

Georgia Families 360°_{SM}—FAQ

Georgia Families 360°_{SM} is a program that delivers care to children, youth, and young adults in foster care; children and youth receiving adoption assistance; and certain youth in the juvenile justice system. The Georgia Families 360°_{SM} program began in March 2014, using a single care management organization to improve access to and coordination of care. Below is a quick and easy reference for you and your office staff to use regarding the Georgia Families 360°_{SM} program. If you have additional questions, you can email Amerigroup Community Care at GF360@amerigroup.com.

Program overview

What is a care management organization (CMO)?

A CMO is a Medicaid insurer that contracts with doctors, clinics, hospitals, and other providers, all working together to take care of the member's healthcare needs. Amerigroup was selected as the single CMO to serve members enrolled in Georgia Families 360°_{SM}.

Who are included as members in Georgia Families 360°_{SM}?

The following members are part of Georgia Families 360°_{SM}:

- Children, youth, and young adults in foster care
- Children and youth receiving adoption assistance
- Department of Juvenile Justice youth placed in nonsecure residential care

Why is managed care important for members enrolled in Georgia Families 360°_{SM}?

We believe managed care enhances coordination and access to services by implementing a collaborative approach to healthcare with physical and behavioral health providers, state agencies, community resources, members, and guardians to greatly improve member health outcomes. Before Georgia Families 360°_{SM}, member populations were vulnerable to receiving fragmented access to healthcare and a lack of continuity with providers unfamiliar with the psychosocial factors (or life changing experiences) impacting them. This resulted in less-than-optimal healthcare for these members.

What is the goal of managed care?

The goals of this program are to:

- Enhance coordination of care and access to services.
- Improve health outcomes.
- Develop and use meaningful and complete electronic medical records
- Comply fully with regulatory reporting for the program as required by the *Kenny A. v. Sonny Perdue Consent Decree of 2005*.

How does this program differ from the current Georgia Families program?

Georgia Families 360°_{SM} will provide the same benefits and services as those covered under fee-for-service and the Medicaid state plan, based on medical necessity. Georgia Families 360°_{SM} is staffed separately from the Georgia Families product line from Amerigroup, allowing a specialized focus on the specific and unique needs of our members. In addition, members enrolled in the Georgia Families 360°_{SM} program will receive:

- An assigned licensed clinician as their care coordinator responsible for coordinating services, supports, and resources for members.
- Access to providers who are trained or experienced in treating individuals with complex special needs, including children in foster care, receiving adoption assistance, and those in the juvenile justice system.
- Coordination of the initial wellness exam and dental exam for every member and trauma assessments for members in foster care when entering the Georgia Families 360°_{SM} program. Annual wellness and bi-annual dental exams are also coordinated for every member.
- A personalized *Health Care Service Plan*.
- A medication management program to assess prescribing patterns and treatment plans for members
- Nurse care managers to assist members identified as having special healthcare needs to obtain medically necessary care, health-related services, and coordinated clinical care with holistic considerations

What are care coordination teams?

Every member enrolled in the Georgia Families 360°_{SM} program has an assigned care coordinator. The care coordination teams have the following responsibilities:

- Develop a *Health Care Service Plan* for each member and communicate the needs and coordinates all the health services identified in the plan.
- Partner with state agencies, providers, caregivers, families, members, and medical consenters to coordinate necessary services
- Assess members' physical, social, and behavioral health needs through various screening tools
- Link members with external organizations, including but not limited to school districts, child protective service agencies, early intervention agencies, behavioral health, and developmental disabilities service organizations
- Locate providers and assist with scheduling physical health and behavioral health appointments and nonemergency transportation

How does a child enrolled in Georgia Families 360°_{SM} select a PCP?

Amerigroup will provide a member handbook that contains information about how to select a PCP and a provider directory that has a list of providers to select from. If a PCP is not selected, Amerigroup will select a PCP for the member. The PCP can be changed by contacting Amerigroup at the Member Intake Line at **855-661-2021 (TTY 711)**.

Will a child have to change providers if they are enrolled in Georgia Families 360°_{SM} and the current provider does not accept Amerigroup?

