Preventing Falls Can Help Save Lives

With the support and assistance of providers like you, our goal is to help CHOICES members maintain safety during their daily activities. Falls are a major safety risk for these members. They can be costly, devastating and deadly. One in five falls causes a serious injury like a broken bone or blow to the head. They become even more dangerous if the person is taking certain medicines (like blood thinners).

A growing number of older adults limit their activities and social engagements because they’re scared of falling, which can lead to further physical decline, depression, isolation and feelings of helplessness.

According to the U.S. Centers for Disease Control and Prevention:
- One-third of Americans 65 and older fall each year.
- Every 13 seconds, an older adult is treated in the emergency room for a fall; every 20 minutes, an older adult dies from a fall.
- Falls are the leading cause of fatal injury and the most common cause of nonfatal trauma-related hospital admissions among older adults.
- Falls result in more than 2.5 million emergency room treatments each year.
- The financial toll for older adult falls continues to rise as the population ages and may reach $67.7 billion by 2020.

What You Can Do for the People You Support

Usually, a fall results from the interaction of two or more risk factors. By working together with your staff, you can develop ways to keep the member’s environment safe.

Assist Members with Daily Living

Falls are the cause for 95 percent of hip fractures and many of those are sideways falls. Providing stand-by assistance can help prevent a member from falling sideways.

Medication Awareness

The people you support may have medical conditions that require multiple medications. Know the side effects of the medications members take, especially the ones that cause dizziness. When they go for doctor visits, encourage them to take all medications for their doctor to review.

Talk to Family Members

If you have concerns about the people you support, talk to the family. Let them know if you see an increase in falls, dizziness or balance issues and ask for their support in keeping the member’s living space free from obstacles that could cause them to fall.

Questions About Billing Guidelines for ECF CHOICES?

If you have questions or need information about billing guidelines, common denials, appeals, timely filing, or other any other claims issues, you can find the answers online in the ECF CHOICES Claims Reference Guide at BlueCare Tennessee.bcbst.com.

https://bluecare.bcbst.com/forms/Provider%20Forms/ECF_CHOICES_Claims_Reference_Guide.pdf

Registering and Updating Medicaid Number

To Register and/or Update Medicaid Number
http://www.tn.gov/tenncare/topic/provider-registration
Home Modification Corner

Understanding the Challenges for Contractors Serving as Minor Home Modification Providers

When people are ready to transition from a nursing facility to their home or other type of living situation, minor home modifications (MHMs) are sometimes necessary for them to conduct daily living activities without obstructions.

Before you begin work on a home as an MHM provider, it’s important to be aware of the challenges associated with these special types of projects. All of the work should be done with an emphasis on promptness and quality. And as the project progresses, regular communication with the MHM team is important.

Accelerated Bidding Periods
The time allowed for MHM providers to schedule and perform on-site estimates can be very short. Frequently, quotes and work scheduling information are due to MHM inspectors within 24 hours. Also, the member’s contact information may still be for the nursing facility – not the actual MHM residence.

Limited Budget
Transition MHM budgets are often below the standard $6,000 per project amount. MHM inspectors make every attempt to disclose budget and scheduling constraints as they become apparent.

Compressed Work Schedules
Sometimes only a few days are available to make all construction preparations and perform work.

Project Completion Date is Move-In Day
To prevent construction activities from being a part of the flurry of activity surrounding a homecoming, projects must be complete before the member arrives home. Alert inspectors when projects require special orders.

Formal Authorizations May Not Be in Place
MHM tasks must often be complete before formal authorizations are in place. Authorizations usually follow the member’s arrival at home by a day or two, so please double check the member’s transition date prior to starting work.

Last Minute Postponements
Even when ample time is allowed for bidding and scheduling, last-minute postponements can occur. If there are delays in the member coming home, significant time can pass before an authorization can be issued or you’re able to bill for work. MHM providers should schedule the start and completion of work as close as possible to the date when the member is expected to transition to their living space.

Helping Members Discover Meaningful Jobs
As a provider, you do a wonderful job observing members’ skill sets and talking to them about possible job interests. You play an important role in helping members discover new possibilities – the kind that could make them say, “Wow, I didn’t know that type of job existed.”

This discovery process begins by asking members about their interests and passions. Do they like to exercise? Do they love to travel? Are they fascinated with art? Try to find at least three things they like that motivate them to invest time or learn. While cleaning is often suggested, it’s rarely a passion.

In a recent training session, one member expressed a strong interest in nutrition. The group came up with many possible jobs like: a restaurant cook, hospital nutritionist, organic food farmer, nutrition journalist/blogger, nutrition teacher in a school and food truck operator.

