



Doulas and Medicaid Managed Care Organizations

Welcome to the Overview for the

PA Doula Commission

January 25th, 2024

E. L. KATZ
CONSULTING



UPMC for You
Affiliate of UPMC Health Plan

Geisinger
Health Plan


AmeriHealth Caritas
Pennsylvania


Health Partners Plans
Health Partners

 **Keystone First**

 **UnitedHealthcare**[®]
Community Plan


HIGHMARK [®]
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What is HealthChoices?

The terms, *Medicaid*, *Medical Assistance*, and *HealthChoices* all have the same meaning in PA

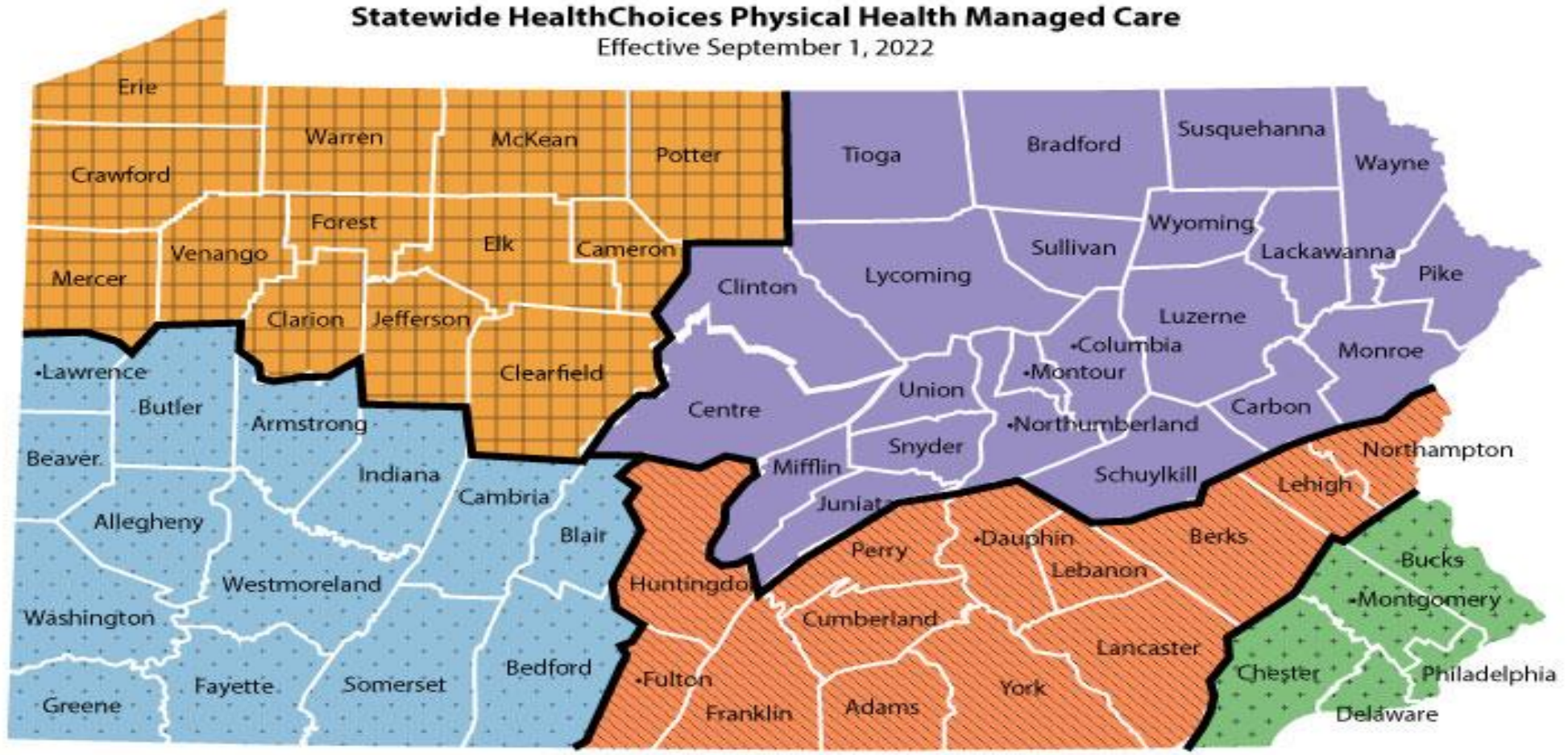
- **HealthChoices** is the name of Pennsylvania's **Medical Assistance** Program, which is the state's **Medicaid** program. PA has been employing the HealthChoices model for over 25 years.
- Medicaid is an entitlement program primarily based on income, jointly administered and financed by the state & federal government. The **Department of Human Services (DHS)** manages HealthChoices in Pennsylvania. Each state Medicaid program is different.
- Through **Medicaid Managed Care Organizations (MCOs)**, eligible individuals in Pennsylvania receive access to high quality **physical** and **behavioral** medical care, as well as **Long Term Services & Supports (LTSS)** for qualifying individuals, known as Community HealthChoices.
- The Behavioral HealthChoices and Community HealthChoices programs are administered by a different set of MCOs; **PAMCO** is the organization of Physical Health MCOs. **These are the MCOs you will be working with to operationalize the Doula contracting process.**

