



## Team Care Information and FAQs

**Helping people with Montana Medicaid and Healthy Montana Kids *Plus* (HMK *Plus*) get the right care at the right time at the right place**

### General Information

- ❖ Developed to educate Montana Medicaid and HMK *Plus* members about how to use medical services the right way while helping them feel better.
- ❖ A team manages the care of members who need help deciding when, where, and how to seek medical care.
- ❖ The team is made up of one Primary Care Provider (PCP), one pharmacy, the Nurse First Advice Line and Medicaid/HMK *Plus*.
- ❖ For members with a history of using Medicaid or HMK *Plus* services at an amount or frequency that is not medically necessary.
- ❖ Members are chosen for the program through information gathered from claims, DUR referrals, and provider referrals.
- ❖ Members will be in Team Care for at least 12 months (unless the PCP asks for the member to be removed.) Review after 12 months can result in graduation from the program or continued enrollment.

### The Team

#### Primary Care Provider

- ❖ Team Care is a subset of the Passport to Health Program. All Passport rules apply. (For more information on Passport refer to the Montana Medicaid & Health Montana Kids *Plus* handbook or go to [www.medicaid.mt.gov](http://www.medicaid.mt.gov).)
- ❖ Team Care providers are Passport providers.
- ❖ Team Care members choose a Primary Care Provider (PCP). If they do not choose, Medicaid/HMK *Plus* will choose one for them.
- ❖ Members need to see their Team Care PCP for most of their medical care. Members need to get a referral from their Team Care PCP to get services from another provider, like a specialist.
- ❖ The Team Care PCP is responsible for managing the member's care.
- ❖ Members cannot change their Team Care PCP unless a request is made to Medicaid/HMK *Plus*. Change requests will be approved if the member has a good reason.
- ❖ Team Care PCPs receive enhanced case management fees.
- ❖ Eligibility verification systems will indicate a member is on Team Care.

#### Team Care Pharmacy

- ❖ Team Care members choose one pharmacy. If they do not choose, Medicaid/HMK *Plus* will choose one for them.
- ❖ Members need to get all their Medicaid/HMK *Plus* prescriptions from their Team Care pharmacy.
- ❖ Pharmacies or members can contact the Montana Health Care Programs Member Help Line at 1-800-362-8312 if a specific need cannot be met by the Team Care pharmacy.
- ❖ Members cannot change their Team Care pharmacy unless a request is made to Medicaid/HMK *Plus*. Change requests will be approved if the member has a good reason.

### **Nurse First Advice Line**

- ❖ Members have free access to the Nurse First Advice Line 24 hours a day/7 days a week.
  - ❖ Team Care members are encouraged to call the free 24-hour Nurse First Advice Line any time they are sick or hurt (except in an emergency).
  - ❖ The nurses ask questions about the member's medical condition and symptoms to help them decide what kind of care they need.
  - ❖ The Team Care PCP will get a fax from Nurse First every time their Team Care member calls the nurse line. This fax will tell the reason for the call and whether or not the nurse advised the member to seek health care services
- ✓ *Providers are encouraged to use their own clinical judgment to determine if they should treat a member. The Nurse First Line and faxes from the Nurse First Line are tools to assist providers in management of Team Care members.*

### **Team Care Program Frequently Asked Questions**

**Q. What is Team Care?**

A. Team Care is a Montana Medicaid and Healthy Montana Kids *Plus* program designed to assist members in making better health care decisions while helping them feel better. A team will help members learn to use health care services the right way. The Team consists of one PCP, one Pharmacy, the Nurse First Advice Line and Medicaid/HMK *Plus* staff.

**Q. Who is in Team Care?**

A. Members who have history of using Medicaid or HMK *Plus* services at an amount or frequency that is not medically necessary. These members need help accessing health care the correct way.

**Q. How are members chosen for the program?**

A. Members are chosen through information gathered from claims, the Drug Utilization Review (DUR) Board, and provider referrals. Members who are identified through claims information are also approved for Team Care enrollment by their PCP.

**Q. How can a provider refer a member to the program?**

A. Referrals can be made by using the Team Care Provider Referral form found at **[www.medicaid.mt.gov](http://www.medicaid.mt.gov)**, or by calling the Montana Health Care Programs Member Help Line at **1-800-362-8312**.

**Q. How are members notified of their enrollment into the Team Care program?**

A. Each member enrolled in the program will receive a welcome packet. The packet includes a welcome letter, Team Care handbook, and a self-care guide.

✓ *Members enrolled into the program receive a self-care guide to assist them in making better health care decisions. The self-care guide is only to be used as an education tool and is not intended to take the place of the PCP's medical advice, diagnosis, or treatment.*

**Q. How do the members get a PCP and pharmacy?**

A. Most members are given the chance to select their own PCP and pharmacy. If members do not choose a PCP and pharmacy, then they will be assigned. For members referred to the program by either a provider or the Drug Utilization Review board the member

may be assigned a provider or pharmacy based on a treatment plan discussed by the provider and Medicaid/HMK *Plus*.

