

G.6. Provider Network

- a. Explain the Contractor's plan to develop a comprehensive Provider Network that meets the unique needs of Kentucky SKY Enrollees. The plan must address the following:
 - i. Approach to contract with PCPs and specialty Providers who are trained or experienced in Trauma informed Care and in treating individuals with complex special needs, and who have knowledge and experience in working with children in Foster Care and those children receiving Adoption Assistance.
 - ii. Recruitment strategy, including processes for identifying network gaps, developing recruitment work plans, and carrying out recruitment efforts.
 - iii. Strategy for contracting and retaining specialists unique to the Kentucky SKY populations and perhaps different from those in the Medicaid managed care Provider network and how the Contractor will provide access to specialists not included in the Provider Network.
 - iv. Process for continuous network improvement, including the approach for monitoring and evaluating Provider compliance with availability and scheduling appointment requirements and ensuring Kentucky SKY Enrollees have access to care if the Contractor lacks an agreement with a key Provider type in a given DCBS Service Region or DJJ Community District.
 - v. How the Contractor will ensure appointment access standards are met when Kentucky SKY Enrollees cannot access care within the Provider Network.
- b. Provide an example of how the Contractor has contracted for similar networks for similar populations in other programs. Provide a workplan to contract with Kentucky SKY Network Providers, with accountabilities and timelines.

Introduction

Passport's Comprehensive Provider Network Meets the Unique Needs of Kentucky SKY Members

Passport currently has a provider network that supports the unique needs of foster children and other potential Kentucky SKY members in all 120 counties of Kentucky. This network continues to grow through recruitment activities and contracting with providers with specialized expertise in the needs of Kentucky SKY members. Passport already provides our members with access to primary care providers (PCPs) and specialty providers who are trained or experienced in trauma-informed care (TIC) and in treating individuals with complex special needs. Currently serving over 5,000 foster care and adoption subsidy members, our provider network supports children in foster care or Department of Juvenile Justice (DJJ) custody and those children receiving adoption assistance.



G.6.a.i. Approach to contract with PCPs and specialty Providers who are trained or experienced in Trauma-Informed Care and in treating individuals with complex special needs, and who have knowledge and experience in working with children in Foster Care and those children receiving Adoption Assistance.

Ensuring Network Providers Offer Trauma-Informed Care to Kentucky SKY Members

Passport will leverage many of our well-established provider recruitment tactics to ensure we have a robust, experienced and trained network of providers to service SKY members. We also target providers using a variety of sources, including:

- Providers recommended by our existing providers, providers requested by our members and providers with whom we have executed single-case agreements
- All providers in any area of unexpected immediate or anticipated shortage, such as providers on staff at contracted hospitals and with nursing and rehabilitation facilities
- Direct provider inquiry
- Suggestions from our more than 100 provider thought leaders who volunteer for Passport committee and workgroup assignments, our medical directors and board members, network providers, and through review of competitor Medicaid provider networks

For the SKY population specifically, Passport will take additional steps to locate, contract with, and train as many qualified providers as possible, in a phased approach:

- 1. Contract with a solid foundation of providers within our existing Medicaid network that we know to have sufficient training and experience in TIC, treatment of individuals with complex special needs, or treatment of children in foster care or receiving adoption assistance.
- 2. Supplement the existing network with additional providers who already have the requisite qualifications.
- 3. Train additional providers.

Passport will establish the expectation of TIC from providers by including language in contracts requiring the use of TIC and evidence-based practices and will monitor compliance to established standards. The contracts will also require orientation to the specific needs of the Kentucky SKY population. Pediatricians and other PCPs may receive basic training on TIC during medical school, with subsequent continuing education. Regardless of any preexisting training they may have had, all PCPs and other providers serving Kentucky SKY members will receive initial training in TIC or be required to document their training. Confirmation of TIC training will be documented in our claims system, which is linked to our provider directory. Passport's TIC training for providers will include the importance of early screening and assessment, consumer-driven care and services, nurturing a trauma-informed and responsive workforce, the use of evidence-based and emerging best practices, creating safe environments, community outreach, and ongoing performance improvement and evaluation.



Another key component to ensuring our PCPs and specialty providers are properly implementing TIC is to ensure that the Passport staff interacting with them have a consistent expectation for TIC within our provider network. Essential to building our network of trauma-informed providers with specific knowledge of the Kentucky SKY population is our dedicated Kentucky SKY Provider Relations liaison, who will have an intimate knowledge of the Kentucky SKY program; Kentucky providers, including behavioral health (BH) providers; and patterns of care/referral in Kentucky. The Provider Relations liaison will also oversee the development and monitoring of training for Kentucky SKY providers, in collaboration with internal and external subject matter experts. This person will also assist with the resolution of provider access and availability issues, be a key resource of knowledge and information, and be an advocate for our Kentucky SKY members and their caregivers.

Further, when Department for Community Based Services (DCBS) or other partners or members notify us of an issue with a specific provider, we reach out to them to provide corrective education to the provider and additional supporting family and community members, as appropriate.

