary Care and Specialist Providers must provide either an answering service or after-hours message with information on how to access after-hours care

# Accessibility Survey

As part of our commitment to our members, your patients, we have made available our Access and Availability survey. NH Healthy Families follows the accessibility requirements set forth by applicable regulatory/accrediting agencies. We monitor compliance with these standards on an annual basis and use the results of appointment standards monitoring to ensure adequate appointment availability and reduce unnecessary ED utilization. Please take a moment to fill out our accessibility survey, and thank you to those providers who have done so in 2018. Please visit: NHhealthyfamilies.com/ providers/resources.html



# Focus on Recovery: CRSW

## New Hampshire Health Experts Discuss Collaborative State Efforts to Combat Opioid Epidemic





In late September, community health leaders from across New Hampshire gathered at Harbor Homes, Inc. in Nashua, NH to discuss collaborative solutions to the opioid crisis. The panel discussion focused on Certified Recovery Support Worker (CRSW) Workforce Development.

The CRSW program provides peer recovery support training for individuals who are committed to working with people in early recovery. It engages and trains qualified candidates to become Peer Recovery Coaches to individuals entering substance use disorder (SUD) treatment. The initiative builds and enhances workforce capacity throughout the state.

The five panelists included Andrea Rancatore, Director of SUD at NH Healthy Families, Melbourne Moran, Director, Integrated Care and Population Health for Harbor Homes, Inc., Brian Rhodes, Chief of Nashua Fire Rescue, Jen Buteau, Director Family Support Services for The Family Resource

Center, and Matt Huuako, CRSW Candidate and Volunteer at SOS Recovery Center. Panelists, moderated by Scott Spradling, explored how health insurance providers, care providers and community leaders are working together to provide treatment, prevention and recovery solutions for opioid misuse.

The discussion was well attended by community partners and media outlets. It comes at a critical time as New Hampshire continues to experience the **second highest rate of opioid-related overdose deaths in the country**. Nationwide, the opioid epidemic **killed more than 42,000 Americans** in 2016 alone, and early figures show that opioid-related deaths approached 50,000 in 2017.

#### Click to watch a short video on the CRSW Program



#### **UPDATE CORNER**

Pharmacy Updates:
Visit NHhealthyfamilies.com for
the latest changes to our Pharmaceutical
Policies and Formulary that may affect
your patients.

If you have any questions, call Provider Services at **1-866-769-3085** and ask for the Pharmacy team.

#### **Provider Updates:**

You can find the complete list of Provider Update Notifications at NHhealthyfamilies.com under "Provider News"

New Applied Behavioral Analysis Clinical Policy

Call NH Healthy Families Provider Services at **1-866-769-3085** if you have any questions or concerns about these changes.

Thank you for your continued support of our members and being a partner in our network.

NH Healthy Families PROVIDER SERVICES: **1-866-769-3085**, Monday to Friday 8 a.m. to 5 p.m. Ambetter from NH Healthy Families: **1-844-265-1278** 

Like us on Facebook and Twitter to stay in touch with initiatives and happenings around the state. #NHhealthy