

7. Provider Services

Provide the Contractor's proposed approach to Provider outreach and education. Include a description of how initial training will differ from ongoing training. Describe proposed training materials including but not limited to:

Provider education and outreach is important to our overall approach to provider support, network management, quality improvement, and enrollee service. Our high-touch Kentucky SKY provider education and outreach will comply with all requirements of Attachment C – Draft Medicaid Managed Care Contract and Appendices, Sections 27.5 Provider Orientation and Education and Section 42.14.1. Leveraging the relationships we have built with the Kentucky provider community over the past 3 decades — including the Kentucky Primary Care Association (KPCA) — we asked our provider partners to help us build and plan our SKY program. Through this close collaboration, combined with our 44 years of experience in 31 other Medicaid markets and experience serving 65,000 children and youth in foster care across 13 states in 2018, we designed an innovative and forward-looking approach to provider services that will meet the needs and preferences of our Kentucky SKY providers.

We realize no one solution will achieve our shared goal of improving the efficacy of the Medicaid system for SKY children and youth. UnitedHealthcare Community Plan of Kentucky is committed to driving collaboration across the people, places and processes involved in health care delivery to help transform a fragmented system to one that is simple, holistic, well informed, coordinated and supported by nimble programs. Foundational to improving the health



of Kentucky's children and youth in foster care is ensuring providers and their staff are well supported, engaged, educated and sensitive to the unique needs of these children. As part of this mission, we bring our modernized, streamlined provider experience to include technology-enabled tools and data analytics to improve the level of care in Kentucky. In all of our markets serving foster care, we continue to innovate and build new capabilities to enhance the provider experience.

We build upon our provider advocates' familiarity with Kentucky providers, the national scale of our educational resources, and technology to deliver our Provider 360° Service & Support model. Through Provider 360°, we employ effective communication and collaboration with providers to improve and support the best care for children and youth in the SKY program. We put provider experience and preferences at the center of our process, so we can address issues important to them while employing resources and technology that improve their experience. As illustrated in the graphic, our initial and ongoing provider outreach and education are embedded in this approach and described here. Our other means of Kentucky

SKY provider support — including the *Care Provider Manual*, provider portal, call center, quality management support, and local plan leadership are briefly described at the end of this section.

Initial Provider Outreach and Education

Provider training and communication are part of our detailed network implementation action plan, which we consider necessary to facilitate a successful network launch within 90 days of contract award. **Ninety days**



Figure 10. UnitedHealthcare's Provider 360° Service and Support model wraps around the provider to support their practice needs and maximize health outcomes.

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prior to the contract effective date, we will offer providers multiple opportunities for training related to the SKY population, including (but not limited to) billing and operations and Trauma-informed Care. Continuing education units (CEU) for topics necessary to offer well-informed care to children in foster care and additional ongoing training based upon needs identified by DMS, the Department of Community Based Services (DCBS), the Department of Juvenile Justice (DJJ), providers and foster parents. Sixty days prior to the effective date, we will deliver our pre "go-live" education, including mailings, online sessions, site visits and group training.

Within 30 days of the contract effective date, our provider advocates will facilitate in-person meetings and forums for provider to access to initial orientation education for providers and office staff, including:

- Familiarizing them with provider service resources
- Providing initial orientation education for providers and office staff
- Familiarizing them with provider service resources
- Training on providing Trauma-informed Care and other topics critical to providing compassionate care to youth in foster care
- Administrative processes, our secure provider portal (*Link*)
- Specific Kentucky SKY benefits and requirements



After Go Live, we will hold monthly webinars, with accompanying detailed materials, to orient new providers on navigating processes in the managed care environment. New provider training topics and requirements include, but are not limited to, SKY population-specific training (described later), cultural competency; fraud, waste and abuse; quality reporting and analytics; telehealth services; medical records review; and population health

management.

