

FAMILY CARE IMPLEMENTATION

PROVIDER OVERVIEW

NorthernBridges

March 2009

What is Family Care?



- Voluntary long term care managed care program.
- Pools all funding currently in system for long-term care including money that funds the current Medicaid waiver programs (CIP, COP-w, and BIW) and Community Options Program, and some Medicaid “card” services such as institutions and personal care.
- Coordination of health care and long term care services.

Goals of Family Care



- **Access** – Improve people's access to services.
- **Choice** – Give people better choices about the services and supports available to meet their needs.
- **Quality** – Improve the overall quality of the long-term care system by focusing on achieving people's health and social outcomes.
- **Economy** – Create incentives and ability for providing and purchasing cost-effective

Primary Components of Family Care



- Aging and Disability Resource Centers (ADRC)
 - Provides information and assistance to all.

- Managed Care Organization (MCO)
 - Provides services to individuals who qualify for managed long-term care program.

ADRC's Role



- Provide information and assistance free of charge on programs and services available;
- Perform long-term care functional screen to determine whether person needs a level of care that qualifies for Family Care participation;
- Works with the applicant and Economic Support unit to determine financial eligibility:
 - Generally must be eligible for Medicaid.
 - May be cost share requirement depending on income and assets.

MCO's Role



□ Assessment

- Involves face-to-face meeting between interdisciplinary team (IDT):
 - Member
 - Social Worker or Case Manager
 - Nurse (RN)
 - Anyone else whom member wants involved
- Identify person's needs, strengths, resources, and preferences.

Individual Service Plans



- Defines what services will be provided
 - ▣ Must help member move toward desired outcomes
 - Examples of outcomes:
 - I decide where and with whom I live.
 - I make decisions regarding my supports/services.
 - I decide how I spend my day.
 - I have relationships with family and friends I care about.
 - I do things that are important to me.
 - I am involved in my community.
 - I feel safe.
 - I am free from abuse and neglect.

Balancing Member Preferences with Fiscal Constraints of MCO

- Interdisciplinary Team (IDT) uses Resource Allocation Decision (RAD) method
 - What is the most cost-effective way to meet this individual's outcomes?
 - Identify individual outcomes
 - Check effectiveness
 - Explore cost-effective options
 - For every decision, not just the major ones
 - Ensures fairness by treating like cases alike.

What are some benefits of Family Care for providers?

- Aging and Disability Resource Centers will provide **information** and counseling about home and community based services **to private pay consumers at no cost to the provider.**
- When Family Care becomes an entitlement 36 months after implementation in each county, there will be **more business** for providers.
- Instead of contracting with multiple counties to provide service, only **one contract** will need to be held with the MCO **to provide services in all 11 counties in the region.**
- The dedicated Provider Network Developer position will allow the MCO to be **responsive to provider concerns and problems** that may arise during the course of the contract.

About NorthernBridges



- Our Mission –
 - Providing our members the best life possible.

- Our Vision –
 - We are the leader and standard of excellence for member services.

- Our Values –
 - Integrity/Respect/Humility
 - Leadership/Ownership
 - Excellence
 - Passion for Win/Win
 - Fun with Challenge/Change

When is this happening?



- Enrollment is scheduled to be phased in as follows:

- May 2009 –

- Barron
- Douglas

- June 2009 –

- Washburn
- Burnett
- Polk

- July 2009 –

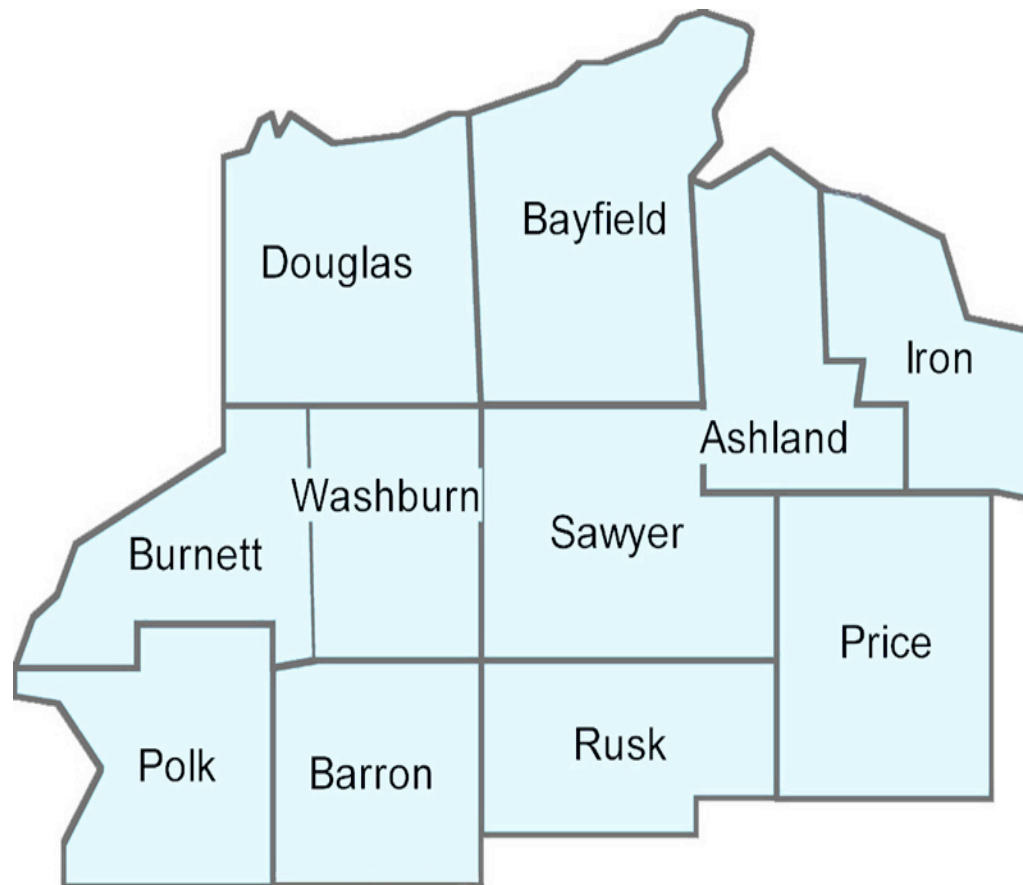
- Rusk
- Ashland
- Bayfield

- August 2009 –

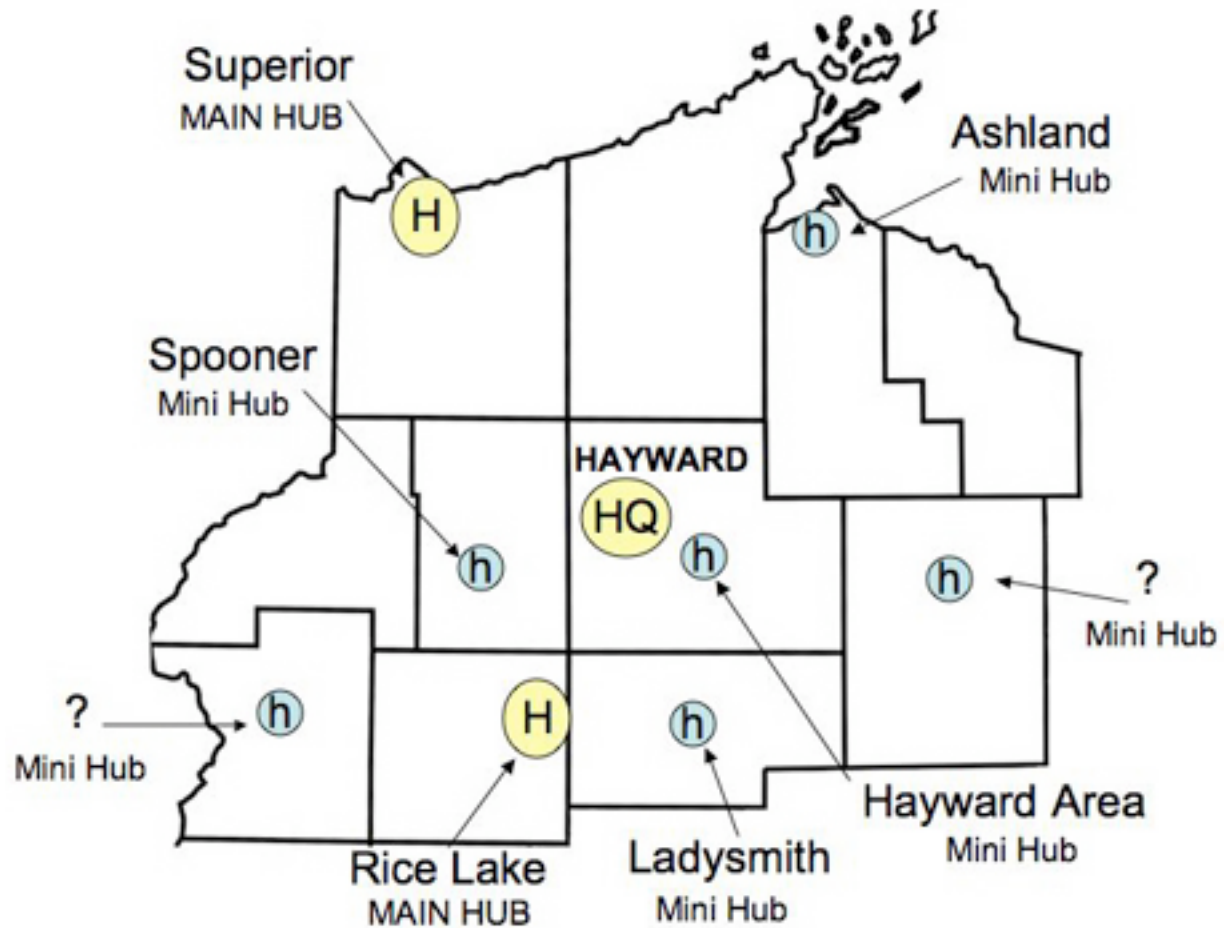
- Sawyer
- Price
- Iron

Northern Bridges Service Area

- 11 Counties



NorthernBridges Headquarters & Hub Sites Map



December 2008

How many people will NorthernBridges be serving?

People currently served by waivers	1,792
People currently on waiting lists for waiver services	1,269
Total potential people to be served	3,061

Increase in number of people to be served



- Currently 1,792
- Projected 3,061
- 70% increase in the number of people to be served.

Profile of People to be Served



- Elderly 36%
- Developmentally Disabled 37%
- Physically Disabled 27%

(Based on target groups of people currently being served by waivers and those on waiting lists)

What types of services?



- Developmentally Disabled
 - Statewide Family Care Data shows:
 - Transportation – 52%
 - Equipment & Supplies – 43%
 - Adult Family Homes – 33%
 - Pre-vocational Services – 28%
 - Supported Employment – 25%
 - Daily Living Skills – 25%
 - Financial Management – 24%

What types of services?



- Physically Disabled –
 - Statewide Family Care data shows:
 - Equipment & Supplies – 78%
 - Supportive Home Care – 59%
 - Transportation – 40%
 - Counseling and Therapeutic Resources – 38%
 - Home Health Care Services – 24%

What types of services?



- Frail Elderly –
 - Statewide Family Care data shows:
 - Equipment & Supplies – 76%
 - Supportive Home Care – 56%
 - Transportation – 51%
 - Counseling & Therapeutic Resources – 27%
 - Home Delivered Meals – 24%
 - Community Based Residential Facilities – 22%

What can providers do to get ready for Family Care?



- Participate in local planning efforts to share expertise about the people you serve;
- Learn what it means to be member-centered and Family Care's focus on quality of life outcomes for each consumer;
- Learn how Family Care Interdisciplinary Teams (IDT's) work so you can be engaged in the care planning process;

What can providers do to get ready for Family Care?



- Be ready to contract with a new type of organization that will be positioned to address your cost and consideration;
- Offer services that helps NorthernBridges manage both quality and costs; and
- Develop new services based on the individual needs and preferences of members in your area.

What's required to be a provider with NorthernBridges?