Kentucky SKY Training for Providers

Passport ensures the high standard expectations required to serve its Kentucky SKY members and their caregivers are met and often exceeded. The providers who serve our Kentucky SKY members and Passport's extended provider support team will participate in initial and ongoing training that incorporates the five guiding principles of TIC: safety, choice, collaboration, trustworthiness and empowerment, as well as how these principles can be implemented in a care management setting.

The training is designed to inform training attendees about the unique needs of this very vulnerable population, the role of the caregiver, and the requirements of the Kentucky SKY program, including:

- Early screening and assessment
- Consumer-driven care and services
- Nurturing a trauma-informed and responsive workforce
- Evidence-based and emerging best practices
- Creating safe environments
- Community outreach and partnership building
- Ongoing performance improvement and evaluation

This Kentucky SKY-specific training module will be included in our orientation training for providers who are new to the Passport network, providers who are new to serving our Kentucky SKY membership, and as part of Passport's new hire training requirements. This training is structured to be delivered in an instructor-led setting and also available as a webinar for easy access at any time.



The care and safety of our members in foster care is at the core of the Kentucky SKY program. Passport works closely with providers to ensure that they have the training they need to best serve the unique needs of this vulnerable population.

G.6.a.ii. Recruitment strategy, including processes for identifying network gaps, developing recruitment work plans, and carrying out recruitment efforts.

Ensuring Network Adequacy and Overcoming Accessibility Challenges

Passport assesses network adequacy on an ongoing basis to rapidly identify and close gaps, increase provider capacity by provider type, and seek opportunities to improve access for members:

- Monthly, our Provider Network team applies Quest Analytic tools, an industry-standard platform that combines dynamic time and distance access standards with our minimum contractual provider requirements, to evaluate our overall network adequacy and identify gaps based on standards.
- Quarterly, Provider Relations also reviews access-related feedback from our PCPs, specialty
 providers, care managers, utilization managers, community health workers, member surveys,
 comments from the member call center, complaints, Partnership Council, and external audit of
 providers for compliance with access standards (described in this section below). Additionally, we
 review claims data to identify all out-of-network (OON) providers seen by members to identify
 network gaps. This review is part of our early warning system, alerting us to changes that may be
 required in network recruitment.
- The broader foster care community, including foster parents and community partners, can also be a valuable source for identifying network gaps.

The Provider Relations team then layers in data from population health survey results regarding emerging needs and social factors that affect patient care and access, such as language, ethnicity, gender and special needs. We then ensure our network is sufficiently positioned to deal with the emerging needs. For example, Passport contracts with Phoenix Health Center for the Homeless (Louisville), which offers a unique combination of health care and social need support, including opportunities to find permanent supporting housing, because of its unique abilities to help the growing number of homeless members.

Provider Relations considers the results of the quarterly member access survey, conducted by SPH Analytics, an independent national leader in health care analytics, and our on-site reviews to determine any hidden pockets where network PCPs may be struggling to meet appointment wait time and access standards. This robust monitoring process uncovers any red flags, which are indicators that a provider is struggling or that a panel may overflow provider capacity in the near-term future. After thorough analysis, we notify providers who scored poorly or below standard on any of the nine (9) elements via both mail and the practice's Provider Relations representative (PRR), who discusses mitigation steps with the provider. The provider is resurveyed the following quarter for improvement.

Additionally, Provider Relations reviews the overall results to determine if any long- or short-term challenges are specific to a location, provider type or individual provider. We also monitor member to PCP ratios and appointment and wait times for all services, including BH services, based on Department for Medicaid Services (DMS) standards. When necessary, the Provider Network staff conducts an intense analytic review,



deploying our suite of Quest Analytic tools and GeoAccess analytics down to the local area and the population's health risk and needs risk assessment scores, to determine if additional provider capacity is required. Based on these analyses, Passport develops an action plan for network or provider-type development.

We develop and provide GeoAccess reports to DMS in accordance with this contract and as directed by the Department, using the most recent GeoAccess program versions available in the Quest tool suite.

Accessibility Challenges

Passport recognizes the significant accessibility challenges some members experience due to the barriers of geography, lack of transportation, disability, and other factors. Our ongoing network assessment includes review of these accessibility issues to determine if any additional steps can be taken, outside of recruitment and retention efforts, to mitigate the barriers. These efforts include:

- Our community health workers, who directly assist members with access issues in their communities, linking them to social supports and providers to increase engagement and the likelihood of a continued relationship with the provider
- Our Population Health team, including Care Advisors who assist members most in need, such as those with chronic conditions, and develop pathways for their access
- Emerging telemonitoring technologies

Strategies for Recruitment by Member Health Needs

Provider Network's monthly analysis also reviews member health needs by region across the network to ensure access to specialty services. This includes the BH network, for which Passport controls provider recruitment, contracting and retention. For our subcontractors who provide network contracting, such as vision and dental services, Provider Relations collaborates with, monitors and reviews their network for adequacy.

Passport has extensive experience in developing a strong network around member health needs. For example, when we recognized a growing need for specialty pediatric services throughout the Commonwealth, especially in pediatric cardiology, we contracted with Children's Hospital of Cincinnati and all its locations. This delivered five additional locations throughout Kentucky for a variety of children's specialty services, including Children's Heart Institutes of Louisville and Elizabethtown, and a pediatric clinic in Crestview Hills with a host of pediatric specialties, including pediatric surgery and pediatric rehabilitative services.