We also offer a variety of other educational opportunities and resources, such as site visits with key providers during regional provider summits quarterly, our quarterly newsletter (*Practice Matters*), Provider Expos, town halls, live webinars, self-directed online training, mailings and telephonic outreach. We recognize proactive provider outreach and readiness are critical for the success of the SKY program and in achieving the Commonwealth's goal of transforming health care for youth in foster care. Through our Commercial and Medicare program relationships, we have been listening to and learning from our Kentucky provider partners for the past 9 years through annual town halls, expos and attending all relevant provider conferences. In March 2019, our provider relations team began hosting Medicaid educational forums (e.g., lunch and learns, provider forums, behavioral health open houses) at key Kentucky locations. As we move toward and beyond the operational start date, we will continue to offer these critical opportunities throughout the Commonwealth to make sure all providers have access no matter their schedule or location.

Providers will have continual access to our Kentucky provider advocates, our SKY program provider relations liaison, and care coordinators, who will communicate with them in-person and online to remind providers of the availability and advantages of our educational resources via *Link* and its vast connections and contents.

Our approach incorporates topics key to understanding the unique needs of youth in foster care, including Trauma informed care, sensitivity to the effect of Adverse Childhood Experiences (ACEs) and multiple placements and changes in school settings and exposure to a myriad providers and professionals in their life. We are committed to integrating Trauma-

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informed principles into everything we do for children/youth and their families in the SKY program and at all levels of our organization. We will accomplish this through our preimplementation and ongoing statewide outreach and communication strategy for providers and their staff — working with providers to make sure they attend Trauma-informed Care training and adhere to the principles; and health care coordinators monitoring care team participants and identifying opportunities for additional training.

To best tailor our education and outreach to the needs of SKY enrollees, we will use the monthly SKY meetings with our partners in DMS, DCBS, DJJ, the Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID), and the Kentucky Department of Education to refine our provider communication and training modules.

Ongoing Provider Outreach and Education

After their initial orientation, beyond continued provider advocate support, providers have access to ongoing training and educational resources via our *Link* provider portal and its vast connections and contents. Ongoing training also may be prompted if we identify a trend in billing issues or receive a request on training about a specific topic. Provider educational resources include:

Foster Care Corner: This site offers resource for providers serving the SKY population, including training specific to Trauma-informed Care principles, links to assessments and information related to evidence based practices most applicable to the SKY population. Providers will have access to Foster Care Corner via Provider Express, which they can access through *Link*.

For the years 2016 through 2018, a total of 2,944 providers nationwide completed the courses listed here, earning 2,850 CEUs. All three courses are offered via Optum Health Education:

- Building Trauma-Informed Services and Supports for Children, Families and Foster Caregivers
- Psychotropic Medications: Keeping Kids Safe
- A System of Care Approach for the Child Welfare Practitioner Community

providerexpress.com: Our behavioral health website serves as a resource for behavioral health providers to review clinical best practice documentation, such as the Behavioral Health Toolkit for Medical Providers and the DID Toolkit.

Town Halls and Expos: We engage our providers in ongoing outreach through town halls, monthly Lunch & Learns via webinar and twice-yearly provider expos that offer providers the opportunity to earn CEUs.

UHCprovider.com: UHCprovider.com is our online source for live recordings and on-demand videos created specifically for providers and will include a customized channel for providers serving SKY children and youth. Providers can watch our recorded presentations at their convenience. They can "Ask a Question" and get an answer within 48 hours. UHCprovider.com is accessible to staff and includes behind-the-scenes reporting so we can track who viewed specific trainings. A number of trainings qualify as continuing education for professionals' continuing medical education and continuing education units.

Optum Health Education: Available through *Link*, providers have access to free courses that offer CEUs for all provider types (e.g., Caring for Children in Foster Care, Managing Care Transitions and Placements and Fostering a Trauma-Informed Environment).



