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June 21, 2023

MEMORANDUM

MEMO NO.
QI-2323
CCS-2308

TO: QUEST Integration Health Plans
Community Care Services

FROM: Judy Mohr Peterson, PhD
Med-QUEST Division Administrator *JMP*

SUBJECT: PLAN STAFF SERVICES REPORTING

The purpose of this memorandum is to inform the health plans that they must comply with contractual requirements to submit encounter data for "Plan Staff Services", starting with services incurred in September 2023. Plans must begin collecting data September 1, 2023, and begin submitting the September data no later than October 31, 2023.

Background:

Plan Staff Services are services that health plan employees provide directly to members. Some examples of Plan staff Services are - care coordination, service coordination, housing coordination, case management, outreach efforts, medication reconciliation, and quality improvement activities.

Currently, health plans submit spreadsheets with summarized data regarding these services, which are used when calculating capitation rates. This summarized data does not give Med-QUEST insight into the different services the health plans are rendering directly to our members. In order to increase transparency into these services rendered, Med-QUEST instituted an RFP requirement to submit Plan Staff Services to HPMMIS as encounters. These

encounters should represent the services and value of services rendered by health plan staff to Med-QUEST members.

RFP Section 6, Part 6.4, Subpart A, Paragraphs 7 (p.281) states:

(7) The Health Plan shall create claims and **submit encounter records** for direct services rendered to beneficiaries by the Health Plan personnel that may otherwise be delegable to providers in the community. Examples of such services include care coordination, service coordination, housing coordination, case management, outreach efforts, medication reconciliation, and quality improvement activities. These costs shall be captured by the Health Plan as part of its general ledger.*

***NOTE:** The requirement above was amended in the 23.1 revision to the Health Plan Manual Part II – Operational Guidance posted on the Med-QUEST Health Plan Resources website: <https://medquest.hawaii.gov/en/plans-providers/health-plan-resources.html> Health Plans are **not** required to create a claim or run a claim through their claims processing but will be required to submit encounter records for direct services rendered to beneficiaries.

Policy Action

Health plans will begin reporting this encounter data for services incurred in September 2023 no later than October 31, 2023.

NOTE: Health plans will continue to submit the QI Reporting Package, the CCS Reporting Package, and the annual reports for the Milliman Actuaries.

Submission of encounters for Plan Staff Services must meet the Accuracy, Completeness, and Timeliness requirements for Encounter Data Submission-see QI RFP Section 6.4.C Accuracy, Completeness, and Timeliness of Encounter Data Submission on the Solicitations and Contract page of the Med-QUEST website:

<https://medquest.hawaii.gov/en/resources/solicitations-contract.html>

Since this data will not go through the plans' claims processing process, encounter data for Plan Staff Services must be submitted to DHS monthly, no later than the end of the month following the month in which the service occurred.

If a plan is unable to meet a reporting deadline, they must request a waiver of operational contract requirements from DHS ahead of time. See – QI RFP Section 14.23.G Health Plan Request for Waiver of Contract Requirements (p. 544) on the Solicitations and Contract page of the Med-QUEST website:

<https://medquest.hawaii.gov/en/resources/solicitations-contract.html>

The below guidance specifies unique encounter guidance for Plan staff Service encounters; overall Plan staff Service encounters shall meet all requirements for 837P encounters, using the appropriate standard codes, dates, and values to describe the services rendered.

Plans will submit data for Plan staff Services as follows:

Form Type: Use form type A (837P)

Procedure Codes: Health plans will use procedure codes aligned to the service the encounter represents.

Med-QUEST is working with health plans to identify the different services they directly provide to members and will publish another QI memo with relevant procedure codes and modifiers prior to this policy taking effect. The list will be a “living” document that will be updated as services are added or removed in the future.

Pricing: A plan must price each service in such a way that the price represents the cost of the service rendered to the member as if the service was rendered by a contracted provider.

NOTE: These encounters will clarify the bucketed costs health plans currently report in spreadsheets for rate setting and Med-QUEST will reconcile the encounter prices with the bucketed costs, however, there will be no immediate impact to capitation rate setting. There will not be an impact to rate setting based on Health Plan Staff Service Encounters until CY2025 at the earliest.

Provider Information: Use Provider Type 99, and use the appropriate HOKU Provider ID from the table below:

Health Plan	Provider ID	Provider Name
Aloha Care	833493	ALOHACARE
HMSA	833500	HMSA
Kaiser	833518	KAISER PERMANENTE
Ohana	691156	OHANA HEALTH PLAN
United	691164	UNITEDHLTHCARE QUEST

Impact

Immediate: Instructions for this requirement will be added to the HPMMIS Technical Guide for Encounters for Form A, and Med-QUEST will provide a link to the update Guide to Health Plans via email.

Intermediate: Beginning September 1, 2023, Health Plans must collect data about Plan Staff Services. Health Plans must submit this data as encounters to HPMMIS no later than October 31, 2023.

Future: Med-QUEST and our actuaries will reconcile encounters submitted to HPMMIS for Plan Staff Services to the summarized data shared in annual requests for capitation rate setting. When Med-QUEST transitions to HPMMIS encounters for capitation rate setting at a future date (planned for CY2025), the Plan Staff Services submitted therein will be the source of truth for these costs. There will not be an impact to rate setting based on Health Plan Staff Service Encounters until CY2025 at the earliest.