



PROVIDER ADVISORY COMMITTEE REPORT

November 10, 2021 | 5:30 - 7:00 PM EST | Zoom



AmeriHealth Caritas
District of Columbia



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EXECUTIVE SUMMARY

To support local providers and increase access to care for those they serve, AmeriHealth Caritas DC designed and developed the **Provider Advisory Committee (PAC)**. The PAC is an opportunity for DC metro area providers to directly engage with AmeriHealth program leadership and elicit answers to their most pressing questions.

The mission of the AmeriHealth Caritas DC (AmeriHealth) Provider Advisory Committee is to create a partnership with provider organizations and community-based organizations who share the same goals and values, that are focused on helping DC residents obtain access to care, stay well, and build healthy communities. This committee provides critical input on innovative and collaborative strategies focusing on effective integration of care coordination and care management programs, as well as other programs to achieve desired outcomes. AmeriHealth finds it is vital to their mission that they collaborate with providers and community-based organizations to proactively improve the health status of those they serve.

Increased emphasis on medical outcomes, preventive care, and other social determinants of health will reward all stakeholders.

The PAC rollout session essentially served as an informative platform which was effective and provided the participants with insightful, timely information and tools. Participants were able to ask questions and get direct responses from AmeriHealth leadership. A range of topics were covered from dental, educational training, to pre-authorization forms, to the Let Us Know Program. Most of the questions centered around necessary forms, and online tools like NaviNet. The AmeriHealth team was able to successfully answer all of the questions to the participants' satisfaction.

The following resources and tools were well received by the providers:



The Let Us Know Program: where providers can refer patients to case managers when they see there may be risk to the patient.



NaviNet: where providers, admins, and billers can verify benefits, eligibility and claim status. Providers have the ability to give their billers access with set permissions so they can follow claim status and issues.

OVERVIEW

AmeriHealth held its Provider Advisory Committee meeting on **Wednesday, November 10, 2021**, to a virtual audience of twenty-two (22) providers and administrative staff. This event took place from **5:30 pm to 7:00 pm Eastern Standard Time (EST) on Zoom**. The virtual session was recorded, and all participants were notified before the start of the discussion. The launch of new tools, networks, and trainings for providers were highlighted during the virtual session. By better supporting providers and tracking their growth, AmeriHealth is committed to closing the access and service gaps for those they serve. After the participants concluded the discussion, they were provided a post-event survey with six (6) fillable and multiple-choice questions centered on understanding their experience and seeking to learn ways to enhance future engagements.

The Provider Advisory Committee meeting was facilitated by Ms. Sheronica Burgess of MMI Consulting Group, LLC, note taking was handled by Ms. Tamu Tucker of MMI Consulting Group, LLC, and registration was carried out by Ms. Barbara (Bobbie) Monagan and her team at AmeriHealth. Six (6) AmeriHealth representatives, Mr. James Christian, Ms. Barbara Monagan, Dr. Nathan Fletcher, Ms. Ronnie Harris, Ms. Cheryl Gray, and Ms. Natasha Parker served as speakers during the virtual session. Mr. Christian introduced the session by providing the audience context into why this program was launched and its overall mission. Ms. Monagan shared AmeriHealth's way forward and gave information of the program's goals. Dr. Fletcher followed, providing the audience information about the dental program and how it is different than other state programs. Ms. Monagan, Ms. Harris, and Ms. Gray went through the account executive points of contact and the available provider education, online tools and resources; special attention was paid to the "Let Us Know Program." Ms. Parker discussed the benefits within the Bright Start Program. Before the Question-and-Answer segment began, Ms. Monagan introduced a new initiative to the audience, the **Provider Action Committee**, which she asked for volunteers to join. During the Question-and-Answer (Q&A) session of the committee meeting, Ms. Monagan along with Ms. Harris, and Ms. Gray answered participants' questions.

OVERVIEW

The facilitator driven agenda was broken up into nine (9) parts:

- Welcome and Agenda, along with minor housekeeping rules, were provided by the Facilitator, Ms. Sheronica Burgess
- Opening Remarks by Mr. James Christian
- Our Way Forward by Ms. Barbara Monagan
- Dental Services was presented by Dr. Nathan Fletcher
- AmeriHealth Representatives and Points of Contact by Ms. Barbara Monagan
- Provider Education, Online Tools, and Resources by Ms. Ronnie Harris and Ms. Cheryl Gray
- Bright Start Program by Ms. Natasha Parker
- Provider Action Committee call for volunteers by Ms. Barbara Monagan
- Facilitated Question and Answer (Q&A) with the audience

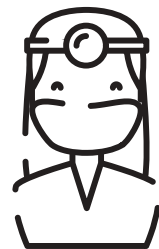
The Q&A session was focused on ensuring providers knowledge of the online tools, their ability to serve their enrollees, as well as responding directly to provider questions, and identifying areas of improvements and/or concern. In conclusion to the virtual session, Ms. Monagan provided insights into how AmeriHealth plans to continue to build their relationship with providers and will work with the providers to identify gaps in care and ensure the enrollees get the tools and benefits they need. The discussion ended by thanking all participants for their time and participation.



