



Wellness and Recovery Benefit Provider Round Table

Drug Medi-Cal Organized
Delivery System

August 2018

Welcome

The Webinar Will Begin Shortly

Before starting, following is a presentation note, and instruction for how to submit questions during the webinar.

- We have muted all lines to keep background noises from causing interference
- You can ask questions at any time during the presentation
- Use the **Questions Pane (Chat Box)**, or click the **Raised Hand** on the **Control Panel**

Thank you for attending today's webinar.

PHC Provider Education Team

Download Webinar Attachments



How to Download Webinar Attachments

1. Click on "Handouts" in your Control Panel.
2. Click the name of a handout to access it.
3. Your default web browser will automatically launch, and open a blank page, and the handout file will automatically start downloading.
4. You can then click on the downloaded file to open or save it.

File View Help

Audio

Telephone

Mic & Speakers

Dial: +1-(000) 555-1234

Access Code: 333-333-333
(and [additional numbers ...](#))

You are connected to audio

Talking: PHCPR Trainer

Handouts - 1

[How To Navigate Training Webinar- PHC O...](#)

Questions

Welcome to PHC Online Services Website Redesign "How to Navigate" Training Webinar

The webinar will begin shortly.

Before we get started, we would like to review a few housekeeping items, and let you know how you can participate in today's webinar.

We have muted all fees in order to keep

PHC Online Services Website Redesign "How to Navigate" Training Webinar
Webinar ID: 132-937-843

GoToWebinar

CITRIX

Talking: PHCPR Trainer

12:03 PM
9/15/2015



Welcome and Introductions

Agenda

- Round Table Goals
- Updates from the Wellness & Recovery Leadership Team
- Certification, Credentialing, and Contracting
- Release of Information
- Introduction to Managed Care
 - Eligibility Verification
 - PCP Assignment -- Clinic or Medical Group
 - Special Members
 - Wellness and Recovery Eligibility
- Member Grievances
- Contact Us
- Questions



Round Table Goals

Round Table Goals

Share information with you to help you go from point of service with our members to appropriate reimbursement, in an efficient and organized manner

Meet monthly in the six months before the launch of the Wellness and Recovery benefit with preliminary orientation and onboarding

Meet monthly in the six months after the launch to review as needed, respond to questions, address issues, and support your work on behalf of our members

Meet as needed thereafter to continue our collaboration



**Updates from the
Wellness and
Recovery
Leadership Team**



**Certification
Credentialing
Contracting**

Drug Medi-Cal Certification

The Drug Medi-Cal Certification application is online on the DHCS website at the following link:

<http://www.dhcs.ca.gov/provgovpart/Pages/DrugMedi-CalCertificationRe-CertificationContinuedCertificationInformation.aspx>

PHC will contract different levels of care with providers that are DMC certified

Individual counselors must be certified by one of the following agencies

- CCAPP – California Consortium of Addiction Programs and Professionals
- CADTP – California Association of DUI Treatment Programs

Following is a link to the DHCS website that covers counselor certification

<http://www.dhcs.ca.gov/provgovpart/Pages/CounselorCertificationOrganizations.aspx>

Medi-Cal Certification

The following types of providers are required to be Medi-Cal certified before rendering services to Medi-Cal members

- LMFTs
- Psychologists
- LCSWs
- MDs

Providers have a pathway to enroll in Medi-Cal through PAVE:

<http://www.dhcs.ca.gov/provgovpart/Pages/PAVE.aspx>

Credentialing with PHC

- Providers must be Drug Medi-Cal certified, a copy is required for PHC credentialing
- W-9 must be included with the application
- Licensed individuals require a separate application from facilities
- When we receive a provider's validated documentation, the provider is presented to our Credentialing Committee
- The Credentialing Committee meets the second Tuesday of every month, except for July and December
- As we get more information we will make it available.

We are Here to Assist You With this Process

Contracting with PHC

- Provider must be DMC certified
- Provider must be credentialed with PHC
- PHC sends contract to provider
- Provider reviews contract prior to signing
- NPIs for facilities and providers required
- As we get more information we will make it available.



