

Administration, Kansas Department of

Moderator: Ross, Becky

January 24, 2019

09:00 AM CT

OPERATOR: This is Conference # 7592657

Operator: Good day ladies and gentleman and thank you for standing by. Welcome to the Kansas Department of Administrations KanCare 2.0 Implementation conference call. At this time, all participants are in a listen-only mode. Later we will conduct a question and answer session and instructions will follow at that time.

If anyone should require operator assistance during today's conference, please press star then zero on your telephone keypad. As a reminder, this conference call is being recorded. I would now like to introduce your host for today's presentation Miss. Becky Ross, ma'am please begin.

Becky Ross: Thank you Howard. Good morning everyone. Thank you for joining us again for the KanCare 2.0 Implementation call. As a reminder, these calls are continuing on Thursday at 9 o'clock, so if you know someone who might like to join, you can share that information with them. Also the transcription recording of the previous calls and every called old will be posted on the KanCare website right now they're on the front page, that they're fairly easy to get through. Also like to remind everybody that open enrollment continues through April 3rd that will allow folks to make changes to their managed care organizations if they wish to through that date.

We have folks from KADA, KDHE, R3, MCOs, DXC our eligibility or enrollment worker and physical agent. We also have a representative

from First Data on the line to answer your questions, but first we want to do some update. So I'll turn it over first to Sunflower for their update.

Stephanie Rasmussen:

Hi, this is Stephanie Rasmussen with Sunflower Health Plan. Our update for today is that we did send out a provider bulletin yesterday as well as an email to all HCBS providers and indicating that the authorizations that we have in place for our members that came over from Amerigroup that need to go into AuthentiCare have not loaded yet. We had some difficulty with the file that we sent over last week, it went through HP, but wasn't able to be loaded into AuthentiCare.

We're working very closely with Candace and Grant with First Data. We are resending a file to them today and we expect to be able to know by Monday whether those authorizations are loaded in AuthentiCare. We do plan to send out a bulletin next week to let all of you know the status of that. We certainly understand the importance of having those authorizations in the AuthentiCare system for the use of the EVV.

But you should be able to see the authorizations through our secure provider portal to at least be able to confirm that we're authorizing the previous level of service approved by Amerigroup. If you have any questions about that, you're welcome to call your HCBS provider representative and their contact information is on the bulletin, and bulletin is on our website.

We are continuing our outreach with all of our new members who transitions from either United or Amerigroup letting those individuals. Now when we will be visiting with them and doing assessments or visiting with them over the phone and doing an assessment, and we've had some very good partnership with our IDD TCM providers getting up copies of individuals person centered service plans. So we really appreciate that partnership. And I believe that probably have for today.

Becky Ross:

Thank you Stephanie. Now I'll turn it over to United for their update.

Jeff:

Hi thank you this is Jeff (?), staff with United Health care. For our update today, I would mention that we now do have all of the transition of care and authorizations loaded, I think previously we had mentioned that we were very close and that we'd loaded a few of them twice and I

think were in very good shape now with all of that. So I don't expect any problems there, but certainly let us now with any do come up.

We were notified of issue earlier in the week with some national vendors that were configured differently for United health care than they have been for Amerigroup. And so they had indicated they weren't sure if those claims could be processed correctly to some members, we've gotten on that, when we talk to the national leadership of those organizations. And they are straight now and they know that they can you know process any of those orders for insulin supplies and things like that without delay and are doing so today. And so I think, you know the remainder things like that come up and we're trying to write one for quickly and move in pretty good shape.

Becky Ross: Thank you Jeff. And finally will turn to Aetna for their updates.

Keith Wisdom: Hello this is Keith Wisdom with Aetna, so from a previous called it in a request for what's new section were provider notices in bulletins could be found in a single place and on our provider portion, provider tab of our website. There has been added to section called what's new/provider bulletins. So, there's only one provider newsletter right now, but for future notices and announcements that's where it can be found.

