



## 2<sup>nd</sup> Quarter Updates Provider Webinar

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6/19/2023

A solid orange wave-like shape that spans the width of the slide at the bottom.

# Housekeeping



- Please mute your phone.
- Please do not put this call on hold—we can hear the hold music.
- Please hold all questions until the end of the presentation.
- This presentation will be posted to the Arkansas Total Care website soon.

# Disclaimer



- Arkansas Total Care (ARTC) has produced this material as an informational reference for providers furnishing services in our contract network and ARTC employees, agents and staff make no representation, warranty, or guarantee that this compilation of information is error-free and will bear no responsibility or liability for the results or consequences of the use of this material.
- The presentation is a general summary that explains certain aspects of the program and is not a legal document.
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# Agenda



- Medicaid Redetermination
- Personal Caregiver ID
- Medicaid ID Requirement Clarification
- HCBS & Atypical Credentialing
- Request for Reconsiderations or Claim Disputes
- Clinical & Payment Policies
- Cultural Competency Training
- Fraud, Waste, & Abuse
- Provider Demographic Accuracy
- Contact Information

# Join Our Email List Today



## For Providers

The best support is close to home. That's why Arkansas Total Care operates from your neighborhood. We partner with local services and providers. Our team brings over 20 years of healthcare experience. We look forward to continuing that dedication.

Every individual should live with respect and dignity. We will help our members to maximize their independence. We will also help and maintain members quality of life in their chosen setting.

If you are interested in joining us as a provider, please visit our [Become a Provider](#) page.

Arkansas Total Care provides the tools and support you need to deliver the best quality of care. Please view our listing on the left that covers forms, guidelines and helpful links.

Interested in getting the latest alerts from Arkansas Total Care? Fill out the form below and we'll add you to our email subscription.

Name \*

Position Title \*

Email \*

Phone Number \*

Group Name \*

Group NPI

Tax ID

Submit

## Login To Your Account

Access your secure provider information any time.

Login Now

Receive current updates for  
Arkansas Total Care at:

<https://www.arkansastotalcare.com/providers.html>

# Acronyms



Acronym	Definition
ARTC	Arkansas Total Care
EVV	Electronic Visit Verification
PHE	Public Health Emergency
FWA	Fraud, Waste, and Abuse
HCBS	Home and Community Based Services
NPI	National Provider Identification
PASSE	Provider–Led Arkansas Shared Savings Entity
SIU	Special Investigations Unit



# Medicaid Redetermination

# Medicaid Redetermination



**During Covid-19 public health emergency (PHE) the Families First Coronavirus Response Act provided funds to state Medicaid programs if states agreed to provide continuous coverage during the PHE.**

The Covid-19 PHE has ended. The Arkansas Department of Human Services' (DHS) routine redetermination process resumed on April 1, 2023.

Arkansas Medicaid members will need to provide proof of eligibility to retain their Medicaid Coverage – DHS has identified more than 400,000 Medicaid members who be subjected to this initial redetermination process.

**You can check your patients Medicaid eligibility status using the AR Medicaid Provider Portal at [portal.mmis.arkansas.gov/armedicaid/provider](https://portal.mmis.arkansas.gov/armedicaid/provider).** Additional resources and information for providers can be found on the DHS Website. From [humanservices.arkansas.gov](https://humanservices.arkansas.gov), navigate to the Divisions & Shared Services dropdown, hover over the Medical Services option, and select Update Arkansas.



# Member Not Eligible



- Increase in “Member Not Eligible” rejections and denials?
- To check if coverage was truly terminated or if it has transitioned:
  - Go to: **portal.mmis.arkansas.gov/armedicaid/provider**
  - If the coverage is displayed and shows ARTC coverage in MMIS, then you can confirm coverage in the ARTC portal.
  - If the coverage is showing as active, the claim can be resubmitted.
  - If the member **does not** show as active on our portal, you can send an email to [Providers@arkansastotalcare.com](mailto:Providers@arkansastotalcare.com) **with “Member Eligibility” in the subject line**. Please make sure to include the member’s name, date of birth, and a screenshot of the MMIS eligibility.