We upload program updates to our secure provider portal under "Provider Alerts" and in *Practice Matters*, our quarterly newsletter developed specifically for Medicaid providers. *Network Notes*, our behavioral health-specific newsletter, informs behavioral health providers.

Finally, we commit to participating in any DMS-designated Kentucky Medicaid provider educational forums as an enhanced education effort. As we do now in other states, our provider relations manager will attend meetings with DCBS, DJJ, and other agencies to fully understand the training needs of our provider network and are committed to delivering the training and education needed to have a strong provider network for the SKY program.

Maximizing Provider Participation

We recognize that SKY providers' immediate focus is on delivering high-quality care to children and youth in foster care — a commitment to which they dedicate significant time and energy. To help maximize participation in and visibility of training for providers and their staff, we take the following approaches:

- CEUs we offer incent providers to use our training platforms
- Office visits (for high-volume providers) and reminders from provider advocates
- Online posting of upcoming training schedules and events
- Invitations hand-delivered by our provider advocacy team
- Fax/email blasts to in-network providers
- Training schedules distributed at industry conferences

Engaging Providers to Ensure Proper Prescribing of Psychotropic Medications

Our approach to psychotropic medication management for children and youth in the SKY program includes comprehensive training and education available to all providers via *Link* on best practices and clinical practice guidelines for prescribing psychotropic medication and the use of therapeutic interventions prior to and in conjunction with medication.

We also use prospective and retrospective drug utilization review to monitor providers and identify inappropriate prescribing patterns. For example, we will work with the Cabinet to establish prior authorization (PA) requirements that direct a pharmacist to contact the prescriber to initiate a PA request in certain circumstances related to psychotropic medication adherence (e.g., prescribing two anti-psychotics for a child under 18 years of age). We also retrospectively review utilization data to detect overutilization of psychotropic medications for children in foster care.

If we identify a child who we believe is being over prescribed psychotropic medications, our clinical pharmacist or CMO will reach out to educate and help the PCP or psychiatrist understand the consequences of over-prescribing — including recommending they complete the training available on *Link*. The following is an example of the positive effect this monitoring, combined with provider education, can have on provider prescribing patterns:

Medication Review: Child in Foster Care with Diagnoses of Fragile X, Autism and ADHD

Upon medication review, we discovered a 9-year-old male was taking both risperidone and aripiprazole for irritability associated with autism, which is therapy duplication. The aripiprazole had been approved with prior authorization and according to the paperwork; the risperidone should have been discontinued over 2 months prior. Our clinical pharmacist called the provider's office and explained the situation. The physician and clinical pharmacist verified that risperidone was being refilled in error. It had been filled twice after discontinuation. During the call, it was

Medicaid Managed Care Organization (MCO) - All Regions



requested that the physician's nurse contact the pharmacy to close the risperidone prescription so that it would not be available to fill again. The clinical pharmacist continued to monitor, and no refills occurred after the outreach.

Provider Support Team



Our network providers are essential partners in transforming the child welfare system and improving the overall wellbeing of the Commonwealth's youth in foster care. Our approach to provider services is designed to meet the needs and preferences of our Kentucky SKY providers. In our interactions (e.g., face-to-face, town halls, and surveys) with them, we have the opportunity not only to build positive working partnerships but also to understand the

challenges they face in working with an MCO and in caring for SKY youth and their families. The following provider support teams are critical in building provider relationships and verifying our providers have the tools they need so they can focus on serving this complex and vulnerable population.