PARTICIPANTS

AmeriHealth Caritas DC attracted a diverse participant group from across the D.C. and Maryland region. The attendees were made up of fifteen (15) general medical services, three (3) behavioral services, and four (4) social services.

Attendee	Institution	Location
Erica Baldwin	So Others Might Eat (SOME)	Washington DC
Dr. Ryan Buchholz	Unity Health Care	Washington DC
J. Butler	Medical Home Development	Washington DC
Jorge Cabrera	City Care Home	Washington DC
Janice Campbell	So Others Might Eat (SOME)	Washington DC
Dr. Bridgette Chase	Chase Consulting	Washington DC
Zoe Gutterman	Unity Health Care	Washington DC
Linda Greene	Howard University Hospital	Washington DC
Numu Kamara	Kambia Medical	Washington DC
Mark Janowiak	Childrens National	Washington DC
Denise McNeill	P&G Behavioral Health Services	Washington DC
Ryan Montoya	Planned Parenthood, Metro DC	DC Metro Area
Oulily Ndecky	Dedicated Health Care Services	DC Metro Area
Dr. Laure Ndeutchoua	SDM 1Stop	DC Metro Area
Marion Newsome	Community of Hope	Washington DC
Jacqueline Newsome-Williams	Washington Area Nurse Practitioner Group	DC Metro Area
Shaney Pendleton	All Walks of Life	Baltimore, MD
Dr. Shelia McDonald Pinkett	Howard University Hospital	Washington DC
Florian Portis	Therapeutic Links	Washington DC
Latriece Prince-Wheeler	Ascension	Washington DC
Eric Tchugoua	SDM 1Stop Primary Care	Hyattsville, MD
Joan Thompson	Howard University Hospital	Washington DC



QUESTIONS & ANSWERS

Bobbie
Monagan



Do you use NaviNet to verify benefits, eligibility, and claim status? Or what's your resolution to that at this point?

Provider: I usually use NaviNet to look for any care management messages that AmeriHealth has sent. As far as billing I have a company that handles all of our billing.

Ronnie Harris: You are able to give your billers access to NaviNet as well. NaviNet is not just for gap in care and viewing eligibility, users can get real time claim status; and if they have to contest a claim, we have an investigational tool on that system. Users can see claim information and question all the information they need regarding a claim via the tool which works like an Instant Messaging System. Once the message is received, someone will review it and get back to the user within 10 days. Billers can log in under your practice, your security officer will be notified via email and you can give the biller specific access, for example 'eligibility status' and 'claim status' access. NaviNet is for the physicians, admins, and billers.

QUESTIONS & ANSWERS

Bobbie
Monagan



Do you have any issues or concerns?

Provider: What I want to do is broaden my patient demographic because we're categorized into just one demographic and when I look at all the patients that are assigned to us as their PCPs, I'm just getting about 20% of those patients coming into the office despite all our efforts to get the other patients to come. About 25% of those are millennials and will only seek PCP if they are having an issue. I kind of understand the reason why they are reluctant to come to the doctor's office. It will be awesome if we can develop a plan to capture 100% of all the patients that are assigned to me to start coming into the practice more and more.

Bobbie Monagan: We're working internally to meet the technology need. I know millennials were mentioned and that's something that we're working and trying to address as well. We're working on creating one-stop shop videos where we talk about our programs and the How-To's in under five minutes, great for the provider community, admin staff, and especially for new providers. A lot of times when we do the provider orientation, we refer our providers back to the provider manual. Our Account Executives are going to be working with our offices to make sure we have the most up-to-date demographic information and that includes email addresses.

QUESTIONS & ANSWERS

Bobbie
Monagan



What's your biggest obstacle with getting patients to get care?

Provider: The first would be - it's hard to get them to even come in to get even preventative care and screenings. Second, getting them in and getting them what they need as far as prescriptions. When Cheryl Gray talked about the provider network, I felt relief knowing I can refer a patient to a specific provider within the AmeriHealth network, this is a game changer.