# Personal Caregiver ID

# Personal Caregiver ID Updates



**All Arkansas providers are required by the Arkansas Department of Human Services (DHS) to provide a caregiver Medicaid ID for every caregiver servicing members for personal care, attendant care, and respite services.**

- Effective Friday, January 27, 2023, the caregiver Medicaid ID must be entered for every caregiver profile in HHAeXchange.
- The caregiver Medicaid ID should be entered in the Professional License Number field of the caregiver profile.
  - The Professional License Number is required when editing or adding a new caregiver and before saving the caregiver profile in HHAeXchange.
  - Failure to add an active and accurate Medicaid ID for each caregiver can result in delay in claim payment or denials.

# Personal Caregiver ID cont.



- To avoid claim denials, the caregiver effective date should be listed in HHA appropriately. You can submit these visits via HHAeXchange or a chosen third-party EVV system that aggregates with HHAeXchange.
- Claims received outside of the EVV system will be denied with the note "NO EVV VISIT MATCH FOR MEDICAID ID BILLED."
- If you have any questions or concerns about this change, please contact Provider Services at 1-866-282-6280 (TTY: 711), or you can contact HHA at 1-855-400-4429

# Personal Caregiver ID cont.



<b>Name:</b> Anderson Stephanie <b>Team:</b> <b>Address:</b> XXX XXX	<b>Caregiver Code:</b> WCP-1008 <b>Agency:</b> QA Provider 1 <b>Languages:</b>	<b>Office:</b> <a href="#">A BETTER DAY HOME CARE SERVICES INC</a> <b>Phone:</b> <b>DOB:</b> XX/XX/XXXX ⓘ	<b>Availability Updated:</b> <b>Caregiver Hours:</b> H: 0 ⓘ V: 0
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**Profile**[Profile Log Print Profile](#)

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**Demographics**[History](#)

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* <b>First Name:</b> Stephanie	<b>Middle Name:</b>
* <b>Last Name:</b> Anderson	* <b>Initials:</b> SA
* <b>Gender:</b> F	* <b>DOB:</b> XX/XX/XXXX ⓘ H
* <b>Caregiver Code:</b> WCP-1008	<b>Alt. Caregiver Code:</b> 5008
ⓘ <b>Caregiver Mobile ID:</b>	ⓘ <b>Mobile Type:</b>
ⓘ <b>Enable Mobile Chat:</b> N/A	ⓘ <b>Mobile Device ID:</b>
<b>Time &amp; Att. PIN:</b> 100008	
ⓘ <b>Enable Mobile App Biometric Two Factor Authentication:</b>	ⓘ <b>Allow Caregiver to select the visit as a Community visit:</b>
<b>SSN#:</b> XXX-XX-XXXX ⓘ H	<b>Ethnicity:</b>
<b>Rehire:</b> No <b>Rehire Date:</b>	<b>Country of Birth:</b>
<b>Marital Status:</b>	<b>Picture:</b>
<b>Dependents:</b>	ⓘ <b>Secondary Offices:</b>

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**Employment Info**[History](#)

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* <b>Type:</b> Employee H	* <b>Status:</b> Active H
	<b>Reason:</b>
	<b>Notes:</b>
* <b>Employment Type:</b> PCA, HHA, HSK, PA, HCSS, CNA, Other (Non Skilled), APC, HMK, ILST, PBIS, RESP, ESC, SDP, CBSA, COMP, PC, CH, SPC, SHHA, SHC	<b>Employee ID:</b>
* <b>Application Date:</b> 02/01/2021	<b>Team:</b>
<b>Hire Date:</b> ⓘ	<b>Location:</b>
<b>First Work Date:</b>	<b>Branch:</b>
<b>Last Work Date:</b>	<b>Contract:</b> UHCT, WNCT, CCHQ, EVRC, CCQA
<b>WHA/PSA Registry Number:</b> 1001000000	<b>Added/Checked Registry Date:</b> 04/22/2022
<b>Professional License Number:</b> 123456795	<b>NPI Number:</b>
<b>Referral Source:</b>	<b>Referral Person:</b>
<b>NYC Registry checks:</b>	<b>Signed Payroll Agreement:</b> No <b>Date:</b> ⓘ
<b>Exclusion/Verification Lists Checked On:</b>	<b>EVV Utilization:</b> ⓘ
<b>Default Travel Method:</b> ⓘ	<b>Secondary Identifier:</b> H <a href="#">Secondary Identifier Details</a>

