



CHNCT Provider Collaborative Program

Community Health Network of Connecticut, Inc. (CHNCT), on behalf of the Department of Social Services (DSS) and the HUSKY Health Program, offers a comprehensive program to support Connecticut Medical Assistance Program (CMAP) enrolled providers and their practices. The Provider Collaborative assigns CHNCT subject-matter experts to work with providers and their staff to support the practice's operational, administrative, and clinical functions as they relate to HUSKY Health.

Practices may work with any or all CHNCT departments participating in the Provider Collaborative to receive education and training for services available to providers, their staff and to HUSKY Health members.

CHNCT Participating Departments:

- Provider Engagement Services
- Member Engagement Services
- Intensive Care Management
- Community Practice Transformation Program & Network Management
- Medical Economics & Quality Management
- Prior Authorization
- Transitional Care

To take advantage of the services the Provider Collaborative offers:

Call or email the designated contact in the desired functional area(s) detailed below to schedule an onsite visit. For general questions and provider support, please call Provider Engagement Services at 1.800.440.5071 or contact your regional Provider Engagement Representative.

For providers interested in becoming CMAP enrolled and leveraging all of the resources provided by CHNCT, please call 1.800.440.5071.

PROVIDER ENGAGEMENT SERVICES

Contact Information:

1.800.440.5071

CHNCT's Provider Engagement Services Department is comprised of provider support staff, including regional Representatives who are available to work with each provider practice in person. Our goal is to establish an open dialogue with providers and their staff to promote positive relationships through communication and education, and to reduce practice administrative burden when possible.

Each regional Representative is available to provide exceptional onsite technical assistance and responsiveness to any concerns identified by provider practices. Providers may request assistance to address any issues with the HUSKY Health Program and our regional representatives will coordinate, as needed, with all program partners including CHNCT, DSS, and Hewlett Packard Enterprise. Provider Engagement Services collaborates with providers to bring resolution to issues as quickly as possible.

We are prepared to discuss any questions providers have, including:

- Changes made to State and Federal Medicaid programs
- DSS bulletins on medical and administrative policies and procedures affecting practices



- Hewlett Packard Enterprise provider enrollment, attestation, profile updates, and claims resolution
- Reducing missed appointments

MEMBER ENGAGEMENT SERVICES & ESCALATION UNIT

Contact Information:

For Providers: 1.800.440.5071

For Members: 1.800.859.9889

Member Engagement Services provides the first line of service for members and providers for any questions they may have. Member Engagement Services is available to help providers and their patients Monday through Friday from 8 a.m. to 6 p.m. Providers should call 1.800.440.5071, and members should call the toll-free number on the back of their ID cards.

Member Engagement Services provides assistance with all of the following and more:

- Educating callers on HUSKY benefits and answering questions on topics such as member eligibility
- Locating CMAP-enrolled providers and offering appointment assistance to members seeking care
- Referring callers to the Connecticut Dental Health Partnership, Connecticut Behavioral Health Partnership, LogistiCare, pharmacies, and other program partners
- Referring members to community resources for food assistance, utility assistance, shelter, and other non-medical needs

The Member Engagement Escalation Unit has special expertise with helping HUSKY members access care. The Escalation Unit provides the extra attention a member or provider may need to obtain timely access to specialty services. The Escalation Unit works directly with providers, members and their families on more complex access to care issues. Representatives assist with locating providers that may be difficult to find, scheduling appointments, coordinating transportation to medical appointments and identifying community resources for members.

Providers are encouraged to contact the Escalation Unit directly when members need additional help addressing access to care issues. To initiate services with the Escalation Unit, call or fax a completed Escalation Referral form.

- Complete the "Escalation Referral Form" at www.ct.gov/husky click "**For Providers,**" , click "**For Providers,**" "**Provider Forms**" under the "**Reports & Resources**" menu item, then "**Escalation Referral Form;**" complete and fax to 203.265.3197 or email to reachforescalation@chnct.org
- Call us at 1.800.440.5071 and ask for the Escalation Unit



INTENSIVE CARE MANAGEMENT

Contact Information:

For ICM Referrals:

Phone: 1.800.440.5071 x2024

The Intensive Care Management (ICM) program provides comprehensive care coordination services in collaboration with members, their providers, and multidisciplinary teams. The program supports HUSKY members with achieving their health goals through coaching and encouraging participation with the provider prescribed treatment plan. ICM Care Managers incorporate evidence-based practice guidelines to formulate person-centered care plans.

