





## **Training Topics**

#### **Overview**

- Welcome and Introductions
- Overview of Carelon Health Federal Services
- Military OneSource Program
  - Eligibility Requirements
  - Scope of Services
  - Duty to Warn and Mandated Reporting **Procedures**
  - Referral Procedures
  - Telehealth Program
- Case Activity Forms and Various Methods for Submission
- Online Tools and Website
- Contact Information





# **Initial Course Requirement**

- Provider Administrative Orientation
- Identifying and Safeguarding PII and PHI
- Cyber Awareness Challenge
- Enhancing Clinical Competency through an Understanding of Military Culture





# **Carelon Health Federal Services Network Services**

#### **Provider Relations**

- Ensures participants' have access to readily available providers
- Maintains network composition by engaging in assertive retention strategies
- Engages in timely and appropriate recruitment
- Offers educative communications and trainings to our provider community and staff
- Provides escalated customer service for providers

#### **Provider Credentialing:**

 Completion of Credentialing Application required for network participation





# Carelon Health Federal Services Network Services (cont.)

# Military OneSource network participation requirements:

- Must be a citizen of the United States
- Speak English
- FBI background check with fingerprints
- Complete all training requirements
  - Training is required annually

#### **Provider Contracting:**

- Contract with Carelon Health Federal Services
  - Ownership Disclosure Form
- Military OneSource Specific:
  - Military OneSource Provider
     Statement of Understanding
  - Military OneSource Short-Term Non-Medical Counseling Program
     Amendment

Military OneSource Provider Questions?
Call 1-833-ONE-SRCE, 833-663-7723 (8am-5pm ET)



# **Carelon Health Federal Services Quality Management**

#### Program oversight is provided by the medical director

- Key Quality Indicators include but are not limited to:
  - Satisfaction feedback measures
  - Access and availability of services -- geographic access; phone statistics;
     appointment availability; etc.
  - Complaints and Grievances tracking and reporting
  - Participant safety (adverse incidents and quality of care)
  - Quality Improvement activities/projects
- Military OneSource-Specific Quality Monitoring
  - Case Activity Form Audits
  - Collaborative management of high-risk cases
  - Assure adherence to scope of non-medical counseling





#### **Overview of Carelon Health Federal Services**





#### Overview of Carelon Health Federal Services

Our company was formed when WellPoint Health Networks Inc. and Anthem, Inc. merged in 2004 to become the nation's leading health benefits company. While the parent company originally assumed the WellPoint, Inc. name, in December 2014, WellPoint, Inc. changed its corporate name to Anthem, Inc. In May of 2022, shareholders approved the change of the holding company name Anthem, Inc. to Elevance Health, Inc. The Elevance Health name underscores the company's commitment to elevating whole health and advancing health beyond healthcare and our evolution to offer products and services beyond traditional health insurance.

Carelon was formed in 2022 out of one of the largest healthcare systems organizations in the United States.

- 40+ years of experience
- 47M+ members across all 50 states
- 115K+ network providers
- 96% in-network utilization
- 40+ Fortune 500 clients



## **Military OneSource**

# RELATIONSHIPS SPECIAL NEEDS HOUSING & LIVING Financial & Legal Casualty Assistance PARENTING RESOURCES AT THE READY

Recreation, Travel & Shopping MOVING & PCS
DEPLOYMENT Transitioning & Retiring
Safety from Violence & Abuse EDUCATION & EMPLOYMENT



# **Eligibility Requirements**

#### Personal support is available for members of our military community including:

- All active duty, National Guard and Reserve Component service members, regardless of activation status
- Immediate family members
- Coast Guard, when activated with the Navy
- Expeditionary civilians, 90 days pre- until 180 days post-deployment
- Retired or discharged, honorably or a general discharge, including Coast Guard veterans, and their immediate family up to 365 days post separation or retirement
- Survivors: non-remarried spouses and children





# **Comprehensive Range of Support**





# **Additional Military OneSource Benefits**

#### **Specialty Consultations**

- Financial Assistance
  - Tax Filing Services
  - Budget Management
- Military Spouse Support
  - Education Resources
  - Career Assistance
- Parenting and Childcare Resources
- Elder Care Resources
- Health and Wellness Coaching
- Research for Community Services and Support