**Q. What does the PCP do?**

A. The PCP manages the member's health care. This includes referring the member to other providers when necessary. The PCP will get a fax from the Nurse First Advice Line when the member calls that line. The fax will tell the PCP that his/her member has called the line, the reason the member called and what the nurse advised the member to do.

✓ ***Please maintain current fax information with Provider Relations at 1-800-624-3958.***

**Q. Why is it important to have one primary care provider (PCP)?**

A. The primary care provider is a member's medical home. By using one provider, members get better health care because the PCP knows their medical history. The medical home will coordinate health care for members and give them necessary referrals for other services. This will help prevent duplicated treatment and medications.

**Q. How does the PCP and pharmacy know which Team Care members are enrolled with them?**

A. The providers and pharmacies will receive a monthly list of their Team Care members. The lists will include the member's name, Montana Medicaid or HMK *Plus* identification number, date of birth, and the name of the provider or pharmacy the member is enrolled with.

**Q. What does the Team Care pharmacy do?**

A. The Team Care pharmacy provides all Medicaid or HMK *Plus* prescriptions to the member. If the Team Care pharmacy cannot fill a prescription, the pharmacy or the member must call the Montana Health Care Programs Member Help Line at **1-800-362-8312** to request approval for the member to receive the prescription from another pharmacy.

**Q. Why is using one pharmacy important?**

A. The pharmacy is a very important part of a member's health care team. Not only is it their job to dispense medication, but also to tell members about the best way and time to take it. The pharmacy can also tell members about drug dosage, how some drugs work together, and possible side effects. This helps reduce the chances of bad drug interactions or duplication. This is only possible if members fill all their prescriptions at one pharmacy.

**Q. What is the Nurse First Advice Line?**

A. The Nurse First Advice Line is a 24-hour 7-days-a-week nurse line. Members call in with symptoms and a registered nurse will assist the member by asking some questions. The nurse will then provide the member with care advice.

**Q. When does the member call the Nurse First Advice Line?**

A. The member is encouraged to call the Nurse First Advice Line prior to seeking medical services (except in an emergency).

**Q. What do the members do if they need health care when away from home?**

A. The member or other provider can call the PCP and request a referral for Medicaid or HMK *Plus* covered health care services. If the member needs a prescription, the member or pharmacy must call the Montana Health Care Programs Member Help Line

at **1-800-362-8312** to ask for the member to get the prescription from another pharmacy temporarily.

**Q. What is the benefit to the member?**

A. The member receives help accessing health care services; a PCP that will manage their health care; a pharmacy that will assist with prescriptions; free, 24-hour access to registered nurses; and education focusing on how, when, and where to use health care services.

**Q. Can members change their assigned PCPs or pharmacies?**

A. Members can request to change their PCP or pharmacy by calling the Montana Health Care Programs, Member Help Line **1-800-362-8312**. The request is reviewed by Medicaid/HMK *Plus* to determine if the member has a good reason to change the provider or pharmacy. Changes will be approved if good cause exists.

**Q. What do members do in an emergency?**

A. During emergencies (lack of immediate medical attention would result in loss of life or limb) members can seek emergency care services from any accepting Montana Medicaid or HMK *Plus* facility. However, the emergency room should NOT be used for routine care.

**Q. Who can members call to talk to about why they are in the program?**

A. The Montana Health Care Programs, Member Help Line **1-800-362-8312**.

**Q. Can members appeal enrollment in the program?**

A. Yes. Normal appeal processes must be followed. For more information, refer to the Montana Medicaid & Healthy Montana Kids *Plus* member handbook or call the Montana Health Care Programs Member Help Line at **1-800-362-8312**.

**Q. How can a Team Care member be removed from the program?**

A. If the member's PCP believes that the member is not appropriate for Team Care, they can request (at any time) that the member be removed from the program. Otherwise, members will remain in Team Care for a minimum of 12 months, upon which a review and determination will be made for continued enrollment or graduation from the program.

**Q. Can a provider disenroll a Team Care member from their caseload?**

A. Yes, providers can request to remove a Team Care member from their caseload for any of the approved disenrollment reasons listed in the Dis-enrolling a Passport Member section of the Passport to Health Provider Handbook.

**Q. What happens when a Team Care provider disenrolls a member?**

A. The provider will be asked to continue managing the member's care for the following 30 days (this allows the member or Medicaid time to choose a new PCP). Medicaid/HMK *Plus* makes exceptions to this rule in special situations.

**Q. What happens when members lose and regain Medicaid or HMK *Plus* eligibility, even for long periods of time? Are they automatically re-enrolled in Team Care?**

A. Members are enrolled in Team Care for at least 12 months of combined eligibility. For example, if a member is on Team Care for 4 months then loses Medicaid or HMK *Plus* eligibility for 2 months; he/she will be back in Team Care for an additional 8 months. Team Care members will be enrolled with their previous PCP and pharmacy if they are available.

**Q. How can I get more information about Team Care?**

A. The Team Care handbook is located on the website at <https://medicaidprovider.mt.gov/teamcare>, or call the Montana Health Care Programs Member Help Line at **1-800-362-8312** which is open Monday through Friday from 8 a.m. to 5 p.m.