**Approx 34% of
births in PA are
covered by
HealthChoices**



Statewide HealthChoices Physical Health Managed Care

Effective September 1, 2022

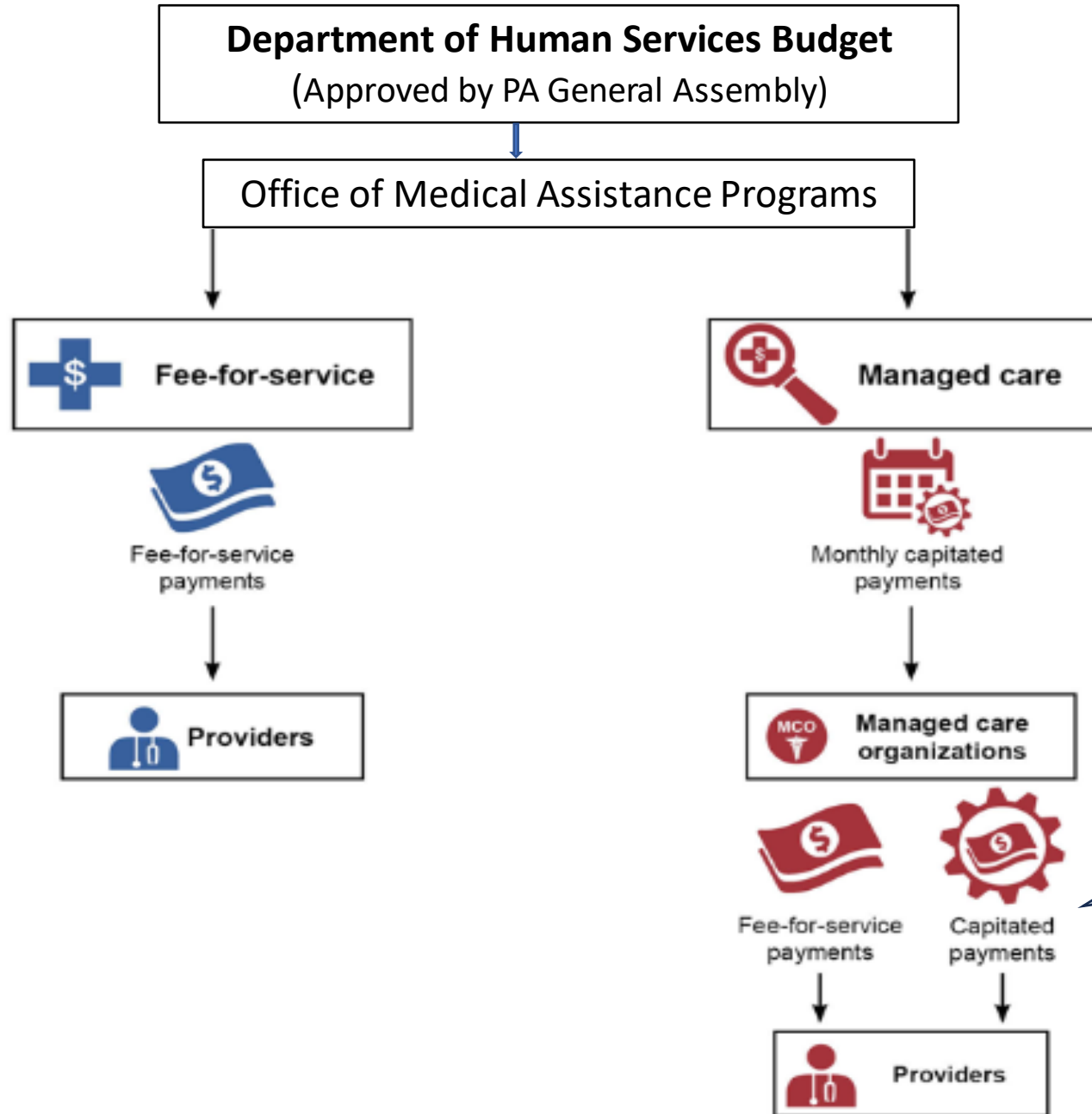


- 
HealthChoices Northwest
 AmeriHealth Caritas PA, Geisinger**, Health Partners**, UPMC
- 
HealthChoices Northeast
 AmeriHealth Caritas PA, Geisinger, Health Partners**, UPMC**
- 
HealthChoices Southwest
 AmeriHealth Caritas PA**, Geisinger**, Health Partners**, Highmark Wholecare (formerly Gateway), UPMC

- 
HealthChoices Lehigh/Capital
 AmeriHealth Caritas PA, Geisinger**, Health Partners**, Highmark Wholecare (formerly Gateway), UPMC
- 
HealthChoices Southeast
 Geisinger**, Health Partners, Keystone First, United, UPMC**

** New MCO in Zone

How are MCOs Paid?



Pennsylvania's MCOs are ranked among the **HIGHEST QUALITY MANAGED CARE PLANS IN THE NATION** by the National Committee for Quality Assurance (NCQA)

This is a general payment overview. Payment arrangements to providers will vary, and will be determined by your MCO specific contract.

What is a Medicaid Managed Care Organization?

- ✓ MCOs serve as the glue that binds provider & community resources with a unified health care strategy that looks at all the factors affecting the health of individuals.
- ✓ Through their reach and expertise in healthcare delivery, MCOs partner with DHS, health care providers, and community organizations throughout the Commonwealth to bring together disparate parts of the healthcare system. Strong provider networks ensure that quality providers are available to members and that they have access to a breadth of services (including Doula services)