Provider Advocates: To eliminate confusion among providers regarding whom to contact for assistance, our full-time, local provider advocates serve as the "One Face of UnitedHealthcare." These advocates — assigned regionally — are the single point of contact for our network providers. Advocates take a hands-on approach to help providers identify issues early through data analytics and targeted training. They meet with providers face-to-face and via webinar to answer questions, identify issues and work on the provider's behalf to reach resolutions. Our advocates tailor their support to fit each network provider group's unique needs. In addition to the provider advocates, our call centers, clinical team and local leadership team are all dedicated to provider support. Provider advocates respond promptly to provider requests — within 2 business days. Providers with a large UnitedHealthcare membership receive touchpoints (in-person, email and/or call) at least monthly. During the course of these visits, the provider advocates promote self-service tools such as our provider portal (*Link*), instruct on new or updated products or processes and discuss any challenges the providers are experiencing. Our advocates also participate in the ongoing forums held by key Kentucky partners, such as KPCA, KYMGMA, Greater Louisville Medical Society and Center Care.

Provider Relations Liaison: Our SKY provider relations liaison will support the resolution of provider access and availability issues for children and youth in foster care. They will work with DCBS to continue strong partnership and a shared vision with the Commonwealth. They serve as the single point of contact for Commonwealth Medicaid programs and foster care agencies, and participate in regular meetings with each as required or requested. We will recruit a liaison with specialized experience in areas such as substance use, mental illness, complex situations (e.g., dual diagnoses), and work with unique populations such as transition-age youth and the Kentucky SKY population. The liaison will be responsible for making sure the child's voice is heard through all of our actions and communications. Our liaison will embrace Trauma-informed Care principles and the system of care approach in developing relationships with enrollees and resolving enrollee concerns regarding quality of care, access to care barriers, gaps in care, and the way in which our care is delivered.

Care Coordinator: Our regionally based, locally hired care coordinators are required to have experience working within the foster care system and have knowledge of services used by foster care children and youth, especially for behavioral health. They will serve as the primary point of contact for the youth, their families, the Commonwealth's child welfare contractor, foster parents or group homes and network providers. Responsibilities include, but are not limited to:



- Conducting needs assessments and developing plans of care in collaboration with identified supports
- Developing a plan of care
- Providing outreach to providers to confirm timely delivery of appropriate services
- Providing outreach and coaching to children, families and foster care placement to promote treatment adherence
- Identifying and collaboratively addressing gaps in care
- Providing education youth, families and foster parents on relevant medical/behavioral topics
- Responding promptly to emerging issues that affect the youth

Foster Care Behavioral Health Specialists: The behavioral health specialist coordinates and collaborates to form and enhance connections for children and youth in foster care; their foster parents/guardians, Commonwealth agencies; medical teams; behavioral health providers; other stakeholders affecting the foster care system; and associated systems. Behavioral health specialists work within the foster care system to coordinate complex and high-risk needs presented by individual children or as a part of patterns that arise within the system, verify appropriate levels of care (e.g., right treatment at the right time) and use the high fidelity wraparound philosophy and processes to resolve complex issues, cases and concerns. Behavioral health specialists work to increase placement/condition stabilization and permanency while helping children and youth meet short and long-term goals. Additional responsibilities include, but are not limited to:

- Participating jointly in rounds, discussions, supervision and staffing
- Understanding provider availability and barriers to access, engaging and motivating children in foster care vis a recovery, health and wellness-oriented approach
- Assisting children, families and caregivers with connections to appropriate psychiatric, medical and psychosocial services
- Meeting with children in-person as needed (e.g., in homes or providers' offices).

Nurse Care Managers: Nurse care managers are essential to the integrated care model. They relay pertinent information about the needs of children in Kentucky SKY, advocate for the best possible care available, and confirm they have the right services to meet their needs. Additional responsibilities include, but are not limited to, assessing, planning and implementing individualized care management interventions; initiating referrals for health care and community-based services; advocating for children and their families/caregivers as needed to ensure their needs and choices are fully represented and supported by the care team.

- a. Coordinating services
- b. Care Coordination Teams;
- c. Training in Trauma-informed Care (include sample materials);
- d. Crisis services;
- e. Child and Adolescent Needs and Strengths (CANS);
- f. High Fidelity Wraparound approach;
- g. Impact of ACEs;
- h. Neonatal Abstinence Syndrome (NAS);
- i. Six Seconds Emotional Intelligence (SEI); and

Medicaid Managed Care Organization (MCO) - All Regions



j. Screening for and identification of Behavioral Health needs.