In addition to the processes described above, Passport continuously monitors feedback from community partners, state agencies and members to identify areas in which the provider network needs enhancement. When applied behavior analysis (ABA) providers expressed reservations about entering the managed care market, our Health Integration team, composed of seasoned independent practitioners who understand the realities of practice in a managed care environment, provided extensive outreach, working with individual

providers and representatives of the Kentucky Association of Behavior Analysis to educate and support this group of providers in becoming a part of our provider network. The consultation and support provided by our Health Integration team is a key differentiator for Passport in expanding its network.

G.6.a.iii. Strategy for contracting and retaining specialists unique to the Kentucky SKY populations and perhaps different from those in the Medicaid managed care Provider network and how the Contractor will provide access to specialists not included in the Provider Network.

Provider Recruitment and Network Planning

Currently, Passport is meeting all DMS adequacy standards for this population. For future Kentucky SKY members, the Provider Relations team will determine which providers are already in network to meet the needs of our foster care members, identify any gaps and enroll them as needed. As described above, Passport will take the following steps to ensure our network is capable of supporting the SKY population and is as robust as possible:

- Contract with a solid foundation of providers within our existing Medicaid network that we know to
 have sufficient training and experience in TIC, treatment of individuals with complex special needs,
 or treatment of children in foster care or those receiving adoption assistance.
- Scour available datasets to supplement the existing network with additional providers who already have the requisite qualifications.
- Train additional providers.

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See below for **Exhibit G.6-1**, a heatmap demonstrating locations of network providers by provider type.



Exhibit G.6-1: Provider Network Heatmap



Our relationships with providers in the community also help us to project future member needs and build our network accordingly. Our primary care, Federally Qualified Health Center (FQHC)/Rural Health Clinic (RHC), community mental health center (CMHC) and emergency department providers are often the very first to identify new or increasing public health issues, changes in the population demographics, or other member needs. By engaging regularly with these providers and maintaining formal relationships, such as through our Quality Medical Management Committee and our Kentucky SKY Advisory Committee, we ensure that our network is continuously prepared to meet the needs of members.

Provider Recruiting Experience for Specialists Unique to the Kentucky SKY Population

Passport has experience building and managing a provider network that includes specialist providers who serve our unique foster care population. Unlike traditional gap-reactive recruiting strategies tied to network deficiencies, Passport proactively recruits providers by incorporating member needs and feedback from the state on preferred areas for targeting and outreach. We will do this through a combination of:

- Direct mail
- Direct office fax engagement bulletins
- Telephone outreach
- Provider and member feedback through advisory groups
- Co-opting existing relationships with providers and local agencies

Contracting with Unique Specialists

Although Passport has a robust network that serves the unique needs of its members, we are always working to ensure our network contains specialty providers necessary for our foster care population. We perform regular outreach as part of our recruiting process to organizations and professional associations throughout the state who have a great understanding of the specific needs of Kentucky's foster care population. These organizations have experience and implement evidence-based practices in TIC to provide support to adoptive and foster families.

Some organizations we partner with to recruit new specialists to our network include:

- The Children's Alliance
- The Autism Council
- The American Association of Pediatrics
- The Kentucky Counseling Association

We also regularly collaborate with the DCBS as part of our process to recruit specialists. The DCBS makes recommendations for the types of specialists who our foster care population would most benefit from



having in our network. If we need a provider who is not yet contracted in our network, we will initiate a single-case agreement to ensure care is available and provided pending contract finalization.

Passport Partners with the DCBS to Recruit a Provider

A Kentucky DCBS worker approached Passport's Specialty Populations manager to discuss a concern with a teenage foster care Passport member named Tia. Tia was moved to another location for her own safety after witnessing violence in the community and having to testify against the accused.

The DCBS worker stated Tia's foster care agency had given a two-week notice to move the child to a new placement. When asked for more information, the agency stated that Tia had a "bad attitude." The DCBS worker had contacted Tia's foster parent, who said she was willing to keep Tia if she could get more help. At that time, the local agency was only providing individual therapy for Tia twice per month. The agency told the DCBS worker they were unable to provide additional services for the child, even though they had put additional therapy services in place for other children in the same home.

Passport worked with the DCBS worker and the DCBS Central Office to gain these additional services and find a provider in that area who could intervene with Tia and her foster parent. By working together, Passport and DCBS were able to find a collaborative way to meet this member's needs when the foster care agency was unable to remove barriers to care and treatment.

A few days later, the DCBS worker emailed Passport saying, "Thanks so much! We were able to save this placement!"

Names have been changed to protect the privacy of our members.

Retaining High Quality Specialist Providers

Passport's history as a provider-driven health plan has helped it develop unique expertise in what is needed to support the retention of high quality specialists. Our medical directors and the Health Integration team, comprised of doctoral-level licensed psychologists with expertise in a wide range of health care settings, are available for consultation, peer-to-peer discussions, help in understanding the Kentucky Medicaid State Plan, assistance regarding treatment plans or service authorization requests, and other patient care questions or concerns. Our providers are invited to join the Passport medical directors at monthly regional meetings on best practices and to discuss specific community and population needs. These peer-to-peer interactions promote communication to identify provider issues and address them early, as well as to continually build commitment to Passport and strengthen network retention.

