Client Profile Questionnaire

June 12th, 2024

Agenda

Overview

The Children and Youth Behavioral Health Initiative (CYBHI) allows networks of providers to deliver mental health services in school-linked sites. As part of this process, Carelon Behavioral Health (Carelon) will perform as a third-party administrator (TPA) to support the relationship between educational facilities, DHCS and Payers. This includes commercial payers, Medi-Cal, and payers under California's Department of Insurance (CDI).

Carelon (CBH) has developed a quick questionnaire for determining each payer's File Transfer details. This document will facilitate a relationship with payers to support CBH's TPA efforts.

The form includes requests for:

- Contact /outbound file data, schedule(s), trading partner Information, inbound details, and who should be notified in the event a file transfer succeeds or fails.

Client Questionnaire

VSD-11655 – **ClientName_**CA_TPA

Created by: Nikhil Nene

Date: 05/30/2024

Updated for Clearinghouses and Separate Medicaid, Medicare or Commercial

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MCP/MCO Actions:

1. Update "ClientName_CA_TPA" to include your entity name.

   a) Ex. "Carelon_CA_TPA"

2. Save Document As:

   (Your Entity Name)_CA_TPA_(Today's Date)

   a) In **YYYY_MM_DD** format

   b) Ex. Carelon_CA_2024_06_12)

   c) Naming Convention outlined on next slide/page.

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VSD-11655 – Client Name_CA_TPA

1 Primary Contacts:

1.1 Client/MCP

Name/Title	Email/Phone	Project Function
		MCP/MCO Contact
		EDI Representative
		SFTP Configuration
		Project Manager
		Inbound Claims (EDI – Front End)
		Claims Adjudication
		Dispute / G&A

1.2 Carelon (TPA)

Name/Title	Email	Project Function
Nicole Copiskey, Plan-to-Plan Manager	CBH-TPA@carelon.com	Payer Liaison/Rep.
Jason Rosete, Business Consultant	CBH-TPA@carelon.com	EDI Representative
Christina Kim, Account Executive	CBH-TPA@carelon.com	Account Management

2 File Layout

- File Layout will follow standard 5010X rules.

3 Naming Convention

- Example: C_TPA_837P_YYYYMMDD_NNN.x12
- C = Client name
- YYYYMMDD – Date of the file submission
- NNN – The file number for that submission date (for example, the first   file submitted)

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MCP/MCO Actions:

1. **Primary Contacts:** Complete as applicable (additional lines as needed)

2. **File Layout:** No actions, informational only

3. **Naming Convention:** This outlines the expectation of how files should be named.

   1. <u>Breakdown:</u>

      1. C = Client Name (entity name) then add an underscore and "TPA" (exclude quotes), add another underscore and "837P" (exclude quotes), add another underscore.

         a)   Ex. Carelon_TPA_837P_

      2. Add the Date of the file submission in 8-digit, YYYYMMDD format, with no symbols and add another underscore.

      3. Add the Version: NNN = the NUMBER of submissions, 001 would equate to the first, 002 the second, and so on.

         1. Each time a file is sent/resent, it should have a unique file name – this is where that name modification occurs, in the NNN section of the file name.

      4. File Name should end with "x12" after the "NNN" version.

VSD-11655 – Client Name_CA_TPA

File Transfer - FTP Details

Outbound From Carelon/ Edifecs 837 to Payer	

Clearinghouse Clients: Please specify your Clearinghouse Trading Partner information if applicable.

Clearinghouse Name	Availity/Other
Clearinghouse Payer ID	
Payor Name	
Please provide the Clearinghouse Companion Guide	
Payer ID's for (if applicable):	Medicaid: Medicare: Commercial:
2010BB - NM1-03 Organization Name	
2010BB - NM1-09 ID Code	

Non-Clearinghouse Clients: Please specify SFTP information if applicable.

Please provide your Companion Guide

Destination Path:	Medicaid: Medicare: Commercial:
Backup Path:	Medicaid: Medicare: Commercial:
FTP Host:	
Port:	
Username/Account:	
Password:	
Frequency:	Daily
Filename Format:	
	If specific, otherwise (examples below): **Medicaid** - ClientName_TPA_837P_MD_YYYYMMDD__NNN.x12 **Medicare** - ClientName_TPA_837P_MC_YYYYMMDD__NNN.x12 **Commercial** - ClientName_TPA_837P_CO_YYYYMMDD__NNN.x12

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MCP/MCO Actions:

1. **Clearinghouse Clients:**
   a) If a client uses a clearinghouse, they will need to complete the details needed for their clearinghouse.
   b) Please fill out all fields as they apply on the Clearinghouse Clients Grid.

2. **Non-Clearinghouse Clients:**
   a) If a client is a non-clearinghouse, they will need to complete the details needed for the SFTP information.
   b) Please fill out all fields as they apply on the Non-Clearinghouse Client Grid.