Proposed Provider Training Materials

As described previously, UnitedHealthcare is committed to ensuring SKY providers are prepared to deliver Trauma-informed Care sensitive to the needs of children and youth in foster care. To facilitate their continuous growth, we offer providers easy, free access to courses including (but not limited to) those listed herein through our provider portal, *Link*.

To	pic	Training Offered	Source/Timing
To a.	Coordinating services	 Training Offered The Role of Interprofessional Collaboration in Transforming Health Care Delivery: This webcast highlights the shift toward inter-professional teamwork in health care and examines what this means for clinicians and health care organizations today and tomorrow. Providers hear a panel of experts discuss the benefits of inter-professional teamwork; define the evolving clinician care team; explore the relevant research and offer examples of how various organizations are better coordinating care and fully leveraging this inter-professional approach to health care. Relationship between Physical and Behavioral Health: This course discusses the importance of an interdisciplinary team of psychiatrists, psychologists and other providers in the effective management of individuals with both physical diseases and behavioral health disorders. It also will identify barriers faced by providers in the appropriate diagnosis and management of individuals with both physical and behavioral illnesses. Caring for Children in Foster Care: Navigating Support Systems: Children in foster care often have an unavailable or incomplete health and medication history. After participating in this activity, health care professionals will have a better understanding of how to navigate the child welfare system and advocate for coordinated care. They will be able to identify reasons children come into care and how their experiences may present as physical or behavioral issues and see how MCOs are able to facilitate better care coordination for this population. Caring for Children in Foster Care: Managing Care Transitions and Placements: After participating in this activity, 	Source/Timing UnitedHealthcare (Ongoing)
b.	Care	Medical Home Care for the Child with Medical Complexity; Care	UnitedHealthcare
	coordination teams	Coordination and Shared Decision Making Effective care coordination (CC) is essential to addressing the fragmented and often inefficient care that children with medical complexity frequently encounter, and building systems that work for their complex health care needs. This activity will define CC and discuss the impact of effective CC and shared decision-making for optimizing care of CMC in a medical home. The fundamentals, infrastructure, tools, leadership and outcomes of CC in the medical	(Ongoing)