Intensive Care Managers work directly with members with chronic and multi-morbid conditions, including members with concomitant behavioral health conditions and collaborates with their providers. ICM also provides services for prenatal and postpartum care, as well as care coordination for babies in Neonatal Intensive Care Units. The primary goals of the program are to improve health outcomes for members and to foster a person-centered approach that helps members achieve their health goals. ICM empowers members to make fully informed decisions about their care options by offering members needed information, education, support, and coaching. ICM staff empowers families to improve their healthcare and stabilize their living situations in the community by referring them to community organizations, medical home providers and other resources.

Providers may refer members to ICM by calling 1.800.440.5071 x2024, or by faxing in a completed ICM Referral Form.

- To download the form, visit www.ct.gov/husky, click "**For Providers,**" "**Provider Forms**" under the "**Reports & Resources**" menu item, then "**ICM Referral Form.**"

MEDICAL ECONOMICS AND QUALITY MANAGEMENT

Contact Information:

1.800.440.5071

The Medical Economics and Quality Management department is responsible for data reporting, data analysis, clinical evaluation of health outcomes, and implementation of provider interventions focused on improving the health of the members we serve.

The Medical Economics team conducts and analyzes various health measure reporting, which includes HEDIS® and other quality measures.

The Quality Management (QM) team is responsible for the implementation of the CHNCT QM Program, accreditation activities, and appeals and grievances. The QM team collaborates with the Medical Economics team to:

- Analyze and report on health outcome measures data
- Monitor health outcome measures used to determine member and/or provider interventions, as necessary



- Conduct root cause analyses, create plans for improvement, implement interventions, assess performance improvement, and provide clinical observations based on the outcome of interventions

COMMUNITY PRACTICE TRANSFORMATION PROGRAM & NETWORK MANAGEMENT

Contact Information:

203.949.4194

pathwaytopcmh@chnct.org

The Community Practice Transformation Program staff assists primary care practices with their applications to the PCMH and/or DSS Glide Path programs to become PCMH recognized practices. Community Practice Transformation staff are specially trained in Nationally Accredited PCMH Standards and maintain NCQA PCMH Content Expert Certifications.

This team provides education and support to the practices regarding NCQA PCMH recognition and the DSS PCMH and Glide Path programs. The Network Management team provides training and assistance to primary care practices on analytical tools and reports available for Medicaid population health management. Reports may be used by providers to identify their members with gaps in care who may benefit from care coordination to help improve health outcomes. Primary Care Practices interested in becoming a PCMH will be visited by members of the Community Practice Transformation and Network Management teams for an introduction to and overview of the PCMH model of primary care, including specific information on NCQA recognition and the DSS PCMH program. For more information on becoming a PCMH, please visit www.ct.gov/husky, click "**For Providers,**" then "**Person-Centered Medical Home.**"

PRIOR AUTHORIZATION DEPARTMENT

Contact Information:

Medical Prior Authorizations:
1.800.440.5071 follow the prompt
for Medical Prior Authorization

Radiology Prior Authorizations:
1.800.440.5071 follow the prompt
for Radiology Prior Authorization

The HUSKY Health Prior Authorization department works to ensure that:

- Members receive services in a timely manner
- Services are medically necessary to address the member's individualized needs

The process of medical necessity determination includes consideration of a member's specific circumstances and special health care needs, adherence with the DSS definition of medical necessity, and application of evidence-based clinical standards of care.

The Prior Authorization process considers the following to determine if the requested service or good is appropriate:

- Medical necessity of treatment based on the DSS definition of medical necessity
- Setting for treatment
- Types and intensity of resources to be used for treatment



- Time frame and duration for treatment

In order to process requests for prior authorization, the request must be for members enrolled in the HUSKY Health Program and the ordering and billing provider must be CMAP-enrolled. To request medical prior authorization, please visit www.ct.gov/husky, click "**For Providers**," then "**Prior Authorization**," and follow the instructions on the page.

TRANSITIONAL CARE

Contact Information:

1.800.859.9889 x2011

The Transitional Care team collaborates with members, caregivers, providers, and community agencies to ensure provider follow-up and services are in place for members:

- After hospital discharge
- With frequent ED utilization
- With selected chronic care conditions who have gaps in care

The goals of this team are to establish a plan of care and coordinate services for these members. CHNCT promotes post-hospital follow-up care by working to ensure that members see their PCP within 7 days of discharge. The nurses work with provider offices to schedule follow-up appointments and help arrange non-emergency medical transportation when needed. For more information on Transitional Care, please visit www.ct.gov/husky, click "**For Providers**," then "**Transitional Care**" under the "**Condition Management Resources**" menu item.