Toll-free telephone 800-342-9647



www.MilitaryOneSource.mil with live chat



www.MilitaryOneSource.mil



Interaction with trained professionals



# **Other Benefits and Programs**

# Information regarding the following programs can be found by visiting http://www.militaryonesource.mil

- Morale, Welfare and Recreation (MWR)
- Commissary and Post Exchange Locations
- Wounded Warrior Support
- Thrift Savings Plans (TSP)
- Savings Deposit Programs (SDP)
- Service Members Group Life Insurance (SGLI)
- Educational benefits
- Family Advocacy Program (FAP)
- Legal Assistance



## **Scope of Services**

# Non-medical counseling for service members and families:

- Face-to-face, online, by phone and video sessions
- Short-term, psycho-educational and solution focused - up to 12 sessions, per issue, per rolling calendar year
- Available to children and teens with some guidelines
- Can address Z-codes issues such as:
  - Stress management
  - Marital and communication issues
  - Decision making
  - Adjustment and deployment challenges
  - Parenting skills
  - Grief or loss

reason service members
and their families seek support
through Military OneSource
and Military and Family Life
Counseling programs.





# Scope of Services (contd.)

#### Military OneSource does NOT cover the following:

- Clinical mental health treatment or long-term issues such as:
  - Depression and anxiety
  - Substance use disorders
  - Severe impairment

- Post Traumatic Stress Disorder (PTSD)
- High risk participants
- Domestic violence or assaults
- Assessment services, fit -for-duty determinations, Disability assessments, or courtordered counseling
- Those recently diagnosed with a mental health illness, prescribed psychotropic medication, receiving concurrent psychiatric or behavioral health treatment, or with an open Family Advocacy Program (FAP) case.
  - All participants who do not meet the scope of services criteria should be referred to their medical health insurance benefits, military base services, or community resources



# **Mandated Reporting**

#### Provider reporting is required for the following issues:

#### All Participants:

- Child, elder, vulnerable adult abuse
- Critical risk to others
- Risk to self
- Wrongful death (homicide/suicide)

#### **Service Members:**

- Sexual assault incidents
- Domestic violence
- Recent psychiatric hospitalizations within 30 days
- Present or future illegal activity

#### To Make a Report Call Military OneSource at (800) 342-9647

- A Triage Consultant or Clinical Supervisor will take the report and file the required information with the appropriate Department of Defense point of contact
  - DO NOT contact the participant's command/supervisor



## **Mandated Reporting Details**

#### Please be prepared to answer the following questions:

- Who is the alleged perpetrator/victim?
- Demographic Information of both perpetrator/victim:
  - Name
  - Date of Birth
- 3. Duty Status, Location, Unit Number: Active Duty, Guard, Reserve
- Detailed account of the incident
  - O When did the incident occur?
  - Were there any injuries?
  - Owere there any witnesses?
  - Were weapons involved?
  - O Were alcohol or drugs involved?



# **Mandated Reporting Details (contd.)**

#### Please be prepared to answer the following questions:

- 5. Date of most recent occurrence and chronicity
- 6. Involvement of military or civilian agencies, arrests made? (e.g., FAP, MPs, SARC, CPS, DHS, local police)
- 7. Any action taken by service member/family member (e.g., police called, restraining order, etc.)
- 8. Any involvement with children (names and ages)
- 9. Was a safety plan developed? Support systems?
- 10. Any resources or referrals that were given (e.g., TRICARE, educational materials, community resources, base services)



# **Mandated Reporting Checklist**



#### Military OneSource Mandated Reporting Checklist

In the event that a participant's circumstances require a mandated report/duty to warn, please call Military OneSource to file the report at 1-800-342-9647. Please have ready the following information (Reports may require 10 -15 minutes to complete):

The nature of the incident:				
0	Child/Elder/Vulnerable Adult Abuse			
0	Risk To Self (Suicidal Intent)			
0	Risk to Others (Homicidal or Other Intent to Harm)			
0	Domestic Violence			
0	Sexual Assault (involving a service member)			
0	Psychiatric Hospitalization (Diagnosis			
0	Illegal Activity			
0	Other			
Who is the alleged perpetrator/ victim?				
Demographic Information of both perpetrator/victim:				
	Name			
	Date of Birth			
Duty Status, Lo	cation, and Branch: Active Duty, Guard, Reserve			
Detailed accou	nt of the incident			
•	When did the incident occur?			
	Summary of Incident.			