# Contact Information



- Providers using a third-party EVV vendor can send the updated information to HHAeXchange through the EDI integration process.
- EDI providers with questions on the specifications should contact EDI Support at [EDISupport@hhaexchange.com](mailto:EDISupport@hhaexchange.com).
- For questions regarding how to update information in the HHAeXchange system, contact HHA at 855-400-4429 or [Support@hhaexchange.com](mailto:Support@hhaexchange.com).
- For plan specific questions, please contact Arkansas Total Care at 1-866-282-6280

# Change to Support



We will be sunsetting the [support@hhaexchange.com](mailto:support@hhaexchange.com) email address on July 1, 2023. Moving forward, all support requests should be made via the HHA Client Support Portal.

HHA developed the Client Support Portal in response to customer feedback for quicker access to support, more visibility on the status of support requests, and an easier way to manage the support request process. We recommend you begin using the HHA Client Support Portal today to take advantage of the improved experience, including:

- Faster support response
- Better communication
- Increased visibility of support request status
- Streamlined support request process

# Medicaid ID Requirement Clarification



# Medicaid ID clarification



On May 9, 2023, we sent an email with the subject line "Medicaid ID Requirement Notice." We apologize for any confusion caused by this communication. The information in that email is only applicable for providers who are receiving claims denials for the listed reason "(4G) Deny: Medicaid Santioned/Termed/Excluded Provider."

- **If you have not received a denial notice for this reason, you do not need to take any action regarding that notice at this time.**
- If you have received a denial for this reason, we have determined that your group does not have an active Arkansas Medicaid ID (MCID). We reached this determination after reviewing our network against the provider file sent to us by the Department of Human Services (DHS).
- Per our contract with the state, the Taxpayer Identification Number (TIN) and group National Provider Identifier (NPI) are required to have an Arkansas MCID in order to receive payment for claims.
- Once you have acquired an active MCID, please forward that information to us at **ArkCredentialing@centene.com**. We will verify your information and reactivate you effective the date provided by the state.



## HCBS and Atypical Credentialing

# HCBS & Atypical Credentialing



## **Atypical and HCBS Provider Recredentialing Frequency Reduced: Now Required Every Three Years**

- In accordance with a recent PASSE agreement update, we have amended our recredentialing schedule for atypical and Home- and Community-Based Services (HCBS) providers. Beginning February 2023, atypical and HCBS providers have been transitioned to a three-year recredentialing cycle. Providers who have gone through this process recently may have seen this change reflected in their approval letter.
- We value your partnership and hope that this change helps facilitate the care you provide our members. If you have any questions about this change, please reach out to us at 1-800-294-3557 or [arkcredentialing@centene.com](mailto:arkcredentialing@centene.com).

# Requests for Reconsideration or Claim Disputes

# Request for Reconsiderations



- A Provider disagrees with the original claim outcome (payment amount, denial reason, etc.).
- Reconsiderations may be submitted using one of the following ways:
  - Calling the provider services department
  - Using the Request for Reconsideration form found on our website (**preferred method**)
  - Sending a written letter that includes a detailed description of the reason for the request
    - To ensure timely processing, the letter must include sufficient identifying information, which includes, at a minimum, member name, member ID number, date of service, total charges, provider name, original EOP, and/or the original claim number found in Box 22 of the CMS 1500 form or Field 64 of the UB-04 form.
- Must be submitted within 180 days of the date of the original explanation of payment or denial for contracted providers.
- Written requests for reconsideration and any applicable attachments must be mailed to:

