

Medicare Advantage Non-Skilled Home Care,

### June 2023 Benefit Overview & Frequently Asked Questions

Please Contact ContractingInquries@bcbsri.org if you receive a BCBSRI member request for non-skilled services and you are not currently in the non-skilled home care provider network.

## **Overview**

Blue Cross & Blue Shield of Rhode Island's (BCBSRI) 2023 Non-Skilled Home Care (NSHC) benefit is available to BCBSRI Medicare Advantage/BlueCHiP for Medicare members. The purpose of NSHC is to assist member and their caregivers with short-term supportive services as follows:

- Services provided by a Certified Nursing Assistant (CNA), Home Health Aide (HHA) or Homemaker, depending on need.
- Assistance with Activities of Daily Living (ADLs) such as bathing, grooming, dressing, eating, toileting; and homemaking services such as light housekeeping, errands, and cooking within the member's home.

# Non-Skilled Home Care: Eligibility, Benefit Limit, Access, Management

MEMBER ELIGIBILTY	ANNUAL BENEFIT LIMIT 1 unit = 2 hours	NON-SKILLED BENEFIT ACCESS	NON-SKILLED HOME CARE MANAGEMENT
BCBSRI Medicare Advantage/ BlueCHiP for Medicare	10 units = 20 hours	<ul> <li>Prior Authorization is NOT required.</li> <li>Members, Designees, Providers and Care</li> </ul>	<ul> <li>Non-skilled home care agencies are responsible for monitoring and informing the member of their non-skilled</li> </ul>
BlueRI for Duals (Z9K prefix)	20 units = 40 hours	Management team members can self/refer directly to	benefit status. See <i>Visits.</i> below for additional details. Agencies confirm member
Contact <u>DSNPTriageGroup@bcbsri.org</u> upon accepting a BlueRI for Duals member on service		<ul> <li>the non-skilled home care agency.</li> <li>Non-skilled agencies complete their intake process to establish scope of services with the member.</li> </ul>	<ul> <li>benefit information via secure email to <u>DSNPTriageGroup@bcbsri.org</u></li> <li>BCBSRI <u>strongly encourages</u> collaboration with the following for optimal care delivery.</li> </ul>
		<ul> <li>See "Workflow, Accessing the NSHC Benefit" below.</li> </ul>	<ul> <li>Provider</li> <li>Designee/ Member</li> <li>Health Navigator</li> </ul>

# Workflow, Accessing the NSHC Benefit

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**BCBSRI Initiating NSHC Services** 

- BCBSRI Associates (Health Advocate/ Navigator) conducts NSHC agency search, coordinating members needs and agency availability. Preliminary member details include member's town residence, hours and type of need if known. Member PHI is not disclosed until agency availability is confirmed. Agencies will coordinate a response time with the requesting BCBSRI Health Advocate/ Navigator.
- 2. Once agency availability is confirmed, BCBSRI Associates obtain the following:
  - a. Confirmation the member has the NSHC benefit.
  - b. Remaining NSHC units/visits for the calendar year, per current claims processed.

- c. Reference Number to include via secure email to the accepting NSHC agency.
- 3. BCBSRI Associate securely emails the obtained information, along with the member's PHI, to the accepting NSHC agency, who then initiates service.

#### Agency Initiating NSHC Services

Agencies may proactively send their staffing/ case availability to <u>DSNPTriageGroup@bcbsri.org</u>.

For unique member referrals, please adhere to the following process:

- 1. Agencies securely email member information to <u>DSNPTriageGroup@bcbsri.org</u>
  - <u>Subject line</u>: Non-skilled home care referral
    - Email must include Member Name, DOB, BCBSRI Subscriber ID
    - Do Not include PHI in the subject line.
    - Please do not contact BCBSRI Associates directly for new referrals. Using the group email ensures referrals will be addressed in a timely manner.
- 2. BCBSRI Associates (Health Advocate/Navigator) follows steps as 2 and 3 above.

**Please note:** May 2023 workflow changes are in response to both provider and member feedback. BCBSRI's goal is to create an optimal member and provider experience. Prior authorization has not changed; BCBSRI's NSHC benefit does not require a PA.

