

# Early Childhood Intervention

Big  
Changes  
Are  
Coming



## These things are happening

- Program income will be from billing for services provided
- State ECI office will give smaller grants
- No reimbursement for uncollected billings

## Without proper management, these things could happen

- Financial Deficits
- Decreased staff and family satisfaction
- Perception of lost culture or true lost culture

**You Must Manage**

**Your Agency's Internal  
Processes**

**State System  
Expectations**

**Ongoing Interactions with  
Managed Care  
Companies**



# Critical Responsibility

## Working With Managed Care Companies

- ❑ Finding Your True Costs and Negotiating a Fair Rate
- ❑ Understanding and Communicating Contract Requirements to Staff
- ❑ Managing Productivity
- ❑ Getting Approval, Billing and Successfully Collecting



# RESOURCES

ECI Committee's Billing Committee's Video on Best Billing Practices

Texas Council's Readiness Guide

Managed Care Companies Provider Complaint Process

State Provider Complaint Process

Sample Reports and Tracking Mechanisms from Other Providers

Consultants on Billing, Dashboards, Productivity

Collaborations

Billing Systems





STATE of  
TEXAS  
ACCESS  
REFORM



## Medicaid Managed Care

*Note:  
HHSC manages  
all Medicaid  
health plan  
contracts.*

Statewide Expansion Is Underway

All Counties Will Be in Managed Care Areas  
In March 2012

Expansion Study clear states, Managed  
Care savings are from changing client health  
care utilization patterns, **not from reducing  
payments to providers.**

TEXAS  STAR  
PROGRAM

STAR+PLUS  
PROGRAM  
Your Health Plan ■ Your Choice

STAR Health

 CHIP





Check the  
TMHP website  
for each child to  
find the correct  
**Program** and  
the **HMO**

How is ECI changing in  
relation to managed care?

# ECI: Children Enrolled in Managed Care

9/1/11

- Therapists enroll independently as providers with TMHP.\* MCO may require therapists to go through a credentialing process.
- **PT, OT, and ST evaluations are billed to MCO.**
- **Nutrition, audiology and counseling services are billed to MCO.**
- TCM services are billed to TMHP.
- SST services are reported in TKIDS and billed by DARS ECI.
- Ongoing PT, OT and ST services are reported in TKIDS and billed by DARS ECI.

10/1/11

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- SST services are billed to THMP under same provider enrollment as ECI/TCM enrollment
- Ongoing PT, OT and ST services are billed to THMP under same provider enrollment as ECI/TCM enrollment

3/1/12

- **March 1, 2012\*NEW MCO areas and NEW MCOs**
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- SST services are billed to THMP under same provider enrollment as ECI/TCM enrollment.
- **Ongoing PT, OT and ST services are billed to MCOs.**

How do ECI providers become  
active partners with health  
plans?

# Get Smart

Quantify Challenges  
Create Relationships





Get Smart

Quantify Challenges

Create Relationships

It takes a lot to get paid.

Contract Negotiation

Credentialing

Authorization

Billing

Appeals

Payment

## Contract Negotiation = 30-90 days

- HMO sends template for review
- Provider reviews contract language and rates and proposes changes
- HMO review of changes and sends revised template
- Provider signs contract, with Board approval if required
- HMO conducts a facility site review
- HMO signs contract once credentialing thresholds are met
- HMO loads fee schedule into system

It takes a lot to get paid.

## Credentialing and Loading = 45-120 days

- HMO sends credentialing information, requirements vary by HMO
- Provider complies with requirements and sends in necessary information
- HMO reviews and sends to credentialing committee if required
- Agency or individual provider is credentialed
- HMO loads agency or provider into system, or Center loads agency or provider into system

## Billing and Payment = 30-180 days

- Provider requests and receives preauthorization, if required
- Provider provides service, documents and bills
- HMO adjudicates clean claim as paid, denied or pended within 30 days
- HMO rejects unclean claim within 30 days
- Provider appeals denials, pends or rejections to HMO
- HMO reviews appeals and makes a determination to pay or deny
- Provider appeals to HHSC if necessary

Get Smart  
Quantify Challenges  
Create Relationships

Get to Know the HMOs.

Do your research

Set up meetings

Collect business  
cards

Educate the HMOs on ECI.

Program Philosophy

Specialized Services

Purpose of General  
Revenue

# Get Informed, Stay Informed

HHSC Medicaid and CHIP Managed Care Services RFP

<http://www.hhsc.state.tx.us/contract/529120002/announcements.sh>

HHSC Managed Care Initiatives

<http://www.hhsc.state.tx.us/medicaid/MMC-Proposals.shtml>

HHSC Calendar of Client Education Sessions

[www.txmedicaidevents.com](http://www.txmedicaidevents.com)

Provider Training and Information

[http://www.tmhp.com/Pages/PCCM/PCCM\\_Home.aspx](http://www.tmhp.com/Pages/PCCM/PCCM_Home.aspx)