Medicaid Managed Care Organization (MCO) - All Regions



To	pic	Training Offered	Source/Timing
C.	Trauma-	What is Trauma Informed Care and Why is it Critical in Health	UnitedHealthcare
	informed	Care Today: Through this panel discussion, providers will learn	(Initial)
	Care	ways to incorporate the principles of Trauma-informed Care into	
		their practice. The ACE study and the connection between adverse	
		childhood experiences and trauma will be reviewed. Discussion	
		also includes methods in which providers can interact with	
		individuals while expressing understanding and empathy in	
		trauma-informed ways to promote healing and reduce the risk of retraumatization.	
c.	Trauma-	Behavioral Health Overview Session Two: Compassion	UnitedHealthcare
C.	informed	Fatigue and Trauma: A curriculum of 13 topics that reflect a	(Ongoing)
	Care	care philosophy for engaging populations with complex health	(Oligoliug)
		and social needs. The goal is to support development of a	
		trauma-informed environment that drives how we design and	
		deliver services for our enrollees.	
		• Fostering a Trauma-Informed Environment: As the last	
		module of the training series, we will review how all of the	
		topics presented in this series work together to offer a	
		framework for creating a trauma-informed environment.	
		Optum: Trauma Informed Care Basics: This 12-minute	
		narrated course will help learners recognize trauma, identify types and prevalence of ACEs and introduce principles of	
		trauma-informed care as a way to reduce re-traumatization.	
		 Person-Centered Care: In this lesson, we'll begin to understand 	
		how a person-centered approach fits into Trauma-informed	
		Care and the importance of person-first language.	
		• <i>Trauma Informed Care 101:</i> Trauma-informed Care is the	
		foundation upon which CRT's care philosophy curriculum is	
		built. This lesson will help learners understand what trauma is,	
		its affect and the signs and symptoms of trauma.	
		United in Resilience: Support After the Newtown Shootings:	
		This webinar was designed to help the employees in	
		Connecticut with the response to the Sandy Hook Elementary	
		School shootings in Newtown, Connecticut, which caused great	
		stress and trauma for many.	
		As requested, samples of our Trauma-informed Care training	
d.	Crisis	materials are included in Attachments G.7.c-1 and G.7.c-2. Caring for Children in Foster Care: Managing Care Transitions	UnitedHealthcare
u.	services	and Placements: After participating in this activity, providers will	(Ongoing)
	Services	have a better understanding of the child welfare system and how	(Oligollig)
		to coordinate care within the foster care system. Providers also	
		will gain knowledge on how to address the elevated health risk	
		profile of children in foster care and strategies to overcome the	
		challenges related to proper continuity of care.	
e.	CANS	This training from NCTSN provides an overview of how the Child	NCTSN
		and Adolescent Needs and Strengths (CANS) assessment assesses	(Ongoing)
		strengths and needs of children that will be served through the	
		SKY program. Providers will be required to enroll through the	
f.	High fidality	NCTSN website to enroll.	NWI
1.	High fidelity wraparound	We know that the High Fidelity Wraparound Approach is one of the most commonly used intensive programs for care planning and	(Ongoing)
	approach	management of children and youth. The National Wraparound	Camaning)
	approach	management of children and youth. The National Wilaparoulla	

Medicaid Managed Care Organization (MCO) - All Regions



To	pic	Training Offered	Source/Timing
		Initiative (NWI) provides online training and guidance to this	
		model. Wraparound is not a treatment per se. The wraparound	
		process aims to achieve positive outcomes for children and youth	
		who are experiencing behavioral health concerns by providing a	
		structured, creative, and individualized team planning process	
		that, compared to traditional treatment planning, results in plans	
		that are more effective and relevant to the child/youth and family.	
g.	Impact of	• Adverse Childhood Experiences Part I: Part one in a series of	UnitedHealthcare
	ACEs	trainings on ACEs, offers providers information on the science	(Ongoing)
		of ACEs and toxic stress. The course reviews the importance of	
		and rationale behind ACE screening will be reviewed along with opportunities to expand screening in the pediatric setting.	
		 Adverse Childhood Experiences, Part II: ACE Screening in Pediatrics: This activity, part two in a series, discusses the 	
		importance of and rationale behind ACE screening along with	
		the available tools and resources to enable providers to use	
		appropriate referral, treatment and intervention services for	
		children and youth in foster care.	
h.	Neonatal	Given the opioid crisis in Kentucky, we will offer providers access	UnitedHealthcare
	Abstinence	to UnitedHealthcare's evidence-based clinical Toolkit on Treating	(Ongoing)
	Syndrome	Prenatal Opioid Use Disorder (OUD) and NAS. It includes	(011801118)
	(NAS)	recommendations on non-judgmental screening for substance use;	
		evidence-based practices for treating pregnant women with OUD,	
		including Medication Assisted Treatment (MAT); postpartum	
		recovery supports; and best practices for caring for infants	
		exposed to opioids that diminish the potential adverse effects of	
		NAS. Because addressing addiction and NAS requires deep	
		community partnerships, we have also begun conversations with	
		organizations designed specifically to serve these populations in Kentucky.	
i.	Six Seconds	Six Seconds Emotional Intelligence Toolkit: Six Seconds	SEI
	Emotional	Emotional Intelligence (SEI) Assessments help providers develop	(Ongoing)
	Intelligence	and apply emotional intelligence to create positive change. We will	(ongoing)
	(SEI)	provide training on the toolkit, and the uses for the toolkit.	
j.	Screening for	• Child Stress Disorders Checklist - Short Form (CSDC-SF): Used	Various
	and	as part of our Pediatric Core Assessment	(Ongoing)
	identification	Primary Care Post-Traumatic Stress Disorder Screener (PC-	
	of behavioral	<i>PTSD</i>): Recommended for incorporation into pediatric/PCP	
	health needs	practices as a standard two-question screener for all youth	
		 Post-traumatic Stress Disorder Checklist (PCL-5): More 	
		comprehensive assessment to be administered when trauma is	
		suspected, but the origins and severity are not yet known. Used	
		by our staff and available for provider use through our provider	
		portal.	
		• CANS-Trauma Comprehensive Version: For use by providers	
		for comprehensive assessment of youth for care planning and	
		treatment	
		• Pediatric Symptom Checklist (PSC-35): Used by our staff and	
		at the provider level to determine the underlying issues leading to aberrant behaviors that may be indicative of past/present	
		trauma.	
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Medicaid Managed Care Organization (MCO) - All Regions