#### **Informed Consent**

#### Participants are provided with full disclosure:

- Participants hear a Limits of Confidentiality statement during their initial call to Military OneSource
- The provider must review the Statement of Understanding with participants prior to delivering face-to-face non-medical counseling services

#### Military Resources that respond to Mandated Reporting situations:

- Family Advocacy Program (FAP)
- Sexual Assault Response Coordinator (SARC)
- Victim Advocacy



## **Post Suicide Survivor Training**

#### **Defining suicide "postvention"**

• Immediate crisis intervention for those affected by a suicide or suicide attempt

#### The aftermath of suicide:

- Types of suicide survivors include:
  - Spouse/Significant Other
  - o Parents
  - Siblings
  - Children
  - Friends
  - Co-workers



## **Post Suicide Survivor Training (contd.)**

#### The Key Issues:

- Normal Grief is magnified
  - Stigma and shame
  - Discomfort of others
  - Existential quandaries

#### **Stages of Grieving:**

- Shock/denial
- Guilt
  - O What could I have done?
  - Why didn't I see this coming
- Sadness
- Acceptance

- Anger (and blame)
  - At the person who died
  - Authorities, helpers, family and friends
  - O Why did he/she do this to me?



## **Post Suicide Survivor Training (contd.)**

# Psychoeducation regarding depression and suicide

#### **Supportive Counseling**

- Telling the Story
- Reframing thoughts and perceptions
- Connecting with others

#### Resources

- Support Groups
  - o Peer led
  - Professional led
- MHSA Services

Normalize the healing process



#### **Referral Procedures**

# Triage Consultants complete an assessment to determine that no urgent needs exist and that counseling is within scope of non-medical parameters:

- Participant will be warm transferred to the provider's office
- Providers are required to offer an appointment within 3 business days or at the convenience of the participant
- If participant information is left on a voicemail, provider must call the participant back within 24 hours to schedule an appointment
- Triage consultants complete an assessment to determine that no urgent needs exist and that counseling is within scope of non-medical parameters
- If unable to schedule an appointment with the referred participant providers need to notify Military OneSource
- Two business days after the referral Military OneSource will contact the participant to verify an appointment is scheduled



# **Conditions of Military OneSource**

- Cases are on a referral basis only, participants must be pre-authorized
- Authorizations are provider-specific: Participants cannot be transferred to a different provider without a new authorization
- Self-referral for additional treatment is not permitted. Providers may not refer participants to themselves for ongoing services
- Providers may not bill or seek reimbursement from the participant or any other entity other than Carelon Health Federal Services
  - Balance billing and charging for missed appointments is prohibited
- Military OneSource benefit allows for a maximum of 12 sessions per authorization
  - Payment for services is limited to the number of sessions authorized and terms of Military OneSource Program

Providers can contact Military OneSource 24/7 for referral consultation if needed: (800) 342-9647



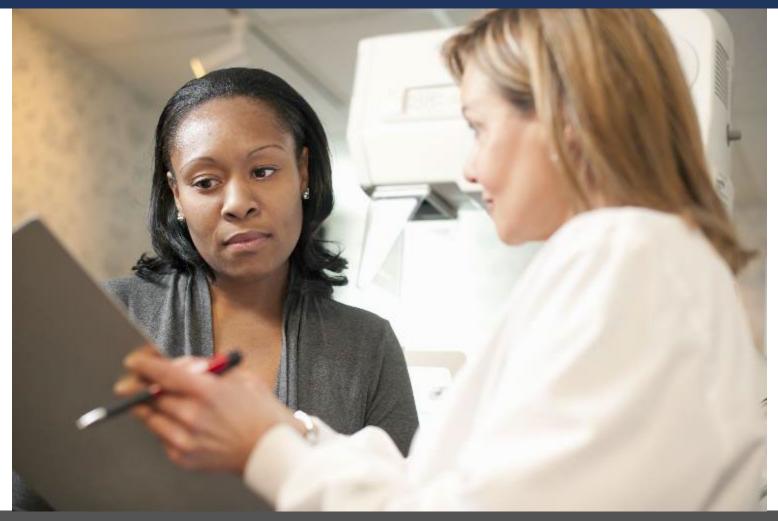
#### **Telehealth**

#### Military One Source offers Telephonic, Video, and Online (chat) counseling:

- Telephonic: All providers may conduct telephonic counseling
- Video: All Military OneSource providers must use the Military OneSource ZOOM
  platform with DoD approved settings. Therefore, all video providers must be preapproved for video counseling, take a one-on-one ZOOM training, and be registered with
  a Military OneSource ZOOM account prior to offering video
- Online (Chat): Military OneSource Online chat providers must use the Military OneSource chat platform with a signed agreement
- The use of other video or chat platforms (i.e., FaceTime, messenger, Skype, Doxy.me, etc.) is strictly prohibited as per the Department of Defense.
- Telehealth sessions may only occur with participants who are located in states where the provider is currently licensed, unless the participant is stationed outside of the United States (OCONUS).

