

Administration, Kansas Department of

Moderator: Ross, Becky

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09:00 AM CT

This is Conference # 7691819

Operator Good morning, my name is Mae, and I will be your conference operator today. At this time, I would like to welcome everyone to the KanCare 2.0 Implementation Call. All lines have been placed on mute to prevent any background noise.

After the speaker's remarks there will be a question and answer session. If you would like to ask a question during this time, simply press star then the number one on your telephone keypad.

If you would like to withdraw your question, press the pound key. Thank you. I would now like to turn the call over to Ms. Rebecca Ross. You may begin.

Rebecca Ross Thank you, Mae. Good morning everyone and thank you for joining us on this first KanCare 2.0 Implementation Call. We will be holding a couple more calls next week on Tuesday and Thursday. If need be, we'll extend the frequency of the calls, if we get a lot of questions.

This is your time to ask questions of the state and the MCOs. We have state staff from KDHE and KDADS available. There are also staff available from each of our managed care organizations; Aetna, Sunflower, and United.

As well, DXC, our partner is represented. So, if their questions related to anything that they can help with, they're available for questions. So, I'm going to provide a reminder, and then I'll just turn it over to each of the managed care organizations to give a brief update, and then we'll open it up for questions.

Just want to remind everybody that the open enrollment period is continuing until April third of this year. For (inaudible) who are interested in changing MCOs, you should have received an enrollment packet last fall in October or early November.

In that packet is a form that you can return, or you can call the 1-866-305-5147 number to change your MCO. If you don't want to change your MCO, you do not have to do anything.

Also, in that enrollment packet is a large sheet, which is titled Health Plan Highlights for Twenty Nineteen, which gives you information about the value-added benefits that each of the MCOs is offering.

And it also has the toll-free numbers for each of the MCOs, if you want to get in touch with them to ask them any questions about their plans. With that, I'm going to turn it over to folks at Aetna to give you any updates that they have.

Keith Wisdom

Hello, this is Keith Wisdom from Aetna. Just as a few things people had questions about, I wanted to provide an update on. On the unsecured portion of our website there's both the provider member handbook links that are available. So, those are easy to access.

Our prior authorization lookup tool is also available on the unsecured portion of our website. It's an automated tool, you can look up by CPT code. It's under the provider button in the resources section in the provider side.

And then, the third thing is the provider login. So, the easiest way to sign up to register for the secure part of the website for providers is using a claim number.

But since there's not any claims that have been processed yet, we have work arounds for that to also make it easy. And it's best to call the

provider experience line, it's the normal one eight five number that's on the front page of our website.

And provider experience will be able to walk you through that and make sure you're signed up while you're on the line. And things are going stew so far. So, excited to be serving KanCare. And I don't know, Becky, if you want to open it up to questions now or later.

Rebecca Ross We'll wait until all the updates. Thanks, Keith.

Keith Wisdom All right. Thanks.

Rebecca Ross So, now I'll turn it over to Sunflower for their update.

Stephanie Rasmussen This is Stephanie Rasmussen with Sunflower Health Plan and we have three updates. First; we've had some of the new members, especially new members that moved over from Amerigroup, calling our call center to ask whether we have their authorizations and service plans. And this is specific to home and community-based services.

And so, we're going to be sending out a member a letter next week to new members that we have to either transitioned from Amerigroup or United and have home and community-based services. And let them know that, yes, we do have their service authorization information, for what time period we will be approving those services, and when will we will be out to visit them.

We're also sending out of provider bulletin to let providers know that we're auto loading all of those HCBS authorizations today and tomorrow, when they should be able to see the authorizations in our portal, and when they should be able to see the authorizations within the AuthentiCare system, and when they should start calling us if they don't see authorizations for the members who have moved to us.

We're also providing them with the continuity of care dates that we're approving those services from the previous MCS. Lastly; for members in our work program, we have been working with members on a transition of FMS providers from Topeka Independent Living Center over to Palco, who is our new FMS provider for the work program as of

January first.

We do have a few members who needed federal employee ID numbers and because the federal government is shut down, they are not able to get an FEIN right now. And so, we are working with members that we believe already have an FEIN from previous work program services, either with PPL or previous HCVS services.

And we also have a backup plan for paying care givers starting next week, the first payroll with Palco. We're having a member call tomorrow at ten thirty AM to provide information to members about what we're doing to make sure that their care givers get paid. And that's it for Sunflower.

Rebecca Ross Okay. Thanks, Stephanie. And finally, United, any updates from you all?