Passport has a robust and unique provider support network that includes the following:

- PRRs, including field-based specialists, help providers with operational issues such as claims submission and payment.
- All Passport PRRs are trained and experienced in requirements necessary to serve providers in its Kentucky SKY network.



- The SKY Provider Relations liaison will also oversee the development and monitoring of training for Kentucky SKY providers, in collaboration with internal and external subject matter experts. This person will also assist with the resolution of provider access and availability issues, be a key resource of knowledge and information, and an advocate for our Kentucky SKY members and their caregivers.
- Embedded Care Advisors and community health workers for high-volume or high-risk practices work with providers and members at the point of care.
- Population Health managers provide in-person support to PCPs and practice managers, including analyzing practice data and helping practices make full use of data available through the provider portal, electronic health records (EHRs), and Identifi[™] Practice tools, and facilitate workflow improvements.

Our Provider Relations team works with the providers' offices to facilitate Passport administrative processes, informing providers about our electronic referral process, the Provider Services call center, credentialing processes, authorization services and prompt claims payment through electronic funds transfer. These features have been identified as critical by our specialist and BH providers in previous provider satisfaction surveys.

Furthermore, our model of governance includes providers and consistently incorporates feedback we receive from providers in our network. Providers in Passport's network are engaged in a meaningful way in the leadership and oversight of the plan, ensuring that our processes are member-centric.

Passport has designated field-based PRRs across Kentucky for all provider types, including BH. The team maintains regular contact with Passport's network providers and ensures that they receive the support needed to successfully work with Medicaid members.

Upon assignment of newly contracted providers, the PRRs reach out to the providers with a welcome telephone call or email to introduce themselves as their dedicated PRRs and to make sure they are aware of the many resources Passport makes available to them. During the welcome call or email communication, the PRR will schedule an initial in-person orientation within 30 days of the provider becoming a participating provider in our network. The PRRs use this time to establish themselves as points of contact for the provider on any issues that may arise and to educate the provider about topics, including:

- An overview of Medicaid and the Kentucky SKY program and contact information for the Kentucky SKY Provider Relations leader
- Passport's benefits and programs
- Passport's Provider Operations
- The resources and information available within the Provider Manual
- The many Passport tools and resources readily available to providers
- Access and availability standards
- Member rights and responsibilities
- Provider responsibilities



PRRs visit providers at their offices on a regular basis. Dependent upon the providers' needs, the PRR may schedule monthly on-site visits and be available on an ad hoc basis to visit providers at any time. PRRs stay engaged with providers via telephone, email or other provider-preferred methods. Upon request, the PRR will return to the provider's office to conduct an in-person orientation refresher course or onboard new provider staff at any time.

PRRs document all provider contacts into our database to maintain a record of the visit and ensure all required aspects of the visit type are captured. For example, the Passport Site Visit form prompts the PRR to validate compliance with waiting times, appointment standards and confidentiality of member information, among other site-visit criteria.

Passport's provider services extend beyond the Provider Relations department and encompass crossfunctional departments to provide our providers with the best and most responsive service, which include Passport's Provider Operations; our Clinical, Population Health Management and Community Engagement teams; and our embedded case managers and community health workers. Collectively, the individuals in these positions, in collaboration with our field-based PRRs, have a deep knowledge of the Kentucky provider community and access to extensive Passport resources that have been developed over the past two decades to best serve our providers. This exceptional team of compassionate and highly skilled individuals not only contributes to the development and delivery of impactful training and education to our providers but also is well-positioned to provide one-on-one situational training and support to providers serving Passport's Kentucky SKY members. The Kentucky SKY team will have ready access to Passport's Specialty Populations team, including guardianship specialists and social workers embedded at key locations, who support care management by identifying social supports for members. They focus on reducing member care gaps and providing care coordination to remove barriers to accessing care.

Although Passport has a 96% voluntary provider retention rate, Passport surveys all providers who voluntarily leave the provider network to determine any areas of dissatisfaction with the plan, its staff, administrative barriers, or areas where improvements or changes would have resulted in the provider electing to stay in the Passport network. We use the results to improve provider retention and recruitment efforts and to provide organization-wide improvement. Passport will provide DMS with the provider exit survey and results upon request.

Passport helps providers ensure members receive the right care at the right time and are connected to appropriate social supports. In concert with the high-fidelity wraparound care approach, Passport requires its extended Passport provider support team to complete the same training as its providers who serve members in foster care, noted in section G.6.a.i.



G.6.a.iv. Process for continuous network improvement, including the approach for monitoring and evaluating Provider compliance with availability and scheduling appointment requirements and ensuring Kentucky SKY Members have access to care if the Contractor lacks an agreement with a key Provider type in a given DCBS Service Region or DJJ Community District.