On the home and community base services front, we had talked about the provider load and the authorization to process in last week and in the time line and that successfully completed. So we have those providers loaded both in and out of network and we have the authorizations from Amerigroup also loaded and can be viewed an EVV.

There were just a handful of providers that were not successfully loaded because they were missing information or additional things we needed. Those individual providers have already been contacted and we welcomed them getting back in touch with us, so we can we can finish that. Again a very, very small number they already know who they are.

So success on authorization front and the load into the AuthentiCare system. On the claims payment front that's moving forward successfully as well with well over 10,000 claims having been paid and the latest claim front that payments will be issued tomorrow for more than a

million dollars and in prior claims payment cycles there's more than a half million dollars paid.

So I've seen the list of providers who receive payments from some of those earlier check runs and it ran through many different categories of providers. So it should be on a broad basis seeing payments on that front obviously with the AuthentiCare and EVV system those authorization just being loaded this week, those claims are just starting and we received our first claims file from First Data through that system yesterday. So those claims will start to process over the coming days.

So all good news on that front. We did identify a set up issue with our vision benefit that the communication was not accurate about our base benefit plus the value add. So, our base benefit is similar to the all the other MCOs with para-glasses with lenses each year and an optometry visit. And then we have value-added benefit of additional 50 dollars of enhancements to the frame and/or lenses.

We are dropping a communications that will work with the optometry association and with our vendor Skygen to get out to the providers to clarify that, but shouldn't be, we are going to get that cleared up as soon as possible, so that beneficiaries can get exactly what we want Skygen system is set up to handle what the correct benefit or just trend making process that. We just need to get the correct communication out. So that process can start. And we were working with KDHE as well and we think all those communications should be out today and tomorrow.

I believe that all the updates for today and so I'll turn it back over to host. There's also an update, Joe Eberwein, do you want to mention there's frequently asked questions, document that we're working to update and can you let everyone know what that'll be close it and the content there Joe.

Joe Eberwein: Yeah, so as Keith outlined we have a let's new plan, new bulletin link on our provider tab. We just received some new revisions for our bulletin that we want to get out with some frequently asked questions. So we just received those edit it this morning. We're getting with the team to get those revisions done. We'll get it back over to KDHE for approval and then they'll be able to be posted within 24 hours.

Becky Ross: Okay thanks Aetna. And First Data, do you have any updates for?

Candace Cobb: Yes good morning everyone. This is Candace Cobb with First Data. I wanted to let you all know that we have been meeting Aetna since late November at least twice weekly and we continue those meeting. So do let us know through the help desk with me on copy, if you are having issues as a provider. Large file from that they came on Monday the 21st, so you provider should have been able to view that on Tuesday morning with the remainder of the authorizations to be sent to us I believe by Friday hopefully by Thursday, so you'll see those on Friday, if not you'll see those over the weekend.

We are going to run any authorizations that have come in since last weekend. We will be running the SMS file for re-auto create claims for providers that will run this weekend as well as personal emergency response rental claims file. So those two files with the auto creations will run this weekend for all authorizations that we have from any of the three MCOs. DXC and First Data have researched a very small list of providers, not yet in Aetna system that she's identified that issue in his report.

I'm hearing both authorizations and claims for providers in AuthentiCare. As Stephanie mentioned, we have worked with Sunflower and if they ask for when that file came in yesterday, I'll double check. We should have that file in AuthentiCare this morning for authorization should be seeing there. If it max DXC the timeline deadline last evening, if not we'll see those on Friday.

Providers can contact our help desk as always at authenticare.support@firstdata.com and put me on copy for that email if you would, they will need examples either client names or authorization numbers or something that we can research. So if you're contacting us please give us some information. And as always you can reach me at Candace.cobb@firstdata.com. Thanks Becky.

Becky Ross: Thanks Candace. Howard, I think we're ready to open up the line for question.

Operator: Ladies and gentlemen, if you have a question or comment at this time, please press star then one on your telephone keypad. If your question has been answered or you wish to remove yourself from the queue, simply press the pound key. Again if you have a question or comment at this time, please press star then one on your telephone keypad. We have a question or comment from the line of Shannon Uehling, your line is open.