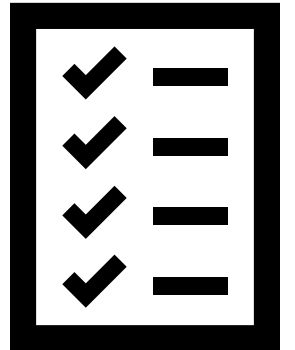
Delivering Whole Person Care

- MCO care coordinators organize the process for managing the health services that member require
- MCOs contract with different providers and organizations from various silos to provide patients the care they need, when they need it, and where they need it, including linking members to services outside of traditional health care



Step by Step – Working with MCOs

- **Enrollment with DHS** - As a healthcare provider in PA, enrolling with DHS is required to ensure that you can provide necessary medical services to the state's HealthChoices (Medicaid/Medical Assistance) beneficiaries.
- Provider enrollment involves completing an application, submitting documentation, and meeting eligibility requirements – (certified perinatal Doula credential is required)
- Enrolling with DHS means providers can then begin the **credentialing and contracting process** with MCOs, and, upon completion of contracting, bill for and receive payment for the services they provide to Medicaid beneficiaries.
- The DHS enrollment process can take several weeks to several months, depending on the complexity of the application and the completeness of the documentation submitted. The credentialing process also takes several weeks, up to 60 days, depending on the completeness of the application.
- There was a DHS training provided for Doulas on the DHS **enrollment** process on Jan 10, 2024.