The Georgia Department of Community Health (DCH) and Amerigroup will make every effort to avoid disrupting services. If a child's provider does not participate in the Amerigroup network, DCH and Amerigroup will ensure there is a choice of providers who will meet the child's needs. If the member receives services that have already been authorized, he or she will be allowed to continue with the current provider and receive services until the treatment plan is complete. Providers may contact Amerigroup to begin the process of contracting with a nonparticipating provider. Amerigroup will contract with providers who meet their credentialing and contract

requirements. Providers may join the Amerigroup network as a Georgia Families 360^o_{SM} only provider.

Will Georgia Families 360^o_{SM} members have a different Amerigroup ID card?

Georgia Families 360^o_{SM} members will not have a different Amerigroup ID card, but the contact information will be different from the standard Amerigroup membership card. Georgia Families 360^o_{SM} members have a 24-hour dedicated phone number (**855-661-2021**) for any needs or questions

What if a member has other health insurance (OHI)?

If there is more than one payer, the coordination of benefits rule decides who pays first. The member's OHI will be the primary payer and Medicaid will be the secondary payer. All medical claims will be billed to the primary insurance first. If there is a balance, the doctor sends the denial *EOB* and a new claim to the secondary payer. The secondary payer decides whether to pay for the services.

What are requirements from Amerigroup regarding comprehensive child and family assessments (CCFA)?

Amerigroup is required to ensure:

- *CCFA* medical assessments are complete and providers' assessment results are sent to the DFCS or the CCFA provider within 10 calendar days of receipt of the eligibility file or notification from DFCS.
- Members receive the specified care identified in the assessments in a timely manner.

What is a trauma assessment?

Trauma assessment is a component provided to all foster care children placed in DFCS custody over the age of five. The comprehensive trauma assessment identifies all forms of traumatic events experienced directly or witnessed by the child to determine the best treatment for that child. The comprehensive trauma assessment must provide recommendations to coordinate services and meet the child's needs. The trauma assessment is completed within 15 days of enrollment.

How do providers participate in care coordination?

Providers can play an important role in care coordination:

- Send in medical records to help in care coordination.
 - Medical records must be submitted within 24-72 business hours of service delivery via fax to **888-375-5064**.
- Call us if you have questions on claims or service authorizations.
 - When in doubt, ask for explanations or information on claims and denials. A quick call or email can often time solve a question that is impacting member care.
- Encourage families and caregivers to contact their care coordinator for support or to help navigate care and services. They can find their care coordinator by:
 - Calling Member Services at **800-600-4441**.
 - Visiting our website at <https://www.myamerigroup.com/ga/your-plan/georgia-families-360.html>.
- For complaints, contact the ombudsman via email at helpomb@amerigroup.com or by phone at **855-558-1436**.

What does ombudsman mean? What if a member has a complaint?

The Office of the Ombudsman helps solve problems from a neutral view to ensure our members get all medically necessary covered services. The ombudsman provides a voice to speak to and acts on behalf of Amerigroup members. The ombudsman can be reached via email at helpomb@amerigroup.com or by phone at **855-558-1436**.

Why do some services and prescription drugs require prior authorizations?

Prior authorizations are required to ensure:

- The appropriate care, medication, or medical exam is ordered.
- The appropriate types and dosages of prescription drugs are ordered.
- Services are not duplicated.

Amerigroup provides information through Provider Updates and the Provider Manual with information about what services and prescription drugs require prior authorization and the process for obtaining prior authorization. To learn more, visit

<https://provider.amerigroup.com/GA>.

What is value-based purchasing?

Value-based purchasing is a voluntary provider incentive program designed to reward contracted providers who consistently deliver high-level services to our Georgia Families 360^o_{SM} membership. To learn more about enrolling and participating in the value-based purchasing program, contact Provider Services at **800-454-3730**.

If I am a provider and want to make a comment and/or ask a question about the program, how do I do that?

For more information or to make a comment about the program, contact us at GF360@amerigroup.com or call Provider Services at **800-454-3730**.

What trainings does Amerigroup make available to providers?

Training and outreach are provided by Amerigroup providers. To learn more about the trainings available to you, visit <https://provider.amerigroup.com/GA> or contact Provider Services at **800-454-3730**. All providers are provided with the link to the most current provider manual on the Amerigroup portal.