Carrie Kimes Hi, this is Carrie Kimes with UnitedHealthcare, just a couple of quick things. We rolled over into the new year I didn't contract with pretty uneventful couple of days. We have possession of the transition of care files.

Which means that for our members that transitioned from either Sunflower or Amerigroup we have got this authorization files and in the process of getting those loaded. We ask if members have questions about that to contact our member services line.

If we have providers that have questions or concerns, again, reach out to our provider services team or to your assigned provider advocate to ask questions or work through that, so that as we're going through today we have no concerns with having in and loaded prior to claims coming in. And other than that, it's been businesses as usual and no concerns today. That's all I have for United.

Rebecca Ross Thanks, Carrie. So now, I'll turn to KDADS. KDADS staff, any updates that you have for folks?

Amy Penrod Hi, this is Amy Penrod, Commissioner of Community Services and Programs for KDADS. I just wanted to provide the update that and we have a signed contract for electronic visit verification services with First

Data.

They were our provider for the last five or six years and they will continue to be our provider. So, there should be no interruption of services and no immediate changes in services. And I think that's my only update.

Rebecca Ross Thanks, Amy. Any other updates from KDHE?

Jon Hamdorf No. This is Jon Hamdorf. I don't believe we have any other updates.

Rebecca Ross All right. Well, Mae, I think we're ready to open up the line for questions.

Operator Yes ma'am. At this time, I would like to remind everyone in order to ask a question, press star then the number one on your telephone keypad. Again, that's star one on your telephone keypad.

We'll pause for just a moment to compile the Q&A roster. Again, if you would like to ask a question, please press star one on your telephone keypad. Your first question comes from the line of Tish Hollingsworth. Your line is now open.

Ruth Cornwall Good morning, this is Ruth Cornwall with the Kansas Medical Society, I'm actually taking the call here at KHA with Tish. A couple of things came up regarding the Aetna website, I noticed that the provider reps are not all listed. I was wondering when we can expect those to be on there and have some contacts for those folks in the certain areas of the state that don't have anyone.

And then, my second question is, I'm concerned about the clinical policy bulletins under guidelines on the website. When you click on those links it takes you to, what I assume is the Aetna national website. And we're wondering, and we want to make certain that these mirror the state policies.

Keith Wisdom This is Keith, I'll deal with your first one. So, regarding the provider reps, we are finalizing those assignments. And we'll review the state before we post it online. So, it should be up latest, I would guess, is the end of next week, but hopefully before then.

- Joe Eberwein And then, this is Joe Eberwein. On the clinical policies, it's normally Aetna's standard process with our portal to show all of our medical processes for a corporation. We are in dialogue with KDHE on this specification and if it does need to be Kansas specific, we will revise that and point to our Kansas specific only medical policy.
- Ruth Cornwall Okay. So, that's concerning because there are some state policies where there's no diagnosis restrictions, for example. Or in the event that the state policy is silent, that doesn't mean that the national policies can be applied. Can you give me an idea of where you're at in the works with KDHE on it?
- Joe Eberwein KDHE has a full list of items that we are trying to remediate for them to get this up and running. This is one of the items dialogue right now. We will probably have you know clarification from KDHE within the next day on this matter. And then, we will have that updated within the next seventy-two hours if there is a need to change those to Kansas specific policies.
- Ruth Cornwall Okay. But in the meantime, for those claims that are coming in are they going to bump up against those edits for those policies?
- Joe Eberwein I'm going to have to go back and take a look at the (inaudible - low volume) or somebody else can answer that one. (inaudible - low volume). I don't think there's any edits specified, discussed in those policies.
- Keith Wisdom Yeah. (inaudible) We're following Kansas claim edit policies. Our claims field was based on the Kansas claim edit policies.
- Ruth Cornwall Okay. So, are you telling me, then, that claims won't deny due to medical policy?
- Keith Wisdom They will only if it would be denied under Kansas medical policies, KanCare medical policies.
- Ruth Cornwall Okay. Do we just watch the website to know when those changes are in and they mirror Kansas policy versus the national policies?

Keith Wisdom I think Joe said that we hope to have a green light to change the website by the end of the business week and he said it would be seventy-two hours to post. So, I guess latest end-of-day Monday.

Ruth Cornwall Thank you.

Operator Again, if you would like to ask a question, please press star then the number one on your telephone keypad. We have a follow-up question from Tish Hollingsworth. Your line is now open.