VSD-11655 – Client Name_CA_TPA

Inbound To Edifecs – Payment Reconciliation/835 – Format TBD

Destination Path:	
Backup Path:	
FTP Host:	
Port:	
User Name/Account:	
Password:	
Frequency:	Daily
Filename Layout:	If specific, otherwise - ClientName_TPA_835_YYYYMMDD__NNN.x12

Inbound To Edifecs – 999 & 277CA Responses

Destination Path:	
Backup Path:	
FTP Host:	
Port:	
User Name/Account:	
Password:	
Frequency:	Daily
FileName Layout:	If specific, otherwise - ClientName_TPA_999_YYYYMMDD__NNN.x12 ClientName_TPA_277CA_YYYYMMDD__NNN.x12

Schedule(s)

- **Edifecs Batching Schedule:** Daily Monday - Friday
- **Submit to Client:** Daily Monday - Friday

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MCP/MCO Actions:

1. Inbound To Edifecs = Payment Reconciliation/835 File
   a) Please complete the section as it applies.
2. Inbound to Edifecs 999 & 277CA Responses
   a) Please complete the section as it applies.
3. Schedule(s) - Informational

VSD-xxxxx – Client Name, State, TPA

Trading Partner Details

Loop Name / ID	Reference	Implementation Guide Name	Value to use	Comments
Interchange Control Header Segment				
Interchange Control Header	ISA-08	Interchange Receiver ID	TBD	Client to provide from CG or payer POC.
Functional Group Header Segment				
Functional Group Header	GS-03	Application Receiver's Code	TBD	Client to provide from CG or payer POC.
Functional Group Header	GS-08	Version / Release / Industry Identifier Code	005010X223A2 – (837) Institutional 005010X222A1 – (837) Professional	
Receiver Name				
1000B	NM1-03	Receiver Name	TBD	Client to provide from CG or payer POC.
1000B	NM1-09	Identification Code	TBD	Client to provide from CG or payer POC.
Payer Name				
2010BB	NM1-01	Entity Qualifier	PR	Client to provide from CG or payer POC.
2010BB	NM1-02	Entity Type	2	Client to provide from CG or payer POC.
2010BB	NM1-03	Organization Name	TBD	Client to provide from CG or payer POC. Please

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MCP/MCO Actions:

1. Interchangeable Control Header Segment
   a) **ISA-08**
2. Functional Group Header Segment
   a) **GS-03**
   b) **GS-08 –** no action
3. Receiver Name (1000B)
   a) **NM1-03**
   b) **NM1-09**
4. Payer Name (2010BB)
   a) **NM1-01 -** no action
   b) **NM1-02 -** no action
   c) **NM1-03**

VSD-xxxxx – Client Name, State, TPA

				specify if separate Medicaid, Medicare or Commercial
2010BB	NM1-08	ID Code Qualifier	TBD	Client to provide from CG or payer POC. Please specify if separate Medicaid, Medicare or Commercial
2010BB	NM1-09	ID Code	TBD	Client to provide from CG or payer POC. Please specify if separate Medicaid, Medicare or Commercial

Notifications/Alerts

- Which group should be notified in case of success/ Failure?

Event	Method	Recipients
Fail	Email	
Success/Failure	Email	

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MCP/MCO Actions:

1. Payer Name Cont'd (2010BB)
   a) **NM1-08**
   b) **NM1-09**
2. Notifications/Alerts
   a) Please indicate the point-of-contact email address for each row, who should be notified if a file:
      - ✓ Fails Submission; or is a,
      - ✓ Success/Failure

➢ **Final Step –** *Please email completed form securely to: CBH-TPA@carelon.com.*

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FAQ's

1. **Where can I find more information about Carelon's role as a TPA (Third-Party-Administrator)?**

   - Please visit: https://www.carelonbehavioralhealth.com/perspectives/transforming-school-based-youth-mental-health

2. **When should the questionnaire be completed?**

   - As soon as possible. This document is necessary to begin facilitating the creation of a future pathway to ensure we are able to exchange data with one another. We are estimating an 8-week implementation window, depending on level of testing.

3. **What is an MOU and when is it needed? Do I have to have an executed MOU before I can complete the Client Profile Questionnaire?**

   - An MOU is a Memorandum of Understanding, which describes an agreement between two or more parties outlined in a formal document. It is not necessarily legally binding, which depends on the signatories' intent and the language in the agreement but signals the willingness of the parties to move forward with a contract. The MOU can be seen as the starting point for negotiations as it defines the scope and purpose of the project/program.

   - An MOU is **NOT** required to establish a relationship via the Client Profile Questionnaire. It is required to exchange live production data.

4. **Is this process comparable, or in any way related, to a contract?**

   - No, the questionnaire is only to gather business requirements and begin technical specifications/testing.

5. **Who should be included in filling out the questionnaire?**

   - The team that handles inbound claims exchange related processes and any project managers or technical representatives that work with SFTP files.

Thank you

We appreciate your time and value your partnership!
Please reach out with questions to CBH-TPA@carelon.com

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Behavioral Health