In addition to those subjects listed in the RFP, UnitedHealthcare will partner with DCBS to develop training for the additional items listed in draft contract section 42.14.1, many of which are also addressed in the Commonwealth's policies. Through close partnership with DMS, we will minimize provider administrative burden by facilitating consistency in language and policy. Once we have developed or agreed upon existing training to address these needs, we will make them accessible via our provider portal, *Link*.

- SKY program, including roles and responsibilities of DMS, DCBS, DJJ and DBHDID
- Family First Prevention Services Act (and any other federally mandated services/programs affecting the SKY population)
- Covered services and provider responsibilities for providing/coordinating such services
 with special emphasis on SKY-specific needs (e.g., coordinating with Foster Parents,
 Caregivers, Fictive Kin, DCBS and DJJ professional personnel, Adoptive Parents, Court
 Appointed Special Advocates [CASAs], judges, law enforcement officials, and other
 Cabinet related agencies)
- Aging out process
- Medical consent requirements
- Required timelines for services and assessments
- Specific medical information for court requests and judicial review of medical care
- Appropriate utilization of psychotropic medications
- Evidence-based behavioral health treatment interventions and specific behavioral health and physical health needs of the Kentucky SKY populations
- Substance exposed infants
- A care coordination team for Kentucky SKY and how to access them
- Performance measures and health outcomes

Additional Provider Support

We know our network providers are essential to achieving improved health outcomes for the children and youth we serve in the SKY program. The following are additional ways we employ our Provider 360° approach to engage and support Kentucky SKY providers, ensuring they have the resources they need to deliver the care this vulnerable population deserves.

Support Method	Description	
Provider Portal	Our website for SKY providers will include webpages designed to facilitate easy access to current program and provider-specific information, and meet all requirements of the draft contract. <i>UHCprovider.com</i> is our public home for provider information, which includes connection to our secure provider portal, <i>Link. UHCprovider.com</i> includes a powerful internal search tool to help providers locate the information they need quickly. The site offers providers the opportunity to submit feedback on their experience to help identify opportunities to improve or enhance how we work together. The site also facilitates easy access to network bulletins and other materials important for them to serve children and youth enrolled in SKY (e.g., contact information for our provider services call center and hotline, information about the Kentucky Health Information Exchange).	
Quality Management and Clinical Support		