Brainstorm, research and get ideas from team members on different possibilities. Then, present them to the individual and see what they want to pursue.

The possibilities are wide ranging, and it’s fun helping people discover many different job opportunities. This approach is the true essence of serving this population and will help people find jobs that are both meaningful and person-centered.
Check out the provider section of our new BlueCare Tennessee provider website. We've redesigned all of our pages to make it easier than ever to get what you need from us online. And everything is optimized to work as well on a tablet as it does on your computer. The new site is live now at bluecare.bcbst.com. You can also click here to go directly to the Long Term Services and Support section, which includes CHOICES and ECF CHOICES.

Report a Broken GPS Device

If your staff finds a GPS device that does not work, they should notify Sandata at 1-855-389-4843 or BlueCare Tennessee at 1-866-276-0588.

LTSS Support Center Now Has Extended Hours - Including Weekends

BlueCare Tennessee has extended live monitoring hours for the EVV database on weekdays from 8 a.m. to 2 a.m. and on the weekends from 11 a.m. to 8 p.m. (all times Eastern).

The support center will contact members and providers during these hours upon EVV notification of an assumed missed or late visit. As a reminder, compliant utilization of the EVV system will reduce the number of outbound calls made to providers regarding assumed missed or late visits.

CHOICES and ECF CHOICES providers are required to have full-time staff devoted to monitoring their EVV databases. Providers should also deliver services as scheduled in the member’s person-centered plan of care (PCSP), but if they can’t, providers should notify both the member and MCO as soon as possible.

During the providers’ scheduled service hours, a provider staff member should be available to respond to service delivery questions. Outreach to your after-hours staff is a critical element to member care. If your organization hasn’t submitted the names and numbers of your after-hours contacts, please email the updated information to ChoiceProviderRelations@bcbst.com.

As always, providers can contact a Support Center representative by calling 1-888-747-8955 and selecting option 2 during the hours listed above. If member assistance is needed outside of these hours, providers can call 1-888-747-8955 and select option 3 to be connected with the 24/7 Nurseline.
CHOICES or Employment and Community First CHOICES members have coverage for behavioral health services through BlueCare Tennessee. If a member asks you for help or if you see members who need behavioral health services, you can direct them to call the customer service number of the back of their member ID card. Our staff is available Monday through Friday, 8 a.m. to 6 p.m. (Eastern).

**Available Behavioral Health Services:**
- Applied Behavior Analysis (ABA)
- Outpatient Psychiatry
- Substance Use Disorder Treatment
- Crisis Respite
- Crisis Stabilization
- Systems of Support (SOS) – A crisis prevention, intervention, and stabilization program for members with intellectual/developmental disabilities
- Inpatient Psychiatry
- Intensive Outpatient
- Intensive Community Based Treatment:
  - Comprehensive Child/Family Treatment (CCFT) - High intensity, time-limited, in-home therapeutic services for children under 18
  - Continuous Treatment Team (CTT) - A team (physicians, nurses, CMs, therapists) who provides a range of intensive care coordination, treatment, & rehab services in a member’s natural settings
  - Tennessee Health Link (THL) – comprehensive behavioral health care coordination

If you are unsure of what service the member needs or if you need help finding the appropriate provider, please contact the member’s coordinator for assistance. Our coordinators are responsible for coordinating services and documenting them in a member’s Person-Centered Support Plan.

**Other Behavioral Health Services**

**Tennessee Mental Health Crisis Information Line**
1-855-274-7471
People are always available to talk to anyone in crisis, 24/7. Callers are connected with the closest crisis team and they can help make arrangements for the member to see someone quickly.

**National Suicide Prevention Hotline**
1-800-273-8255

**Tennessee Suicide Prevention Network**
(615) 297-1077

**New Reporting Form for HCBS CHOICES Critical Incidents**

The new HCBS CHOICES Critical Incident Reporting Form is now available at bluecare.bcbs.com. The new form is now consistent among all TennCare managed care organizations (MCO), including BlueCare Tennessee, to help make critical incident reporting easier for providers. The following are a few of the changes you’ll notice on the form:
- Checkboxes for providers to indicate the correct MCO for the member.
- Free-form fields replaced drop down boxes for easier documentation.
- Sections were reorganized to help streamline the reporting process.
- New headings to help gather information for the investigation.

Please use the new form to report all HCBS CHOICES critical incidents. If you have any questions about critical incident reporting, please email us at CHOICESQuallity@bcbs.com.
How Are We Doing?

As a valued BlueCare Tennessee provider, we welcome your feedback and would like to hear from you. If there are questions and/or concerns regarding a process or if there is an individual that you'd like to give “kudos” please submit them to CHOICESProviderRelations@bcbst.com.

We look forward to hearing from you.

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