Becky Ross: Shannon are you on mute?

Shannon Uehling: I don't know how I entered the queue. I did not submit a question.

Operator: Okay, I retrieve from the queue for you so.

Okay, our next question coming from the line of Shirley Gamble, your line is open.

Shirley Gamble: Good morning. This question is Aetna and at a previous call, you had a Stacy Brown from Lincoln OBGYN ask a question regarding OB notification process. And you were going to get with her individually off the call. But there's others of us that do OB that would need to have some of that information and I wondered if you could just kind of go over that on the phone and let us know what your expectations are?

Becky Ross: And Shirley, this was around the value-added benefit and how to get pregnant women hooked into that was that-- correct question.

Shirley Gamble: That is correct.

John Shely: Hi this is John Shely with Aetna. I met with Leslie Seals who's been working on our team with some of the value added benefits including this pregnancy benefit. And the question that the last thing was, is this tied to claims in order for the member to get the benefit and answer to that is no.

And so there is a process whereby the individual can receive credits by us reaching out to the individual to OBGYN offices and through several different options and I guess this is then tried already. I'm not sure which specific offices, but simply getting confirmation of the appointments sometimes even getting a copy of the schedule some ways that is

agreeable by the OBGYN office to validate that member was seen in the office on a given day. So the concern was that how was a member get credit because of global-cap payments to OBs and it's not dependent upon the claims. It depended upon us reaching out and getting information from the OB office to validate the number of visits that have occurred?

Becky Ross: So to clarify, you would be reaching out to our offices to verify an appointment had taken place.

John Shely: Yes and I will double check that just to make sure that it's always going to be as reaching out, but my first meeting with Leslie just occurred yesterday. But I think the main message at this point is that's not claims base of that the patient who comes into an OB offices saying where is my reward. They'll be doesn't have to worry that that'll be delivered long after delivery.

So my understanding from my conversation yesterday is that there will be that information and will also send out a communique just to verify the articles so that it'll be available to all of OBGYN providers, that is our next step is to make that clear through mass communication to physicians to deliver women.

Becky Ross: And just to clarify further role health clinics that do OB we do bill on a per visit basis. So you would have a claim coming in from our office as long as all they have, was the KanCare coverage. If they had a primary, we would then build global to the primary first. So there's really nothing that we need to add that we may be getting requests to verify appointment. I just want to know what my front office is to expect.

John Shely: Yes so, by the end of next week on our provider notice section on our website, we will have more details on the process for this value-added benefit.

Becky Ross: Okay thank you.

Operator: Thank you, our next question comes from a line of Jackie Clifton, your line is open.

Jackie Clifton: Okay hello, I'm going to have a question first for United Health Care and then I can go back on mute and let somebody else have a question if there are others. United, we've heard on the all the calls this month about the duplicate and sometime triplicate authorizations that are in AuthentiCare that you guys are dealing with. We've had communication with our provider rep. We set the names of the authorization, and our provider rep know that these authorizations are containing between like 30 and 70 hours per day of service which is impossible, but they're really big mistake.

AuthentiCare if someone clocks in, Candace might be able to speak to the way this works, but those claims can hit against all of those authorizations. So we have a potential of over approving services or you guys over approving services that we as SMS providers within pay and we really want to get those cleared out, and so far that hasn't happened. So do we need to do something else to get you those names or what should we do?

Keith Wisdom: So all those will be embedded instead of deleted, so we don't want to keep pounding the error in AuthentiCare. So the easiest way to you know get them to no longer be effective and to stop influencing them essentially embed them all higher. And we're not being not happen, then it's not happening the way we think it is and yes please this is Jeff Stafford, I will give you my email jeff_stafford@uhc.com and send us those names and we will get on it, but you please make sure and check, you know currently the team's been working now pretty hard, so you know what's there today is a lot different than what they're two days ago and so forth.

