

# Post-Acute Care Insourcing FAQs

Beginning **Dec. 1, 2022**, post-acute care for EmblemHealth members will be managed by EmblemHealth instead of eviCore. We have provided the following Frequently Asked Questions to help you understand this change and how it impacts the members in your care.

## **Q: Why has EmblemHealth chosen to insource post-acute care (PAC) services?**

**A:** By bringing this service in-house, we strive to provide better care for our members. The EmblemHealth Post-Acute Care (PAC) program, in partnership with our providers, offers personalized care with an emphasis on the home, and on choosing the right path of care for the right length of stay. For EmblemHealth members, the PAC program will aim to:

- Reduce readmission rates.
- Make the home a center of care.
- Allow us to better serve providers who need to connect our members with appropriate care.

## **Q: When does this become effective?**

**A:** For any start of service on or after **Dec. 1, 2022**, EmblemHealth will provide PAC services to all members with requests for admission to a skilled nursing facility (SNF) or acute rehabilitation facility, and for covered home health care (HHC). In addition, members will be eligible for transition of care support and care management services through EmblemHealth. eviCore will continue to manage ongoing care requests for services that began prior to **Dec. 1, 2022**.

## **Q: Will care management services be available for members prior to discharge?**

**A:** Yes. Your facility will continue to work with our utilization management team around authorization needs. They will be happy to connect you with our Care Management area. It is our goal to partner with facilities to help with the transition of care with members and caregivers prior to discharge. Our care management services are provided by a specialized care management team to provide education and support to members and caregivers, as well as connect to community resources to enable them to manage themselves. Care management can be reached by:

- Email: [bcampbell@emblemhealth.com](mailto:bcampbell@emblemhealth.com)
- Direct phone: **646-447-4976**
- CM intake phone: **800-447-0768**, Monday through Friday, 9 a.m. to 5 p.m.

## **Q: Where can I get more information?**

**A:** To help you better understand how this change impacts the members in your care, we will host a webinar to discuss the insourcing for all PAC services and the transitions of care program. For the full list of session dates and times, visit [emblemhealth.com/postacutecare](https://emblemhealth.com/postacutecare). Please join the session that's best suited for your facility/provider type – no registration required. All sessions will be held via Microsoft Teams between **Nov. 8 and 17**.

## **Requests**

### **Q: When should a provider request PAC services?**

**A:** We encourage providers to initiate discharge planning from the day of the acute care admission. Staff will be available to assist in early discharge planning efforts to ensure the member is ready to transition to the next most

# Post-Acute Care Insourcing FAQs

appropriate location as soon as the member is safe to do so. Please do not wait until the discharge order, as we want to ensure the authorization is ready before the member is ready to leave your care level.

## **Q: How should providers submit requests for PAC services?**

**A:** Providers should submit requests through one of the following intake channels:

- Provider portal (preferred): Sign in at [emblemhealth.com/providers/resources/provider-sign-in](https://emblemhealth.com/providers/resources/provider-sign-in)
- Fax: **866-544-9387**, 7 days a week, including holidays
- Phone: **877-833-2729**, Monday through Friday, 9 a.m. to 5 p.m.

## **Q: What requires preauthorization?**

**A:** All inpatient post-acute care admissions (SNF, long-term acute care hospital, acute rehabilitation facility), ambulances for non-emergent transportation codes, home care needs, and some DME require preauthorization per our Preauthorization Lists, which can be found at: [emblemhealth.com/providers/clinical-corner/um-and-medical-management/pre-authorization-list](https://emblemhealth.com/providers/clinical-corner/um-and-medical-management/pre-authorization-list)

## **Q: When can authorization requests be made?**

**A:** We ask that services be requested Monday to Friday to prepare for possible weekend/holiday discharge needs. Nurses are available on weekend and holidays to review requests for admission to PAC facilities. If submitting by fax, please specify on the cover sheet that the request is on a weekend or holiday admission date.

## **Q: How should a provider submit additional clinical information to support a request?**

**A:** Providers should submit additional clinical information to support PAC requests through one of the following channels:

- Provider portal (preferred): Sign in at [emblemhealth.com/providers/resources/provider-sign-in](https://emblemhealth.com/providers/resources/provider-sign-in)
- Fax: **866-544-9387**, 7 days a week, including holidays
- Phone: **877-833-2729**, Monday through Friday, 9 a.m. to 5 p.m.

## **Q: How long can a facility postpone a discharge for PAC services?**

**A:** Admission dates to PAC facilities can only be postponed up to five days due to unexpected delays in acute care discharge. After five days, we will require additional clinical information to update the authorization.

## **After PAC Admission**

### **Q: How should a PAC inpatient facility notify EmblemHealth of an admission?**

**A:** Notifying EmblemHealth is required, and facilities can notify us by:

- Fax: **866-544-9387**, 7 days a week, including holidays
- Phone: **877-833-2729**, Monday through Friday, 9 a.m. to 5 p.m.

### **Q: Is the PAC inpatient facility responsible for informing EmblemHealth of ongoing stay needs of the member?**

**A:** Yes, facilities must contact us 72 hours prior to last covered day with additional clinical information to review for the ongoing stay or inform of planned discharge date for all lines of business and include a copy of the signed notice of Medicare non-coverage for Medicare Advantage members in SNFs 2 calendar days prior to the last covered day to ensure valid delivery to the member.

# Post-Acute Care Insourcing FAQs

**Q: Once at the PAC facility, how often are updates needed?**

**A:** The approval letter will list the days approved, and SNF level as appropriate. Additional information is required 72 hours prior to the last covered day *for ongoing stay reviews*. If there is a change in the member's status and variable SNF level is requested, please send additional clinical information and fax coversheet explaining the request for alternate bed level to an already-approved stay.

**Q: Does EmblemHealth require a 3-night inpatient stay prior to SNF request?**

**A:** No, there is no requirement for 3 days of inpatient stay prior to an SNF admission. Services must be medically necessary and within the member's benefit limits.

**Q: What is the expected turnaround time for an authorization?**

**A:** Regulatory time frames are followed for all member requests. EmblemHealth is dedicated to transitioning members to the next appropriate level of care as quickly as possible, and decisions will be made within 1 business day. Therefore, we encourage early discharge planning and requests so that determinations are in place prior to the discharge date.

**Q: Will a retrospective authorization be provided if the authorization is not obtained timely?**

**A:** Within five days of an admission, EmblemHealth will review requests for medical necessity. If the review is deemed not medically necessary, the provider will be issued a denial. If the member is still receiving care, submit request as previously indicated.

**Q: Does EmblemHealth have a list of preferred skilled nursing facilities?**

**A:** Yes, please refer to the list located at:

**[emblemhealth.com/content/dam/emblemhealth/pdfs/provider/toolkit/EmblemHealth-Skilled-Nursing-Facility-Quality-Guide12062021.pdf](https://emblemhealth.com/content/dam/emblemhealth/pdfs/provider/toolkit/EmblemHealth-Skilled-Nursing-Facility-Quality-Guide12062021.pdf)**

**Additional Information**

**Q. Will EmblemHealth manage services when delivered out of state?**

**A:** Yes, EmblemHealth will also manage out-of-state PAC services for members.

**Q: How do we request an ambulance transport to a PAC facility?**

**A:** If the member requires non-emergency transport to transfer from acute care to the next lower level of care, please request at the same time as the PAC facility request by:

- Fax: **866-544-9387**, 7 days a week, including holidays
- Phone: **877-833-2729**, Monday through Friday, 9 a.m. to 5 p.m.