Provider



We have had issues with prescriptions, for example the covered brand will change. Why does this keep happening? My concern is the constant changing of prescriptions from something that was working for a patient.

Bobbie Monagan: I will refer you to our pharmacist for more detailed formulary information and why brands may change in the system.

QUESTIONS & ANSWERS



If we use the provider network tool to find a specialist for an enrollee do we still need to submit the Pre-Authorization form for that service or because the specialist is in the AmeriHealth network will the Pre-Authorization form be waived or not taken into account?

Cheryl Gray: No, it will not be waived because that form is how we review if the service is medically necessary. You may say you need the service but when you submit your clinical documentation it may not warrant that service for that member. Most times PCPs don't need to submit a pre-authorization unless it's for specialized radiology referrals and those are handled through National Imaging Association (NIA). On our website under Provider Resources, go to the *Prior Authorization link* for any NIA prior authorizations, there's a *Utilization Review Matrix* which has the CPT codes that are covered under NIA, and the website to submit prior authorization requests through to NIA.

QUESTIONS & ANSWERS

Provider



Is there follow up once the OB Authorization form is filled out?

Cheryl Gray: Yes, this form is used for case management for the enrollee. It helps to ensure that they receive any assistance and services they may need that they may not even know they needed or had access to.

Provider



What if the patient is still deciding whether or not to continue with the pregnancy while at the first visit, are we still required to submit the OB Authorization form?

Cheryl Gray: Yes, if they decide to continue with the pregnancy this form will help to track her health needs.

CONCLUSIONS

The participants in the November 2021 Provider Advisory Committee meeting viewed this meeting as timely, needed, and expressed excitement in signing up to take advantage of AmeriHealth's services and tools. Providers offered their time, and expressed willingness to further explore other areas of expansion and exploration through both the Provider Advisory Committee and Provider Action Committee.

Three areas were noted in the Q&A session:

- ➔ Since the pandemic, a provider noted a drastic increase in changes in patient demographics which makes it difficult to get ahold of them to administer necessary care.
- ➔ A general care provider noted that when approved medications change it makes it harder on the patients if they have had success with a particular brand of drug.
- ➔ Providers would benefit from the upcoming *How-To* trainings for the many available online tools on AmeriHealth's website.



**PROVIDER
ADVISORY
COMMITTEE**



AmeriHealth Caritas
District of Columbia

PROVIDER ADVISORY COMMITTEE MEETING MINUTES

Wednesday, November 10, 2021

5:30pm – 7:00pm

FACILITATOR:

- Sheronica Burgess, Facilitator, Provider Advisory Committee

SPEAKERS:

- James R. Christian, Chief Operation Officer; Director, Local Operations
- Bobbie J. Monagan, Director, Provider Network
- Dr. Nathan Fletcher, Dental Director
- Cheryl Gray, Account Executive II
- Ronnie Harris, Account Executive II
- Natasha Parker BSN, RN, Supervisor, Bright Start Team; Integrated Health Care Management

AGENDA:

- Welcome and Agenda
- Opening Remarks
- Our Way Forward
- Dental Services
- AmeriHealth Representatives and Points of Contact
- Provider Education, Online Tools and Resources
- Bright Start Program
- Provider Action Committee
- Questions and Answers

DISCUSSION:

- Welcome and Agenda
 - Sheronica Burgess started meeting with introductions and meeting instructions.
- Opening Remarks
 - James Christian: AmeriHealth is proud of the partner with our Provider Community, as it is important to us that we provide whole-person care to our enrollees and invest back into the community in which we operate and serve. AmeriHealth operates in 15 states



(10 states providing Medicaid services, and 5 states providing either pharmacy or behavioral health services), with a mission to help people get care, stay well, and build healthy communities. AmeriHealth's primary focus: Social Determinate of Health (food insecurities, transportation, housing, health literacy, employment, and job training) and providing necessary service to the enrollees. Committed to DC Business Community, spent \$22M with local certified business entities within the District and has met goals over the last 3 years. Mr. Christian thanked the providers in attendance for participating.

- Our Way Forward

- Barbara 'Bobbie' Monagan: Our goal is to ensure you know how important you [providers] are and create a beneficial working relationship with you. As Director of Provider Network Management (with 20 + years of Healthcare experience), my responsibilities include, value based contracting, creating new and supporting existing company initiative, collaborating with internal and external stakeholders to ensure enrollees have access to the best quality care via a robust provide network. We want to increase awareness of the resources so they can be taken advantaged of and keep them in the community. It is our goal to make sure language and ethnic barriers are addressed so that care is not impacted.