**Arkansas Total Care**  
**Attn: Request for Reconsideration**  
**P.O. Box 8020 Farmington, MO 63640-8020**

# Claim Disputes



- **Claim Dispute**—A provider disagrees with the outcome of the request for reconsideration.
- A claim dispute/claim appeal should be used only when a provider has received an unsatisfactory response to a request for reconsideration. If a dispute form is submitted and a reconsideration request is not located in our system, then the dispute will be considered a reconsideration.
- A claim dispute/appeal must be submitted on the claim dispute form located under the Provider Resources tab of ArkansasTotalCare.com. The form must be completed in its entirety.
- The completed form may be mailed to the following address:
  - **Arkansas Total Care**
  - **Attn: Claim Dispute**
  - **P.O. Box 8020 Farmington, MO 63640-8020**
- A claim dispute/appeal will be resolved within 30 calendar days. The provider who filed the dispute/appeal will receive a written letter detailing the decision to overturn or uphold the original decision.



# Clinical & Payment Policies

# ARTC Clinical Policies



Home Find a Doctor Contact

Contrast ☐ On ☐ Off a a a language▼

FOR MEMBERS

FOR PROVIDERS

CONTACT US

## FOR PROVIDERS

Cultural Competency Training Attestation

Provider Relations

Login

Become a Provider

Provider Financial Support & Resources

Provider Training +

Pharmacy

Provider Webinars

Provider Resources -

Clinical & Payment Policies

Pre-Auth Check

Coding Tip Sheets And Forms

Provider News +

QI Program +

Grievance and Appeals

Coronavirus Information for Providers +

## Clinical & Payment Policies

### Arkansas Total Care Policies

To easily search for a policy, use the Ctrl+F (Command+F on Mac) function on your keyboard to search by keyword, policy number or effective date.

WHAT ARE CLINICAL POLICIES? +

WHAT ARE PAYMENT POLICIES? +

### Arkansas Total Care Policies

ARTC CLINICAL POLICIES -



POLICY TITLE	POLICY NUMBER	EFFECTIVE DATE
<a href="#">25-hydroxyvitamin D Testing in Children and Adolescents (PDF)</a>	CP.MP.157	January 1, 2022
<a href="#">Abaloparide (Tymlos) (PDF)</a>	CP.PHAR.345	March 1, 2022
<a href="#">Abatacept (Orencia) (PDF)</a>	CP.PHAR.241	
<a href="#">AbobotulinumtoxinA (Dysport) (PDF)</a>	CP.PHAR.230	June 1, 2022 - NEW
<a href="#">Acupuncture (PDF)</a>	CP.MP.92	October 1, 2021



# Policy Update



Recently we sent a notification to providers about policy updates effective **June 1, 2023**. The below changes were made to align with current guidance from the Centers for Medicare & Medicaid Services (CMS). They are not health plan policy updates.

- Inappropriate Primary Diagnosis
  - Denies or limits diagnosis codes based on coding guidelines supported by CMS and ICD-10. Claims will be denied when billed with unacceptable primary/principal diagnosis, manifestation diagnosis, and sequela diagnosis in outpatient or inpatient facilities.

# Supportive Living Clinical Policy



Arkansas Total Care is amending our Supportive Living Criteria policy.

POLICY ID: ARTC.CC.20. can be viewed on our website.

**These changes will go into effect August 14, 2023.**

[www.arkansastotalcare.com/providers/resources/clinical-payment-policies.html](http://www.arkansastotalcare.com/providers/resources/clinical-payment-policies.html)

\*New or amended policies are indicated by a “NEW” designation next to the effective date.



# NEW Waiver Manual

# New Waiver Manual



Available online now at  
<https://www.arkansastotalcare.com/providers/resources.html>  
under the Provider Resources section of the ARTC website  
titled “Provider Waiver Manual”.

# Cultural Competency Trainings

# Cultural Competency Trainings



- This course allows providers to receive information on how to service the member's health care needs in a culturally competent manner
- Self-led trainings available now at [https://www.arkansastotalcare.com/providers/Provider\\_Training.html](https://www.arkansastotalcare.com/providers/Provider_Training.html)!

