

About Neighborhood **INTEGRITY** (Medicare-Medicaid Plan)*



Frequently asked questions for providers

Who does **INTEGRITY** serve?

INTEGRITY will serve Rhode Islanders, age 21 or older, who are eligible for both Medicare and Medicaid. More than 18,000 Rhode Islanders currently receive Medicaid benefits through Neighborhood **UNITY** / Rhothy Health Options (RHO), and Medicare benefits through another insurer. Many of these dually eligible members will transition to **INTEGRITY** for their health coverage.

What benefits and services does **INTEGRITY** cover?

INTEGRITY offers both Medicare and Medicaid benefits under one plan. It will cover all Medicare Part A, B and D services, Medicaid services, and long-term services and supports (LTSS) for enrolled members.

How is Neighborhood prepared to successfully launch **INTEGRITY**?

Neighborhood has more than 20 years of experience serving Rhode Islanders with high-quality care. We have been ranked as one of the top Medicaid health plans in America for the past 12 years and currently serve more than 175,000 members. Since the launch of Rite Care in 1994, Neighborhood has successfully implemented health plans to serve children, families, children with special health care needs and adults with disabilities. During our consistent growth in membership we have demonstrated successful management of Medicaid and Marketplace benefits, as well as long-term services and supports (LTSS). Because of this experience we are prepared to offer **INTEGRITY** and Medicare and Medicaid benefits under one plan.

What is the goal of the Integrated Care Initiative (ICI)?

The Integrated Care Initiative (ICI) is Rhode Island's brand name for our state's duals demonstration. The goal of the ICI is to improve the care and quality of life for elders and adults with disabilities who are eligible for both Medicare and Medicaid. The ICI is being implemented in two phases. Phase 1 began in November 2013 when Neighborhood launched **UNITY** / Rhothy Health Options (RHO), which offers Medicaid benefits and long-term services and supports (LTSS). We are currently preparing for Phase 2 to offer Medicare and Medicaid benefits under one plan called **INTEGRITY**.

How will the integrated care approach benefit members?

Neighborhood's mission is to integrate medical, behavioral health and long-term services and supports (LTSS) for our members to improve their quality of life. This mission cannot be accomplished without the partnership of our valued providers. Our approach to care is:

- Person-centered to improve access and ensure high-quality care.
- Customized to serve all of a member's unique needs.
- Coordinated to help members stay in the community with LTSS.
- Deliberate to align financial and quality incentives that improve care.

Neighborhood members will have a care manager to coordinate their services and ensure they receive the best care possible.



*Neighborhood is working with the state to pass the readiness review and a three-way contract needs to be signed by CMS, EOHHS and Neighborhood before we can offer this plan.

How will the integrated care approach benefit providers?

The integrated care approach has two main advantages for providers:

1. Integrated billing, which means providers only bill Neighborhood for services a member receives.
2. A member's care manager is the point person for providers to call and get the information they need about all of the care a member receives.

What is the enrollment process for members?

There are two ways eligible Rhode Islanders will be enrolled in **INTEGRITY**: they can opt in or be passively enrolled.

Opt-in enrollment:

When an eligible Rhode Islander chooses to sign up for **INTEGRITY**. All eligible Rhode Islanders will receive a notice from the Executive Office of Health and Human Services (EOHHS) explaining how they can enroll. This notice will be mailed to two groups. The first group will receive the notice in late March for an effective date of May 1, 2016. The second group will receive the notice in late April for an effective date of June 1, 2016.

Passive enrollment:

When eligible members are automatically enrolled in **INTEGRITY**. These members:

- Are currently enrolled in **UNITY**.
- Are currently enrolled in Original Medicare for their Medicare benefits.

Passive enrollments will begin with the first effective date of July 1, 2016 and run monthly through December 1, 2016 for a total of six phases. EOHHS will mail two notices to eligible members. The first notice will be sent 60 days before the effective date and the second notice will be sent 30 days before the effective date.

Who is the Ombudsman and what is their role?

As part of Phase II of the Integrated Care Initiative, Rhode Island's Executive Office of Health and Human Services (EOHHS) plans to implement an Ombudsman Program for dual eligible individuals (individuals eligible for both Medicare and Medicaid) enrolled in ICI Phase II. The goal of the program is to ensure members, caregivers and authorized representatives have person-centered assistance with issues and concerns within the ICI. EOHHS intends to contract with local, community-based organizations to deliver these services.

