

Questions from the Heritage Health Webinar for EDN Services Coordination Personnel

July 28, 2016

Question: Is transportation provided?

A: Emergency related transportation will be provided through the Heritage Health plans. Non-emergency transportation continues to be provided by IntelliRide: contact them toll free at 844-531-3783 or visit their webpage: <http://www.iridenow.com/home/nebraska.aspx>

Question: What will the role of A and D Waiver worker be? Will we refer them to their worker or someone else?

A: The Aged and Disabled Waiver services are not included in Heritage Health. The Aged and Disabled Waiver will continue to operate as it is currently, with EDN Services Coordinators (SCs) providing the services coordination for the Waiver for children birth to three.

Question: Do you anticipate EDN SCs ever needing to call the Heritage Health Case Manager (CM) or will that CM know to keep us in the loop as needed?

A: The Heritage Health CM, if one is assigned to a family, could appropriately be invited to participate in initial, annual and periodic IFSP team meetings as requested by parents/with their consent. (See 4802 NAC 3-008.03 through .05)

Question: How will SCs know "who" and how to contact them?

A: This information would be provided by the family, or with the consent of the family, the SC could contact the health plan directly. Another option is to contact the health plan contract manager with DHHS, Division of Medicaid and Long-Term Care. For assistance with this option, please contact DHHS EDN central office personnel.

Question: I would assume on the Release of Information the SC has completed, noting DHHS is still ok. Was not sure if "Heritage Health" has to be specific.

A: The health plan will need to be specified on the Release of Information for any information to be shared using it. Noting DHHS will not be sufficient if the SC wants to make contact with, or receive information from the health plan.

Question: We tend to see with the current managed care providers a difference with what they will approve for medical equipment. Will there be continuity in approving equipment and other needs for those who are medically involved?

A: Please see the Health Plan Comparison Chart linked on the following website:

http://dhhs.ne.gov/medicaid/Pages/med_ManagedCare2.aspx

Health plans may differ in what they will approve for medical equipment. When selecting a health plan, families will want to carefully inquire with the enrollment broker to determine the medical equipment that is covered by each health plan.

Question: Will there be handouts describing the difference in [health plans]? Is there anything that SCs can look at?

A: Please see the answer to the question immediately above for a link to the website to view the Health Plan Comparison Chart. For your information, the first letter introducing Medicaid clients to Heritage Health was mailed July 28, 2016. The first mailing of enrollment packets to Medicaid members were sent out on September 15th. All five of the documents included in the enrollment packets are located at the website linked above under the heading, "Open Enrollment".