Inclusa has been working to align various internal processes, including the methodology we use for setting residential Care and Supervision rates. Beginning in January, our rate methodology will reflect the Wisconsin Department of Health Services’ 2017 regression model for all Inclusa residential providers. This will ensure that rates set using Inclusa’s methodology will accurately reflect the state’s updated scoring of the Long Term Care Functional Screen. This implementation has two parts, and will be effective 01/01/2018:

- Rates in Geographic Service Regions (GSRs) 1, 3, 4, 5, 5-6, 7, and 14, which had been determined using the state’s 2015 regression model, will be transitioned to the updated methodology that uses the 2017 regression model.

- Rate setting for the legacy Western Wisconsin Cares service area (GSR 2) will no longer use the legacy rate process and will use the same rate methodology as all other Inclusa service areas.

Therefore, all residential rates will be reviewed as part of this transition.

Transition Plan for Current Rates
Our focus in this transition is to assure as little disruption as possible for members and providers.

(continued on page 3)
Influenza Vaccine Submission Reminder for Residential Providers

The single **BEST** way to prevent the flu is to get a flu vaccine **EACH** year. As part of Inclusa’s contract with the Wisconsin Department of Health Services, we are required to submit the influenza and pneumonia immunization rates of our members. To assist us in tracking the immunization information of the Inclusa members you support, we ask you to please send the data by using this survey link: [www.surveymonkey.com/r/FluPrevention2017](http://www.surveymonkey.com/r/FluPrevention2017).

In early October you received a detailed communication outlining this submission process. Please submit data per facility location and only include dates when an actual vaccination or decline occurred (no future dates). **Important note:** while members have the right to refuse the vaccination, we still want to capture this information in the survey.

We understand how busy your staff are, and through this collection process we hope to reduce contacts from care teams inquiring about vaccination information for Inclusa members. If you have any questions about this process, please contact the Quality Innovation Department at [QualityInnovation@inclusa.org](mailto:QualityInnovation@inclusa.org).

PHI Email Security is Provider Responsibility

Organizations can send Protected Health Information (PHI) via email, if the information is secure and encrypted. Providers are responsible for ensuring that messages are properly encrypted if they are sending any email containing PHI to Inclusa.

If Inclusa receives apparently unsecure PHI email, we will send you the following reminder: “Your last email and/or its attachments were transmitted via an unsecure email which appears to contain information that may be considered Protected Health information (PHI). As a reminder, all electronic correspondence to Inclusa containing PHI must be transmitted via secure/encrypted email in accordance with HIPAA regulations. Thank you for your attention to this matter.”

As the sender of the email in question, it will be your responsibility to properly investigate the HIPAA incident and be able to demonstrate to any outside agency (including the U.S. Department of Health and Human Services) that the incident was or was not a HIPAA breach. You must also be able to show what you (as sender) did to mitigate any breaches and complete all proper notifications.
New Rate Methodology (continued from page 1)

In order to ensure a smooth transition while working toward continued movement of rates into the new methodology, a transition logic was created to develop rates for any existing placement for the first year of full implementation. For more information about the rate model and transition plan, please see the Residential Rate Methodology Presentation at www.inclusa.org/providers/resources.

Opportunities to Discuss New Rate Methodology

To support a collaborative approach to this change, Inclusa has created opportunities for providers to request both member- and provider-specific reviews. Additionally, there will be an opportunity for providers to meet 1:1 with Inclusa Community Resources/Provider Relations staff during November and December to discuss any concerns they have. To schedule an individual meeting to discuss our approach to establishing 2018 rates for members you support, please contact: InclusaRates@inclusa.org.

Rate Packets

Informational packets containing important details about the new Residential Rate Methodology were mailed to residential providers on 11/01/2017.

If you have not received your rate packet:

please contact InclusaRates@Inclusa.org as soon as possible.

If you have questions about the information in your packet, please contact:

- Jan Ash – Jan.Ash@inclusa.org 715-598-2448
- Becky Kuehl – Rebecca.Kuehl@inclusa.org 715-301-1652
- Linnea Fiser – Linnea.Fiser@inclusa.org 608-785-3630
- Karla Lubinski – Karla.Lubinski@inclusa.org 608-785-9903

1-2 Bed Adult Family Home providers, please contact:

- Angela Young – Angela.Young@inclusa.org 608-647-1531

Though current placements may experience rate increases or decreases as part of this transition, the purpose of the new methodology is to better align rates with the acuity of the member and level of service provided.

Thank you for your ongoing partnership and the high-quality support you provide to Inclusa members.