Becky Ross: Okay we would really suggest that your team look at the leading those duplicate authorizations and you might not be able to because claims it hit against them, but we have to then combine authorizations and do a lot of work to make sure people don't go over the plan of care, when you have those duplicate that you just Endate. So I don't know if there's a good solution on that, but it does really cause a lot of problem.

Keith Wisdom: Okay you know ---

Becky Ross: But we will send you the information, so you can look at it.

Keith Wisdom: Thank you very much and I will just give you some information that is imperfect, but we had looked into [Inaudible] that caught the separate issue simply for providers particularly you know they were clients of already going against those, you know our goal here and what we want to end up with is the solution that eliminates that without causing you no problem for people.

So I do appreciate you, you know you've currently work with upon that and please give them the information while I give with you and make sure that we've got the one that you know you're working with their and that you have on your list is it's going to taking care of. We believe were you know at a total universe of about 300, you know across the system. So we're going to get cleared up.

Becky Ross: Okay, we will keep being but it's just kind of you know one of those things that we want to make you aware of. I do have [Inaudible].

Keith Wisdom: Okay thank you very much.

Candace cobb: This is Candace with AuthentiCare, First Data. Jackie, could you put me on a copy for that and Jackson we reach out to you from First Data to coordinate that effort because as Jackie said and as you said. There are issues if you delete it an authorization that claims have attached. So what we want to do is make sure that we end date those appropriately and that typically an AuthentiCare that will hit us I guess the first one for that band of the date of service and ignore the others that have come in. And tell better authorization is used up, but its Jackie said once it's used up. And it'll bounce in the next, it is my understanding. So what we want to do is coordinate that effort and there may be a way you can avoid those and not delete those and that would retain the history. So if you can keep us on copy for that, we would appreciate it very much.

Becky Ross: Sure Candace, I will copy on.

Candace cobb: Yes.

Keith Wisdom: Thank you very much that's perfect, but we don't want to solve one problem a momentum to create another. So I really appreciate that collaboration, Thank you.

Candace Cobb: You're welcome.

Operator: Thank you our next question or comment comes from a line of Gail Herndon, your line is open.

Gail Herndon: Yes, it's been a while since I sit in on this group but I'm having my bill for OCTK in Twin Valley (?), I'm having significant issues giving any response for prior authorization issues and payment with Amerigroup. And I cannot get any phone calls back. So I don't know what the solution is for that.

Shirley Norris: Hi Gail, this is Shirley Norris from KDHE. The Amerigroup offices closed as of 12/31. So they have the one phone number to call for providers this 1800 number. So you call that number and they won't answer.

Gail Herndon: No, I'm getting voicemail and I have called four different times over the last three weeks but not one respond and it's telling me is Kansas authorization extension, but it does not returning any phone call. And we've got one individual that we've been serving since November 1st that is a very high serve and relays an 8500 dollars a month.

Shirley Norris: Gail, could you please email me that information. My email address is Shirley.norris@ks.gov and I'll fire that off to their leadership and have them address this.

Gail Herndon: Yeah because this is just getting crazy, I've got and happened is an issue so --

Shirley Norris: Well that's unacceptable. They promised to have those phone lines open and that have issues addressed. So I need to know about that, one anyway and that sort of issue.

Gail Herndon: I appreciate that. Thank you.

Operator: Thank you. Just a second, I quit the line. Our next question comes from a line of John Prescott, your line is open.

John Prescott: Yes this questions for Aetna. We received some core our clients receive some correspondence with regard to some medications and your notification or communications indicated that there medication was not on your list. Now you were very kind to provide them a 30-day supply a temporary supply, but the communication indicated that they may not be the case in the future.

Can you shed some light because we didn't have any problem with Amerigroup for filling those pharmacy needs or you know we looked in some of the other providers where some of other clients using similar drugs that wasn't a problem. So can you shed some light on and manage our expectations?

Keith Wisdom: This is Keith Wisdom from Aetna. Can I get your name again?