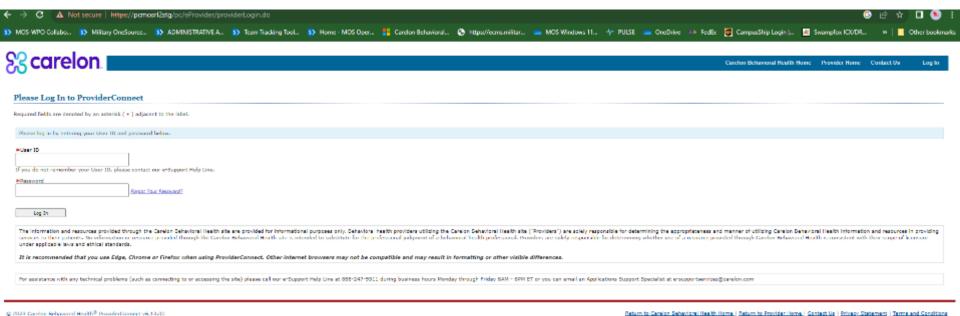


# Military OneSource Case Activity Form (CAF)



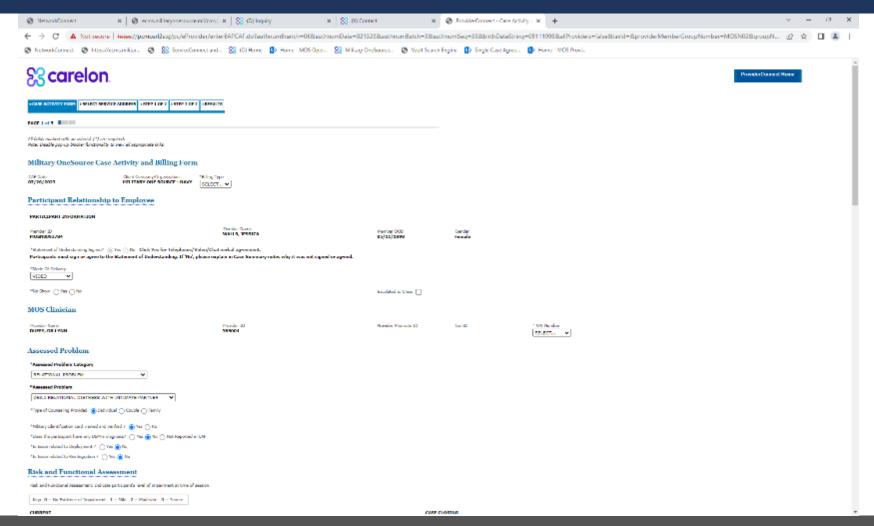


# Military OneSource Case Activity Form (CAF) on website





# Military OneSource Case Activity Form (CAF) on website





# Two Outcome Questions to Ask Participants – Question 1

Military OneSource is always interested in non-medical counseling outcomes. Please ask

participants these two questions during responses on the CAF form:	ing their first and final sessions and record the
First and Final Sessions:	
Question 1: "How would you rate the	severity of your problem?"
Participants Response Options:	
☐ Low	☐ Do Not Know
■ Moderate	Did not respond
☐ Severe	Provider deemed question inappropriate
☐ Very Severe	



# Two Questions to Ask Participants – Question 1 (contd.)

If you determine that the question, "How would you rate the severity of	f your	problem"	is
not appropriate to ask, please mark:			

☐ Provider deemed question inappropriate

If the participant did not show for the final session and you are submitting a Case Closure CAF, please mark:

☐ Do Not Know



# **Two Questions to Ask Participants – Question 2**

Final Session Only:	
Question 2: "How is your abili counseling?"	ty to address the issue as compared to when we started
Participants Response Options	S:
☐ Improved	☐ Did not respond
☐ Same	☐ Provider deemed question inappropriate
☐ Lower	□ N/A



# Two Questions to Ask Participants – Question 2 (contd.)

If you determine that t	he question, "How	v is your abi	ility to address	the issue as	compared to
the start of counseling'	' is not appropriat	e to ask, ple	ease mark:		

☐ Provider deemed question inappropriate

If the participant did not show for the final session and you are submitting a Case Closure CAF, please mark:

□ N/A



## Importance of Accurate Documentation

- Conciseness: Provide clear and concise notes that cover the essential details of each counseling session.
- Completeness: Make sure to cover all required sections of the CAF
- Clarity: Use clear and professional language that accurately reflects the counseling session. Avoid jargon unless it is necessary and well-defined
- Timeliness: Submit your CAFs promptly and within the timely filing deadline. Document level of risk or safety
- Avoid: Copying and pasting session notes or writing the same notes for each session. A unique note is required for each session.
- Avoid: A note that is so general or brief that the quality of work is not reflected in your notes.



