Office of the Governor | Mississippi Division of Medicaid

Mississippi Division Of Medicaid

Managed Care Provider Workshops

2020



Purpose of the 2020 Provider Workshop

The purpose of today's provider workshop is to provide clarity and understanding for Mississippi Division of Medicaid Managed Care programs MississippiCAN and CHIP processes; to resolve provider and office managers' issues and concerns.

The Division of Medicaid in collaboration with the coordinated care organizations (CCOs) are ready to assist and help resolve issues and concerns.

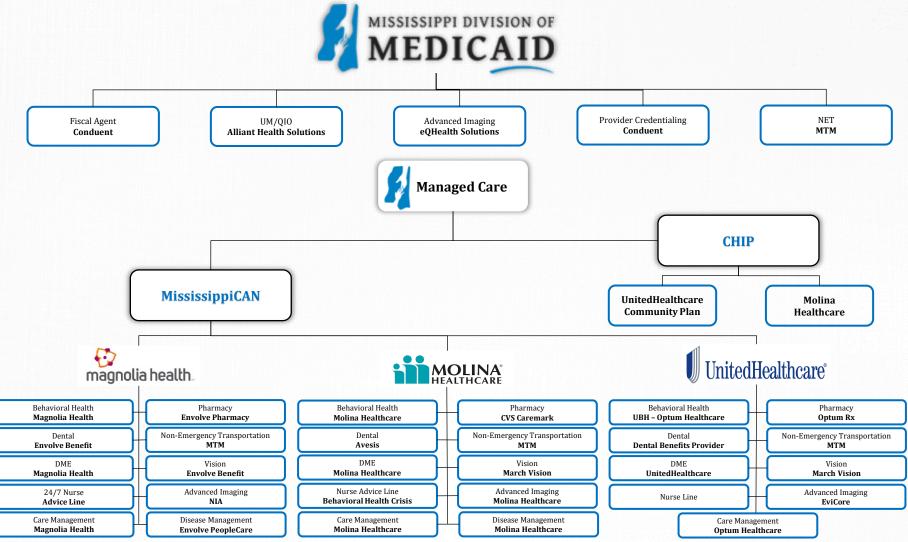
Mission: The Mississippi Division of Medicaid responsibly provides access to quality health coverage for vulnerable Mississippians.



Welcome & Introductions



Medicaid Organizational Chart



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MEDICAID

Division of Medicaid Managed Care Staff



Sharon Jones Director of Managed Care Operations



April Burns



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Magnolia Health





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Dawn Teeter



Tyania Klingelhofer



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Chinwe Nichols



Earl Robinson





Kari Lewis



Kwiinta Anderson



Thomasina Robinson



Ricky Bailey



Bert Emrick



Chris Cauthen





LaKeida Ward



Pam Canavan

AGENDA

1:10 p.m.	1:20 p.m.	Review Managed Care Provider Desk Reference Division of Medicaid – Office of Coordinated Care
1:20 p.m.	2:10 p.m.	Behavioral Health, Rural Health Clinics, Federally Qualified Health Centers & Top Provider Issues Review Managed Care Provider Desk Reference Magnolia - United - Molina
2:10 p.m.	1:25 p.m.	RECAP What Providers Need To Know Magnolia - United - Molina
2:25 p.m.	2:30 p.m.	Closing Remarks How to Access Presentation and Material Division of Medicaid – Office of Coordinated Care



Division of Medicaid – Office of Coordinated Care Overview of <u>2020 Provider Desk Reference</u>



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Managed Care | MississippiCAN & CHIP Provider Desk Reference

2020



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Open Enrollment MississippiCAN and CHIP

- MississippiCAN and CHIP Open enrollment is available to members from October 1, 2020 to December 15, 2020. Members may choose 1 of 3 CCOs.
- Beneficiaries can only switch once. DOM will only acknowledge the first open enrollment form submitted.
- If a member contacts your office needing an enrollment form direct them to the Office of Coordinated Care at:

Toll Free: 1-800-421-2408

Local: 601-359-3789

Fax: 1-888-495-8169

Local Fax: 601-359-5252



MississippiCAN Enrollment

When can Beneficiaries enroll in MSCAN?

• Beneficiaries not already enrolled may enroll throughout the year.

When is Enrollment effective?

- Enrollment is always effective at the beginning of the month and disenrollment is effective the last day of the month.
- The exception is when beneficiary is transferred to a nursing home or waiver program.