MCO Contracting

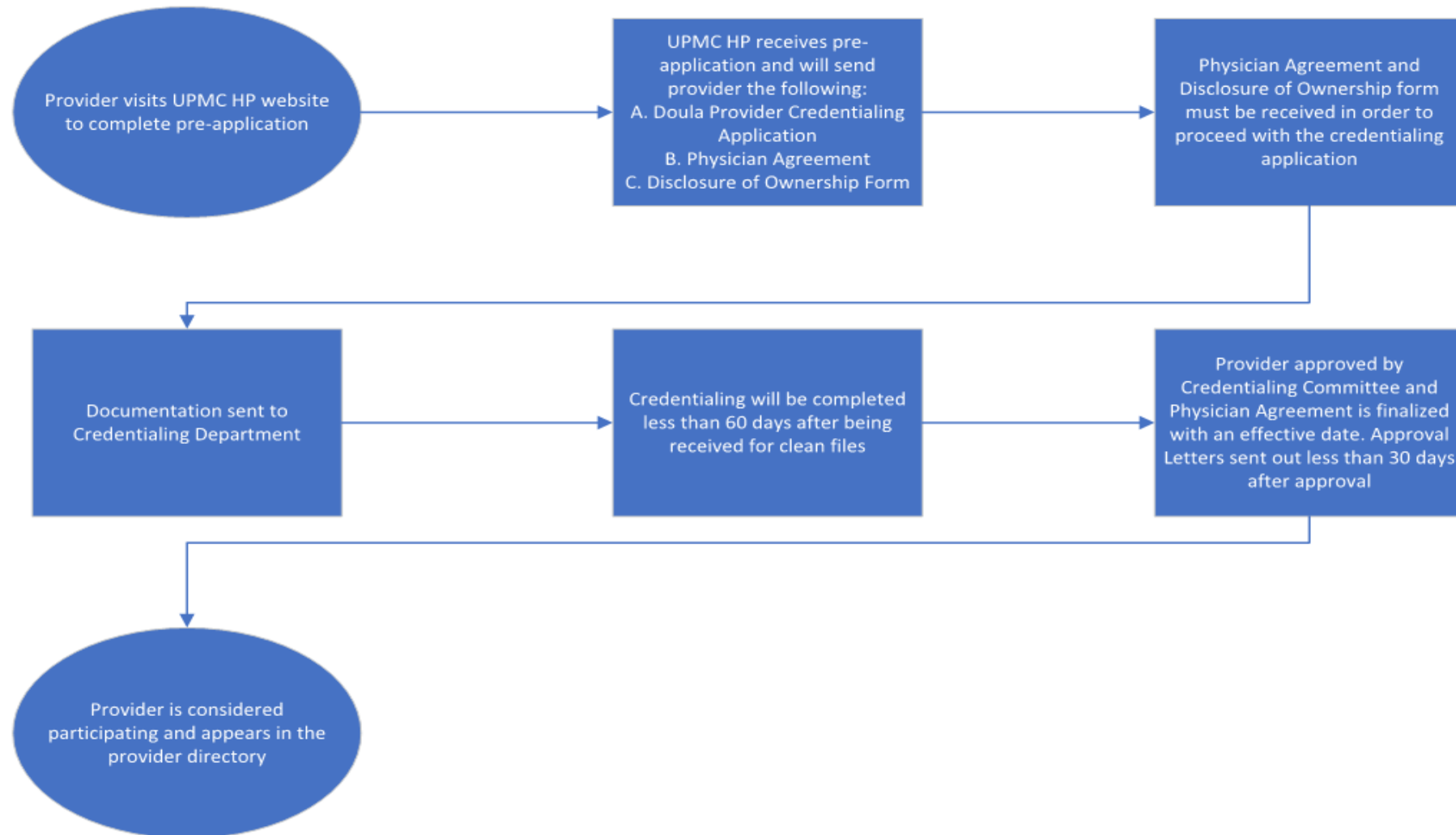
- Federal law requires MCOs have a contract with enrolled providers in order to pay for services
- Each MCO will have different payment rates/conditions set forth in their contracts
- Doulas must contract with each individual MCO with which they want to do business/provide member services
- Enrollment with DHS does not guarantee payment by an MCO



Terms you Might Hear During MCO Contracting

- **Fee Schedule**: Payment rates; a list of charges for the health care services provided
- **Value Based Purchasing**: These contracts link provider payments to patient outcomes, aligning incentives to improve care and reduce unnecessary costs. MCOs have a requirement to have a majority of their payments (at least 50%) in some type of value based payment arrangement.
- **Bundled Payments**: Considered a type of value-based purchasing where contracts utilize bundled payments which include all payments for services rendered to treat a patient for an identified condition during a specific time period. DHS may specify certain services that must be paid through bundled payments

