

PROVIDER CONNECTIONS

PARTNERING WITH PROVIDERS TO EMPOWER MEMBERS TO LEAD FULLER, HEALTHIER LIVES

FALL 2022



EMPOWER provider updates

Empower transitions to new Electronic Data Interchange clearinghouse services vendor

Empower Healthcare Solutions (Empower) is transitioning from Change Healthcare (CHC) to a new vendor, Availity, to provide Electronic Data Interchange (EDI) clearinghouse services effective Dec. 15, 2022.

Empower's Payer Name and Payer ID will remain the same as they are today:

- Payer Name: Empower Arkansas
- Payer ID: 12956

Claims submitted through CHC after Dec. 15 cannot be adjudicated. Availity must be used.

Please refer to the box (right) to de-

termine if any action is needed depending on your current claim submission method. For additional information

and/or Availity training videos and instructions, go to the Empower website, www.getempowerhealth.com/providers.

Clearinghouse services are changing soon!

DO YOU SUBMIT CLAIMS VIA A VENDOR THAT SUBMITS CLAIMS TO CHANGE HEALTHCARE (CHC) ON YOUR BEHALF, VIA THE EMPOWER PROVIDER PORTAL OR BY PAPER CLAIMS BY MAIL?

No action is required!

DO YOU USE CHC'S MANUAL CLAIMS ENTRY PORTAL CALLED CONNECT CENTER?

You must register for an Availity Essential Portal account at www.availity.com, and start using this portal for claims entry Dec. 15, 2022.

Effective Dec. 15, 2022

THIS ISSUE

- ◆ Clearinghouse changes
- ◆ HCBS medication administration
- ◆ MMIS updates
- ◆ InterQual criteria

Empower to oversee medication administration by Home, Community-based Service providers

Home and Community Based Service providers (HCBS) providers are required to administer or assist with the administration of medications according to the 1915 (c) waiver, and this administration will be supervised by Empower Healthcare Solutions.

HCBS include an array of services and supports that are largely non-medical in nature and that address the needs of individuals with functional limitations who need assistance with everyday activities. They are focused on functionally supporting individuals living in the community regardless of whether provided under 1905, 1915(c), or 1915(i) authority. HCBS services are generally an alternative to an institution. The actual services available to a member will be described in the member's PCSP.

The definition of Medication Administration is the direct application of medications by injection, inhalation, ingestion, or any other means to an individual receiving services by (i) persons legally permitted to administer medications or (ii) the individual at the direction and in the presence of persons legally permitted to administer medications.

The HCBS providers must have proper policies and procedures to address medication administration.

Empower's oversight of HCBS medication administration includes an attestation for the providers to provide evidence of proper medication administration policies and procedures. Policies and procedures will be



requested and reviewed for:

- Administration processes of who may administer and oversee medications and who may assist with the administration of medications;
- Yearly training of designated staff regarding proper medication administration;
- Proper documentation of medication administration inclusive of, the member's name, the medication dispensed, the dose dispensed, the route used to administer the medication, time dispensed, the individual signature of the person dispensing in the member chart/record;

■ Documentation of PRN medication must include the member's acceptance or refusal of the medication;

■ When a documentation process is not used, what authority is cited to waive the requirement;

■ Policies and procedures for controlled substance process and incident reporting of medication errors.

All medication error Incident Reports will be reviewed as a Potential Quality of Care Concern.

For additional information, please contact the Empower Quality department staff at qualityofcare@empowerarkansas.com.



Utilization Management reminders:

■ All providers: In order to avoid potential delays in payments, specific diagnoses are needed when submitting requests for Prior Authorizations.

■ Audiology providers: Please be mindful of age limits as well as benefit coverage prior to submitting for Prior Authorizations.

Federal Electronic Visit Verification mandate

The Medicaid Management Information System (MMIS) will no longer be available to bill for services for the following service codes beginning Dec. 1, 2022.

- Attendant Care - S5125U2
- Personal Care 21 and Over - T1019U3
- Personal Care 21 and Under - T1019
- Respite - S5150

Empower providers must be fully onboarded with Federal Electronic Visit Verification (EVV) and submitting all visits for the noted service codes through an EVV system ahead of Dec. 1, 2022.

A phased-in approach will start on Nov. 1, 2022. Any visits for the services above must be submitted through an EVV system, or the payment for these claims will be suspended for up to one week. Payment will be delayed. This will

occur for any visits submitted through the MMIS between Nov. 1, and Nov. 30, 2022.

To avoid claim suspension and payment delays, providers must submit these visits through an EVV system - either AuthentiCare or a chosen third-party EVV system that aggregates with AuthentiCare.

For additional information, contact provider services at 855-429-1028.

Attention: InterQual criteria available on Empower provider portal



InterQual criteria is available on the Empower Provider Portal on the "InterQual" tab on the top banner. Providers can view the criteria for their specific request and use the InterQual criteria to ensure they submit the correct information on the first submission.

For questions about accessing the provider portal, call Customer Service at 855-429-1028. For questions about the InterQual criteria that is applicable to your request, please call Customer Service and select option 1 to speak to the authorization department.



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PROVIDER NOTES

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TO FIND RESOURCES FOR PROVIDERS:

- ◆ Clinical practice guidelines
- ◆ Contracting/credentialing
- ◆ Cultural competency plan
- ◆ EVV
- ◆ Provider forms/resources
- ◆ Incident reporting
- ◆ Provider alerts
- ◆ Provider FAQ
- ◆ Provider handbook
- ◆ Provider portal
- ◆ Pharmacy provider guidelines
- ◆ Provider quality improvement activities