Continuous Network Improvement and Monitoring

Passport uses a suite of Quest Analytics tools to analyze its provider network for access and adequacy. The platform allows us to build template documents based on housed provider data, including access distances and adequacy ratios, for complete and ongoing analysis, including:

- **Proximity Standards:** An analysis of Passport members' actual access against each contracted proximity standard, including by provider type, to ensure compliance and ongoing monitoring
- **Predictive and Prospective Analysis:** A review of the network to assess the impact of the potential provider recruitment efforts or voluntary loss or termination of a provider or provider group to prospectively protect member access in cases of provider shift
- Visualization Reports and Geomapping: Quickly highlight any gaps or potential gaps

Quest allows for streamlining adequacy and access thresholds using native data specifications, including distance by mileage or time, and can be appended to project templates and exported into Microsoft Excel workbooks. Using this suite of technology allows for repeatable and accurate analyses to support Network Services and leadership review and action.

The Proximity Standards Report (**Exhibit G.6-2**) provides analysis of PCPs and other specialties and provider types by geography. Adequacy is divided into rural and urban coverage of geographies for measurement using DMS standards. Calculation of the raw data produces adequacy percentages using Excel formulas that have been programmatically established, tested and confirmed for accuracy. Output allows for quick ongoing review of our network against all contractually required or internally driven access standards



Exhibit G.6-2: Proximity Standards Report Sample

Percent of Members Within	Standard	Passport 2018 Q1-2019 Q4						
Contract Terms								
Sixty (60) miles of a hospital (rural)	100%							
Thirty (30) miles of a hospital (urban)	95%	100%						
Forty-five (45) miles of a primary care provider (PCP)/primary care (rural)	95%	100%						
Thirty (30) miles of a PCP/primary care (urban)	95%	100%						
Sixty (60) miles of a dentist	95%	99.87%-100%						
Sixty (60) miles of vision services	95%	100%						
Sixty (60) miles of a laboratory	95%	100%						
Sixty (60) miles of a radiology services	95%	100%						
Thirty (30) miles of a pharmacy	95%	>95%						
Selected Physician Specialist								
Sixty (60) miles of an allergist	95%	98.86%-99.95%						
Sixty (60) miles of a cardiologist	95%	100%						
Sixty (60) miles of a dermatologist	95%	98.34%-99.98%						
Sixty (60) miles of a Durable Medical Equipment (DME)	95%	100%						
Sixty (60) miles of a gastroenterologist	95%	97.38%-97.48%						
Sixty (60) miles of a general surgeon	95%	100%						
Sixty (60) miles of a neurologist	95%	100%						
Forty-five (45) miles of an OB/GYN	95%	100%						
Sixty (60) miles of an orthopedist/orthopedic surgeon	95%	100%						
Sixty (60) miles of an otologist, laryngologist rhinologist	95%	100%						
Sixty (60) miles of a pathologist	95%	100%						
Sixty (60) miles of a psychiatrist	95%	100%						
Sixty (60) miles of a urologist	95%	100%						

We also generate predictive and prospective access reports. Predictive reports assist in recruiting so we can determine the impact on network adequacy of adding a particular provider or group. Prospective access reports allow for assessment of potential impact of a pending voluntary provider loss or termination of a provider. We then use the results of the analysis to develop recruiting strategies and maintain network balance and compliance. **Exhibit G.6-3** is a sample of these reports.



Daviess, KY	2,047	DMS Network w DME - Access	With	2,047	100.0	1.5	2.3	2.6
		1 in 60 miles	W/o	0	0.0			
		DMS Network wo DME - Access	With	2,047	100.0	1.0	1.3	1.4
		1 in 60 miles	W/o	0	0.0			
		DMS Network w General Surgeon - Access	With	2,047	100.0	2.8	3.0	3.0
		1 in 60 miles	W/o	0	0.0			
		DMS Network wo General Surgeon - Access	With	2,047	100.0	1.0	1.3	1.4
		1 in 60 miles	W/o	0	0.0			
		DMS Network w OBGYN - Access	With	2,047	100.0	2.5	2.9	3.2
		1 in 45 miles	W/o	0	0.0			
		DMS Network wo OBGYN - Access	With	2,047	100.0	1.0	1.3	1.4
		1 in 45 miles	W/o	0	0.0			
		DMS Network w Ortho/Ortho Surgeon - Access	With	2,047	100.0	2.9	3.1	3.5
		1 in 60 miles	W/o	0	0.0			

Exhibit G.6-3: Predictive/Prospective Access Reports Sample

Passport also uses visualization and geomapping as an additional method of quickly assessing network coverage. We develop geomaps as an accurate visual representation of the network plus geomaps against predictive and prospective access reports. A geomap can highlight potential geographic gaps if providers in a specific region may or are no longer participating with Passport. **Exhibit G.6-4** is a sample of this tool

Exhibit G.6-4: Geomap Report Sample



In monitoring our network for adequacy, we will deliver to DMS all required reports using the most recent GeoAccess program versions available and updated periodically on the timeline defined by DMS. All reports will be produced in compliance with the requirements of Draft Contract Section 28.4, and Passport will fully comply with KRS304.17A-515 and all required accessibility standards. Below, we describe ongoing monitoring efforts across the network.

Passport Success Story: Personalized Outreach to Fill Network Gaps

In December 2015, Passport identified the need for ambulance providers in Region 6, Northern Kentucky. Using the Lead Tracker for potential OON providers, our PRR was able to retrieve a list of potential candidates for contracting for our members. She made multiple personal contacts. By August 2016, over 20 ambulance companies signed contracts to participate with Passport, and these ambulance companies remain part of Passport's network.

