AmeriHealth Caritas North Carolina (ACNC)

Long Term Services and Supports (LTSS)

Update January 1, 2024





Mission and Vision



AmeriHealth Caritas North Carolina is part of the AmeriHealth Caritas Family of Companies, one of the nation's leaders in health care solutions for those most in need.

Our mission

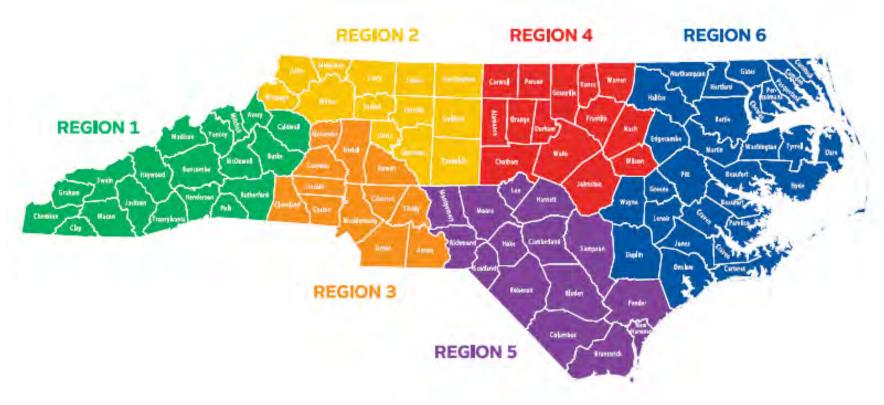
To help people get care, stay well, and build healthy communities. We have special concern for those who are poor.

Our vision

To be a national leader in empowering those in need, especially the poor and the disabled, across their full life journey, from wellness to resilience, in order to achieve their American Dream.

North Carolina Managed Care Regions





- Regions may be used for quality monitoring, reporting and to define geoboundaries of regional contracts and Medicaid beneficiaries served.²
- Four of the five Prepaid Health Plans (PHPs) selected serve all six regions.
- Beneficiaries who live in regions 3, 4 and 5 have additional choice of a regional PHP.

^{2. &}quot;Medicaid Managed Care Proposed Policy Paper Prepaid Health Plans in North Carolina Medicaid Managed Care," North Carolina Department of Health and Human Services, May 16, 2018, https://files.nc.gov/ncdhhs/documents/PHPs-in-Medicaid-Managed-Care-PolicyPaper_revFINAL_20180516.pdf.

Meeting Members' Needs



What Is LTSS?



LTSS qualifying individuals who have functional limitations receive the help they need with certain activities of daily living, such as bathing, eating, dressing, using the bathroom, assistance with medication as well as instrumental activities of daily living, like doing laundry, grocery shopping and housekeeping. These services can be provided in the member's home or in a community setting, such as an adult care home or a family care home, depending on the member's choice.







Taking medication



Dressing



Getting to appointments



Household chores



Bathing

LTSS in North Carolina

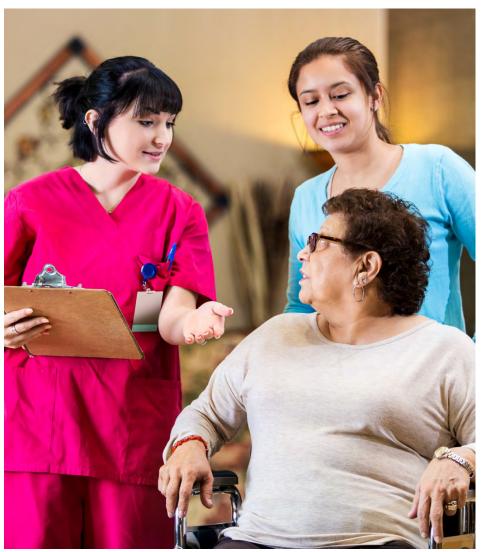


- Offering quality, cost-effective and coordinated care for those with chronic and complex health care needs
- Coordinate social and support services in a nursing facility or in a home-and community-based setting
- Care management for program enrollees includes:
 - Assessment
 - Care planning,
 - Service coordination
 - Implementation
 - Ongoing monitoring and evaluation
 - Fully integrated physical health, behavioral health, and LTSS model of care

LTSS in North Carolina



- Supports and enhances personcentered care, regardless of the setting members receive services.
- Long-term care needs to live in their own homes or other communitybased residential settings.
- Develops a care plan to address their care and treatment needs
- Provide assurances for health and safety and to proactively address the risks that may face a member desiring to live as independently as possible.



The Department of Health and Social Services (DHSS) Division of Medicaid & Medical Assistance (DMMA) determines initial and continued eligibility for LTSS membership.

Covered Community Settings



- Adult and family care homes
- Nursing facility services up to 90 days
- Members living in the community



LTSS Person-centered Planning



- Offering high-touch, person-centered care and planning.
- Members receive a comprehensive assessment of needs, including if community-based LTSS is needed.
- All of the needs identified in the assessment are included in the member's service care plan.
- The service care plan will identify which providers will address the member's needs, as well as the frequency and duration of authorized LTSS services.
- Members are also offered complex care management through either internal or external care managers to assist with all needs.

What is a Care Manager?



- ACNC LTSS members are supported through intake and ongoing care management by *INTERNAL OR EXTERNAL* Care Managers who engage the member, caregiver, and family in the planning and decision-making process.
- Care Managers are the primary point of contact with the member.
- All ACNC Care Managers are licensed registered nurses and/or social workers with bachelor's or master's degrees with active licensure and appropriate credentials.