A screenshot of the Arkansas Total Care website. At the top, there are three orange navigation tabs: "FOR MEMBERS", "FOR PROVIDERS", and "CONTACT US". The "FOR PROVIDERS" tab is selected. Below it, a sidebar menu lists various resources for providers, including "Cultural Competency Training Attestation", "Provider Relations", "Login", "Become a Provider", "Provider Financial Support &amp; Resources", "Provider Training" (which is highlighted), "Web Wizard For Home And Community Based Service Providers", "Pharmacy", "Provider Webinars", "Provider Resources", "Provider News", "QI Program", "Grievance and Appeals", and "Coronavirus Information for Providers". The main content area is titled "Provider Training" and contains a paragraph explaining that Arkansas Total Care provides a self-led cultural competency training. It includes links to "Discharge Planning Provider Training" and "Treatment Planning for Behavioral Health (PDF)". Below the text is a video player showing a slide titled "Cultural Competency" with the Arkansas Total Care logo and the definition: "Defined as the ability to work with and diverse cultures." The video player has a play button icon and a share icon.

# Cultural Competency Training Attestation



Home Find a Doctor Contact

Contrast ☐ On ☒ Off a a a language▼

FOR MEMBERS

FOR PROVIDERS

CONTACT US

## FOR PROVIDERS

### Cultural Competency Training Attestation

Provider Relations

Login

Become a Provider

Provider Financial Support & Resources

Provider Training +

Pharmacy

Provider Webinars

Provider Resources +

Provider News +

QI Program +

Grievance and Appeals

Coronavirus Information for Providers +

## Cultural Competency Training Attestation

Cultural Competency Trainings needs to be completely every year. Providers who have completed the Cultural Competency Trainings can complete the form below.

Practice Name \*

TIN \*

Practitioner Name \*

Practice Phone Number \*

What type of training did you attend? \*

- ☐ Attended an ARTC presented webinar  
☐ Attended another Cultural Competency training

The year attestation completed \*

Check Box for attestation\*

☐ Attest

Electronic Signature \*

Submit

# Fraud, Waste, & Abuse



# Fraud, Waste and Abuse



- Arkansas Total Care takes the detection, investigation, and prosecution of fraud, waste and abuse very seriously and has a FWA program that complies with the federal and state laws.
- Arkansas Total Care routinely conducts audits to ensure compliance with billing regulations.
- The Centene Special Investigation Unit (SIU) performs retrospective audits, which may result in taking actions against providers who commit fraud, waste, and abuse.

# Fraud, Waste and Abuse – Cont'd



- These actions may include but are not limited to:
  - Remedial education and/or training to prevent the billing irregularity
  - More stringent utilization review
  - Recoupment of previously paid monies
  - Termination of provider agreement or other contractual arrangement
  - Civil and/or criminal prosecution
  - Any other remedies available to rectify
- Some of the most common FWA submissions seen are:
  - Unbundling of codes
  - Up-coding services
  - Add-on codes without primary CPT
  - Diagnosis and/or procedure code not consistent with the member's age and/or gender
  - Use of exclusion codes
  - Excessive use of units
  - Misuse of benefits
  - Claims for services not rendered

**If you suspect or witness a provider inappropriately billing or a member receiving inappropriate services, please call our anonymous and confidential hotline at 1-866-685-8664**



# Provider Demographic Accuracy

# Provider Demographic Accuracy



Help us ensure the information provided to ARTC members for your service location is up to date!

- This can be through credentialing, rosters, provider data change forms and third- party vendor requests, such as LexisNexis.
- Maintaining correct clinic information ensures our members are able to locate the providers they need through the ARTC provider directory posted online.
- Changes can be submitted through the secure provider portal or by submitting a provider data change form to [arkcredentialing@centene.com](mailto:arkcredentialing@centene.com)
- Changes can include, but are not limited to:
  - Adding or removing a location
  - Updating your phone number
  - Removing inactive practitioners
- We are required to report directory accuracy to the state.