Network Adequacy Measurement: Each month, Passport leverages Quest Analytics (an industry-standard solution for measuring network adequacy) to identify network gaps. Passport reviews Care Management (CM), utilization management (UM) and claims data on a quarterly basis to identify OON providers used by members, along with access-related feedback from members, referring providers, care managers and utilization managers. This information, in conjunction with reference to the DMS Master Provider File, identifies additional options for provider recruitment:

- Verification: Passport uses Identifi, a web-based provider data management tool that maintains our provider file. Identifi also populates the provider directory, supports network adequacy analytics provided through Quest Analytics, and is used to verify that any network gaps are closed. Identifi allows our network managers to track the collection of feedback related to provider access from the CM, Member Services and Population Health Management departments. This Passport departmental feedback, along with any identified network gaps, verifies the identification of providers for recruitment.
- **Remediation:** Using our Lead Tracker process, Passport develops a recruitment work plan and then conducts outreach to providers in person, via phone and over email to invite them to join our network. This action plan approach, along with filling immediate needs through single-case agreements, serves as a remediation process for network gap closure.

Availability and Wait Times Measurement: Providers must comply with contracted availability and wait times, such as appointment times not exceeding 30 days from the member's request for routine and preventive services and 48 hours for physical and BH urgent care, and counseling and medical appointments within 10 days for members under age 18 years or as soon as possible for voluntary family planning, counseling, and medical services (if the provider cannot provide complete medical services within the 10 days) and for all members within a maximum of 30 days.

- Verification: Passport contracts with SPH Analytics, an industry leader in measuring and analyzing provider performance, to conduct quarterly reviews of our provider network for availability and wait times. Results are analyzed by state, region, local area and individual provider to examine overall compliance with standards.
- **Remediation:** We take every possible step to ensure compliance with availability and wait times. We intervene with noncompliant providers, remediate conditions that led to the noncompliance, and re-survey the member the following quarter for satisfactory, compliant performance. Providers who do not meet standards going forward are subject to our policies and procedures on corrective action, continued monitoring and possible termination from the network.

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PASSPORT

 $HEALTH \star PLAN$



Process for Providing Out-of-Network Care

Access to Out-of-Network Providers

If Passport does not hold a contract with a key Provider type in a given DCBS Service Region or DJJ Community District, or an in-network provider does not meet appointment adequacy standards, Passport ensures that members can access medically necessary care, including services from an OON provider, when needed and appropriate. We address immediate service needs through our policies on OON coverage for emergency services. To address short-term needs for OON services, we use single-case agreements. Our long-term approach is to recruit OON providers into our network.

If a member requires immediate, emergent or urgent care services and is not near or cannot access a contracted provider, we advise him/her to go to the nearest treatment facility. We support this through documented Passport policies, which we communicate through our contracted providers, Member Services and Member Handbook. OON emergency services are available without any financial penalty to the member.

If the member has any issues securing a visit with a specialty care provider, Member Services or Care Management staff can assist the member by contacting the OON provider to help secure a timely appointment that meets DMS standards.

Educating Out-of-Network Providers

Passport recognizes that it is responsible for ensuring OON providers understand the Kentucky Medicaid program and its policies and procedures, including access standards. Our Provider Relations staff will contact the provider to explain these program elements and standards. We also make them aware of other available resources, including our provider website, which gives them access, for example, to provider manuals that include member rights and responsibilities, our coverage policies and provider updates. Providers can also find information on the website about how to join the Passport network.

Using Single-Case Agreements

If our existing network does not meet a member's specific health needs, Passport uses single-case agreements. Our UM team, which performs the assessment of the member's health needs, forwards cases that require continuity of service coordination to our service coordinator/care manager for review and discussion with the medical director. If the medical director deems that services from the OON practitioner are medically necessary, we take the following actions:

- Our UM department reauthorizes the services to be provided by an OON provider.
- We check to verify that the provider is licensed, that there are no licensure sanctions, that the provider is enrolled with Medicaid, and that the provider is not listed in the Office of the Inspector General (OIG) List of Excluded Individuals or Entities or the General Services Administration (GSA) Excluded Parties List when we authorize care.

- Our Network team approves either a comparable in-state/network rate, the State Medicaid fee-forservice rate, state-approved OON provider payment methodology, or a negotiated fee schedule and incorporates that fee approach into a single-case agreement for the member.
- Our Provider Relations staff will encourage the OON provider to join the network.
- If the OON provider does not join our network, our UM team develops a strategy to coordinate a member's transition to a network provider once the member is stable or if the care requires longterm treatment that is available from a network provider.

Establishing Prior Authorizations for Out-of-Network Providers

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H E A L T H 🛧 P L A N

When a member needs to access non-urgent care outside of the Passport network, the PCP or OON provider contacts the UM department to secure an authorization. During the authorization process, the UM team reminds the OON provider of the timely access requirements for urgent and routine appointments. The Provider Services call center is available to respond to OON providers' questions and assist them with the OON service authorization process.