The role of the Care Manager includes:



- Give member information ACNC and answer questions
- Work with member to make informed choices about their health care
- Complete a comprehensive assessment and coordinate person-centered planning process to receive appropriate services in the right setting
- Coordinate member's physical health, mental health and LTSS needs.
- Help resolve issues about the care they are receiving.
- Make sure member's care plan is carried out and they are receiving the authorized services.
- Monitor needs as they change; reassess and update their care plan to make sure the services they are receiving are appropriate for their changing needs.
- Routinely connect with member's providers to be sure they are informed about the member's health care and coordinate the services.

Requesting LTSS Services



All LTSS services should be requested through the LTSS department.

- All unlisted and miscellaneous codes
- All Home & Community Based Services (HCBS)
- All services not listed on the <u>North Carolina Medicaid fee schedule</u>

Department hours of operation are:

8 a.m. to 5 p.m. Eastern time, Monday through Friday.

The team can be reached at:

- LTSS Care Manager, call 984-122-2881 or fax 833-584-2262
- LTSS Utilization Management, fax 1-833-893-2262

For prior authorizations after hours, weekends and holidays, call Member Services at 1-855-375-8811.

Provider's Role in LTSS Services

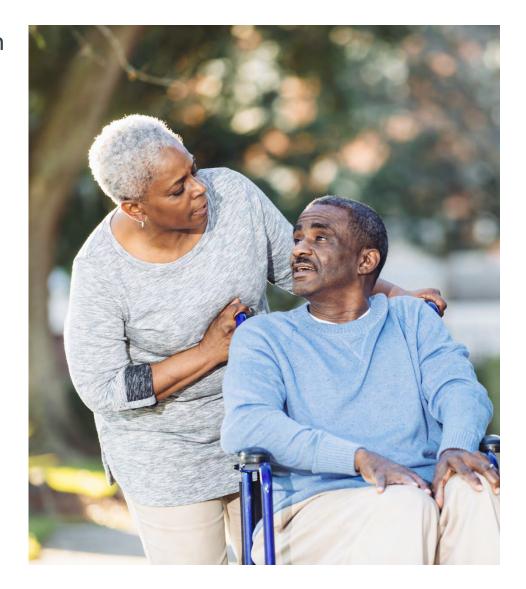


Covered Services: LTSS



The following services are covered through the ACNC LTSS program. For a full description of services and limitations, please refer to the LTSS section of the provider manual.

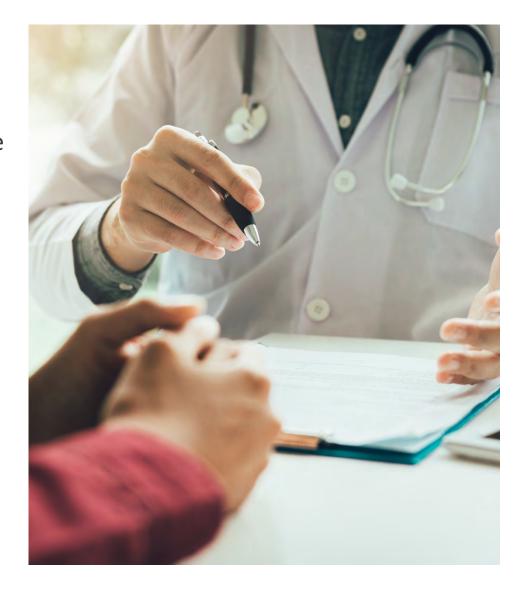
- Skilled nursing facilities for up to 90 consecutive days
- Home health services
- Personal care services.
- Hospice services
- Home infusion therapy
- Private duty nursing
- Aged Blind and Disabled Services



Provider's Role in Care Planning



- Front line staff are our "eyes and ears,"
 notifying the Care Manager when there
 is a change in condition, hospital
 admission or caregiver status (trigger
 events).
- Assist in identifying the subtle changes that could prevent an admission to the hospital or nursing facility.
- The Plan strongly encourages providers to participate in the person-centered planning team meetings.



How does Electronic Visit Verification (EVV) apply to LTSS?



Electronic Visit Verification and Claims



- As of, October 1, 2023, per NCDHHS, home health care services (HHCS)
 providers who provide home health aide services, physical therapy,
 occupational therapy, speech therapy and skilled nursing visits are required to
 implement the electronic visit verification (EVV) system.
- All Home Health EVV claim information for ACNC members must be submitted through HHAeXchange.
- Please <u>register with HHAeXchange</u> or contact ncsupport@hhaexchange.com for assistance.
- Providers are encouraged to review the <u>NCDHHS Blog article</u> from September 18, 2023.
- Claims without the required EVV data will be denied.

LTSS Member and Community Advisory Committee



Purpose of Member Advisory Committee (MAC)



- Brings together diverse skills and experiences of LTSS members, community leaders, partners and advocates in a collaborative approach.
- Seeking input and advice regarding policies and procedures.
- Provide feedback and actively engage to improve access to care.
- Seek better health outcomes for member.
- Support wellness education programs.

Goals of MAC



- Provide recommendations for improving the quality of current programming.
- Identifying healthcare and Social Determinants of Health needs of the community
- Recommending additional programming and value-added benefits.

Member Enrollment and Provider Credentialing Contacts



Updates and Contact Information



- Please note that this presentation is subject to change based upon new information received from NCDHHS. The most up-to-date version will be posted on our <u>Provider Training</u> webpage.
- Member Enrollment: To contact ACNC regarding enrollment, please call Member Services at 1-855-375-8811.

- Providers Services: 1-888-738-0004
- Provider Contracting: To request a contract, please email Provider Network Management at <u>ProviderRecruitmentNC@amerihealthcaritas.com</u>.