- ❑ Submit completed application form
- ❑ State license if applicable
- ❑ Medicaid and Medicare certification if applicable
- ❑ Adult Family Homes – either local certification or State licensure
- ❑ Must enter into contract with NorthernBridges
- ❑ Must meet contracting standards: i.e. service criteria, civil rights adherence, criminal background checks, insurance, communication and reporting requirements

Communication and Reporting Requirements

- Communicate any significant change of condition, such as:
 - ▣ If member's legal status changes, e.g. guardian appointed, Power of Attorney activated or deactivated or decisional capacity is questioned.
 - ▣ If there is a plan to use physical or chemical restraints with a member.
 - ▣ If there is use of emergency restraints.
 - ▣ If there is allegation/suspicion of abuse or neglect.

Communication and Reporting Requirements



- If there is any significant change in health status, i.e. weight loss, increased confusion, frequent falls.
- If member requires an ER, Urgent Care or emergency clinic visit or is admitted to the hospital.
- If there is a need to change a service or add a new service.
- If there is a new diagnosis of chronic condition or new medical treatment initiated.

Important Things to Remember



- All services must be authorized by NorthernBridges team
 - Services/goods to members must be authorized prior to delivery and regardless of primary payer source.
 - NorthernBridges IDT develops services plan which specifies every authorized service.
 - NorthernBridges does not pay for goods and services before enrollment or after disenrollment.

Important Things to Remember



- Providers may request new or additional services or extensions of existing authorizations for service by contacting the care manager. A request, however, does not imply that a change will occur.
- In case of emergent need for service authorization a 24 hour authorization phone line will be available.
- Providers can not seek payment from members when reimbursement is denied because the service was not authorized.

Important Things to Remember



- Federal law requires that payment for services can not be made prior to actual service delivery.

- Begin planning for possible cash flow changes now
 - Build internal agency reserve for transition
 - Obtain a line of credit to assist in transition period

Verifying Member Enrollment

- Since members can enroll in an disenroll at any time during the month, providers should always verify member eligibility before providing services.
 - To check enrollment status, Medicaid Providers may use:
 - Call State Provider Services – 1-800-947-9627
 - Logon – www.forwardhealth.wi.gov
 - Providers may receive contact from MCO Care Manager.
 - Contracted Providers may contact MCO to verify enrollment as needed.

Provider Payment Rates



- Rate setting methodology being developed.
- Residential service rates will be assessed shortly after transition to contracting with NorthernBridges based upon needs of individuals in care.
- NorthernBridges needs to maintain and expand current provider network.
- NorthernBridges may not pay more than Medicaid fee-for-service rates for card services.

Payment Information



- Claims may be submitted either in traditional paper form or electronically (to be developed).

- Payment will be available up to two times each month.

- Common items that delay payment:
 - Amounts billed differ from contract or MA amounts.
 - Incorrect or missing procedure codes.

Who to call with questions?

- Claims Payment Questions –
 - 1-800-508-6967 (applicable upon roll out date for Family Care in each specific county)

- NorthernBridges Provider Network Staff
 - Rita Mueller
 - 715-934-2266 ext. 1113;
 - Email – rmueller@northernbridges.net
 - Sarah Benson
 - 715-934-2266 ext. 1125;
 - Email – sbenson@northernbridges.net
 - Glenn Taylor
 - 715-934-2266 ext. 1129
 - Email – gtaylor@northernbridges.net

Other Resources



- NorthernBridges Website:
www.northernbridges.com
- Booklet – Family Care for Long-Term Care Service Providers – Responses to Questions from Providers
<http://www.dhs.wisconsin.gov/managedltc/stakeholders/pdf/qaforproviders.pdf>
- State of Wisconsin Long Term Website:
<http://dhs.wisconsin.gov/ltcare/>

Other Resources con'td.



- Family Care Guide for Wisconsin Medicaid-Certified Providers:

<http://dhs.wisconsin.gov/medicaid2/handbooks/familycare/index.htm>

- Family Care Benefit Information

<http://dhs.wisconsin.gov/ltcare/generalinfo/benpackage.htm>

Questions?



- What special circumstances should we be aware of as we move forward in contracting with your agency for Family Care?
- Questions of us?