

Provider Bulletin

August 2021

Health-related social needs initiative with GroundGame Health and the provider referral process

Referral overview introduction

Referring patients identified with a health-related social needs (HRSN) barrier to GroundGame Health™* (GGH) is an easy process.

Step one

Once the PCP or healthcare team identifies a Healthy Blue patient enrolled in Medicaid with an HRSN barrier, they can refer the patient to GGH using one of the following methods:

- Call GGH: 866-739-6323
- Email GGH: Physicianreferral@preferredchp.com
- Access GGH and directly entering referral into GGH's system
- Add the Z diagnosis code(s) on a claim (Note: Healthy Blue will send a weekly extract of Z-codes received on claims to GGH serving as a referral.)

Step two

Provider will complete the referral form and send to GGH using the best method identified above.

Step three

GGH will contact the patient and set up a time for further assessment. For additional information on the referral process, please contact Physicianreferral@preferredchp.com. Please note that *HIPAA* compliance will need to be followed anytime a provider emails GGH. Secure email requirements are required for any referral.

The required patient information for a complete referral to GGH is as follows:

- First name, middle initial, and last name
- Date of birth
- Gender
- Member preferred language
- Member ID and/or health plan ID
- Member primary full address
- Member primary phone number
- Member alternate phone number, if available (Must be health plan approved phone numbers)
- Member primary diagnosis
- Reason for referral (concerns to focus on, etc.)

Step four

Information will be communicated back to the PCP using Provider Care Management Solutions (PCMS). GGH will enter all available and relevant member/patient information into PCMS. This allows the PCP or healthcare

https://provider.healthybluemo.com

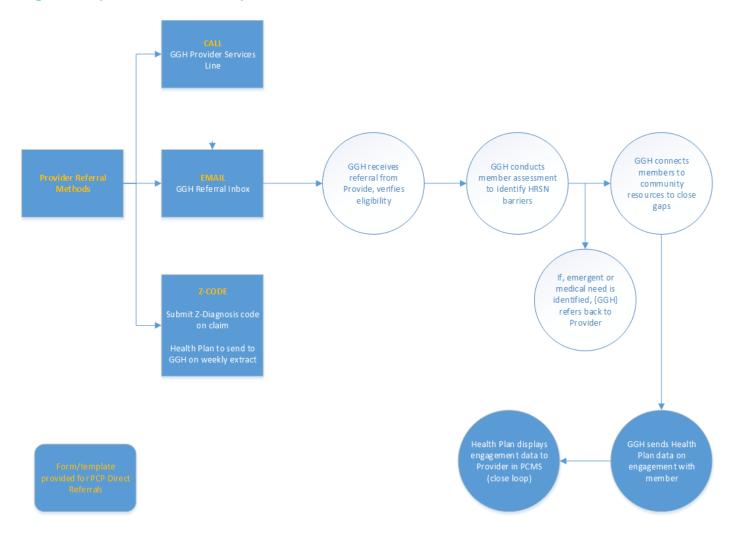
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^{*} GroundGame Health is an independent company providing contracting services on behalf of Healthy Blue.

team to view the history or status of member engagement. PCMS will be the single source of information between PCP and GGH, enabling new HRSN case visibility at the launch of the program. Please refer to the updated *PCMS User Guide* for steps and instructions on new fields for all HRSN reporting and engagement tracking.

High-level process for HRSN provider referrals to GGH



High-level process steps in summary:

- PCP's healthcare team refers to GGH via best method (phone, email, or website) by completing and submitting all required member information.
- GGH receives the referral and inputs it into their system (standard operational processes).
- GGH verifies member eligibility and benefits as they do today.
- GGH contacts the member and conducts a face-to-face or telephonic HRSN assessment:
 - o If an emergent/urgent need is determined, GGH will call the referring provider immediately.
 - o If other medical needs are determined, GGH will provide the new findings back to the referring provider in the same way the referral was received, either via phone, email, or website.
- Healthy Blue receives the engagement data back from GGH via PCMS in the new HRSN reporting tab:
 - o PCMS recognizes the type of referral from Z-code identifiers, comment fields, etc., and loads the required information into PCMS.
 - o Use of the information serves as close loop for PCP, office staff, and Healthy Blue for reporting.
 - o Information/data will also be used for program evaluation, program monitoring, and look back.