

## Care Transitions Peer Hour

### *Frequently Asked Questions*

**Question:** How are the patients/families told about this service? We are finding that most of our referrals are refusing the service because they think it's a scam. Even after they are told about it by hospital discharge staff?

**Answer:** Individuals who are not aware of your agency or your purpose, may need more information or authentication about the program before disclosing their personal details to a stranger. SARCOA has addressed this in two ways. First, we offer professionally produced print materials which contain agency description, program description and contact information. These materials may include our agency directory, program brochure and business card and may be distributed by either the hospital or the agency staff.

Second, we work with the hospital case managers and discharge planners to help identify and refer potential candidates for the program. The program is normally presented by the hospital discharge planners as a referral to the SARCOA transitions coach, which adds legitimacy to the service. Ideally, the program is integrated into the hospital discharge planning process as a routine practice to screen all patients. As a result, there is less potential for the beneficiary to think that the service is not legitimate since the referral originates from a trusted hospital source.

SARCOA is fortunate to have a dedicated person on-site in the hospital case management department of the largest hospital in our region. But for most of our hospitals, we rely on the local hospital case managers and discharge planners to identify potential patients and then present the program to them prior to hospital discharge. Then the SARCOA transitions coach conducts outreach and engagement during the hospital stay, based on the hospital discharge planner referral.

**Question:** What accreditation was needed for SARCOA's care transitions program?

**Answer:** SARCOA currently has a three-year NCQA Long-term Services and Supports Case Management accreditation (NCQA-LTSS). NCQA accreditation is not required to provide care transitions, although care transitions are a core element of the standard accredited process. While not required to implement hospital care transitions, the structure of the accreditation process required that SARCOA have a formal policy and procedure for implementing care transitions and an integrated information technology (IT) system to support the implementation of care transitions. The rigor required to successfully achieve accreditation placed SARCOA in a better position to have the capacity to implement the hospital care transitions program, when the opportunity became available.

**Question:** Does the program help patients out of long-term care that do not have a full-time caregiver? If so, how? Which services are being provided?

**Answer:** Yes. The caregiver is needed to provide back-up care and support for the individual but does not have to be full-time. This care transitions program will assist eligible beneficiaries, with enrollment in the Alabama Community Transitions (ACT) waiver. (The name of this waiver will vary by state under the Medicaid Money Follows the Person.) SARCOA works with the Alabama State Unit on Aging and Alabama Medicaid Agency to expedite the Hospital to Home enrollment process into the ACT Waiver. If the beneficiary is approved for the ACT Waiver, then the beneficiary becomes eligible for a range of services. An abbreviated list of services that are covered by the ACT Waiver includes the following:

- Case management
- Personal care
- Homemaker
- Skilled/unskilled respite
- Meals
- Limited home modifications

**Question:** What technology platform and screening tool is Alabama using for their Area Agencies on Aging (AAA)?

**Answer:** SARCOA received state funding for a case management technology pilot that was later expanded to all Alabama AAAs. The technology was then developed to facilitate accreditation standards to support all AAAs in a successful NCQA LTSS Case Management accreditation. The Global Vision Technologies (GVT) technology platform that is used is called FamCare. FamCare is a HIPAA-compliant, cloud-based, software as a service (SaaS) technology solution. The software is managed for the Alabama AAA network locally by SARCOA IT staff.

**Question:** Could you describe how Alabama bills for TCM under Medicare FFS? What form, what procedure code etc.?

**Answer:** SARCOA has an agreement with a local physician group practice to provide care management and transitional care management services. The agreement, with the physician group, designates SARCOA as a third-party care management entity to provide hospital transitions and care management services. These services are provided under the general supervision of the physician group practice. The physician group practice submits all claims to Medicare for transitional care management and chronic care management services. The physician group is the Medicare provider, that is responsible for all Medicare FFS claims submission. The current list of Medicare-approved care management services and codes, listed in the Federal Register, include the following CPT® / HCPCS Codes\*

CPT® / HCPCS Code	Description
99496	Transitional Care Management, high medical complexity (7 days)
99495	Transitional Care Management, moderate medical complexity (14 days)
G0506	Chronic Care Management Initial Plan of Care
99490	Chronic Care Management
G2058	Chronic Care Management, non-complex, ea. additional 20 minutes
99487	Complex Chronic Care Management
99489	Complex CCM, ea. Additional 30 minutes

\* CPT® is the registered trademark of the American Medical Association. All rights reserved. Any use or reprinting of CPT content in any product or publication requires license.

**Question:** How do you bill Medicaid for administrative claiming if they aren't yet enrolled in Medicaid?

**Answer:** The Alabama Medicaid Agency has an approved 1915c waiver that allows for reimbursement for administrative work to provide outreach and eligibility assistance to potential beneficiaries. The 1915c waiver reimburses administrative work to conduct beneficiary outreach and eligibility assistance with a required 50% Federal funding match. The 1915c waiver requires that the State of Alabama use a non-Federal funding source to pay the required 50% State funding match.

**Question:** Could you please comment on marketing services in the hospital setting?

**Answer:** SARCOA uses a range of services to market services in the hospital setting. The methods used to market SARCOA transitional care management services include oral presentations to hospital staff, direct-to-consumer marketing, print media, and social media. SARCOA designed the print media which was professionally printed. In order to increase marketing to hospital staff, SARCOA engaged a marketing firm to develop a YouTube video. The hospital discharge staff, medical staff, nursing staff, and consumers are able to access the SARCOA YouTube video to learn more about the transition services and Alabama Community Transitions (ACT) Waiver.

A link to the SARCOA care transitions YouTube video can be found using the following link:  
<https://youtu.be/33hDOug4luY>