What is the contracting process for providers?

Contract amendments and notices were mailed in December 2015. There is no action required by providers. Providers who wish to opt out must provide written notice within 60 days per their contract. If a provider chooses to opt out, they will no longer be participating in any Neighborhood Medicaid products.

What is the credentialing process for providers?

Neighborhood's credentialing process validates that providers have the required training, credentials and licenses to serve members. The process for validating provider credentials is the same for all lines of business. Providers must pass the credentialing process to become part of the Neighborhood network, and are reviewed at least every three years thereafter to maintain their in-network status. Signing a contract does not guarantee a provider will pass the credentialing process and be admitted to the network.

What is the timeline for implementation of INTEGRITY?

There are three opt-in enrollment waves.

Waves	Letters Received	Effective Enrollment Date
Wave 1	June 1	July 1
Wave 2	July 1	August 1
Wave 3	August 1	September 1

The opt-in enrollment waves 1, 2 and 3 include all population groups: nursing facilities, duals with LTSS, duals without LTSS, SPMI and IDD.

What are the training requirements for providers?

For compliance, providers are required to take and attest to six training modules covering:

1. An introduction to **INTEGRITY**
2. Enrollee rights and protections
3. Cultural competence, disability literacy and the Americans with Disabilities Act (ADA)
4. Model of care, assessment and care planning
5. Putting cultural and disability competence into practice
6. Integration of behavioral health and long-term services and supports (LTSS)

An authorized representative from each provider organization is required to take the training, and complete our attestation form. The authorized representative attests to having completed the training and agrees that their organization adopts and trains its employees and downstream entities using these training modules.

The second requirement of providers to ensure we are in compliance in meeting member needs, is the completion of the Americans with Disabilities ACT (ADA) Survey. Network providers are required to accommodate members with disabilities by providing services that are geographically and physically accessible as defined by CMS through ADA requirements. The purpose of this survey is to determine and document if your location meets these requirements. Information collected in the survey feeds the provider directory and, more importantly, allows Neighborhood to direct members with specific needs to the appropriate provider.

The training, attestation form and ADA survey

are now available on Neighborhood's website at www.nhpri.org/Providers/ProviderTraining.

Will Neighborhood provide additional training?

Neighborhood representatives will provide specific training related to billing guidelines and the claims submission process upon request.

When a member has a question about INTEGRITY, where can I direct them for information?

Neighborhood is working with the state to pass the readiness review and a three-way contract needs to be signed by CMS, EOHHS and Neighborhood before we can offer this plan. More information about who members can call for more information will be provided at a later date.

How do I submit formulary coverage determinations?

The formulary for the **INTEGRITY** product is slightly different than the formulary for our other Medicaid lines of business. For this reason, Neighborhood will provide a new form and fax number for you to submit formulary coverage determinations. Please do not use the Medicaid form to submit requests. Requests made with the Medicaid form will be delayed.

Where can I view a list of in-network pharmacies?

When the plan goes live this information will be posted on our website at www.nhpri.org/INTEGRITY.

Is Neighborhood's utilization management (UM) procedure changing?

The procedure for requesting prior authorization is not changing and request forms should be faxed to 401-459-6023. For a list of services and more information, go to www.nhpri.org/Providers/ResourcesFAQs and click on "Prior Authorization Reference Guide." Neighborhood's clinical medical policies are also available on our website. Go to www.nhpri.org/Providers/ClinicalResources and click on "Clinical Medical Policies."

What are the payment rates for providers?

Neighborhood will reimburse a combined Medicare and Medicaid payment rate, which, in the aggregate, is equivalent to what a provider would have received prior to **INTEGRITY**.

Who do I contact if I need more information?

Business Area	Name and Title	Contact Information
Product	Alison Croke <i>Vice President of Medicare Medicaid Integration</i>	1-401-427-8868 acroke@nhpri.org
Claims	Janis Lanzoni <i>Director of Claims</i>	1-401-459-6034 jlanzoni@nhpri.org
Contracting	Susana Conklin <i>Director of Provider Contracting and Engagement</i>	1-401-459-6629 sconklin@nhpri.org
Credentialing	Soraia Monteiro <i>Manager of Credentialing</i>	1-401-459-6145 smonteiro@nhpri.org
Integrated Care Team	Dolores Burke <i>Director of Care Management</i>	1-401-459-6013 dburke@nhpri.org