John Prescott: Sure, it's John Prescott.

Keith Wisdom: And from what pharmacy?

John Prescott: No, not pharmacy I'm with an agency.

Keith Wisdom: Okay. Which agency?

John Prescott: Sunflower oversight services.

Keith Wisdom: Thank you. I think the best thing would be for us to have somebody from our pharmacy team reach out to you certainly every MCO has a unique formulary and each formulary has usually multiple drugs in the category. They're just not the same as you know, they're just not the same between MCO. So I think a discussion about the specific issues, we probably would be the most productive thing to solve that. And so if I could get your phone number, we can have somebody to call you back either from our medical team or our pharmacy team.

John Prescott: Okay, let me give that to you now or how would you like to?

Keith Wisdom: Yeah if you don't mind.

John Prescott: Sure, it is 620 792 1325.

Keith Wisdom: Okay thanks.

John Prescott: You bet thank you.

Operator: Thank you. Our next question or comment is a follow up from Jackie Clifton, your line is open.

Jackie Clifton: All right thank you. This time I'll talk to Aetna about the authorizations in AuthentiCare. We did see a big group of authorization loaded in AuthentiCare this week, so we're pleased to see that, but as we ran the list of authorization again what previously was there, I don't think any one of them matched. So we're not quite sure. If we just go with what's in there or not and also on probably 90% of the authorizations we do not have authorize and we just have personal care authorization.

So we don't know if the SMS maybe got it into some of the personal care and if so we can't actually feel that I've got a separate authorization. So we just wanted to let you know that and also we did have a call from care coordinator this week asking for a copy of the previous Amerigroup authorization and I thought from last week we weren't going to be doing that like somehow have to get that from the state.

Keith Wisdom: So this is Keith Wisdom, the authorization should not be different than what Amerigroup authorized. So we would like to speak to a live and walk through the details of that to see if there were any issue specific to those authorizations and it didn't come over consistent with what should have been extracted from Amerigroup files. So we would like to talk to your record directly about that ---

Jackie Clifton: What the percent every single one of them is different, so I don't know it has made you know emailing with you and Candace might be something to look also just so you can --

Keith Wisdom: Okay, can we get your phone number?

Jackie Clifton: 316 260 9910

Keith Wisdom: Okay, the other thing you mentioned was we asked for the plan of care. We did not get any mess, any plans of care for the members we received. So Amerigroup did not pass those to us except for a very small handful of numbers. And so that will be a lucky, but according to the transitioning you know we do have the information from the AuthentiCare file, but that's what we have right and so we do appreciate getting copies of the plan of care because as part of the transition of care policy we're supposed to respect those and continue with those to the anniversary.

And so you will at times get those request from my end and I think you know for us to solve to make sure these authorizations and the specific examples you're talking about are loaded correctly and we'll have those as well. So that's the reason you heard that request and Alan Schaefer who works on that side of our business on the clinical side, did you have something to add?

Alan Schaefer: No, I just want to talk about yeah, the reason we're asking for the plan to care because we don't have them and to have as much information we can about numbers as we make visits with them and put together and initials person centered services plan. And backup continues to plan and so forth as much as we have is all the better rather than starting from scratch.

Becky Ross: And I completely respect that, but I think this goes to the state that they dropped the ball for you guys because it shouldn't be like this, we shouldn't be almost at the end of January and you not knowing. The people you've got the authorizations that they had previously and it's very unfortunate because it's pretty much of this. So the state really should help out here.

Operator: Thank you. Once again ladies and gentlemen, if you have a question or comment at this time, please press star than one on your telephone keypad. Okay we have a question in the queue, but they were unable to leave their first and last name, so if you queued up for question, your line is open go ahead and speak.

Anita This is Anita with OCCK and last meeting, our last call on last Thursday I spoke to Aetna and you guys were supposed to reach out to me about what to do if authorizations or not loaded because I had to process payroll. And they were supposed to have been loaded I was already processing payroll day late to accommodate for the loading. And they were not loaded. So me and my team spent an entire day trying to process to come up with information to hand key to be able to pay our client's workers.