UPMC Contracting Flow Chart Example

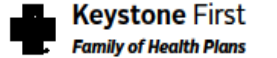


Example: Keystone First Contracting Application

- To begin the [contracting process](#), you must complete the [contracting application \(PDF\)](#).
- Keystone First will then email you a contract with instructions for signing and return. Please allow up to 14 days to receive.
- Once you receive a signed contract you can begin the credentialing process for practitioners in your practice.

[LIVE DEMO](#)

Contract Application



Contract type: <input type="checkbox"/> Medicaid <input type="checkbox"/> Medicare <input type="checkbox"/> CHC		<input type="checkbox"/> W9 Attached (signed within last 180 days)	
Provider type: <input type="checkbox"/> PCP <input type="checkbox"/> Specialist — provide type:		<input type="checkbox"/> Ancillary <input type="checkbox"/> Facility	
Legal entity name:			
Group NPI:		Group TIN:	
Contracting contact name:		Phone:	Email:
Credentialing contact name:		Phone:	Email:

Practice locations	Practice name (as it will appear in directory)	Address (street, city, state, ZIP)	County	Telephone number	Fax number	*MAID	**MC ID
Primary							
Location #2							
Location #3							
Location #4							
Location #5							
Location #6							

Email to provider.contracting@keystonefirstpa.com or fax to 215-863-5472.

*Enrollment in the PA Medical Assistance Program is required in our Medicaid Product. If you are not enrolled and do not have PPID, we cannot credential you for participation. If you need to enroll, please call the Department of Human Services (DHS) at 1-800-537-8862.

**Enrollment in Medicare is required in our Medicare Product. If you are not enrolled and do not have a Medicare ID, we cannot contract or credential for participation. If you need to enroll, please complete the online PECOS application through the Centers for Medicare & Medicaid Services (www.cms.gov > Become a Medicare Provider or Supplier).

MCO Credentialing

- Each MCO will need to credential you in order to pay a claim and list you in the directory
- Once a complete initial file is sent to the Credentialing Department it is generally assigned to a Credentialing Specialist who has 30 business days to complete the file.
- If the specialist deems the file incomplete, they will reach out for the missing information (file will be discontinued if information is not provided).
- All complete file information is added to the MCO credentialing database, where verifications will then be performed for all healthcare professionals to show that they have the proper education, training, and licenses to care for patients.
- Once all primary source verification has been completed the file is submitted and will become approved the day of submission.
- Claims processing can be back dated to the date of the application submitted if the provider has an active PromiseID for the date of service.

Example of MCO an Credentialing Checklist

- Submit a completed and accurate Provider Application
- Register with CAQH where you can add their information and share it with multiple insurance companies.
- Have a NPI number
- Be a Certified Perinatal Doula (Certified Perinatal Doula | Pennsylvania Certification Board (pacertboard.org))
- Be enrolled with DHS (PromiseID)
- Provide a copy of professional liability policy
- Provider cannot be listed or found on any excluded/Deathmaster file/sanction listings

MCO State Requirements – Douglas



- MCOs have a requirement in their 2024 contract with DHS which states Doulas must be part of maternity care teams, which MCOs use to provide perinatal services for at least 25% of their covered births
- The doulas may be employed or contracted by the birthing hospital or a physician group, or they may be independent.
- A list of Participating Maternity Care Bundle Sites is provided on the following slides.
- DHS is working toward adding doula services to the State Plan, hopefully in 2025. At that time, MCOs will be required to cover doula services for all eligible members regardless of whether they are delivering at a Maternity Care Bundle Site.

