

Community HealthChoices Overview Southwest Zone Provider Meetings

July 24-27, 2017

UPMC is Committed to Achieving the Commonwealth's Goals

Innovative community relationships

Track record of quality, including D-SNP

Experience in valuebased care

GOAL 1:

Enhance opportunities for community-based living

GOAL 2:

Strengthen coordination of LTSS and other types of health care, including all Medicare and Medicaid services for dual eligibles

GOAL 3:

Enhance quality and accountability

GOAL 5:

Increase efficiency and effectiveness

GOAL 4:

Advance program innovation

History of integrated physical and behavioral health care and large, innovative D-SNP

Nationally recognized analytics and clinical innovator



Service Model Differentiators

Leverage Expertise

- PA has a unique history and strong infrastructure and we are seeking partnerships with the existing service coordination network
- Our SNP breath and depth of expertise enables integration of long-term supports with Medicare
- Integrated delivery & financing as a payer-provider offers innovation in value-based care

Coordinate Service Needs With Partners & UPMC Core Team

- Integrated care model & Informatics
- Partners:
 - Performance & value
 - Represent diversity of participants

Address Social Determinants

- Housing partnerships
- Unpaid caregiver support
- Connect participants with existing community resources



Contracting

- We are completing distribution of physical health, Home and Community Based Services, and Nursing Facility amendments/agreements to Southwest Zone Providers
 - If you have not heard from us please reach out immediately to:

chcproviders@upmc.edu

- Process in brief for new providers (mostly HCBS and SC providers in SW):
 - 1. Application / Credentialing
 - 2. Contracting



Training & Orientation

- UPMC Community HealthChoices will conduct various education sessions leading up to implementation on 1/1/18 including, but not limited to:
 - On-Site Orientation Meetings with a Network Manager
 - Group Orientation Meetings
 - Collaboration with various State Associations for HCBS and NF providers
- Providers will be informed via mailings, email blasts, or, if appropriate, Association newsletters of upcoming events



Service Coordination During Continuity

- SCs are required to use each MCO's system but we are exploring options to make the least disruptive impact
- We are especially cognizant of impacts of extensive training during a period of change and want to work with you throughout this process
- Continuity expectations:
 - This is an opportunity for us to build a relationship
 - We lack definitive data and experience working with each of you
 - Expect us to provide reporting early in the year to create a baseline
 - We will work with you on meeting quality expectations



Service Coordination in the Long Run

- UPMC Community HealthChoices will operate a "hybrid" model
 - We will have internal and external service coordinators
 - Continuity relationship will set the tone for ongoing collaboration
- External service coordination entities:
 - Will be 'delegated'
 - Will be a part of the UPMC Community HealthChoices team with consistent:
 - Care model
 - Training
 - IT
 - Expectations



Claims Payment

- We share the commonwealth's goals of assuring provider payment and no service disruption during the transition to Community HealthChoices
- Claims payment is our top priority and we will be spending much more time with each provider during our fall onsite meetings and through detailed trainings
- We will have an electronic system for most HCBS that contains the service authorization to expedite payment and assure we have clean claims
- Physical health claims will be processed in the same manner as today if you are a UPMC for You provider
- Nursing facility claims process will be similar to the UPMC process today and we will have more information to follow
- We work with most major claims clearinghouses, if you have specific questions, email chcproviders@upmc.edu



Transformation, Integration & Partnership

UPMC's model brings:

- Transformation of LTSS delivery
- Integration of social supports with medical care
- Leverage IT
- Partnership with providers and community organizations to address social barriers
 - Achieving integrated community living for our members with whole-person support and broadened access to housing, employment, and socialization

... All of which will keep people out of nursing facilities and help them return to integrated community-based settings



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General questions:

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