## **Case Summary Notes**

Case Summary Notes are meant to be brief and general, yet informative about what occurred during each session related to the participant's progress toward established goals.

The following 3 elements are necessary for a comprehensive Case Summary Note (one sentence for each should suffice):

- 1. How did the participant present or what occurred during the session?
- 2. What steps were taken by the provider to achieve established goals?
- 3. What was the response of the participant?

#### Example:

➤ Participant exhibited stress and discussed the pressures of his workplace and marriage. Practiced stress management exercises to be used in times of overwhelming stress. Participant was receptive and agreed to practice at home.



# **Case Summary Notes (contd.)**

Additional case summary details are required in the following situations:

- **High Risk Cases**: If the participant is engaging in high-risk behaviors (violence, abuse, self-harm, and impulsive or addictive behaviors that present risk to self or others), please document those behaviors and call Military OneSource to report or consult.
- **Safety Plan Developed:** If a safety plan was developed, please document a summary of that safety plan.
- Risk and Functional Assessment indicating Severe Impairment: If the participant exhibits Severe Impairment of functioning in any of the Assessment factors (this is indicated by a '3'), please clarify what behaviors lead to that determination in the Case Summary Note.



# Case Activity Form (CAF) and Submission Procedures

#### Submit CAF within 30 days of the date of service

- Check that the Statement of Understanding radio button was reviewed
- Check, but do not copy Military ID cards
- Enter your billing address on the CAF (not practice address)
- It is IMPORTANT to complete ALL sections of CAF (Case Closing session is only required for Final CAF)
- Must complete the Case Closing section of the CAF once the services are complete or within 30 days after last contact.



# Case Activity Form (CAF) and Submission Procedures

- Ensure that notes are entered under the correct participant to maintain the integrity and confidentiality of participant records
- Services must not exceed 12 sessions rendered during the stated dates listed on the authorization
- Authorizations are provider specific; only the authorized provider can render services
- Services can only be rendered by fully-independently licensed providers





# **How do I submit my Case Activity Form (CAF)?**

Submit CAF within 30 days of the date of service Online:

Military OneSource ProviderConnect Portal

Carelon Behavioral Health ProviderConnect



# **Records and Confidentiality**

#### **Guidelines for Record Keeping**

- Keep a copy of the record/CAF in your files
- Print CAFs prior to submission on ProviderConnect
- Participants have a right to their records
- Records may be released if the participant completes a Freedom of Information Act (FOIA) request
- The record must NEVER be released to the Department of Defense or the chain of command
- The record may be released to a third party (other than the DoD) with a signed ROI. It is always preferable to release the record directly to the participant.



# **Online Tools**





# Military OneSource ProviderConnect

#### A 24/7, Secure online tool where providers can:

- Access ProviderConnect message center
  - Submit customer service inquiries
  - Submit updates to provider demographic information
- Submit re-credentialing applications
- Access and print forms:
  - Authorizations
- Submit Case Activity Form and view form status

Increase convenience, decrease claims processing time, and ultimately claims payment time is reduced



## Military OneSource Network Information

# Carelon Health Federal Services Website

https://www.carelonbehavioralhealth.com/providers/militaryonesource



#### **Online Tools**

#### **Relias Learning Management System**

- Website where Military OneSource Training Requirements may be completed
  - Self paced & access available 24/7
  - Military OneSource initial and annual training requirements
  - Military specific courses CEU accredited
  - For help with Relias Learning Management System <u>MOSprovidertraining@militaryonesource.com</u>
  - PaySpan Health
  - Direct deposit for claims payment
  - o Phone: (877) 331-7154
  - Email: <u>providersupport@payspanhealth.com</u>



#### **Contact Information**

- Military OneSource 24/7 dedicated line Phone: (800) 342-9647
- EDI Helpdesk
  - o Phone: (888) 247-9311
  - o FAX: (866) 698-6032
- PaySpan Health Support
  - o Phone: (877) 331-7154
  - Email: <u>providersupport@payspanhealth.com</u>
- Military OneSource Provider Relations Department Email: MOSProviderRelations@MilitaryOneSource.com



# Thank you

Military OneSource Provider Relations Department MOSProviderRelations@MilitaryOneSource.com

