



Beacon Health Options

Kansas Sentencing Commission

Presenting

- Toby Scott MBA MA NCC LCPC LCAC
- Beth Bernasek BS LAC



Beacon Administration of KSSC Funded Treatment Services

- Administration began 10/1/18 for all dates of service 10/1/18 and after.
 - Portal access
 - Claims payment
 - Administrative Review
 - Clinical Review
 - Data Analysis and Reporting
- Clinical Issues
 - Contact the Clinical team
 - 866-645-8216
 - KansasClinical@BeaconHealthOptions.com
- Claims or Credentialing Issues
 - Contact Beth Bernasek - Provider Quality Manager
 - Office: 785-338-9018
 - Cell: 785-213-3562
 - Elizabeth.bernasek@beaconhealthoptions.com
 - SB123@beaconhealthoptions.com

Since 10/1/18

1245 offenders served

\$3,447,000 in paid in more than 30,000 claims

72% of Offenders present with Amphetamine related diagnosis

Documents Required for Service Requests

- Detox, Initial 21 days of Level 3.3 tx during case, Level 3.1, Level 2 IOP and Level 1 OP
 - Client Placement Agreement (CPA)
 - Must indicate level of care requested, be signed by ISO and the Agreement date must be on or prior to the review start date/start date of services
- DAAP assessment Must have all 3
 - SB 123 assessment form fully completed
 - SASSI
 - Clinical Narrative
- Level 3.3 tx request for services following 21 days of billed services at level 3.3 tx during case – These are reviewed for medical necessity
 - CPA
 - Clinical to justify level of care included on Clinical Review Form found on Beacon's website:
 - <https://kansas.beaconhealthoptions.com/providers/kssc/>

Submission of the CPA is Mandatory

- The Client Placement Agreement (CPA) is the agreement between the ISO.
 - Evidence of a hand shake
- Service Requests received without an attached, complete, and signed CPA are voided.
- CPAs must be obtained prior to admit to treatment services.
 - The only exception to this would be if an offender were admitted to social detox and SB123 eligibility was determined after admit.

Use the Authorization and Claims Submission Reference Guide

- Remember there is a 45day timely filing rule being enforced from the date of service.
- Please bill the appropriate charge amount. Some providers are actually billing less than they can.
- All post sentence documents and service requests are submitted via ProviderConnect



Eligibility

- The member ID in ProviderConnect is the KBI#+01. However, the true KBI#, KDOC# and SSN can all be used as alternative IDs for offender lookup.
- Eligibility is determined via TOADS. Do not send KDADS related eligibility documents.
- If Eligibility data in ProviderConnect does not match provider/ISO records
 - Provider reach out to the ISO to confirm eligibility.
 - If data continues to differ from what is in Provider Connect- please reach out to Beacon (PR or clinical).
 - Beacon will confirm upload information and reach out to KSSC as needed to confirm/adjust eligibility and notify the provider.
- If you do specific member search with KBI/KDOC # and DOB the FIRST page that pulls up (DEMOGRAPHICS) Should show you the member ID to submit claims under.

Demographics Enrollment History COB Benefits Additional Information Primary Care Provider

Member eligibility does not guarantee payment. Eligibility is as of today's date and is provided by our clients.

Member	Eligibility
Member ID	Effective Date
Alternate ID	Expiration Date

Claims Denials

- Do you have an authorization for that level of care in Provider Connect?
 - From the Member Demographic screen Click on the “View Member Auths” Button and then scroll down and Click “Search”

Demographics | Enrollment History | COB | Benefits | Additional Information | Primary Care Provider

Member eligibility does not guarantee payment. Eligibility is as of today's date and is provided by our clients.




Member	Eligibility
Member ID	Effective Date
987654321	
Alternate ID	Expiration Date

If you wish to use the ProviderConnect Message Center to communicate with this Member, please select the 'Enable Member Commu (Note: You will be able to send a message only if the Member participates in Message Center communication.)

View Member Auths	View Member Claims	View Empire Claims	View GHI-BMP Claims
Enter Auth/Notification Request	Enter Claim	Send Inquiry	View Clinical Drafts
View Referral	Special Program Applications	View At Risk Crisis Plans	Enter an Individual Plan

Search Authorizations

- Click the blue hyperlink that matches the service you're looking for

Auth # 	Member ID	Member DOB	Provider ID	Vendor ID	Service
View Letter	Member Name		Provider Alt. ID	Alternate Provider	
01-02232011-1-3	987654321	12/02/1979	12345	A00001	EAP
	ASLAN, SUSAN		712345		EAP
01-042210-1-10	987654321	12/02/1979	12345	A00001	Behavioral
	ASLAN, SUSAN		712345		Inpatient

Find the Authorization Details

- On the next page- click the AUTH DETAILS tab

Auth Summary **Auth Details** Associated Claims

The information displayed indicates the most current information we have on file. It may not reflect claims or other information that has not been received by Beacon Health Options.


Authorization Header

Member ID	987654321	Return to search results
Member Name	SUSAN ASLAN	Send Inquiry
Authorization #	01-02232011-1-3	Complete Discharge Review
Client Auth # [?]	N/A	Enter EAP CAF
Authorization Status	O - Open	
From Provider	PETER TUMNUS	
Admit Date	01/14/2010	

Authorization Details

- Auth details are at the bottom of the auth detail tab

Authorization Header

Member ID	987654321	Return to search results
Member Name	ASLAN SUSAN	Complete Discharge Review
Authorization #	01-02232011-1-3	Enter EAP CAF
Client Auth # [?]	0003541789	
NPI # for Authorization [?]	N/A	
Authorization Status	O - Open	
Authorization Letter(s)	 (click to view)	

Service Lines

Line #	Submission Date	Service Code	Modifier Code	Service Class Descrp.	Dates of Service	Visits Requested/ Approved	Visits Actually Used (As of Today)	Status	Reason
1	01/14/2010	12345678		EAP SERVICES	01/07/2010- 07/07/2010	5/ 5	3	O - Open	N/A

- ** Note this is also the section you can CONFIRM the units that were authorized. (Ie. If you asked for 30 IOP units however 10 were authorized due to CAP.**

Thank You

Contact Us



 866-645-8216

 <https://kansas.beaconhealthoptions.com/providers/kssc/>

Send your clinical and eligibility questions here:

 KansasClinical@beaconhealthoptions.com

Send your EDI and credentialing forms here:

 SB123@beaconhealthoptions.com