

IHCP *bulletin*

Note: This bulletin has been updated. See IHCP Bulletin [BT202250](#). The July and August scheduled trainings have been canceled. New training is planned to be available in September 2022.

INDIANA HEALTH COVERAGE PROGRAMS BT202234 APRIL 28, 2022

IHCP announces additional HCBS managed care training opportunities

In anticipation of transitioning to managed long-term services and supports (MLTSS) in 2024, the Indiana Family and Social Services Administration (FSSA) is partnering with ADvancing States to offer managed care training courses. The managed care training sessions are designed for Aged and Disabled (A&D) home- and community-based services (HCBS) waiver providers (which includes durable and medical equipment [DME] providers) as well as other long-term services and supports providers to assist them with building successful partnerships with the managed care entities.

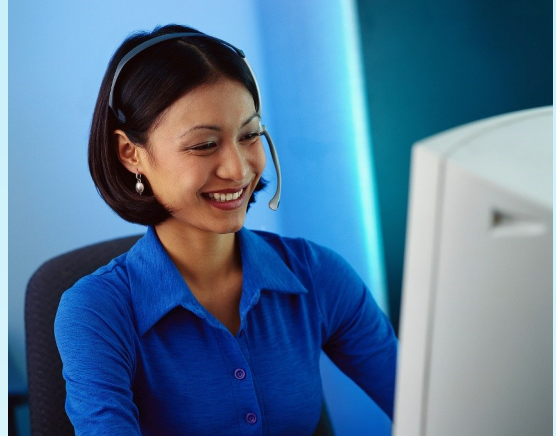


Table 1 lists training courses added to the courses announced in *Indiana Health Coverage Programs (IHCP) Bulletin [BT202220](#)*.

Participation in the sessions may be limited depending upon interest. All sessions will be scheduled for one hour and will include interactive time for questions and answers with ADvancing States.

All sessions will be held on the Zoom platform. All sessions must be registered in advance to participate. Each session has a separate registration link, which is included in Table 1. Login information will be provided by ADvancing States upon registration.

Table 1 – Training class schedule and registration links

| Title | Course date/ time | Description | Registration link |
|------------------------|---|---|--|
| Managed Care Contracts | May 24, 2022 3 p.m. to 4 p.m. (Eastern) | When the time comes to negotiate a contract with a managed care entity, it is important to know that every provider agency and MCE partnership is different. These differences may result in usage of various types of contracts or agreements, which also come with their own alphabet soup, such as an NDA, BAA or MOU. This session will focus on contracts, where you will have the opportunity to learn about the lifecycle and timeframes of the contracting process within the world of managed care. The session will walk through key areas of a typical contract, such as effective and termination dates; data-sharing requirements; and when, how and under which conditions payments occur. At the end of the day, it is critical that provider agencies fully understand all parts of the agreement and what happens when the contract is not fulfilled. Knowing these details will help set the stage for success. | Managed Care Contracts |

Table 1 – Training class schedule and registration links (Continued)

| Title | Course date/ time | Description | Registration link |
|----------------------------------|---|--|--|
| Managed Care Claims Payment | June 21, 2022 3 p.m. to 4 p.m. (Eastern) | After a hard day’s work, getting paid is critical. The managed care claims payment process will be different with a managed care entity versus the fee-for-service experience. In the session, we will talk through multiple pieces of the payment process such as education and training of staff, billing timelines, claim submissions and encounter data. In addition, we will discuss the role of the service plan, which drives MCE-generated authorizations and the following steps. As part of this process, participants have the opportunity to learn even more new terminology and its relevance. Examples include understanding what a clean claim is, why it is important and state requirements for health plans surrounding payments. Last, as we all know, sometimes payments don’t happen as planned. In these situations, it will be important to know your rights and understand the appeal process. | Managed Care Claims Payment |
| Managed Care Value-Based Payment | July 27, 2022 3 p.m. to 4 p.m. (Eastern) | Value-Based-Payment (VBP) models pay for value instead of volume, or quality over quantity. There are various model types or value-based arrangements but all are focused on performance and quality versus numbers. Come learn about the purpose of VBP, different model types, and associated risks and rewards for your organization. We will talk through multiple VBP scenarios and discuss some of the challenges. For organizations attending that have participated in a value-based arrangement, we welcome you to share your experiences as well. | Managed Care Value-Based Payment |

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