Release of Information

Release of Information

- We are aware of the issues related to 42 CFR that applies to Substance Use Disorder (SUD) programs
- We are working internally to develop best practices for this issue to make sure we get it right
- As we get more information we will make it available.



Introduction to Medi-Cal Managed Care

Introduction to Managed Care

- Eligibility Verification
- PCP Assignment (Clinic or Medical Group)
- Special Members
- Who is Eligible for Wellness and Recovery

Eligibility Verification

- We have an online Eligibility Verification System on our website

<https://provider.partnershiphp.org>.

- DMC providers can access the site when they complete the credentialing process
- We also have an automated telephone service Integrated Voice Response (IVR) **(800) 557-5471**
- As Special Member Status can change, providers are encouraged to verify PCP assignments at every visit

PCP Assignment

- Members who are newly assigned to PHC are instructed to select from a list of available PCP offices
- Most PHC members are assigned to a unique PCP
- The PCP is frequently a clinic or medical group, rather than a specific medical practitioner
- The PCP is responsible for primary and preventive care, and referrals to specialty care

Special Members

- A small percentage of our members are not assigned to a PCP. PHC members who are not assigned to a PCP are referred to as **Special Members**.
- We will work with **Special Members** to ensure they have identified a PCP site as their medical home.

Special Members

Special Member Category Examples

- Members are placed in Special Member status during their first month of eligibility with PHC while they choose a PCP
- Members with a Share of Cost (SOC)
- Members who do not live in the county of responsibility, including foster children
- Members with primary insurance under a commercial health plan
- Native Americans are allowed to choose between PCP assignment or Special Member status

Who is Eligible for Wellness and Recovery

- Services are available for all Medi-Cal beneficiaries, including Medi-Cal Fee For Service (FFS), who will be assigned to PHC
- Members must meet the medical necessity criteria as determined by the American Society of Addiction Management (ASAM) scale



Member Grievance Process

**Eric Becerra
Grievance & Appeals
Resolution Manager**

What is a Grievance?

A grievance is any written or oral expression of dissatisfaction regarding PHC and/or one of its providers.

Two types of grievances

- Complaint
- Appeal

Complaints

A complaint is an expression of dissatisfaction regarding PHC and/or one of our providers.

This includes quality of care concerns.

Complaints may be filed anytime following the date of the incident.

Complaint Examples

- Difficulty Obtaining an Appointment
- Billing Issues
- Facility Conditions
- Confidentiality Issues
- Quality of Care or Service

Appeals

An appeal is a member's request to PHC to reconsider an initial review decision resulting in a notice of action of their service, benefit, or claim.

Timeframes

- Appeals must be filed within 60 calendar days from the date of the Notice of Action
- We issue an acknowledgement of an appeal request within five calendar days
- Standard resolution is 30 days
- Expedited resolution is 72 hours

State Hearings

A State Hearing is a grievance or appeal filed by a member or their authorized representative to the California Department of Social Services, to be heard by an Administrative Law Judge (ALJ).

- When a PHC member or their authorized representative is dissatisfied with any denial issued by PHC, they have the right to file for a State Hearing, once they have exhausted our appeal process. **Per: APL 17-006 Effective 07/01/2017**
- State Hearings must be filed within 120 calendar days from the date on the Appeal Resolution Letter.
- Members have an opportunity to present their case in front of an ALJ. The ALJ will take into account applicable laws, PHC policy, testimony, and evidence, in order to issue a ruling.

Grievance Issues that We Cannot Address

There are certain issues that we cannot address through our grievance process because they are outside the authority of the health plan.

Examples

- Requiring providers to accept members
- Requesting that staff be fired
- Fees associated with any provider office policy (i.e. No-shows)
- Medi-Cal Eligibility
- Disagreements with Treatment Plans

Contact Us

Member Services Department

Including Grievances

(800) 863-4155 Monday – Friday 8 a.m. – 5 p.m.

Automated Eligibility Verification

(800) 557-5471 – 24 Hours a Day 7 Days a Week

Questions related to this program

drugmedicalphc@partnershiphp.org



Questions?