Maternity Care Bundle (Exhibit B7)



• Maternity Care Team

- a. Includes at least one (1) clinician (physician, CRNP, CNW, or other) who is qualified and licensed to provide prenatal care to pregnant women.
 - b. Includes at least one (1) clinician (physician, CRNP, CNW, or other) who is qualified and licensed to assist in vaginal delivery of babies.
 - c. Includes at least one (1) clinician (physician, CRNP, CNW, or other) who is qualified and licensed to provide newborn services.
 - d. Provides access to at least one (1) physician who is qualified to treat women with high-risk pregnancies, to treat complications experienced during pregnancy or childbirth, and to perform cesarean sections.
 - e. Provides access to at least one (1) hospital that has the capability to perform cesarean sections and treat common complications of labor and delivery.
 - f. Provides access to at least one (1) Anesthesiology practice.
 - g. Provides access to at least one (1) physician practice, hospital, clinical laboratory, or other entity that has the ability to perform laboratory tests or imaging studies needed as part of prenatal care, labor and delivery, and postpartum care.
 - h. Includes at least one (1) individual, such as a social worker, or peer recovery specialist, to coordinate the care of the pregnant woman to address other needs, including behavioral health, substance use disorder, and Social Determinants of Health.
 - i. **Includes at least one (1) Doula, who can be independent or health system affiliated. If available, doula services must be provided to any women who requests doula services.**
 - j. Includes at least one (1) community health worker
- Doulas submit claims for services
 - Doulas can receive incentive payments



Maternity Care Bundle Hospitals by MCO

Hospital Name	Hospital Zip Code	AmeriHealth Caritas	Geisinger	Health Partners	Highmark	Keystone First	UPMC	United
Pennsylvania Hospital	19107					X		X
Hospital of the University of Pennsylvania	19104					X		X
Chester County Hospital	19380					X		X
Geisinger Lewistown Hospital	17044	X	X					
Geisinger Wyoming Valley	18711	X	X					
Geisinger Bloomsburg Hospital	17815	X	X					
Geisinger Medical Center	17822	X	X					
Geisinger Community Medical Center	18510	X	X					
St. Luke's Hospital Upper Bucks	18951	X	X					
St. Luke's Hospital Allentown	18104	X	X					
St. Luke's Hospital Anderson	18045	X	X					
UPMC Altoona	16601						X	
UPMC Northwest	16346						X	

Maternity Care Bundle Hospitals by MCO

Hospital Name	Hospital Zip Code	AmeriHealth Caritas	Geisinger	Health Partners	Highmark	Keystone First	UPMC	United
UPMC Horizon	16125						X	
UPMC Hamot Medical Center	16550						X	
UPMC Magee Women's Hospital	15213						X	
Lancaster General Women & Babies	17601	X						
Einstein Hospital	19141			X				
The Washington Hospital	15301				X			
Penn State Milton S. Hershey Medical Center	17033				X			
Penn State St. Joseph Medical Center	19605				X			
Tower Health Reading Hospital	19611				X			
WellSpan Good Samaritan	17042				X			
WellSpan Chambersburg Hospital	17201				X			
WellSpan Gettysburg Hospital	17325				X			
WellSpan York Hospital	17403				X			
WellSpan Ephrata Community Hospital	17522				X			

Claims & Billing

- Claims and Billing resources can be found on each individual MCO's website
- Potential Future Training:
 - Claims Form
 - Billing Codes
 - Submission Requirements
 - Timelines
 - Documentation

HEALTH INSURANCE CLAIM FORM
APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

1. MEDICARE MEDICAID TRICARE CHAMPVA GROUP HEALTH PLAN FECA (LUNG) OTHER **INSURED'S I.D. NUMBER** (For Program in Item 1)
 (Medicare) (Medicaid) (DoD/DoD) (Member ID#) (ID#) (ID#) (ID#) 123456789012345

2. PATIENT'S NAME (Last Name, First Name, Middle Initial)
Abbott, Aaron

3. PATIENT'S BIRTH DATE
MM DD YY 08 27 1984 SEX M F

4. INSURED'S NAME (Last Name, First Name, Middle Initial)
Abbott, Aaron

5. PATIENT'S ADDRESS (No., Street)
1 Beverly Drive B6

6. PATIENT RELATIONSHIP TO INSURED
Self Spouse Child Other

7. INSURED'S ADDRESS (No., Street)
1 Beverly Drive B6

CITY Abington STATE PA CITY Abington STATE PA
 ZIP CODE 14219 TELEPHONE (Include Area Code) (218) 8173931 ZIP CODE 14219 TELEPHONE (Include Area Code) (218) 8173931

