



July 18, 2018

Medicaid MCOs Transition to New, Universal Provider Roster Template: Training Available July 24-26

IHA's advocacy and policy teams prioritized the goal of a standardized provider roster for the Medicaid Managed Care program after IHA members cited the lack of standardization as a significant impediment and administrative burden for their staff. To accomplish this goal, IHA worked with the Department of Healthcare and Family Services (HFS) and the Illinois Association of Medicaid Health Plans (IAMHP) to develop a new, universal provider roster.

Our collaboration with the State and IAMHP to require all MCOs to utilize a common format is a significant step toward addressing a core member issue regarding MCOs. The provider roster is routinely used to transmit information needed by Medicaid MCOs for the key functions of:

- Proper claims payment;
- Provider directory updates; and
- Care coordination functions.

The new model comes after HFS, IHA and hospital and health system leaders, and IAMHP and its members agreed on a format that would satisfy multiple requests.

Key Points:

- The provider roster cannot be used for credentialing physicians. Effective January 1, 2018, HFS assumed the primary responsibility for credentialing through the State's IMPACT registration system. This change eliminates duplicate credentialing efforts by individual MCOs.
- The State's IMPACT file is the initial source of certain information needed by MCOs.
- The roster is accepted by all HealthChoice Illinois MCOs, effective June 15, 2018.
- The roster eliminates individual MCO requests and variances in data required by Medicaid MCOs participating in the HealthChoice Illinois program.
- The roster has standard instructions for data entry, which eliminates variances in data input and assists MCOs in improving the accuracy of data loading.
- The new format addresses the information needs of individual providers, group practices and facilities.
- The format ensures compliance with recent Centers for Medicare & Medicaid Services rules on the scope of additional information that should be made available to Medicaid beneficiaries in provider directories.

While IHA is pleased that the provider roster is now standardized, additional issues remain open that require further dialogue between IHA and IAMHP. Those issues include:

- Enhancing IMPACT data to further reduce the overall size of the roster and eliminate duplicate data entry;
- Establishing overall and MCO-specific timeframes for roster loading as well as a monitoring mechanism;
- Identifying improvements in file transmissions from MCOs to the Client Enrollment Broker (CEB); and
- Holding periodic reviews with all parties to validate any additional changes or ways to further streamline the roster.

IHA's Next Steps and Member Training:

To assist hospital and health system staff in successfully using the new roster, IHA and IAMHP are in the process of jointly crafting frequently asked questions for providers. HFS also plans to notify all HFS providers using content that IHA supplied.

IHA and IAMHP will jointly host three complimentary training webinars in late July, with Medicaid MCO experts from both organizations presenting. Roster experts from MCOs will provide a live demonstration of the new format and review its instructions. Webinar participants will have opportunities to ask specific provider questions.

Based upon feedback and capacity, IHA will evaluate the need for additional training webinars or live sessions, as appropriate. Because the webinars will present the same information, participants only need to register for one of the three. The webinars will be:

- Tuesday, July 24 from noon to 2 p.m.;
- Wednesday, July 25 from 2-4 p.m.; and
- Thursday, July 26 from 8-10 a.m.

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