Tish Hollingsworth Thank you. I didn't want to bump in on the end of Ruth, in case there were others joining in on the call. Thanks for the updates this morning. And we've kind of been watching the website for Aetna as you transition in and every day we're seeing some progress.

But there's still a couple of things that I think kind of our members are asking questions about, one of them is the list of contracting providers. As I was looking at it yesterday, it didn't look like that was truly functional yet.

And I know we're early into the game, but I think as our members are working and playing into the website, getting used to wear the functionality is, that's one of the things they're asking. How do I find out the list of contracting providers? Can you provide an update on that?

Joe Eberwein The directory it is operational right now. There are classifications that we've been asked to remediate around the list of providers make it simpler for our members to actually complete their searches. I do not have an ETA when that will be completed, but the directory is up and operational for members. Could you give me some other additional specifics of what the challenge is?

Tish Hollingsworth Yeah. Like, for example, I was just pretending like I was a KMAP patient and trying to do a search for a hospital using my zip code and I couldn't get any hospitals to come up. And you know there would be a bunch of different provider types that came up, but more like in the home and can be community-based services or hospice, those types of things. So, I couldn't get any hospitals to come up.

Joe Eberwein You know if we can get your contact information, I think that's probably we need walk you through it, but we do know our hospital search is working. So, I think we can kind of take this one-off line and follow back up with you probably KDAD. But if we can get your contact information, we'll follow up with you and walk you through that search.

Tish Hollingsworth Okay. Yeah.

Keith Wisdom Hey, Joe, we have Tish's contact information, so we can get that to you. Yeah, Tish, our internal teams actually use the provider look up tool online, so, we're not experiencing that.

Ruth Cornwall Hi, this is Ruth with KMS. Just last night I tried looking up for Lawrence, for example, my zip code there and put in Lawrence Memorial Hospital and actually put in a physician too and neither one came up.

If there's special details about how the provider directory works, can we make that available to everyone so those that do access it you know have some instruction on you know what's mandatory, maybe there was a field I didn't put in or something. But I think it would be helpful for everyone if we had a good understanding of how that works.

Tish Hollingsworth And then, I have one other follow-up question. I, also, was looking at the upcoming training that Aetna's going to be doing in the month of January. And it looked like from the registration process that was online, that it looked like it was only for physician offices and clinics. Is that correct?

Kim Glenn Tish, this is Kim Glenn, and no it's for all participate, it's all for providers; hospitals, home, community-based, anyone, so we'll double-check that invite to make sure that it's very clear that it's for any provider and go from there.

Tish Hollingsworth I think that would be helpful because when I looked at it looked like only physician office. And then like for Ruth and myself, since we are advocating for all of our members that we have, we like to participate in those as well; and I didn't see a way that since like the ten and the NPI are required fields on there we wouldn't be able to register. So if we can

send an email to somebody at Aetna so that we can participate in those as well would be helpful.

Kim Glenn And please feel free to send that email to Mike McClure and he will make sure that we're on the one closest to you guys either in Topeka or Lawrence

Tish Hollingsworth Okay. Thank you.

Kim Glenn You're welcome.

Operator Again, if you would like to ask a question please press star then the number one on your telephone keypad.

Your next question from comes from the line of the Belinda Mahoney. Your line is now open.

Belinda Mahoney Hi. I just want to ask if the prior authorization list mirrors the national Aetna list?

Keith Wisdom Joe, please keep me honest; this is Keith Wisdom from Aetna. The prior authorization tool that is online available on our unsecured portion of our website is specific to Kansas, but that is not a national tool, that is a Kansas Medicaid tool.

Joe Eberwein That's correct, Keith.

Belinda Mahoney Okay. Thank you.

Operator We also have the line of Tish Hollingsworth. Your line is open.

Tish Hollingsworth Well, I don't want to monopolize the call here, trying to give some space in there. Following up on the prior auth, I do see that the look-up tool is out there, and I appreciate that, I think that's very helpful. Is there a way, though, that we can get the entire list out there for practices? It'd be easier for them to just know in advance which CPTs need prior auth as opposed to having to look up each one and create their list themselves, this way they can educate their staff and their offices about what procedures need prior auth.

Male Speaker Okay. So we'd be glad to talk about that offline. But if we create a point in time file then that file is going to be outdated at some point, and when we make updates online it needs to be real time and accurate. So then then your members would be responsible for constantly getting a new file or they would be on the hook for not knowing the latest prior auth information. So I'd advise against that, but we'd be glad to talk about it offline.