8. RESERVED FOR NUCC USE

9. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)

10. IS PATIENT'S CONDITION RELATED TO:
 a. OTHER INSURED'S POLICY OR GROUP NUMBER
 b. RESERVED FOR NUCC USE
 c. RESERVED FOR NUCC USE
 d. INSURANCE PLAN NAME OR PROGRAM NAME

11. INSURED'S POLICY GROUP OR FECA NUMBER
1234567890

12. INSURED'S DATE OF BIRTH
MM DD YY 08 27 1984 SEX M F

13. OTHER CLAIM ID (Designated by NUCC)

14. INSURANCE PLAN NAME OR PROGRAM NAME

15. CLAIM CODES (Designated by NUCC)

16. IS THERE ANOTHER HEALTH BENEFIT PLAN?
 YES NO # yes, complete items 9, 10, and 11.

17. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below.
 SIGNED Signature on File DATE 06/12/2014 SIGNED Signature on File

18. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION
 FROM MM DD YY TO MM DD YY

19. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES
 FROM MM DD YY TO MM DD YY

20. OUTSIDE LAB? YES NO \$ CHARGES

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate A-L to service line below (24E) ICD 9th 9

A. 255.11 B. 280.1 C. D. E. F. G. H. I. J. K. L.

22. RESUBMISSION CODE ORIGINAL REF. NO.

23. PRIOR AUTHORIZATION NUMBER

24. A. DATE(S) OF SERVICE	B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Caption Unusual Circumstances)	E. DIAGNOSIS POINTER	F. \$ CHARGES	G. DROVE CH. UNITS	H. PAYMENT PLAN	I. ID. QUAL.	J. RENDERING PROVIDER ID.#
05 16 14 05 16 14 11			97804	AB	64.00	2		NPI	
								NPI	
								NPI	
								NPI	
								NPI	
								NPI	

25. FEDERAL TAX I.D. NUMBER SSN EIN 26. PATIENT'S ACCOUNT NO. 27. ACCEPT ASSIGNMENT? (For govt. orders, see back) YES NO

28. TOTAL CHARGE \$ 64.00 29. AMOUNT PAID \$ 50.00 30. Revd for NUCC Use

31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.)
SIGNED Ashley Wilson DATE 06-12-14

32. SERVICE FACILITY LOCATION INFORMATION
ABC General Store
123 Main Street
Suite 1020
Pittsburgh, PA 15222

33. BILLING PROVIDER INFO & PH# (412) 5551212
Pliside Media, Inc.
PO Box 310442
Des Moines, IA 50331-0442

NUCC Instruction Manual available at: www.nucc.org PLEASE PRINT OR TYPE APPROVED OMB-0938-1197 FORM 1500 (02-12)



PH-MCO Name	Contact	Title	Email	Phone
Amerihealth Caritas	Meghan Stroud	Director, Provider Network Management	mstroud@amerihealthcaritaspa.com	717-920-8331
Geisinger Health Plan	Amy Buterbaugh	Director HealthChoices Business Unit	abuterbaugh@thehealthplan.com	724-351-1168
Health Partners (Jefferson HealthPlans)	Chris Ward	Director, Credentialing & Provider Data Management	cward@jeffersonhealthplans.com	215-991-4424
Highmark Wholecare	Angela Ruber	Provider Contractor	aruber@highmarkwholecare.com	412-255-7266
Keystone First (part of the Amerihealth family of companies)	Kim Beatty	Director, Provider Network Management	kbeatty@keystonefirstpa.com	215-863-6614
United	Jodi Kreger	Director Physician Contracting, Network Management	jodi_kreger@uhc.com	612-383-4607
United	Lavinia Nabors	Sr Clinical Program Manager	Lavinia.nabors@uhc.com	412-297-0051
UPMC	Emily Ott	Manager, Contract Management System	ottea@upmc.edu	412-454-6101



Emily Katz: Executive Director, PAMCO
717-446-4304
Emily@elkatz.com

Gwen Zander: Director of Managed Care Operations, DHS
717-787-1871
gzander@pa.gov

Questions Submitted In Advance by Doula Commission (with Answers by DHS in RED)

