America’s Voice for Community Health Care

The NACHC Mission
The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.
FROM THE VETERANS’ CHOICE ACT TO THE VETERANS’ MISSION ACT: MANAGING THE TRANSITION

June 5, 2019
2:00 PM/EDT
SESSION OBJECTIVES

- Understand the implications for health centers of changing from the CHOICE Act to the MISSION ACT.

- Status of the transition to the MISSION ACT.

- Understand TriWest’s role during the transition period.

- Clarify what actions health centers need to take.
Moderator: Dick Bohrer

LeeAnn Owsiany (TriWest)

Kadel Laxson (TriWest)
Setup a personalized, integrated, high quality system of care for Veterans.

Consolidate existing Community Care programs.

Community provider networks that are extensions of VA’s facilities.

Aggressive scheduling and care coordination activities to ensure Veterans get care where and when it is needed.
### WHAT’S CHANGING?

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<tr>
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<th><strong>CHOICE</strong></th>
<th><strong>MISSION</strong></th>
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<tbody>
<tr>
<td>Specific Community Care Programs</td>
<td>Multiple types, including Veterans Choice Program (VCP) and Patient Centered Community Care (PC-3)</td>
<td>One Consolidated Community Care Program</td>
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<td>Responsibility for Care Coordination and Scheduling</td>
<td>Third Party Administrator (TPA) or Local VA</td>
<td>Local VA Community Care Departments and TPA as Assigned</td>
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<td>Role of Third Party Administrators</td>
<td>Provider Certification, Care Coordination, Scheduling and Payment</td>
<td>Establish Robust Community Provider Networks &amp; Manage Provider Payments</td>
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<td>Potential Number of Third Party Administrators</td>
<td>Two TPA’s</td>
<td>Six Regions managed by two or more TPA’s.</td>
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Optum awarded first Community Care Network (CCN) Contract
- December 2018 for Region 1
- May 2019 for Region 2
- CCN’s established for all VA medical centers in a Region within 12 months of CNN Contract “Award Date”

Contracts for Regions 3, 4, 5, and 6 not yet awarded

VA expanded TriWest’s Scope of Work
- October 2018 thru October 2019
- Covers entire country
- Will serve as the Third Party Administrator for CHOICE and PC3 until CCN Contracts are awarded and fully implemented in all parts of the country
- Ensures access to Community Care until CCN contracts are fully implemented
Veteran Community Care Programs

Presented by:

TriWest Healthcare Alliance®
Topics We Will Cover

• Overview of TriWest and Getting Started
  • Who is TriWest?
  • PC3 – Patient-Centered Community Care and VCP – Veterans Choice Program
  • MISSION Act of 2018
  • Next Steps for Participation
  • Direct Contracting for Federally Qualified Health Centers (FQHC)

• For Participating Providers
  • Authorization Process
  • Claims and Medical Documentation Submission
  • Resources, Training and Webinars

• Questions
TriWest Healthcare Alliance is a Phoenix-based corporation owned by not-for-profit health plans and two university hospital systems.

- From 1996-2013, TriWest served at the side of the Department of Defense as the TRICARE contractor of the West region.
- In 2013, TriWest began serving the health care needs of Veterans through PC3 followed in 2014 by VCP.
- In 2018 this Community Care Program management was expanded to include all 6 of the program Regions. TriWest is honored to serve the health care needs of Veterans in all 50 States plus the Virgin Islands, Puerto Rico, Guam, American Samoa and the Northern Mariana Islands.
Veteran Programs

• TriWest is focused on providing a high-quality network and customer service - supporting Veterans’ access to care through a nationwide footprint of community providers.

• This footprint was managed and accessed in two different ways.
  • PC3 providers were fully credentialed and participating as part of the network. PC3 providers could see either a PC3 (VA initiated) or VCP (VA or Veteran initiated) referral.
  • VCP providers were credentialed in alignment with Medicare and loaded into a registry as certified for VCP and subsequently PC3 referrals. Veterans with long wait times, a need for a specialist not on the VA Medical Center staff, or a long-distance commute could qualify for a VCP referral.
In 2018 the VA MISSION Act was signed, allowing for consolidation of programs and a fundamental transformation of certain aspects of VA health care system.