Our OON service authorization includes review by a UM nurse, in collaboration with the care coordinator or the member's care manager (if enrolled in care management), and as determined appropriate by the UM medical directors. The UM nurse confirms the requested service is medically necessary and is not available or accessible from a network provider. The UM medical directors review all OON requests to ensure appropriate use of services. The medical directors are also available for peer-to-peer consultation with the OON provider and the member's other treating providers.

We continue to authorize OON services for as long as medically necessary and until we can meet the member's need with an in-network provider. To ensure continuity of care, we may choose to extend the OON authorization until the member's course of treatment is complete, even if an in-network provider is identified.

Coordinating Care with Out-of-Network Providers

Our UM and care management processes coordinate services from OON providers, ensuring the services are appropriate and consistent with the member's identified needs. The care coordinator or care manager coordinates services with the member's other providers, including the PCP, and provides appropriate medical records, including copies of the member's care plan, to the member's PCP and treating providers, including the OON provider.

If the member has not been part of our care management program, we evaluate the request for OON services to determine whether it represents a potential acute care episode that requires case management or is an indicator of a chronic condition that would require ongoing care management. If so, we will contact the member to offer enrollment in case or care management, explain the benefits, and, if accepted, begin the assessment and care planning process.



Encouraging Out-of-Network Providers to Join Our Network

The UM nurse also notifies Provider Network staff about requests and authorizations for OON services. Provider Network then contacts the identified OON provider and invites the provider to join the network. If the provider is agreeable, a Provider Network specialist initiates the contracting and enrollment process. If the provider is not willing to immediately join the network, we create a single-case agreement, and the Provider Relations staff instructs the OON provider on how to obtain access to the Passport's website, which includes resources the provider can use to join the network at any time. We also provide materials to the provider via fax or by mail if the provider has no internet access. Provider Network also initiates provider recruitment and contracting efforts to identify available providers of the same specialty type able to meet the member's needs and willing to join our network.

C.6.a.v. How the Contractor will ensure appointment access standards are met when Kentucky SKY Members cannot access care within the Provider Network.

Supporting Members in Accessing Out-of-Network Care

If a member has to use an OON provider until we secure in-network care that complies with the time and distance standards, Passport's Care Management team works with the DMS transportation vendor to arrange transportation for the member. The authorization of out-of-area travel is an active part of every specialty provider selection consideration by Passport UM staff when no provider exists in our network. Passport may also consider other transportation options as medically necessary.

As indicated in our process and supporting explanations above, we do several things to support members in accessing OON care. The most important element underlying this support is to simplify the process for members so that they can access the care they need through the following:

- Ensure we understand the member's needs. Passport recognizes that the support system for the SKY population extends far beyond the members themselves, including foster parents and other community supports, so understanding the member's needs here is a more extensive process that should include feedback from all involved parties.
- Help the member find the care they need, whether that is encouraging an in-network Provider to open an appointment slot, finding an OON provider, or offering alternative options, including transportation or telehealth.
- Ensure the member understands the process, explaining to them the difference between in-network and OON care while assuring them that Passport will pay for covered services and that they should not receive a bill from a provider for those services.
- Explain the coordination of care process and that the member might hear from other Passport team members who can help make sure that his/her encounter with the OON provider goes smoothly and that we will help coordinate activities between that provider and the member's other providers
- Tell the member how to seek help if he/she needs it at any time in the process.



C.6.b. Provide an example of how the Contractor has contracted for similar networks for similar populations in other programs. Provide a workplan to contract with Kentucky SKY Network Providers, with accountabilities and timelines.

Passport's Experience with Similar Programs

The Passport team has provided services for the Kentucky SKY population for 22 years, including BH since 2014, contracting with providers to meet the needs of this population for the duration of this time. We have demonstrated success in contracting in innovative ways to build the provider network for foster youth and also in creating services unique to the Kentucky SKY population. Here are some examples of experience Passport has providing networks for similar populations in other programs.

Passport Success Story: Satisfying Member's Out-of-Network Needs

A member, a toddler whose family did not speak English, had a painful cyst in her eye that required surgical removal. The family wanted to take the child to an ophthalmologist who was not in Passport's network. After discussing the issue with the family, Passport agreed to cover the child's surgery performed by the recommended ophthalmologist and arranged for the toddler's medical treatment.

Passport High Fidelity Wraparound Foster Care Pilot Program

Elsewhere in this proposal, Passport has extensively described the collaborative process of developing an intensive care management pilot in conjunction with DMS, Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID), and DCBS. This pilot resulted in more children and youth living with natural or adoptive families, improved adaptive functioning for participants, and decreased per member per month (PMPM) cost in care in the period following intervention. These outcomes were obtained by contracting with two local provider organizations, Centerstone Kentucky (Seven Counties Services) and ResCare. To serve as providers, these organizations had to commit to being trained in high fidelity wraparound care management and to receive regular coaching and feedback. Passport monitored the fidelity of their services using nationally recognized measures. Independent assessment indicated that a high degree of fidelity in implementing the model was achieved in keeping with national findings. Through this process, Passport also gained experience in the types of support needed to successfully address specific service needs through contracting. Since the initial pilot, Passport has continued to evolve its broader relationship with Centerstone Kentucky into a shared savings model value-based arrangement.