And make sure that they got paid, where they should get paid. And at 4:30 in the afternoon someone finally called me to say, "Oh, Hey, I just wanted to reach out to make sure that the authorizations were loaded". And by that time of course I'm a little irritated and I said no they were all loaded, some of a more loaded, but some of them were not loaded and they said they would reach out to me yesterday and I still haven't been reach back to.

So I can give them a list of who was not loaded. Because not all of Aetna's authorizations are loaded. Payroll that normally takes me from 8:30 to noon, I spent an entire day with my team researching to make sure we could get people paid and that was just enough information for me to hand key not for me to process payroll. And authorization still aren't loaded, so it's frustrating on this end.

Becky Ross: Anita, this is Becky Ross and have your number 785 827 9383 and your extension 130 correct?

Anita Yes.

Becky Ross: Okay go head case.

Keith Wisdom: So we apologize for the inconvenience in ended the authorizations that didn't match your expectations. We will be reaching back out to you and like we discussed with the previous caller will be working with you through the details of how the authorizations do not match right? You know I can't speak to why they don't match, it concerns me whether or not the files accurate now that we have two questions in a row, but we also need to investigate if there's any errors on our part, but that we will

be reach actively talked to those details because it would just speculation too at this point as to why they don't match your expectations?

Anita Okay, a concern is whether people going to contact back because you know someone of the contacted before at least I would have had a contact information. You know to know that it's you know if they weren't loaded, I had you know some of the contact instead of you know us wasted an entire day of trying to run circles and make sure people got paid.

Keith Wisdom: Okay. Again I apologize I know that this Lesa Castillo from our team did leave you a message. I also understand that you were going to send us a list of the authorizations that they didn't match with your expectation list is that correct?

Anita: She was supposed to call me back to give me where I needed to send it to and she never called me back yesterday.

Lydia Jones: Okay this is Lydia I'm also in the network department, please listen out yesterday and is out sick again today, you know I will call you as soon as this call over and we'll work through your issue.

Anita: I have that list of everyone's authorizations that wasn't there. So I have that list ready to go. Okay, what's not there?

Lydia Jones: As soon as we get off this call, I will call you and I've noted your number.

Anita: Okay.

Lydia Jones: Okay thank you.

Operator: Thank you, our next question or comment as a follow up from Miss. Jackie Clifton, your line is open.

Jackie Clifton: Hi good morning. For Aetna, we've only build one claim that was an AuthentiCare because they want to follow it and see what happens because we're still not quite sure with contracting. We on the provider portal of your website, we did a search for our agency and we can't find

it. We noticed there's no SMS service provider on your dropdown provider box.

So that might be something you need to add. But we really would like to figure out how to get access to the portal, so once we send claims through AuthetiCare, we can actually see what happens if they get duplicated, if they get denied, and so we can figure out your guys process, so you could let us know if we need to contact someone or how that would work that'd be great.

Keith Wisdom: Yeah just for the broader people on the call, we are signing people up for the access to the provider portal and that can be done through our regular 1800 number that you choose the provider, you know services line from that and that team knows how to sign people up for the provider portal. We can contact you directly, but I wanted the broader group on the phone to know how to do that if anybody's interested. So if you want to provide us our number, your number we will reach out to you and help you with that.

Jackie Clifton: Okay 316 260 9910.

Keith Wisdom: Thank you Jeff.

Jackie Clifton: Thank you.

Operator: Thank you again ladies and gentlemen, if you have a question a comment at this time, please press star than one on your telephone keypad. I assure no additional audio questions in the queue at this time.

Becky Ross: Thank you, any last update from anyone state and MCOs, First Data? All right, well thank you all for joining us on this call. We will have another one next week same time and have a good day.

Operator: Ladies and gentleman, thank you for participating in today's conference. This concludes the program. You may now disconnect. Everyone have a wonderful day.