Tish Hollingsworth That'd be great. Thank you.

Operator Again, if you would like to ask a question please press star then the number one on your telephone keypad.

Your next question comes from the line of Cindy Mann. Your line is now open.

Cindy Mann I just kind of wanted to follow up with what Tish just asked about the prior auth list. United always gives us one, and while we understand that there are things that change, we need to know what the entire list is because we need to set up our system and we don't have time to go out there and to put every single code in there to try to figure out what requires it and what does not require it. That should be something that is given to us, and then if something changes then we get information just like Kansas Medicaid today, did they change theirs, there's a bulletin, so a bulletin would be coming out if the prior auth changed. So we definitely need to have that so that we can set up our systems to know what requires an auth and what does not.

Keith Wisdom Can you give--this is Keith from Aetna--can you give me your name and [inaudible]

Cindy Mann Sure. It's Cindy Mann. And I'm sorry, what else did you need, I didn't hear the last part of that?

Keith Wisdom What provider are you with?

Cindy Mann University of Kansas Hospital.

- Keith Wisdom Okay. Cindy, we will reach out to you and work on a solution.
- Cindy Mann Okay. Thank you.
- Kim Glenn This is Kim Glenn from Aetna, and as we would make changes to our prior auth list or anything else, we will be following the same process as our other MCOs for KanCare and posting provider bulletins out on the KMAP website.
- Operator Again, if you would like to ask a question please press star then the number one on your telephone keypad.
- Next question comes from the line of Tish Hollingsworth. Your line is now open.
- Tish Hollingsworth Thank you, just one follow-up question to that. And Keith you mentioned that updates can be sent out on different things, and I imagine there will be a lot of transitional things in the next month or two. Do you have a list serve or is there a way that providers--whether they're hospitals, physician offices, whatever--can receive the most up-to-date information? Is that information you're pushing out or is that information that they have to go to a certain spot like a latest news tab or something on Aetna's website?
- Kim Glenn Hey Tish, this is Kim Glenn again; and as we're making those changes and doing that we'll be pushing it out. We'll use different medias, we can do fax blasts, we'll put notices out on the website, both the secure portal and the public portal. We'll also be posting, like I said earlier, bulletins on the KMAP website under our section there that will keep that information current.
- Tish Hollingsworth Okay. I guess I'm not familiar with when you're saying on the KMAP website through the Aetna portion is there a...?
- Kim Glenn Well there's a managed care portion on the website that bulletins are posted.
- Tish Hollingsworth There's just one spot where bulletins are on there.

Kim, could you maybe provide that information? Ruth and I are looking at each other and maybe we are just still have holiday on our brains.

Kim Glenn We'll get that put together in an email and get it sent out to both of you.

Tish Hollingsworth That would be helpful because we can help then direct our members to certain spots if there's an area on your website that might contain that information just like KJ does not have all of the hospitals in Kansas as members, we have all of the community hospital with the exception of three, and Ruth does not have all of the physicians as members. So we're happy to help push out whatever we can push out in our newsletters and different spots that we can, but know that we don't necessarily reach every hospital or every physician by doing that so...

Thank you.

Operator We have a follow-up question from the line of Cindy Mann. Your line is now open.

Cindy Mann Just a question on getting that information. I'm out on the website and I know on--and I'm not seeing it, may be me--but is there a way that we can sign up on your website to automatically receive any changes and bulletins or anything that are put out there?

Male Speaker I don't believe our website is built with that functionality; but again, when we reach out to you we can we can talk about what's worked for you in the past and what we can work on. In addition, since we verified that there's not a managed care portion on the KMAP website we'll talk at the next update session on Tuesday about how this will be put together in addition to Kim working with KMS and KHA on that.

Cindy Mann Okay. What's worked the best for us because a lot of people at the hospital can sign up for it any time there's a change we get an email, so there's a number of people and we don't have to have one person to reach out or try to get that to everybody. So if there's any way that you can get that added so that as soon as something becomes available it's automatically sent out to whoever signs up for that, that's really the best that we've been able to work in in the past.