## Key Contacts

# Key Contacts



Department	Phone/Website	Fax/Email
HHAeXchange Support	1-855-400-4429	HHA Client Support Portal
<b>Envolve Pharmacy Services</b> —Prior Authorization	1-866-399-0928 Pharmacy.Envolvehealth.com	1-866-399-0929
<b>Turning Point</b>	501-263-8850/ 1-866-619-7054	501-588-0994
<b>NIA</b> Advanced Imaging (MRI,CT, PET)	1-866-500-7685 RadMD.com	N/A
<b>Envolve Vision</b>	1-844-280-6792 VisionBenefits.EnvolveHealth.com	N/A
<b>EDI Claims Assistance</b>	1-800-225-2573 ext. 6075525	EDIBA@CENTENE.COM

# Need to Contact Us?



# **Arkansas Total Care**

Provider Services

Phone: 1-866-282-6280

Website: [arkansastotalcare.com](http://arkansastotalcare.com)



# Provider Services Call Center



- **First line of communication**
  - Arkansas Total Care Provider Services Call Center
    - 1-866-282-6280 (TTY: 771)
- Provider Service Representatives can assist with questions regarding:
  - Eligibility
  - Authorizations
  - Claims
  - Payment inquiries
  - Negative Balance reports
  - Appeals
  - Check Re-issue
  - Secure Portal Password reset
- Representatives are available Monday through Friday, 8AM to 5PM (Central Standard Time)

# Provider Inquiries



- After speaking with a Provider Service Representative, you will receive a reference number, which will be used to track the status of your inquiry.
- If you need to contact your assigned Provider Relations Representative, you must have the following when submitting an email inquiry:
  - Reference number assigned by the Provider Services Center
  - Provider's Name
  - Tax ID
  - National Provider Identifier (NPI)
  - Summary of the issue
  - Claim numbers (if applicable)

# Provider Contracting



To join our network, select 'Become A Provider' from the 'For Providers' tab on our website. You must currently be a participating Arkansas Medicaid provider.

	FOR MEMBERS	FOR PROVIDERS	CONTACT US
<b>FOR PROVIDERS</b>			
Login			
<b>Become a Provider</b>			
Pharmacy			
Provider Webinars			
Provider Resources +			
Provider News			
Grievance and Appeals			
QI Program +			

## Become A Provider

Thank you for your interest in participating with Arkansas Total Care. We are excited for the chance to work with you to provide high-quality care.

If you are interested in joining our network call toll free 1-844-631-6830 or fill out the form below.

As a Arkansas Total Care provider, you can rely on:

- A comprehensive approach to care for your patients through disease management programs, healthy behavior incentives and 24-hour toll-free access to bi-lingual registered nurses
- Initial and ongoing provider education through orientations, office visits, training and updates
- A dedicated claims team to ensure prompt payment
- Minimal referral requirements and limited prior authorizations
- A dedicated provider relations team to keep you informed and maintain support in person, by email or by phone
- The ability to check member eligibility, authorization and claims status online

Healthcare collateral for your patients (e.g., information about our benefits and services) and educational displays for your office

Legal Practice Name or DBA \*

Specialty \*

Practice Address \*



# Contracting Department

Phone Number: 1-844-631-6830

Hours of Operation: 8am-4:30pm

**Press 1** if you  
know your  
party's  
extension.

**Press 2** for  
Ambetter

**Press 3** for  
Wellcare by  
Allwell

**Press 4** for  
Arkansas  
Total Care

**Press 5** to  
repeat

Provider Contracting Email Address:

[ArkansasContracting@centene.com](mailto:ArkansasContracting@centene.com)

Regular contracting inquiries and contract requests



## **Credentialing**

Phone: 1-844-263-2437

Fax: 1-844-357-7890

**Provider Credentialing Email:**  
[arkcredentialing@centene.com](mailto:arkcredentialing@centene.com)

## QUESTIONS?

Please submit any questions by using  
the Q&A feature in ZOOM

or

Send us an email with  
“Provider Webinar” in the subject line to

[Providers@Arkansastotalcare.com](mailto:Providers@Arkansastotalcare.com)

**Thank You For  
Joining Us!**