Passport's Trauma-Focused Cognitive Behavioral Therapy Program Initiative

Passport noticed a trend of adolescent members who were in and out of the hospital due to behaviors rooted in their trauma history. Members were sometimes sent out of state due to inability to get needed trauma treatment in-state. Passport determined that these members needed a longer length of stay in an acute environment to address their trauma using an evidence-based or evidence-informed practice. Some



providers were willing to partner in this effort but needed clarification on licensure issues. Passport worked with providers to identify evidence-based solutions for trauma, and they jointly determined that traumafocused cognitive behavioral therapy (TF-CBT) seemed appropriate. Passport worked with providers and discussed the issue with DBHDID regarding member needs and perceived licensure barriers. DBHDID spoke with OIG, and OIG gave approval for providers to offer the needed service at an extended care unit (ECU) level of care in an acute setting. Passport developed an authorization process and a rate to support participation for the ECU level of care through the early and periodic screening, diagnosis and treatment (EPSDT) benefit. With those steps taken, River Valley Behavioral Health was able to begin serving Medicaid members in this unique program.

The success of this program was described in detail earlier in this proposal response. Of the participants, 60% were in foster care, and over the past six years, we have seen a 75% reduction in residential/facility (including psychiatric hospital stays) post-intervention among those who complete treatment. These accomplishments again reflect Passport's understanding of the Kentucky regulatory environment, its strength in listening to and working with providers and governmental partners, and its ability to contract in a way that meets the unique needs of the Kentucky SKY population.

Passport Participation in the Building Bridges Initiative

Passport has been fully supportive of the DCBS Building Bridges Initiative, which emphasizes that "children grow best in families, within supportive communities and through empowering partnerships." We are committed to participating in a system of care that is youth-guided and family-driven. Passport believes that the Kentucky SKY contractor has a unique opportunity to support this effort by emphasizing the Building Bridges Initiative (BBI) principle of achieving "sustained positive outcomes" in its contracting relationships with providers. We intend to pilot incentives and other value-based arrangements that reward providers for achieving stability in placement and, when possible, successful transition to a permanent family; reduction in trauma (specifically incidents of restraint and seclusion); promotion of participation in developmentally appropriate community engagement; and improved care coordination at the provider level. Although the capacity of providers to participate in these arrangements will vary, Passport will explicitly address the need for youth's sustained future success in contracts with all childcare and child placing agencies. This emphasis is intended to move the focus of our relationship away from day-to-day control of behavioral problems and into one where services are designed with long-term success in view.

Passport's Kentucky SKY Contracting Work Plan

Passport's Kentucky SKY contracting work plan, which includes contracting accountabilities and timelines, can be found in **Exhibit G.6-5**.



Exhibit G.6-5: Passport's Kentucky SKY Contracting Work Plan

			Assigned
Contracting Task Phase 1—Build the Foundation: Identify and contract with providers currently participating in Passport's network that are equipped to provide care for the SKY population.	 Responsibilities Identify providers who have sufficient training and experience in TIC, treatment of individuals with complex special needs, or treatment of children in foster care or those receiving adoption assistance. Ensure appropriate language is incorporated into contracts (includes negotiation and signature of contract amendments). Confirm adequacy and access standards are met. 	Time Frame Six months prior to Go Live through Go Live	Resource Provider Relations Contracting
Phase 2—Expand the Network: Identify and contract with providers who already have the requisite qualifications for providing care for the SKY population but are not yet in Passport's network.	 Using available datasets (including network analyses via Quest Analytics, Kentucky Medicaid Provider Master File, Provider Relations, and other community resources), identify additional target providers. Negotiate and execute contracts with target providers. Conduct credentialing and provider load activities. 	Ongoing	Provider Relations Contracting Credentialing, Provider Data Management
Phase 3—Train: Facilitate training to build additional expertise within the existing Passport network.	 Identify additional providers within Passport's existing network who have not yet been trained in TIC but show both a willingness and a track record of providing high quality care that would demonstrate the needed capabilities. Facilitate procuring specialized training for this subset of providers. Once these additional providers are sufficiently trained and have the requisite experience, negotiate and execute contract amendments that incorporate appropriate language for servicing the SKY population. 	Ongoing	Provider Relations Contracting



Conclusion

Passport is committed to recruiting a provider network that is focused on the unique needs of the Kentucky SKY population. Furthermore, through explicit contracting requirements, initial and ongoing training, and innovative contracting, we are committed to ensuring a high quality of services to Kentucky SKY members. Our robust network already serves this vulnerable population and will serve as the basis of building provider resources throughout Kentucky. By building a collaborative, comprehensive partnership with providers, we continually strive to ensure timely access, TIC and evidence-based practices that our members can depend on. As we have throughout our history, Passport will continue to collaborate with DMS, DCBS, DBHDID and DJJ, as well as with the providers who support Kentucky SKY members, to ensure that information is shared freely and that, together, we remain focused on providing the best, most appropriate support possible for each member. Passport is passionate about supporting this vulnerable population and has the experience necessary to support Kentucky SKY members.

Passport has been honored to serve the Kentucky Medicaid and foster care populations for 22 years and will continue to comply with all provisions of the Medicaid Managed Care Contract and Appendices (including Kentucky SKY) as we continue to serve them in the future.