- Dental Services

- Dr. Nathan Fletcher: Our dental program is extensive compared to other state programs, and is administered as a hybrid management model. Our team is very hands on and does a lot of work communicating within the process. They work in conjunction with Member Services for management of enrollee issues, with the Appeals Committee to help address specific dental cases, and with Compliance for Fair Hearings. Most important for dental providers is the Dental Provider Supplemental Manual which can be found on our website under Providers then Dental section. You can also find our policy information and sign up for notifications of updates.

- AmeriHealth Representatives and Points of Contact

- Account Executives – are extremely knowledgeable and many have been with the plan since inception in DC, and can provide assistance with claims, authorization, and education across the board.
 - Cassandra Arnold, Account Executive II, is the newest to the team and still finalizing her training.
 - Email: carnold@amerihealthcaritasdc.com
 - Phone: 215-863-6465
 - Cynthia Brown, Account Executive II, works with physical health providers, has been with the team for 8+ years.
 - Email: cbrown1@amerihealthcaritasdc.com
 - Phone: 202-713-7290

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- Cheryl Gray, Account Executive II, works with physical health providers, has been with the team for 8+ years.
 - Email: cgray1@amerihealthcaritasdc.com
 - Phone: 202-713-7301
- Ronnie Harris - Account Executive II, works with physical health providers, has been with the team for 8+ years.
 - Email: rharris@amerihealthcaritasdc.com
 - Phone: 202-713-7316
- Brenda Peterson - Account Executive II, works with our behavioral health facilities and handles the training for behavioral practices.
 - Email: bpeterson@amerihealthcaritasdc.com
 - Phone: 202-280-9729
- Paulette Reed - Account Executive II, works with early intervention providers, has been with the team for 8+ years.
 - Email: preed@amerihealthcaritasdc.com
 - Phone: 202-713-7291
- Provider Education, Online Tools and Resources
 - AmeriHealth Caritas DC Website: www.amerihealthcaritasdc.com
 - Provider Homepage link: [Providers - AmeriHealth Caritas District of Columbia \(amerihealthcaritasdc.com\)](http://www.amerihealthcaritasdc.com/providers)
 - Provider Services: Main | 202-408-2237 or 1-888-656-2383; Fax | 202-408-1277
 - Provider Updates: We ask that providers pay attention to this so they can educate their enrollees of the most recent updates. The most recent update on our Provider Updates page is from October 1, 2021, and discusses the new gift card initiative to get people to see providers for their healthcare needs.
 - Prior Authorization Lookup Tool: We have a new live tool where you can type in a Current Procedural Terminology (CPT) code or a Healthcare Common Procedure Coding System (HCPCS) code to get general information.
 - Claims and Billing: Claims are best submitted electronically, but paper is still accepted. NaviNet is a great tool that is highly recommended because it can be used to check member eligibility and verify claim status. There are also training guides located there.
 - Education and Training: Here you can find many training resources and great information about AmeriHealth Caritas DC.



- Forms:
 - The Pre-authorization form is required if seeking authorization for any service. This can be submitted by fax, but it is highly recommended that it is submitted through NaviNet.
 - Question - If we use the provider network tool to find a specialist for an enrollee do we still need to submit the Pre-Authorization form for that service or because the specialist is in the ACDC network will the Pre-Authorization form be waived or not taken into account?
 - No, it will not be waived because that form/process is how we review if it's medically necessary. You may say you need the service but when you submit your medical documentation it may not warrant that service for your enrollee. Most PCPs don't need to submit a pre-auth unless it's for specialized radiology referrals and those are handled through NIA.
 - The Obstetrical Authorization & Initial Assessment form must be filled out by the provider once a patient that is deemed pregnant has their 1st visit.
 - Question – What if the patient is still deciding whether or not to continue with the pregnancy while at the first visit, are we still required to submit the OB Authorization form?
 - Yes, if they decide to continue with the pregnancy this form will help to track her health needs.
 - Question – Is there follow up once this form is filled out?
 - Yes, this form is used for case management for the enrollee. It helps to ensure that they receive any assistance and services they may need that they may not even know they needed or had access to.
 - The Enrollee PCP Designation form can be used to reassign the enrollee to your PCP. This needs to be filled out while the enrollee is present so they can give consent by signing off on the change.
 - Provider Change forms should be used to keep us up to date with your demographics. This needs to be done in a timely fashion.
 - The Provider Intake form must be done with you add a new provider into your practice but cannot be done without a Medicaid number.
- Provider Directories and Drug Formularies:
 - Provider Directories - All credential services and providers are in our directory
 - Drug Formularies – We have a searchable database for prescription drugs where you can look to see which ones are covered
- Resources: The Let Us Know Program is our case management tool. Here a PCP or Specialists can refer enrollees to case managers for intervention if it is noticed that there

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may be an issue with said enrollees' health, for example if they are not taking their meds as prescribed. To be clear it is completely voluntary if the enrollee wants to participate in the intervention. The provider that submitted the referral will be notified of the outcome.