- The VCP program had an end date of June 6, 2019 established
  - Providers must transition to fully contracted under PC3 in order to see Veterans long term.
  - This must happen within 12 months of initial participation in VCP
- Referrals allowed for VCP certified providers were expanded, allowing providers to see VA initiated care under the PC3 program.
• Get your credentialing data to TriWest, along with any signed agreement, to start the data load into the VA’s Provider Directory
  • To load clinics quickly, and ensure continuity of care, TriWest can load a practice as a certified provider.
  • Certified providers/clinics in the registry do not have all the credentialing requirements included in PC3.
  • Certified providers are available for referrals and can continue to see Veterans for up to 12 months.
Clinics contracted directly with a VAMC (but not with TriWest) must be re-credentialed and sign a contract with TriWest to continue seeing and being eligible for payment for services provided to Veterans.

- VCP referrals will transition to PC3 only starting in June 2019
- Regardless of Region, you will be able to continue seeing Veterans until the new community care network (CCN) is fully active in your area if you are loaded through TriWest.

Do you already have a contract with TriWest? Call us to find out! Reach Provider Services directly at 1.866.284.3743 and provide your tax identification number (TIN).
• FQHCs, Rural Health Clinics and FQHC look-alikes are all contracted by a dedicated TriWest FQHC team.
  • Credentialed or Certified providers are added to our systems to allow TriWest or VA to see providers and schedule appointments.

• For Quick Reference Guides on these programs with details on contracting, appointing and more, please visit TriWest’s Payer Space at www.availity.com or visit www.triwest.com/provider.

Availity – a multi-payer space portal where you can access training and tools for multiple insurance plans
For Participating Providers
The authorization letter is the **verification of eligibility**. If authorized, an episode of care is covered and will be reimbursed.

**Detail on Covered Services Are Included**
- All care is authorized by episode. Typically the care follows a template, the standardized episode of care – or SEOC – template.
- Covered service listings and profile definitions for each SEOC profile are in the letter and available online along with Quick Reference Guides.
- Commonly prescribed ancillary services (lab test, PT, X-ray and other) are typically included as part of an episode. No additional authorization is needed!
- Valid date ranges, any limits to number of visits and or codes are also detailed.
Appointments

• Depending upon your area, either the authorizing VAMC or a TriWest patient service representative may call your office to schedule appointments on behalf of the Veteran.

• No shows, missed, or canceled appointments (initial scheduled visit) must be reported to TriWest or VA by the provider.

• For VA scheduled appointments, call or fax your local VAMC with the contact information in the authorization.

• For TriWest scheduled appointments, call or fax TriWest 1-866-606-8198 (phone), 1-866-259-0311 (general fax) or 1-866-284-3736 (Behavioral Health fax).
Who is appointing makes a difference on how you get consult documents – you can track this on TriWest’s provider portal: https://www.triwest.com/globalassets/vapc3-provider-files/resources/vamc_lookup_matrix.xlsx

If VA appoints, clinical consult documents come from VA. If TriWest appoints you can obtain consult documents from VA or TriWest can pull and fax if requested.

• Report any delays in start of care to ensure your claims align with the episode of care time frame.
Medical documentation is critical to ensuring a complete medical history of the Veteran’s care is recorded within the VA medical record system. Documentation submission is a program requirement.

