# **HCBS Provider Insider**



### 2025 HCBS Provider Qualifications Audit

The most common reason HCBS providers fail a Provider Qualification Audit is non-compliance with employee background checks. To support your success with the 2025 audit, please check out <a href="MMAP General Bulletin 24271">KMAP General Bulletin 24271</a> (PDF), to understand how and when to complete employee background checks and prevent audit failures.

Averifi is the vendor for provider qualification audits and audit processes. For additional information on completing audits and audit requirements for each HCBS service, visit the <a href="Averifi">Averifi</a> website.

#### **Quick Facts:**

- KDADS requires all background checks to be completed PRIOR to serving HCBS participants.
- KDADS <u>Nurse Aid Registry Check</u> must be completed on all employees providing HCBS services, including non-licensed staff.
- Background checks must be completed within two years from the date of the last result.
- A list of prohibited offenses can be found here: <u>KDADS list of</u> prohibited offenses (PDF).

KMAP bulletins can be found on the KMAP website under publications or at <a href="https://portal.kmap-state-ks.us/PublicPage/Public/Bulletins/">https://portal.kmap-state-ks.us/PublicPage/Public/Bulletins/</a>

# KanCare 3.0 Brings EVV and Billing Changes

Effective October 21, 2024, providers can validate eligibility and benefits, submit claims, check claim status, submit authorizations, and access Sunflower Health Plan payer resources via Availity Essentials.

If you already work in Essentials, you can use your <u>existing account login</u>. If you are new to Essentials, your organization's representative with legal authority to sign agreements can sign up for a <u>new account</u> online or contact Availity Client Services at 1-800-AVAILITY (282-4848), Monday through Friday, from 7:00 AM to 7:00 PM CT.

### Workforce Development

Workforce Development efforts are in full swing to help providers bring additional qualified workers to the direct care fields. The team is excited to measure the success of these actions and track the process!

### Data Collection and Analysis:

- We have developed a tool to collect data on workforce gaps. Providers will report their staffing needs as well as any support needed.
- We are exploring opportunities to integrate this data collection. By mapping provider data with workforce trends, we can pinpoint areas of critical need and opportunity more efficiently to support identification of initiatives.

### • Partnership Outreach Strategy:

- We plan to leverage social media platforms and digital marketing strategies to extend our outreach to a broader audience. Developing targeted campaigns for high schools, colleges and community organizations can help generate interest and reach potential candidates.
- We are collaborating with our partners to host virtual information sessions to engage those who cannot attend inperson events.

Joshua Vargo will be sending you monthly survey reporting emails.

These reports are part of the new state requirement for all MCOs.

### **Resources & Links**

General outreach to Provider Relations: <a href="mailto:providerrelations@sunflowerhealthplan.com">providerrelations@sunflowerhealthplan.com</a> Get the latest Sunflower News: Sunflower Health Plan Provider News Alerts

General outreach to Authorizations Team: <a href="https://docume.com/hcbsauthorizations@sunflowerhealthplan.com/">hcbsauthorizations@sunflowerhealthplan.com/</a> Provider Resources & Territory Maps: Sunflower Health Plan Provider Resources



# Sunflower Transitions to SafeRide for Non-Emergency Medical Transportation Services

Effective November 1, 2024, Sunflower is partnering with SafeRide to provide members with nonemergency medical transportation (NEMT) services for curb-to-curb transportation. SafeRide also manages gas reimbursement for Sunflower Medicaid members.

Sunflower Medicaid members can now be reimbursed \$0.60 per mile for travel to and from their healthcare appointments. Members' friends, relatives or neighbors may also be reimbursed for approved travel expenses. Drivers must register to become approved gas-mileage reimbursement drivers through SafeRide. Members can arrange gas reimbursement or NEMT in two ways: Call SafeRide 1-877-917-8162, TTY 711 or through the SafeRide Member Portal.

Members should have the following information ready when calling to make a reservation:

- Member ID and Date of Birth
  - Doctor's name and drop off address
- Contact Phone Number & Pick-Up Address
- Date & Time of Appointment

#### Member Resources

Sunflower's dedication to transforming the health of the communities we serve, one person at a time includes helping members access the <u>Sunflower Health Plan 2025 Member Handbook</u>. The handbook includes plan information on covered <u>Medical and Pharmacy Benefits</u>, <u>Establishing with A Primary Care Physician</u>, and using the <u>Mobile App</u>. Members can also help improve quality by participating on the <u>Member Advisory Committee</u> and plan for their healthcare choices through <u>Health Management</u>, <u>Disease Management</u> & <u>Advanced Directives</u>.

## Continuity of Care & Care Manager Connections

KanCare 3.0 and Sunflower want to ensure you know how to support members who have selected a new MCO. This <u>newsroom bulletin</u> was shared to assist you. To find out which care manager is assigned to waiver members, email: <u>region6cm@sunflowerhealthplan.com</u>. For Sunflower members in HCBS: What to expect during the connections with a care manager:

### **Initial or Annual Service Plan Meeting:**

Complete health history or review, needs assessment, service plan creation or updates. This meeting should take approximately one hour. Persons the member identifies as part of their team, such as legal representatives and those involved in care, are encouraged to attend.

#### **Care Gap Meeting:**

Completed six months after the annual. Use this time to discuss updates to the Person-Centered Service Plan (PCSP). Review needs and discuss gaps in preventive care that should be completed in the next six months, such as breast cancer screening, colorectal cancer screening, diabetic A1C screening, and provide education for chronic health conditions.

### **Quarterly Connections:**

Friendly outreaches 90 days after annual and care gap visits to ensure the service plan continues to meet member needs.

### **Community Events**

For more information on these events and others please sign up for Sunflower Provider News Alerts.

To coordinate an event contact: <u>SM CommunityRelationsSunflowerHealthPlancom@sunflowerhealthplan.com</u>

### Did you know?

- Sunflower improved access to care through the Language Assistance Program, serving members 4,937 times during 2023.
- Interpreter-assisted Customer Service line 1-877-644-4623 (TTY 711).
- Sunflower requires 72 hours advance notice to schedule in-person interpreter services.



Scan to access the newsletter and links.