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PRODUCT TYPE: Medicaid	REFERENCE NUMBER: LA.PRVR.22

SCOPE:

Louisiana Healthcare Connections (PlanMCO) Provider Services

PURPOSE:

The purpose of this policy is to ensure that calls coming into the Provider Services Telephone line are answered timely and accurately and to ensure 24 hour/7 day per week access to Provider Services.

POLICY:

It is the policy of Louisiana Healthcare Connections to maintain a local and a toll free telephone number whereby Providers can access Provider Services for assistance. It is the policy of LHCC Louisiana Healthcare Connections ensures that all calls coming into the Provider Services component of the telephone line are answered timely and accurately, meeting the requirements demonstrated in our contract with the State of Louisiana, as well as Louisiana Healthcare Connections policies and performance Standards.

LHCC operates maintains a toll-free telephone help line to respond to Provider questions, comments, and inquiries, and concerns. Additionally, staff are available to response to any provider inquiries, provide general assistance to providers regarding program operations and requirements. The telephone line includes the ability for providers to access interpreter services as described in the Enrollee Services section of the model contract. The provider toll free telephone line complies with the call center performance standards as outlined by LDH.—The telephone line has the capability to track provider call management metrics and complies with the member call center performance standards outlined in the Enrollee Services section of the model contract.

LHCC has developed telephone help line policies and procedures that address staffing the hiring and training of , personnel, staffing ratios, hours of operation, access and response standards, monitoring of calls via recording or other means, and compliance with the standards of the model contract.

LHCC submits these telephone help line policies and procedures, including performance standards, to the Agency for written approval.

LHCC call center systems have the capability to track provider call management metrics.

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LHCC staff's the provider access component of the telephone line twenty-four (24) hours a day, seven (7) days a week to respond to Prior Authorization requests. LHCC also staff's the provider access component of the telephone line to respond to Provider questions and address provider issues in all other areas, including Provider complaints and regarding Provider responsibilities,, between the hours of 7:00 am and 7:00 pm CST, Monday through Friday, excluding State holidays.

LHCC has developed performance standards and monitors telephone help line performance by recording calls and employing other monitoring activities. All performance standards are submitted to the Agency for written approval.

LHCC ensures that after regular business hours the Provider services line (not the Prior Authorization line) is answered by an automated system with the capability to provide callers with information about operating hours and instructions about how to verify Enrollment for an Enrollee with an Emergency or Urgent Medical Condition. This shall not be construed to mean that the provider must obtain verification before providing emergency services and care. Additionally, between the provider services component of the toll-free line and the after-hours automated system/ Nurse Advice Line component LHCC is available to handle emergent provider issues twenty-four (24) hours per day seven (7) days per week.

PROCEDURE:

- A. Plan's toll-free hotline is staffed with <u>Customer Service</u> Representatives (CSRs) during normal business hours (7:00 am to 7:00 pm Monday through Friday excluding State holidays).
- B. LHCC staffs the telephone help line to respond to provider questions in areas including the provider complaint system, provider responsibilities, etc. between the hours of 7:00am and 7:00pm CST as appropriate, Monday through Friday, excluding State holidays.
- C. As part of its established provider complaint and dispute process, the Plan call center shall provide information on how to file a complaint or dispute, log all complaints and disputes given through the provider toll-free telephone line, assist as appropriate in the resolution, and notify the provider regarding the resolution. Member grievances and appeals filed by providers on behalf of a member are documented and processed in accordance with member grievance and appeals policies.
- D. After normal business hours, the provider services component of the toll-free telephone line is answered by an automated system giving callers information about

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operating hours, and instructions about how to verify enrollment for an enrollee with an emergency or urgent medical condition without construing it to mean that the provider must obtain verification before providing emergency services or care. Providers obtain prior authorization by connecting with-to NurseWiseNurse Advice Line, LHCC's after hour's subcontractor.

- E. The Avaya Call Management System (CMS) delivers call routing, advanced vectoring, messaging and information tracking to allow for seamless, efficient call answer/service capabilities, monitoring and reporting. CMS enables the Provider Services Manager or person appointed to conduct real-time monitoring and captures call activity by time, date, queue and Provider Services Representative. The NICE software system records all calls answered by the Provider Services staff and allows the Provider Services Manager or person appointed the ability to evaluate the Provider Services staff response for accuracy. All callers are provided with a message that notifies them that the call may be monitored for quality control purposes.
- F. The Provider Services Manager monitors the performance of the Provider Services staff ensuring that the following standards are met:
 - Answer Total Service Level of ninety-five percent (95%) of calls within thirty (30) second or higher or calls are directed the call—to an automatic call pickup system with IVR options. In Louisiana calls are directed to an automatic call—pickup system with IVR options that are user friendly to members.
 - No more than one percent (1%) of incoming calls receive a busy signal
 - Maintain an average hold time of three (3) minutes or less per call.
 - O Hold time, or wait time, for the purposes of this Contract includes:
 - 1) the measure of time after a caller has requested a live person through the IVR system and before a customer service representative answers the call; plus
 - 2) the measure of time when a customer service representative places a caller on hold;
 - ASA (Average Speed to Answer) 30 seconds or less
 - Maintain abandoned rate of calls of not more than five percent (5%)
 - Abandonment Rate
 5% or less
 - Hold time Less than 3 minutes
 - ASA + Hold Time 3 minutes or less
 - The average Blocked Call rate for direct calls does not exceed one percent (1.0%).

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G. All calls are documented in the OMNI system. The OMNI system is used to track issue resolutions, communicate with the claims department and or other functional areas. An OMNI Service Object is completed and routed appropriately for all calls to ensure timely documented resolution to all issues.