## FREQUENTLY ASKED QUESTIONS, BCBSRI Medicare Advantage Non-Skilled Home Care

#### Member is seeking additional BCBSRI benefit programs, services, and support?

• Securely email member request and information to <u>DSNPTriageGroup@bcbsri.org</u>. All BlueRI for Duals members receive care management services and are outreached by the D-SNP Care Management team.

#### Visits

- Visits are billed in units; 1 unit equals up to 2 hours of NSHC services.
- More than 1 unit can be provided on one day. E.g., 2 units = 4 hours of NSHC services can be provided on a unique day.
- NSHC scheduling is determined between the agency and the member.
- A Medicare "qualifying event" (i.e., hospitalization or surgery) does not need to occur for a BCBSRI Medicare Advantage member to access their NSHC benefit.
- BCBSRI does not require Electronic Visit Verification (EVV) for BCBSRI Medicare Advantage non-skilled services. EVV is required for Medicaid plans, BlueRI for Duals is BCBSRI's Medicare Advantage HMO duals special needs plan (D-SNP).

#### **Co-occurring Non-Skilled and Skilled Services**

- Non-skilled services and skilled services can be provided and billed to BCBSRI when rendered in the same day.
- Claims must be coded correctly for reimbursement when filing for non-skilled and skilled services in the same day. Monitor hours closely.
- Ensure your agency is billing under the NPI & TIN assigned for your BCBSRI non-skilled contract.
- Non-skilled services <u>may not</u> cooccur while members are receiving Hospice benefits. All services, when a member is on Hospice, shall be through the members hospice benefit.

# Your Agency is Actively Providing Non-skilled Home Care to a BCBSRI Member, but your Agency is not in the BCBSRI Non-skilled Home Care Provider Network?

- Please outreach <u>ContractingInquries@bcbsri.org</u> to pursue a Letter of Agreement for your unique consumer. Please securely share the members name, DOB, and subscriber ID.
- See options for joining the BCBSRI non-skilled home care network at the close of this document.

#### **Claims Processing**

- Any claims over the allowed units will deny as a benefit maximum denial.
- Services exceeding the non-skilled home care benefit limit may be covered by Medicaid if approved for LTSS services or other means.
- Providers are obligated to inform members of their NSHC benefit status prior to exceeding their annual benefit limit.

#### BlueRI for Duals ONLY: BCBSRI Duals Resources

BlueRI for Duals is BCBSRI's Medicare Advantage HMO Duals Special Needs Plan. Members covered under this plan have <u>BlueRI for Duals as their primary health insurance and Medicaid Fee for Service as their secondary insurance</u>. BlueRI for Duals is **not** an integrated Medicare Medicaid Plan. BCBSRI does not authorize Medicaid services.

- Medicaid Specialists are available to support LTSS applications.
  - Agencies are encouraged to outreach BCBSRI's D-SNP Care Management Health Navigator by emailing <u>DSNPTriageGroup@bcbsri.org</u>. Health Navigators track LTSS application status with BCBSRI's Medicaid Specialists team.
  - Once the member's BlueRI for Duals benefit is exhausted, members may transition to approved LTSS services under the Medicaid benefit.
  - Health Navigators also coordinate with Medicaid Specialists, assisting with Medicaid applications and recertifications, and referrals for Preventive care benefits.
- **D-SNP Clinical Team** is comprised of a medical director, nurses, behavioral health clinicians, social workers, pharmacists, and health navigators.
  - Please outreach the D-SNP team to coordinate care plans and address additional needs that may arise during non-skilled servicing.
  - While BCBSRI does not provide Medicaid coverage, we do assist in coordinating the member's full scope of benefits under the primary and secondary plans.
- **Duals Program Lead Manager** works with Network Management to support the non-skilled provider community with onboarding into BCBSRI's provider network.