Ahora Disponible en Español:

Dementia Care Training Course for Community Members

The UW-Oshkosh Center for Career Development and Employability Training (CCDET), along with the Wisconsin Department of Health Services, has developed a Spanish version of the Dementia for Community Members course. There is no cost for this 20-minute online training, which is designed for community members who interact with people living with dementia within a community setting. For more information or to register, please visit www.uwosh.edu/dementia.
Room and Board Changes for 2018

The Inclusa Finance Department has announced the following changes to residential Room and Board (RB) billing, which will be effective January 1, 2018:

- The member’s RB billing will reflect updated Wisconsin/U.S. Department of Housing and Urban Development (HUD) rates.
- The member’s RB billing will be based on the member’s monthly available income and allowable expenses, calculated in accordance with Wisconsin Department of Health Services regulations.
- If the member reports any changes in income (other than Social Security), have this information forwarded or direct the member to the billing contact on the bottom their billing statement.
- Inclusa will no longer bill shared room rates.
- RCACs in the legacy Western Wisconsin Cares service area (GSR 2) will no longer collect RB from the member. This amount will be part of the provider’s claim submission to Inclusa, and Inclusa will bill the member.

Members and/or financial representatives were informed of these changes with their billing statements (or in a separate mailing for the RCAC change). Providers may send rent information requests for Inclusa members to the contact for the facility location county as shown below.

<table>
<thead>
<tr>
<th>Facility County</th>
<th>Contact</th>
</tr>
</thead>
</table>
| Chippewa, Columbia, Crawford, Dodge, Dunn, Eau Claire, Grant, Green, Green Lake, Iowa, Jefferson, Juneau, Lafayette, Marquette, Pierce, Richland, St. Croix, Sauk, Taylor, Washington, Waukesha, Waushara | Melissa Hohneke  
Melissa.Hohneke@inclusa.org  
phone: 608-647-1525  
fax: 608-647-4754 |
Nancy.Gear@inclusa.org  
phone: 715-204-1746  
fax: 715-345-5725 |
| Buffalo, Clark, Jackson, La Crosse, Monroe, Pepin, Trempealeau, Vernon | Stacy Gilbertson  
Stacy.Gilbertson@inclusa.org  
phone: 608-785-6359  
fax: 608-785-6315 |

HCBS Settings Rule – Door Lock Requirements FAQ

In 2014, the Centers for Medicare and Medicaid Services released new federal requirements for home and community-based services (HCBS), which include a door lock requirement for residential providers. The Wisconsin Department of Health Services (DHS) has received numerous questions concerning the door lock rule and, in response, has published a resource to assist providers in complying: Frequently Asked Questions (FAQs) about Door Locks in Adult Long-Term Care Residential Settings (pdf).

You can find the door lock FAQ and FAQs on other HCBS topics on the HCBS Settings Rule Frequently Asked Questions (FAQs) page.

Providers may also contact HCBS settings rule staff with questions about the door lock rule or other HCBS settings requirements, at dhshcbsettings@dhs.wisconsin.gov or 877-498-9525.
Claim Submission Reminders and Definitions

Here are some claim submission reminders and definitions of terminology used in our processes:

Reminders
Claims submitted to WPS or Inclusa must be:

• Filed Timely
• Accepted as a Clean Claim

Definitions

Filed Timely – Claims must be filed within 90 calendar days from the date of service or 90 days from the processed date of the primary insurance’s most recent explanation of benefits (EOB). The claim filing timeline does not end with the original claim submission: If a claim is partially paid/partially rejected, for units or dollars, the provider must submit a “corrected claim” within the original 90 calendar days from the date of service, or 90 days from the primary insurance’s most recent explanation of benefits (EOB).

Clean Claim – A clean claim is a complete and accurate claim that includes all provider and member information needed to process the claim, including all appropriate service and authorization codes.

Corrected Claim – If a claim is fully rejected with no payment, correct any errors and resubmit as a new claim. If the claim was partially paid, a Corrected Claim Form must be used. This form can be found on the Claims & Billing page at inclusa.org

Business System Alignment in 2018

Great news! We are excited to announce that Inclusa business system alignment will occur on July 1, 2018.

Since our merger on January 1, 2017, we have been operating in two business systems: CareDirector (Central Region) and ProNet (Western Region). This has meant that some of you have needed to complete billing and authorization work through two provider portals, and others have experience with only one of the portals.

After completing a thorough analysis, the decision was made to use the ProNet system for all of Inclusa and discontinue the CareDirector system. This transition will directly impact about 35% of our providers, and will help simplify and streamline your work.

Stay tuned for more information about the alignment, including ProNet provider portal training opportunities, coming in the new year.