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Provider Services	Provider Service Calls/Hotline
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EFFECTIVE DATE: 2/2015,	REVIEWED/REVISED: 5/15, 9/15, 6/16,
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PRODUCT TYPE: MedicaidAll	REFERENCE NUMBER: LA.PRVR.22

SCOPE:

Louisiana Healthcare Connections (Plan) 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.

POLICY:

It is the policy of LHCC that all calls coming into the Provider Services 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 a toll-free telephone help line to respond to Provider questions, comments and inquiries.

LHCC has developed 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.

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.

LHCC staff's a the telephone help line twenty-four (24) hours a day, seven (7) days a week to respond to Prior Authorization requests. LHCC also staff's the telephone help line to respond to Provider questions in all other areas, including the Provider complaint system, Provider responsibilities, etc., 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

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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.

PROCEDURE:

- A. Plan's toll-free hotline is staffed with 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 non-business hours, the provider services telephone line is answered by an automated system giving callers information about 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 NurseWise, 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 Uptivity 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.
- F. The <u>Customer Provider</u> Services Manager monitors the performance of the Provider Services staff ensuring that the following standards are met:
 - Total Service Level of 95% or higher or calls are directed to an automatic call pickup system with IVR options
 - ASA (Average Speed to Answer)

30 seconds or less

Abandonment Rate

5% or less

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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%).
- 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.

- B. All incoming calls received by PSRs are 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
 - Abandonment Rate, Response Time
 - Call Duration
 - Transfer Rate
 - Average Talk/Hold Time
 - % Answered in Seconds
 - Busy/Delay Signals
 - Average Handle Time
- 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.
- C. In the event of disaster, the Call Management System can be redirected to allow for inquires to be serviced from an alternate location.
- D. The workforce management team or <u>Manager of Customer ServiceProvider Services</u> <u>Manager</u> will summarize call type activity using reports generated from the Avaya

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Call Management System and submit the report to Plan management for inclusion in weekly and monthly reports.

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.

REFERENCES:	10.2
ATTACHMENTS	:
DEFINITIONS:	

REVISION LOG

REVISION	DATE
Added total SL of 90%	3/15
Revised policy to reflect Bayou Health Plan contract amendment -	5/15
changed SL to 95%	
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	5/17
Team or Manager of Customer Service	
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

POLICY AND PROCEDURE APPROVAL

* *	al retained in <u>RSA ArcherComplic</u> nt to a physical signature.	ance 360, Centene's P&P's management software
V.P. Operations	approval on file	

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