Medicaid Managed Care Organization (MCO) - All Regions



Support Method	Description
	subsequently trigger incentive payments within various value-based payment and other shared savings models to enable provider success.
Provider Advisory Councils (PACs)	In Kentucky, as with most of our Medicaid programs, we will form PACs to better understand providers' concerns and issues and offer educational opportunities while providers and their staff meet with our local team. Councils meet quarterly and will consist of providers from across the Commonwealth with a variety of areas of specialty or expertise (e.g., medical, behavioral health, hospitals, ancillary services, pharmacy and more). We will include representatives from Kentucky provider associations (e.g., KPCA, Kentucky Medical Association, Kentucky Hospital Association) on our PAC and request their input on targeted training needs and topics, the overall program and UnitedHealthcare initiatives.
Kentucky Health Plan Leadership Support	Our Kentucky Health Plan leadership has developed and will continue to grow relationships with providers throughout Kentucky. They will engage with providers through attendance at provider expos, town halls, Joint Operating Committee (JOC) meetings with key providers and our PAC for escalated issues as requested or needed.
Provider Services Call Center Support	Our provider services call center will be available 24 hours a day, seven days a week for medical, behavioral health and pharmacy support; prior authorization service support; claims inquiries or concerns; and more. Our entire call center staff will complete training on interacting with providers who treat children and youth in the SKY program to better understand and effectively meet their unique needs.
Care Provider Manual	We will develop, issue and maintain a <i>Care Provider Manual</i> that complies with all requirements noted in Attachment C – Draft Medicaid Managed Care Contract and Appendices, section 27.4 and that specifically addresses the requirements, policies, covered benefits and goals of the Kentucky SKY program. <i>The Manual</i> serves as a tool for providers to have a better understanding of Kentucky Medicaid policies and procedures, and UnitedHealthcare-specific policies, to effectively navigate the system and provide better, more consistent care to children and youth in foster care.

Modernizing the Provider Experience



Internally, UnitedHealthcare has charted a path to modernize health care — starting now and continuing well into the future — we are committed to driving change in the health care system. We recognize that to achieve this we must work more effectively with providers big and small — from the multi-state hospital system to the solo-practicing family physician, from the CEO to the office manager to the frontline caregiver. Our provider service solutions have a

strong focus on high-touch, proactive and efficient essentials (e.g., timely claims payment, ongoing education) that are paving the way for implementing future enhancements around electronic health records (no chart chases), electronic banking and online capabilities.

Electronic Health Records via CommunityCare

Today, we can import and share assessments, plans of care, and medical records through our *CommunityCare* platform. *CommunityCare* maintains all information about a child's care and supports in their electronic health record, providing a comprehensive view of their needs and goals. This technology will enhance the level of coordinated, informed care our providers are able to deliver to youth in foster care. Rather than depending on inconsistent or incomplete information from birth or foster families across transitions, providers will be able to log into *CommunityCare* and access the following information:

Medicaid Managed Care Organization (MCO) – All Regions



- The child's person-centered care plan, including their care preferences, prioritized goals and interventions needed to achieve them
- Assessment results, including the child's goals and desired outcomes, and social, behavioral, medical and functional needs and circumstances
- Utilization of health care services
- Names and contact information of the child's multidisciplinary care team (MCT)
- The child's prioritized health concerns, issues, intervention strategies and selfsufficiency goals and how well the enrollee understands and is adhering to the goals
- Claims data, pharmacy claims, condition list, medications, service dates, history, provider visits, diagnoses, issues, case conference notes and lab results

Individual Health Record



As part of our offering, we will bring a revolutionary tool for provider services: the Individual Health Record (IHR). We will be launching the IHR to all our markets across our multiple plans to help people live healthier lives. The IHR will transform how we deliver health care to those we serve, especially our most complex enrollees such as children and youth in the SKY program. Through IHR, we will simultaneously compile and translate disparate data sources from the last 3 years of enrollees' medical history into a single

consolidated view. The IHR revolutionizes how enrollees, providers, and care coordinator access and take action on enrollees' health and health care. By revealing clinical intelligence from data feeds into a single, complete, secure, and easily digestible record, the information becomes meaningful and workable. By empowering our enrollees with the IHR, providers can enhance their preparation for a visit, coordinators have an additional resource to understand those they serve, and SKY enrollees and their family/caregivers have access to a consolidated record of their medical history.