



May 17, 2018

Dear Legacy CCCW Provider,

As shared in previous communications, Inclusa is in the process of aligning our two business systems into one merged system, the Inclusa System. This letter contains important information about the following changes related to service authorizations, claims submissions, and procedure codes which are impacted as part of the business system transition:

- Provider Referral and Authorization Form
- Pharmacies – Over-the-Counter Items
- Nursing Home – RUGS Levels and Member Absences
- AFH, CBRF, RCAC, CSL, SHC Days – Member Absences
- Central Region/CareDirector Portal Decommission

During the month of June, Inclusa staff will be holding training sessions for providers transitioning to the Inclusa System effective July 1, 2018. Registration is now open at [bit.ly/InclusaProviderTraining](http://bit.ly/InclusaProviderTraining). Please see the end of this letter for details.

**Provider Referral and Authorization Form**

- As of 07/01/2018, all requests for services or updates to service authorizations will be documented via a written Referral and Authorization Form. The form will be completed by the member’s Interdisciplinary Team (IDT) and sent to the provider.
- This form serves as written approval to provide the service. The authorization number and other details will be available in the provider portal.
- The form contains information grouped in three sections:
  - Member information
  - Authorization information
  - Referral-specific information
- A sample Referral and Authorization Form is located on the Providers/[Business System Transition](#) page at [www.inclusa.org](http://www.inclusa.org).
- In addition to the procedure codes and authorization details, providers will also see a field titled “SPC” (Standard Program Category) on the form. The SPC is used for grouping codes within a category of services, but should not be included in any claims submissions.

### **Pharmacies – Over-the-Counter Items**

Beginning with 07/01/2018 dates of service, all over-the-counter (OTC) items will be grouped together into a budget amount for the period of the authorization.

- All OTC items will be authorized and claims submitted using procedure code T1999 for dates of service on or after 07/01/2018. All items dispensed on the same day must be submitted to WPS on a single line.
- Providers should continue to use procedure codes A9150 and A6250 on claim submissions for dates of service prior to 07/01/2018 as found on the member’s CareDirector authorizations.
- All other items will continue to be authorized separately and paid using Medicaid-applicable codes.
- Pharmacies are still responsible to ensure only authorized items are dispensed to members.

### **Nursing Home – RUGS Levels and Member Absences**

To ensure that nursing home claims are authorized and paid at the accurate RUGS level, providers will be required to submit a *Member Notification Form - Nursing Home* beginning 07/01/2018.

- The *Member Notification Form - Nursing Home* will be used to report the following:
  - Member absences
  - RUGS score updates
  - Hospice enrollment
- The *Member Notification Form - Nursing Home* is available on the Providers/[Resources](#) page at [www.inclusa.org](http://www.inclusa.org).

### **AFH, CBRF, RCAC, CSL, SHC Days - Member Absences**

Beginning 07/01/2018, providers will be required to submit a *Member Absence Notification Form – Residential Care* to notify care managers when a member is temporarily out of the provider’s facility.

- A temporary absence is defined as an absence that occurs where the member does not return within 24 hours. Exceptions to reporting an absence include visits with family, vacations, or camp attendance that is less than 14 calendar days in length.
- The *Member Absence Notification Form - Residential Care* is available on the Providers/[Resources](#) page at [www.inclusa.org](http://www.inclusa.org).
- When a member is temporarily out of the facility, Inclusa will end the residential care and supervision authorization the day prior to the date of discharge. The room and board authorization will expire at the end of the current calendar month. If the member absence continues into a new calendar month, the facility may work directly with the member or legal decision maker to continue the bed hold. The negotiated rate shall not exceed the current rent amount at the facility. Payments to retain the placement will be paid directly to the facility by the member or legal decision maker.

- For example, if a member is hospitalized on 05/04/2018, the room and board authorization will end on 05/31/2018. If the member wishes to retain their room after 05/31/2018, they will pay the facility directly to hold the room.
- Providers are requested to start using the *Member Absence Notification Form - Residential Care* as of 07/01/2018.

### Central Region/CareDirector Portal Decommission

The CareDirector portal will be decommissioned on 10/31/2018. Please download or print all authorization details needed for claims submissions prior to this date.

- Information in the CareDirector provider portal is only valid as of 06/30/2018. Any changes made after 06/30/2018 *will not* be reflected. As of 07/01/2018, providers will receive mailed updates for any changes to legacy authorizations with dates of service on or before 06/30/2018.
- Please go to the Inclusa Portal for authorization information for dates of service 07/01/2018 and forward.

### Provider System Training

During the month of June, Inclusa staff will be holding training sessions for Providers transitioning to the Inclusa System effective July 1, 2018. Topics that will be covered include:

- Inclusa Portal
- Process changes for transportation, therapies, and pharmacies
- Claims and Customer Service
- Time for questions and individual assistance with the portal application

See our [Provider System Training](#) page (short link: [bit.ly/InclusaProviderTraining](http://bit.ly/InclusaProviderTraining)) for schedule and registration information. You can also download a [printable flyer](#) from the training page.

You will find additional resources regarding many of the topics above on the Providers/[Business System Transition](#) page at [www.inclusa.org](http://www.inclusa.org). For questions regarding claims, referrals or WPS claims processing changes, please contact Customer Service at [customerservice@inclusa.org](mailto:customerservice@inclusa.org) or 1-888-544-9353, option 1.

Sincerely,



Erin Smith  
Vice President-Community Resources/Provider Relations