- Male Speaker Yeah. Kim had mentioned the fax blast, so when we talk to you we'll make sure that the right fax is in our database to include you.
- Cindy Mann Wait, wait, you're talking about a fax or an email?
- Male Speaker There's emails too as part of that process.
- Cindy Mann Yeah, emails are better because I'm not sure that everybody has a right fax or what have you to their computer, whereas if we have an email sign-up that anytime there's something updated it automatically goes in to individuals to be sent out as an email blast from the insurance carrier. That is what works the best for us is what I'm saying, but we can talk about that when you reach out to me. So, thank you.
- Chris Swartz Hey Keith and Kim, you may want to--this is Chris Swartz--you may want to talk with DXC and see how the KMAP is set up for these automatic notifications to providers that have registered for them. I think it's a pretty simple process to add to the functionality, it's not a very complex functionality of any website, so check with them and you'll see what the providers are used to.
- Male Speaker Thanks Chris, we will do that.
- Operator Your next question comes from the line of Tish Hollingsworth. Your line is now open.
- Ruth Cornwall Hi, it's Ruth Cornwall with KMS. Back to the provider reps. A question. What can providers expect as far as a timeline with respect to follow-up from reps?
- Mike McClure Ruth, can you--this is Mike McClure--can you give me a little bit more clarity on what, are you just looking for should we expect a phone call back same day or what exactly?
- Ruth Cornwall Right. Let's say that some claims are denying inappropriately, they reach out to their reps; should the reps be getting back with them in two days/two weeks, what's the expectation there?

Mike McClure Well I think it's going to depend on the depth of the research needed to resolve the problem, but they should be communicating that on the call; but there should be some resolution and communication back within twenty-four hours. That may not always be the final resolution, but there will be an outreach on that timeframe.

Ruth Cornwall As long as there's a touchback that's great. So twenty-four hours, that's great. Thank you.

Operator Again, just a reminder. To ask a question please press star then the number one on your telephone keypad.

Your next question comes from the line of Jeanette Livingston. Your line is now open.

Jeanette Livingston Hi, this is Jeanette with the Sedgwick County Developmental Disability Organization. I think I heard Stephanie mentioned that there's an issue with FEIN numbers for folks self-directing, and she mentioned that they're having to work around for the work program. But how will that affect other folks, new folks starting to self-director? Do all the MCOs have a workaround for folks or...?

Stephanie Rasmussen Hi, this is Stephanie, and right now it's just impacting the members that we have in the work program who self-correct who have been trying to get an FEI...or in the process of getting an FEIN number. But yes, I anticipate if there are new individuals wanting to self-direct we will be helping them either continue with or offering them agency-directed service options until they're able to get an FEIN number to self-direct. My understanding is it's a pretty immediate process when the federal government's open, once they apply they get the number immediately, it's just that they can't access it right now.

Jeanette Livingston So is that the same for all the MCOs. So if somebody new wants to self-direct do you just tell them to talk to their care coordinator?

Rebecca Ross Yeah, from a United Healthcare perspective that what Stephanie would be the same process. We'll need to work with them for agency-directed until we can get their self-directed provider [attend] and set up for payment.

Male Speaker That would also apply for Aetna.

Jeanette Livingston Okay. Thank you.

Operator Again, if you would like to ask a question please press star then the number one on your telephone keypad.

Presenters, there are no further questions at this time, please continue.

Sorry. We still have the line of Jennette Livingston. Your line is now open.

Jeanette Livingston Hi, I had another question. I've been fooling around on the Aetna website, the provider directory; and it doesn't look like you can easily identify who's like a waiver service, I'm looking specifically for IDD waiver providers. And some of the terminology is just a little off and different, like it says adult foster home, which is showing one of our residential providers, but that's not adult foster homes. So, the terminology is a little different, do you know if that will be--is that's how we just have to look at it or is there an easy way to find waiver providers on the Aetna website.

Joe Eberwein Yeah, this is Joe Eberwein with Aetna; and I'm sorry, I thought I gave an update on this. So Shirley did provide us some feedback on Friday around the classifications of our providers, we are trying to get back with the team and get that corrected and remediated. So it is a work in progress right now, I do not have an ETA when that will be corrected. But that feedback has been given to us from KDHE and we are trying to work on it and get it resolved.

Jeanette Livingston So there will be potentially. So we're the CDDO for Sedgwick County, I should be able to find out all the IDD waiver providers you have for Sedgwick County, there'll be a way to do that on your website?

Joe Eberwein Correct.

Jeanette Livingston Okay. Thank you.

- Operator Again, if you would like to ask a question please press star then the number one on your telephone keypad.
- Presenters, there are no further questions at this time. Please continue.
- Rebecca Ross Thanks Mae. Well thank you all for the good questions today, we look forward to talking with you on Tuesday. Have a good day.
- Operator Thank you, presenters. This concludes today's conference call, you may now disconnect. Presenters, please stay for the post-conference.