Call Distribution System

A The Avaya Call Management system is utilized by LHCC for Service Center operations. Full Speech IVR is utilized to direct callers to the appropriate area. IVR is utilized to direct callers to the appropriate area. Callers are immediately presented with a message to contact 911 if it is a medical emergency.

- B. All incoming calls received by PSRs are <u>tracked and</u> monitored via the Avaya Call Management System (CMS). Avaya CMS delivers call routing, advanced vectoring, messaging and information tracking to allow for seamless, efficient call answer/service capabilities, monitoring and reporting. This system allows LHCC to capture and report a broad number of performance metrics including, but not limited to
 - Call Volume/Peak Balance
 - Speed of Answer/Hold Time
 - Types of calls received
 - Abandonment Rate, Response Time
 - Call Duration
 - Transfer Rate
 - Average Handle Time
 - Number of calls in queue
 - Measure the total number of calls and average calls handled per day/week/month
 - Measure the average hours of use per day
 - Assess the busiest times and days by number of calls
 - Average Talk/Hold Time
 - Busy/Delay Signals
 - % Answered in Seconds
 - Busy/Delay Signals
 - Average Handle Time

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- B. The Avaya Call Management System will manage the inbound routing of calls and ensure that the next available agent receives calls in the proper sequence. The Avaya Call Management System can also transfer calls to other telephone lines as needed.
 C. A decision tree illustrating the IVR system is available upon request.
 B.
- D. In the event of disaster, the Call Management System can be redirected to allow for inquires to be serviced from an alternate location.
- D. In the event of disaster, increases in call volume, emergency situations, staff illnesses and vacations, the Call Management System can be redirected to allow for inquiries to be serviced at alternate locations. A contingency plan for hiring, training, and coaching call center staff to address overflow calls and emails and to maintain call center access standards set forth for MCO performance will be implemented to sustain call center performance levels in situations where there is high call/e-mail volume or low staff availability. Such situations may include, but are not limited to, increases in call volume, emergency situations (including natural disasters such as hurricanes), staff in training, staff illnesses and vacations. LHCC has telephone help line policies and procedures that address staffing, personnel, hours of operation, access and response standards, monitoring of calls via recording or other means, and compliance with standards and emergencies including but not limited to hurricane-related evacuations. LHCC shall submit these telephone help line policies and procedures, including performance standards, to LDH for written approval prior to implementation of any policies. This must include a capability to track and report information on each call. The call center will have the capability to produce an electronic record to document a synopsis of all calls. The tracking shall include sufficient information to meet the reporting requirements.
- E. The workforce management team or Provider Services Manager will summarize call type activity using reports generated from the Avaya Call Management System and submit the report to Plan management for inclusion in weekly and monthly reports.
- F.E. LHCC will be responsible for all reasonable costs incurred by LDH or its authorized agent(s) if it is determined it is necessary to conduct onsite monitoring.

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REFERENCES: 10.2 **LDH Model Contract**

- 2.10 Provider Services and Support
- 2.10.3 The Provider Relations
- 2.10.4 Provider Toll-Free Telephone Line
- 2.13.10 Enrollee Call Center
- 2.13.13 Automated Call Distribution (ACD) System
- 2.13.14 Call Center Performance Standards

ATTACHMENTS:

IVR Decision Tree



LHCC Medicaid IVR for 866-595-8133 - U

DEFINITIONS:

REVISION LOG

REVISION	DATE
Added total SL of 90%	3/15
Revised policy to reflect Bayou Health Plan contract amendment – changed SL to 95%	5/15
Added language relating to provider complaints from the BH	9/15
carve-in. Changed DHH to LDH	6/16
Replaced Witness with Uptivity software system	5/17
Replaced Plan with LHCC	
Replaced Supervisor of Customer Service with Workforce Analyst Team or Manager of Customer Service	5/17
Replaced Customer Relationship Management with Avaya Call	5/17
Management System	
Replaced CRM references with OMNI system information	6/18
Added ASA + Hold Time metric of 3 minutes or less	6/19
No Revision	04/20

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Added clarifying language to paragraph one under policy section,	5/22
"component of the telephone line"	
Added "The provider toll-free telephone line complies with the call	
center performance standards as outlined by LDH." to paragraph	
two under policy section	
Added clarifying language to paragraph 6 under policy section.	
"provider access component of the" and Provider complaints and	
"regarding" Provider responsibilities	
Added clarifying language to paragraph 4 under procedure.	
"Normal" business hours, the "provider services component" of the	
toll-free	
Changed Uptivity to NICE.	
<u>Updated all sections under Call Distribution system to better align</u>	<u>6/22</u>
with language in model contract	
Updated purpose section with language "and to ensure 24 hours /	<u>6/22</u>
7 day per week access to Provider Services."	
Updated language under policy section paragraph one, two, three,	<u>6/22</u>
five, and seven to better align with language in model contract.	
<u>Updated procedure section item A with "Customer Service" and</u>	<u>6/22</u>
<u>item D with "Nurse Advice" to bring current.</u>	
<u>Updated item F under procedure section to better align with</u>	<u>6/22</u>
<u>model contract</u>	
Added IVR Decision Tree attachment	<u>6/22</u>
Added "The telephone line includes the ability for providers to	<u>6/22</u>
access interpreter services as described in the Enrollee Services	
section of the model contract. The telephone line has the capability	
to track provider call management metrics and complies with the	
member call center performance standards outlined in the Enrollee	
Services section of the model contract." To paragraph two under the	
policy section.	
Add reference to the LDH Model Contract	6/22
	<u>6/22</u>

POLICY AND PROCEDURE APPROVAL

The electronic approval retained in Archer is considered equivalent to a physical signature.

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