When can Members choose a CCO?

 After receiving initial notification letter, beneficiaries may choose a plan within 30 days or they will be automatically assigned to a CCO. Members may be added each month to Medicaid and MississippiCAN.

When can Members change CCOs?

- After initial enrollment with a CCO, every member will have a 90-day window to make changes.
- During the 90-day window, mandatory members may only switch **once** between CCOs.
- During the 90-day window, optional members may switch **once** between the CCOs or return to regular Medicaid.
- The open enrollment period each year (October December) to allow members to make changes. *Changes go into effect January 1.*



Opioid Abuse Treatment Services

DOM Office of Mental Health Updates

Opioid Treatment Providers can now enroll as Medicaid providers. To enroll as an Opioid Treatment Program (OTP) provider, the agency:

- Must be certified by Department of Mental Health (DMH)
- Must be certified by the Substance Abuse and Mental Health Services Administration (SAMHSA)
- Must be certified by the Commission on Accreditation of Rehabilitation Facilities (CARF)
- Must maintain a "Pharmacy Permit," as defined and authorized by the MS Board of Pharmacy.

Fee Schedule

https://medicaid.ms.gov/wp-content/uploads/2020/12/Opioid-Treatment-Program-Fee-Schedule-Print-Date-12012020.pdf

DOM Administrative Code

https://www.sos.ms.gov/adminsearch/ACProposed/00025180b.pdf



Outpatient Treatment Services

DOM Office of Mental Health Updates

Community Mental Health Services Fee Schedule Revised

https://medicaid.ms.gov/wp-content/uploads/2020/12/CMH-Services-Fee-Schedule-Print-Date-12012020.pdf

- Applies to mental health and substance use services (HF modifier Required for Substance Use Disorder Services)
- Revised codes for some services (Psychosocial Rehabilitation (PSR), Crisis Residential/Crisis Stabilization, Community Support)
- Independent Practitioners (ex. LCSW, LPC, LMFT, etc.) reimbursed for services provided to adults (over age 21 | eff. September 1, 2020)
- Licensed Marriage and Family Therapists eligible to enroll as providers (eff. January 1, 2021)
- Partial Hospitalization can be provided by General Hospitals and Free-Standing Psychiatric Hospitals (eff. September 1, 2020)

Behavioral Health | Rural Health Clinics | Federally Qualified Health Centers Top Provider Issues





MOLINA® HEALTHCARE **2020 Provider Desk Reference Guide**

Behavioral Health

Page 47

Federally Qualified Health CentersPage 50

Rural Health Clinics

Page 52

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Managed Care | MississippiCAN & CHIP Provider Desk Reference





What Providers Need to Know!



- How to identify services requiring authorization
- How to obtain authorizations
- How to obtain continued authorizations
- How to file claims with modifiers, documentation, etc.
- How to obtain claim reconsiderations and retro reviews
- How to appeal an adverse benefit determination
- How to avoid authorization and claim denials
- How to locate Behavioral Health, RHC, and/or FQHC information on CCO website



MOLINA[®] HEALTHCARE

How Providers Can Access Webinar Presentation

2020 Managed Care Provider Workshop Presentation

Managed Care | Mississippi Division of Medicaid (ms.gov)



Managed Care Inquiries and Complaints

HELP US, HELP YOU

Please forward all issues and complaints to: <u>MississippiCAN.Providers@medicaid.ms.gov</u>

Please provide the below detailed information. If you have examples, attach them to the email.

Managed Care Inquiries and Complaints		
Date		
Provider Name		
Provider ID Number		
Facility Name		
Contact Person		
Telephone Number		
Fax Number		
Beneficiary Name		
Beneficiary ID Number		
Telephone Number		
PLEASE PROVIDE	DETAILED QUESTIONS AND/OR COMPLAINTS	

The Division of Medicaid and all subcontractors will answer and resolve all provider inquiries within 15 business days.



Providers: Please complete the following



Scan the code using your camera on a smartphone or tablet to access the evaluation form. **2020 Provider Workshop Evaluation Form**

We would appreciate your feedback following today's webinar.



Scan the code using your camera on a smartphone or tablet to access the survey.

2020 Managed Care Provider Satisfaction Survey

Don't forget to complete the 2020 Provider Satisfaction Survey included in the September 2020 Provider Bulletin (Page 8).



Questions & Answers

Division of Medicaid Sharon Jones



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