Provider NOTES



ATTENTION:
Medicare Providers
Remember to review our
Model of Care document,
and submit an attestation
before the end
of the year.

APPOINTMENT STANDARDS FOR BEHAVIORAL HEALTH PATIENTS

One in five (51.1 million) adults in the U.S. are living with mental illness. (NAMI, 2019). One in six youth, ages 6-17, experience a mental health disorder each year. The pandemic has taken a mental toll on the world, and we don't know the long-term behavioral health impact.

Early intervention by a healthcare professional can lead to an improved quality of life for people living with mental illness. MHS Health adheres to the National Committee for Quality Assurance (NCQA) and State of Wisconsin Department of Health Service's accessibility standards for member appointments. The standards for behavioral health requires all behavioral health practices to maintain adequate availability for patient appointments, specifically:

- An initial routine care visit or follow-up routine care within ten (10) business days
 - Care of a non-life-threatening emergency visit within six (6) hours of request
 - An urgent care visit within 24 hours

- Follow-up after an inpatient mental health stay within seven (7) calendar days
- A process is in place to provide after-hours coverage 24 hours/day, seven (7) days/week
- Patients are seen by physicians within 30 minutes of scheduled appointments

FREQUENCY AND TIMELINESS

The NCQA and MHS health also encourage focus on the frequency of notifications to PCPs and the timeliness of those contacts to take advantage of opportunities for collaboration. In many cases, the PCP has extensive knowledge about the member's medical condition, mental status, psychosocial functioning, and family situation. Timely communication of the member's current treatment will help us better manage their care and coexisting conditions.

For more information about MHS Health appointment accessibility and availability guidelines, refer to the Medicaid or Medicare <u>Provider Manual.</u>

Did You Know?

Well Badger Resource Center is a free, SDOHfocused health information and referral program that connects Wisconsinites with local resources. Through the Well Badger website, people can:



- ✓ Connect with a Certified Resource Specialist
- ✓ Sign up for important text or email alerts
- Search their online directory of 3,000 local programs and services
- ✓ Access COVID-19 Resource Guide for families

Visit www.wellbadger.org to learn more!

Have You Checked Out Your Patients' COVID-19 Vaccine Detail Report?

You can now focus your COVID-19 vaccination outreach on your most vulnerable, unvaccinated patients.

- ► Go to MHSWI.COM/PROVIDERS
- ► Log into the Portal. Then select Provider Analytics Note: Only account managers have access to Provider Analytics. Contact us if you need access or assistance.
- ► Select the report by date: COVID-19 Detail --/--/2021
- You can filter the report to meet your search needs.
- ► Call 1-800-222-9831 with any quesitons.



Preventing Suicide Among Providers and Staff THURSDAY, DECEMBER 16 | 12 - 1 P.M. CT

Registration required. bit.ly/sscproviders

Join us for a FREE, live webinar to learn about the scope of the crisis and how organizations can better support providers and staff through effective suicide prevention and postvention strategies during and beyond the COVID-19 pandemic.



Behavioral Health Care Audit for Minors

Wisconsin BadgerCare Plus members (0-18) have access to behavioral health services including mental health treatment, substance use disorder treatment, and interventions for developmental delays. This is outlined in Section 5022 of the SUPPORT (Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities) Act. It is the responsibility of MHS Health to ensure the use of age-appropriate, evidence-based, validated behavioral health screening and assessment tools in primary care settings for BadgerCare Plus members (0-18).

MHS Health follows the Bright Futures periodicity schedule that was developed by the American Academy of Pediatrics.

MHS Health completes random audits to evaluate providers' adherence periodicity table, as well as to validate that appropriate actions were taken with the member and/ or member's guardian for any positive findings per the assessment's criteria. The process is as follows:

- 1. MHS Health requests medical records from randomly selected providers per the periodocity table.
- 2. A health plan member reviews the medical records for proof an evidence-based assessment was completed timely and scored appropriately.
- **3.** Using Bright Futures guidelines, MHS validates that the provider made the appropriate referral and/or recommendations for any positive findings.
 - If the provider did not take the appropriate steps, MHS
 Health completes follow-up education and/or develops
 a corrective action plan with the provider.

Be prepared for an audit by MHS Health at any time.

TIP: BrightFutures is dedicated to supporting providers in their practices. There a variety of tools, guides, and other resources on the BrightFutures website. Check them out!

It is with sincere appreciation we thank you for being a valuable partner. We wish you the joy of the season and a new year filled with happiness.

Provider Services: 1-800-222-9831

Behavioral Health Provider Services: 1-800-589-3186 Prior Authorization Requests Fax: 1-866-467-1316 Member Customer Service: 1-888-713-6180 24-hour Nurse Advice Line: 1-800-280-2348 Mailing Address:

MHS Health Wisconsin Attn: Provider Relations 801 S. 60th Street, Suite 200 West Allis, WI 53214 Medical Claims Address:

MHS Health Wisconsin Attn: Claims Dept PO Box 3001 Farmington, MO 63640 BH Claims Address:

MHS Health Wisconsin Attn: BH Claims Dept PO Box 6123 Farmington, MO 63640