

Updated Beacon responses:

Utilization review: How will providers understand your systems, including how to request services, how to appeal any denials of services, and how to submit backup materials to support requests for services?

- An hour long Webinar for all BHCA providers is scheduled for 6/24/2019. This will be a taped webinar and will be available on the Beaconhealthoptions.com website moving forward for provider reference.
- Webinar will cover, among other things, the following:
 - Coverage requirements and excluded services (FS&T, TM) Yes
 - Member eligibility criteria – how to determine if a member is eligible for services Yes
 - Medical Necessity Criteria and where to find the MNGs Yes
 - Phone numbers to call with questions Yes
 - Initial authorization and concurrent review requirements and processes yes
 - Standard educational information about [carrier] website resources, submitting claims, etc. These are existing Beacon providers that are familiar with our processes. When expanding our network for access, this is the information that a CBHI team member (Operational Manager) does with all incoming providers during readiness meetings.
- If providers are not able to attend the webinar, it will be recorded and posted to the [insert] section of the [carrier] website. The Webinar will be posted to the Beaconhealthoptions.com website.
- An article about BHCA services was included in the [date] [carrier] Plan Provider Update. The article included links to all relevant materials, including the applicable Medical Necessity Guidelines and Payment Policy. Our Provider Notification was sent to all providers on 5/16/19. This was accompanied by Performance Specs and MNC copies, as well having included a great deal of detail around billing, authorization processes, etc.
- An article reminding providers of the 7/1/2019 BHCA implementation will be included in the [date] [carrier] Provider Update. Providers have been notified again on 5/31/19. Providers will be notified again on 6/4/19 to include service definitions, i.e. billing parameters. Beacon will be attending the 6/6/19 meeting with DOI and ABH for any further questions.

1. Credentialing: How will providers understand how any credentialing systems may apply to them and what materials may need to be submitted for the credentialing process?

The providers that [carrier] is pursuing contracts with are either already contracted with [carrier] for the CBHI services [if applicable] or contracted with Commercial for other BH services. There will be no additional credentialing requirements for these providers. Correct.

If [carrier] is pursuing a contract with a provider that does not already have an established contract with [carrier], the requirements for Credentialing will be identified during the contracting process. These are the standard credentialing processes that apply to all [carrier] providers. When we expand the network, as discussed above, we will meet with providers and discuss clearly the process for coming in network, including the credentialing process.

2. **Billing for Services:** How will providers understand how to submit claims for reimbursement of medically covered services, including the identification of appropriate codes for BHCA covered services? What materials will your plan make available to explain your company's system to process claims? **These are existing Beacon providers that are familiar with our processes. Any new providers will be given detailed instructions upon readiness to begin services.**
- The above mentioned Webinar for all BHCA providers will also cover, among other things, the following:
 - o Claims submission process
 - o [carrier] Website Resources
 - o **The Webinar will include the following topics:**
 - Background
 - Who this affects
 - How to figure out which families this affects
 - Medical necessity/Specs/Service defs for each of the three services starting 7/1/19 (MCI/CBAT and ICBAT will not change)
 - Clinical reviews, including phone numbers/links
 - Authorization parameters and backdating
 - Continuity of Care
 - Denials and Appeals processes
 - Contact information
 - If providers are not able to attend the webinar, it will be recorded and posted to the [insert] section of the [carrier] website. **The Webinar will be posted to the Beaconhealthoptions.com website.**
 - Applicable procedure codes are included in the provider contract. **Procedure codes are in the provider amendments. Beacon is keeping the same codes for BHCA services as for CBHI services.**
 - The applicable procedure codes are in each Medical Necessity Guideline (MNG), which are available in the provider resource center of the [carrier] website. Also included in each MNG is a link to the applicable Payment Policy. **Our Medical Necessity criteria does not include this. However, the procedure codes are listed in their contract amendments and their historical CBHI documentation.**
 - The [name applicable] Payment Policy has been updated with information about BHCA services, including the procedure codes, modifier requirements, unit maximums and authorization/notification specifics. This payment policy is available in the [insert specific area] of the [carrier] website, and is also linked in each applicable BHCA service MNG. **This information is available in the provider contract amendments and provider manual.**
 - **All providers will receive an email with links to all relevant documents.** If no email address is on file, copies of the documents will be mailed to the provider. **CBHI Program Manager has been emailing regularly with our provider network. They are aware that they can reach out to her or her staff with any questions. Phone numbers have been provided.**

Providers interested in joining the Beacon network can contact the dedicated number for Beacon/Fallon at 1-888-421-8861. Providers will have the option to choose a specific area they are interested in joining. There are also prompts for claims questions, contracting questions, clinical questions, etc.