1. What is the reimbursement rates for visits and birth attendance? Managed care organizations (MCOs) are to negotiate rates with doulas. The Department will not set a rate that MCOs need to pay.
2. At what point will reimbursement rates from managed care groups be made available? You will negotiate this rate at the time of contracting with each MCO.
3. Where can the managed care billable information be found? Each MCO has provider onboarding materials that will offer you guidance about how to bill for your services. Please refer to the slides for contact information for each MCO.
4. Will there be information shared on how to contract with MA providers? Yes, please refer to the slides.
5. When will we find out the reimbursement rates? You will negotiate this rate at the time of contracting with each MCO.
6. You mentioned we would need to contract with a managed care organization? Would we need to enroll in that before receiving reimbursement? Yes, you will need to be credentialed by and contracted with an MCO to bill for and receive payment.
7. When will we know what the reimburse-payment rates are? You will negotiate this rate at the time of contracting with each MCO.
8. How does this work with managed care groups? are we assigned to one, several. many of us this is very new for You will be credentialed by each MCO individually, and you will have a contract with each MCO. When you are contracted and credentialed with an MCO you are considered to be in that MCO's network. Which MCO(s) you contract with depends on which MCO(s) your clients are enrolled in. Enrollment in an MCO is based on where the client lives. You should ask your client which MCO they are enrolled in. You can also refer to the map to see which MCOs serve which counties. Remember, the county is based on your client's residence, not yours.
9. When will we find out about reimbursement rates? You will negotiate this rate at the time of contracting with each MCO.



Appendices: AmeriHealth Caritas Pennsylvania

- **Contact:** Meghan Stroud
- **Title:** Director, Provider Network Management
- **Email:** mstroud@amerihealthcaritaspa.com
- **Phone:** 570-209-1037
- **Provider Network Website:**
<https://www.amerihealthcaritaspa.com/provider/services/credentialing/index.aspx>

Appendices:

- **Contact:** Amy Buterbaugh
- **Title:** Director HealthChoices Business Unit
- **Email:** abuterbaugh@thehealthplan.com
- **Phone:** 724-351-1168
- **Provider Network Website:** <https://www.geisinger.org/health-plan/providers/join-our-network>

Appendices:



- **Contact:** Chris Ward
- **Title:** Director, Credentialing & Provider Data Management
- **Email:** cward@jeffersonhealthplans.com
- **Phone:** 215-991-4424
- **Provider Network Website:**
<https://www.healthpartnersplans.com/providers/join-our-provider-network/provider-recruitment-form>

Appendices:

- **Contact:** Angela Ruber
- **Title:** Provider Contractor
- **Email:** aruber@highmarkwholecare.com
- **Phone:** 412-255-7266
- **Provider Network Website:**
<https://wholecare.highmarkprc.com/Join-Our-Network/Join-Our-Network>

Appendices: **Keystone First**

- **Contact:** Kim Beatty
- **Title:** Director, Provider Network Management
- **Email:** kbeatty@keystonefirstpa.com
- **Phone:** 215-863-6614
- **Provider Network Website:**
<https://www.keystonefirstpa.com/provider/credentialing/index.aspx#becomeaprovider>

Appendices: UnitedHealthcare® Community Plan

- **Contact:** Jodi Kreger
- **Title:** Director Physician Contracting, Network Management
- **Email:** jodi_kreger@uhc.com
- **Phone:** 612-383-4607
- **Provider Network Website:** <https://www.uhcprovider.com/en/resource-library/Join-Our-Network.html>

- **Contact:** Lavinia Nabors
- **Title:** Senior Clinical Program Manager
- **Email:** Lavinia.nabors@uhc.com
- **Phone:** 412-297-0051

Notes:

- There is a [chat feature](#) available for providers to get quick help with questions.
<https://www.uhcprovider.com/en/contact-us.html>
- UHC will not require credentialing for their Doula contracting process.

Appendices: *UPMC for You* Affiliate of UPMC Health Plan

- **Contact:** Emily Ott
- **Title:** Manager, Contract Management System
- **Email:** ottea@upmc.edu
- **Phone:** 412-454-6101
- **Provider Network Website:**
<https://www.upmchealthplan.com/providers/requests/provider-web-request.aspx?providerType=physicians>