- Sign Up For Email Alerts: It is encouraged that everyone signs up for email alerts to keep up to date. There is a small glitch with the system if you have a firewall. If you do have a firewall please check your spam or junk mail for our emails. This can be avoided by putting our email in your contacts.
- Takeaways from Bobbie Monagan: Please note that we need to be notified immediately of demographic changes. This will help keep enrollees from being routed to the wrong providers. Our Let Us Know Program is a great place to find tools and resources that can be used to help your patients.
- Bright Start Program
 - Natasha Parker: The Bright Start program makes connections with our enrollees and their families. We want to meet the health and social needs for our enrollees. Here you will find *AuntBertha.com* a community database of resources. We offer *transportation* so enrollees can get to and from their appointments. We have a *meals program* as well as *farmer market vouchers* that can be obtained by getting a prescription from their provider that is then taken to the pharmacy at Giant to obtain the voucher. Our *Safe Sleep Training* is offered the 4th Friday of every month, if it lands on a holiday it is moved to the 3rd Friday. We hope to soon offer this program in Spanish. We have *Virtual Baby Showers* to help teach new mothers of available resources. We have *48-hour home visits for high risk infants*. There is a NICU graduate program as well as a Deemed Newborn Team. We are here to partner with you [provider].
- Take aways by Bobbie Monagan: We are trying to increase our awareness within our provider community, you may see an increase in communication from our account executives. We will work with you to identify gaps in care and to ensure our enrollees that we work to give them the tools and benefits they need to close these gaps. We will focus on our maternity program, we want to increase participation in our program so that our enrollees can get the best care they can. Making sure providers have the reporting tools they need to help facilitate this.
 - Comment by Eric Tchuigoua: We have run into a lot of issues getting in contact with our assigned patients because their contact information was not updated. So it was hard to address their long care gaps. Your presentation did cover a lot of my questions.
 - Question: Eric Tchuigoua – We have had issues with prescriptions, for example the covered brand will change. Why does this keep changing? My concern is the constant changing of prescriptions from something that was working for a patient.
 - Bobbie Monagan will refer Eric to their Pharmacist for more detailed formulary information and why brands may change in the system.

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- Provider Action Committee
 - This meeting will be once a quarter. We want to focus on our providers, and would like about 10 - 12 providers/administrators to volunteer to give feedback about what works and what needs to be changed.

- Questions and Answers:
 - Conversation between Bobbie Monagan and Eric Tchuigoua
 - Do you use NaviNet and tools on our website? Eric stated that he use's NaviNet to look for any care management messages that have been sent. He stated they already have a company that handles billing. All his questions were addressed in the presentation. The primary concern with patient care is getting their assigned enrollees in for their doctor visits, the first obstacle is due to incorrect contact information.
 - Ronnie Harris spoke with Eric and let him know that his billers can have access to NaviNet. This is not just for viewing eligibility, they can get real time claim status, there is an investigation tool on the site as well. They can see and question all the information they need regarding a claim. You can have them log in under your company and they can be given specific accesses.
 - What's another obstacle of getting patients to get care? Eric stated it is hard to get them to even come in, but then also being able to get them their prescriptions and the pre authorization process. After hearing about the referral program today Eric stated he is excited about using the referral program.
 - We are working on creating one stop shop videos where we talk about our programs and the how-to's in under five minutes. Our goal is to email them out.
 - Account executives are working on updating/verifying demographics so we can make sure information can be sent to you.

POINTS OF CONTACT:

- Bobbie J. Monagan, Director, Provider Network Management
 - Email: bmonagan@amerihealthcaritasdc.com
 - Phone: 202-821-8083
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- Rosalyn Carr Stephens, RN, MSN, CCM
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- Natasha Parker, RN, BSN
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ACTION ITEMS:

- Contact Bobbie Monagan if you would like to volunteer to give feedback about what works and what needs to be changed.

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