- The HealthShare Referral Manager (HSRM) portal will phase in over 2019 for uploading all documentation directly to VA.
  - In the interim, providers can submit medical documentation to the supervising VAMC via fax, secure email, regular mail or other. Please contact the authorizing VAMC to determine the best method for submission.
  - Call 1-866-606-8198. Based on ZIP code, calls are routed to TriWest or a local VAMC. VAMC contact information is also in the authorization/clinical consult information.
• TriWest as the third-party administrator for the PC3 and VCP programs and manages the network. WPS Military and Veteran Health (WPS MVH) functions as TriWest’s claims processor.
  • TriWest pushes data to WPS MVH to allow for EDI registration and claims payment.
  • TriWest appoints based on NPI, but pays claims based on TIN.
• Claims status can be found at [www.triwest.com/provider](http://www.triwest.com/provider), with registration for a secure account. For further questions call 1-866-606-8198 option 3 to reach the dedicated Portal team.
• Veteran programs pay 100% of the FQHC PPS rate – there is no copay or cost-sharing for the Veteran.

• FQHC get reimbursed per CMS criteria – this is at 100% of the CMS payment (FQHC PPS).

• Please refer to our Claims and FQHC Quick Reference Guides for more information.
• With the MISSION Act, VA will expand services to include Urgent Care.

• Urgent Care and Convenience Care services can be billed to TriWest by participating network clinics.
  • TriWest pays 100% of the applicable Medicare fee schedule – you collect no copay or coinsurance!
  • VA anticipates at least 2.5 million visits may utilize the urgent care benefits, this may be much higher.
  • Bill in compliance with Medicare B on a CMS 1500 using place of service location 20.

Learn more – attend our Urgent Care Webinar!
Urgent Care Poll

Do your locations also offer urgent care?

Would you like for TriWest to contact you about urgent care?

Please submit an email for more information.
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<th>Topic</th>
<th>Description</th>
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<tr>
<td>PC3 and VCP Overview</td>
<td>An overview that covers background information, TriWest’s role and a comparison of the programs</td>
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<td>Appointing &amp; Authorizations for Veteran Programs</td>
<td>Learn about how to access and read authorization letters. This session also covers inpatient care, transfers, emergency care, and how to initiate or extend authorizations.</td>
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<td>How to Bill TriWest</td>
<td>This is an overview on claims and the differences between TRICARE, VA, Medicare and Medicaid payments. Where to send claims, and the specific steps for ERA and EFT enrollment are also discussed.</td>
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<td>Medical Documentation Requirements</td>
<td>VA’s medical documentation submission is a program requirement. Included will be where to send medical documents, timelines and deadlines, and what types of documents VA requires.</td>
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<td>Medication &amp; DME Processes</td>
<td>Processes for prescribing medicine and durable medical equipment (DME) do not align with Medicare or group health insurance. Learn how to prescribe for routine, urgent or emergent situations, how to order DME, and how to order hearing aids.</td>
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<td>Behavioral Health Processes</td>
<td>With a focus on behavioral health – this webinar covers appointing and authorization process, how to extend authorizations, how to submit claims, and required behavioral health medical documentation.</td>
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<td>Home Health Processes</td>
<td>Understand Home Health Care processes, determine when VA has transferred a patient to home health as part of PC3/VCP, and claims/medical documentation requirements.</td>
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<td>TriWest Network Portal Training</td>
<td>This webinar will present an overview on how to use the secure TriWest Provider Portal and the process for setting up and getting trained on VA’s HIE solution – the HeathShare Referral Manager portal.</td>
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Visit **TriWest’s Payer Space on Availity®** to register for a webinar or view an on-demand eSeminars!
Resources

• For detailed information, Provider Handbook, and additional educational tools, visit www.triwest.com/provider or TriWest’s Payer Space on Availity®.

• Contact information for additional TriWest participation support:
  • Phone: 1-866-245-3820
  • Provider Services Support Team: providerservices@triwest.com (please include your TIN in all correspondence)
  • Contact our FQHC contracting team directly to get started on a contract – email us at FQHC@triwest.com.

• Claims questions? Contact WPS MVH or TriWest’s dedicated claims team by phone – 1-866-651-4977. Calls are routed based on ZIP code

• More questions? Please review the FQHC and Claims Quick Reference Guides!