

## **ECM Provider Reminders and Checklist**

Partnership's Enhanced Care Management (ECM) program team has compiled reminders and a checklist for partnered providers to best serve ECM members. For questions, please email <a href="mailto:ECM@partnershiphp.org"><u>ECM@partnershiphp.org</u></a>.

#### **Reminders:**

- Please continue to submit the provider <u>return transmission file (RTF)</u> and provider initial outreach tracker (IOT) to Partnership.
- All invoices and claims should be submitted within 30-days of the service date. Providers have 365-days from the date of service to submit claims to Partnership for payment consideration.
   Claims received after the 365-days from the date of service will be denied.
- ECM providers must submit treatment authorization requests (TARs) through Partnership's
  provider portal for ECM eligible members, once the member agrees to participate. Before
  doing this, ECM providers must verify that the member has Partnership eligibility and meets
  the criteria for at least one population of focus. The initial TAR date span will be a one year
  period. ECM providers should ensure these members are listed on their RTF; if not, they
  should be added to the most current RTF for the reporting period.
  - After obtaining the member's release of information and individualized care plan, ECM providers must upload these documents to PointClickCare within 60-days of the TAR request date. Reauthorizations for TARs are approved for a six-month span after the initial one-year span and will continue to be approved for six-months until the member is no longer receiving ECM.
  - Although not mandatory, it is best practice for ECM providers to stagger reauthorizations (renewals). This approach can help mitigate potential delays in TAR review and streamline administrative processes.
- ECM providers are required to outreach and engage with newly referred, potential ECM
  eligible members at least three times before discontinuing outreach efforts. These outreach
  and engagement attempts must be tracked and reported to Partnership on the provider <u>IOT</u>.
- ECM providers should notify discontinuation of ECM eligible members to Partnership via monthly reporting files (refer to page nine, section F of the MCCP2032 ECM Policy).
- Education and resources for billing can be found on Partnership's CalAIM webpage.







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### **ECM Provider Checklist:**

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- ECM providers must upload a copy of the member's individualized care plan and release of information to PointClickCare within 60-days of the TAR request date.
- Contact Information:
  - Email: cmt-support@pointclickcare.com
  - o Phone: (801) 285-0770

#### ☐ Individualized Care Plan (ICP)

- ECM providers may use their own ICPs if they meet the minimum core elements of the ECM benefit addressing identified needs: medical, behavioral health, dental, long-term supports, and community referral(s).
- Partnership provides an ICP template for ECM providers to use, if necessary.

#### ☐ Release of Information (ROI)

- ECM providers may use their existing ROI forms, but these forms must use "ECM specific" information and provisions.
- A new ROI is required at the time of expiration if the member is continuing in ECM.
- Partnership provides a ROI template for ECM providers to use, if necessary.

#### □ TARs

- ECM providers must submit their TARs through the Partnership provider portal.
- ECM providers must upload a copy of the member's ICP and ROI to PointClickCare within 60-days of the TAR request date.
- Partnership aims to approve all TARs within five business days. If a TAR has not been approved within five business days, email <a href="mailto:ECM@partnershiphp.org">ECM@partnershiphp.org</a>.
- Note: TAR dates that overlap are considered as duplicated and denied. Please be sure to stagger TAR dates accordingly.

#### □ Claims and Billing

- ECM providers utilizing the invoice billing format are required to submit through the secure file transfer protocol (sFTP).
- ECM providers can submit electronic or paper claims once there is an approved TAR in the Partnership system.
- Electronic claim submission is the preferred billing method for quickest reimbursement.
   For more information about electronic claims submission, call (707) 863-4527 or email <a href="mailto:EDI-Enrollment-Testing@partnershiphp.org">EDI-Enrollment-Testing@partnershiphp.org</a>.

The ECM program team has also scheduled monthly office hours in 2025 to offer additional provider support (<u>click here to register</u>).