# BlueRI for Duals (ONLY) Non-Skilled Service Scenarios

Duals MEMBER State	Non-Skilled Access	LTSS Transition
Seeking Non-Skilled Services + Requires LTSS Application	<ol> <li>Agency informs BCBSRI's D-SNP Care Management Team, and or Health Navigator of member NSHC intake.</li> <li>Agency supports information for the LTSS application processed by BCBSRI's Medicaid Specialist.</li> <li>Exhausts BlueRI for Duals Non-Skilled benefit.</li> </ol>	<ul> <li>LTSS application may take 30-90 days to process once all materials are submitted.</li> <li>Medicaid Preventive Care level is pursued if needed for interim coverage.</li> <li>BCBSRI's D-SNP Care Management Team (Health Navigator and or Medicaid Specialist) monitors status of LTSS</li> </ul>

		and/or Preventive Care applications.
Active with LTSS	<ol> <li>Agency bills BlueRI for Duals for non-skilled until maximum benefit is reached.</li> <li>Resumes Medicaid's LTSS services (&amp; billing) as approved by Medicaid.</li> <li>Collaborates with D-SNP Care Management for coordination of services.</li> </ol>	<ul> <li>Agency may receive BCBSRI letter requesting direct bill to BCBSRI until non-skilled benefits are exhausted.</li> </ul>
	<i>Leep in mind</i> s are sought out by the non-skilled home care agency, the es the LTSS assessment for services.	Medicaid Care Manager is consulted

- > Medicaid Care Managers are assigned regionally throughout the state.
- LTSS Medicaid Access Points include:
  - West Bay CAP
  - East Bay CAP
  - Comprehensive CAP (CCAP)
  - o RIPIN
  - o DEA, Office of Healthy Aging
- > BlueRI for Duals non-skilled services cannot be double billed to Medicaid.

Department	Role	Contact
Provider Services	Benefit status determination obtained via a	(401) 274-4848 or 1-800-230-
	BCBSRI Associate (Health	9050
	Advocate/Navigator).	
BCBSRI Care Management,	Care management collaboration for existing	Triage_Group@bcbsri.org
For Medicare Advantage members	BCBSRI Medicare Advantage members.	401-459-2273
D-SNP Clinical Care Team, 🛛 🕂	Email ALL NSHC member referrals to >	DSNPTriageGroup@bcbsri.org
<b>Z9K</b> prefix for BlueRI for Duals members		401-459-1187
	The D-SNP Triage Team will assign next	
	steps to their respective Health Advocate/	
	Navigator.	
	Care management collaboration is available	
	for all BCBSRI Medicare members.	
Medicaid Specialists	Assistance with Medicaid or LTSS	MedicaidInquries@bcbsri.org
	applications and/or recertifications for	
	current BCBSRI members; typically	
	accessed via the BCBSRI Health Navigator	
	or the CM Team.	
D-SNP Benefits Consultants	Supports prospective member referrals	(401) 459-5477

# **BCBSRI Key Contacts**

D-SNP Lead Program Manager	Assists with non-skilled home care agency orientation and processes to join the BCBSRI network. Sets expectations for collaboration once a non-skilled home care provider joins the network	DSNP.Questions@bcbsri.org
Network Management, Contracting	Manages requests for providers to join the non-skilled home care network. Includes single case agreements	ContractingInquiries@bcbsri.org
Provider Relations	Provides onboarding support after a provider joins the non-skilled home care provider network and can address escalated claims issues when they can't be resolved by the Provider Call Center	ProviderRelations@bcbsri.org

# Join the BCBSRI Non-Skilled Home Care Network!

Please contact <u>DSNP.Questions@bcbsri.org</u> if you are interested in joining the BCBSRI Non-skilled Provider Network. At this time BCBSRI does not require non-skilled home care agencies to be Medicare certified.

Upon outreach you will receive:

- 1. An introductory meeting invitation to discuss the overview of the non-skilled benefit.
- 2. The Non-Skilled Home Care Participation document, inclusive of rates, non-skilled home care codes and a link to begin the provider network application process.
- 3. Opportunity for BCBSRI to train Intake Contact(s) to process BCBSRI Non-Skilled member service requests.
- 4. Opportunity to track services requests that are unable to be filled; collaboration is requested in lieu of a nonskilled prior authorization process.
- 5. Opportunity to have ad-hoc discussions focused on community needs, partnership, and process improvement opportunities.
- 6. Opportunity to have a discussion related to members who may have dropped their BlueRI for Duals plan since joining non-skilled services.

*Of note: The process to join the BCBSRI Non-skilled care provider network takes approximately 45 days to complete BCBSRI's credentialing and contracting processes. The effective date of network participation is activated on the 1<sup>st</sup> of the month following completion. If you receive a non-skilled member referral prior to this timeframe, please outreach* <u>*ContractingInquiries@BCBSRI.org*</u> for potential next steps.