

Q4 2025 Medicaid Provider Network Townhall

Welcome Washington providers



Steven Romero

Director of Provider Relationship Management

Reminders:

Please mute your phone or device.

You will be able to enter questions and comments in the chat box at that time.

At the end of our presentation, please take a quick minute to complete the attendance survey.

- Your name, group/practice name, TIN, or NPI.
-

Deck will be available on our provider site.



Steve Romero

Dir. Provider Relationship Manager

Medical Advisory Committee (MAC):

- Recruiting providers to be voting members

Wellpoint Provider Community Investment

\$500,000 Wellpoint Scholars Fund

What can we do with you?



Medical Advisory Committee

The Medicaid Medical Advisory Committee (MAC) is looking for new voting members from a variety of specialties to serve as external consultants and to provide feedback on a multitude of topics.

You can help us provide applicable advice and input to the QMC in the development of action plans on improvement of HEDIS®, CAHPS, network accessibility, and provider satisfaction metrics.

Here is the commitment:

Attend and participate in the quarterly meetings. Each quarterly meeting is scheduled for 90 minutes.

- Join us in person or via phone. You will receive a \$200 honorarium for every meeting you attend.
- You will also be given the opportunity to present your organization's work to the group.



HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

Wellpoint Community investment with our providers

Wellpoint Scholars Fund – \$500,000 five-year program with UW School of Nursing

Third year, placing UW School of Nursing Psychiatric-Mental Health Nurse Practitioners (PMHNP) in transitional housing settings, in partnership with Compass Housing

What can we do with you?

- We sponsor well-child days.
- We sponsor immunization fairs.
- What do you need? Let us know!



Contact David Escame, Dir. Marketing & Community Relations (david.escame@elevancehealth.com) or your PR Account Manager



Christopher McGinnis

Provider Relationship Account Manager

Trauma-informed care (TIC)

Trauma-informed care resources



Trauma-informed care (TIC)

Importance of TIC

Trauma-informed care (TIC) is essential because it recognizes the widespread impact of trauma on an individual's mental, emotional, and physical well-being. By understanding and acknowledging these impacts, TIC aims to create an environment that promotes healing and avoids re-traumatization. By prioritizing TIC, organizations and care providers can create supportive networks that facilitate recovery and promote healthier communities.

- **Comprehensive understanding:** TIC helps caregivers and care providers recognize signs of trauma and understand its pervasive effects on behavior and health
- **Safety and trust:** TIC fosters a safe and supportive environment where people feel secure and respected, which is pivotal for healing
- **Empowerment:** TIC emphasizes the individual's autonomy and empowers them to take active roles in their recovery, enhancing their self-efficacy and resilience



Trauma-informed care (TIC) (cont.)

- **Avoidance of re-traumatization:** By being aware of trauma triggers, caregivers can better avoid practices or interactions that may inadvertently exacerbate a person's trauma
- **Personalized care:** TIC promotes individualized care plans that are sensitive to the unique experiences and needs of each person, improving treatment effectiveness
- **Holistic approach:** Recognizing that trauma can affect all aspects of someone's life, TIC integrates physical, emotional, and social dimensions in recovery efforts
- **Improved outcomes:** By addressing trauma, this approach often leads to better health outcomes, increased engagement, and compliance with treatment



TIC resources

TIC training opportunities and requirements

Access TIC training on the Washington State Department of Social and Health Services website at [Training Center \(tiawashington.com\)](https://tiawashington.com) or contact healthcare Networks at [Email a Provider Experience Associate](#) to request TIC training for your practice at no charge.

TIC Links:

- [Trauma-Informed Care \(samhsa.gov\)](https://samhsa.gov)
- [Trauma-informed approach \(hca.wa.gov\)](https://hca.wa.gov)
- [Guide to Completing the Agency Self-Assessment \(PDF\) \(hca.wa.gov\)](#)



Sam Giddens and Heidi Nelson, RN

Quality Management

PCP appointment availability

After-hours access standards



PCP appointment availability

- Timely access to care ensures patient satisfaction and optimal health outcomes
- Adherence to established time frames prioritizes patient needs based on urgency and condition type

| Access standards | Medical | Behavioral health | Specialists |
|---------------------------------|------------------|-------------------|------------------|
| Urgent care | 24 hours | 24 hours | 24 hours |
| Routine care | 30 calendar days | 30 calendar days | 30 calendar days |
| Non-urgent sick | 10 calendar days | 10 calendar days | 10 calendar days |
| Follow up after hospitalization | 7 days | 7 days | N/A |

The provider manual covers the responsibilities of the PCP as well as appointment availability and after-hours access standards . For a current copy of the provider manual, visit our website at <https://provider.wellpoint.com/wa>.



After-hours access standards

After-hours care: PCPs should provide 24/7 coverage. When a patient calls after hours, a live person or recording should direct them to the on-call practitioner, an urgent care center, an emergency room, or directed to call 911. Regular hours of operation should be clearly defined and communicated to members.

The health plan conducts telephone surveys annually for PCPs, specialists, and behavioral health providers, and all appointment types (urgent, non-urgent, and routine care)





QM plan supports contacts

Sam Giddens, Business Change Manager
sam.giddens@wellpoint.com

Heidi Nelson, RN, Clinical Quality Prog Admin
heidi.nelson@wellpoint.com



Yolanda Frazier

MBA MPR

Medicaid Whole Health and Health Equity Director

Deployment of health equity

How is health equity deployed within our departments



The Wellnesspalooza impact

Event Overview

The WLP WA Whole Health Wellnesspalooza Health Fair, curated by the Whole Health, Health Equity Director, took place on Saturday, November 8, 2025, from 11 AM to 1 PM PST at Living Hope Church, as part of *Wellpoint's ongoing commitment to the whole health of Washingtonians.*

Event Highlights:

Hosted in collaboration with local community organizations, the fair provided attendees access to a variety of free health services, educational opportunities, and family-friendly activities.

- Featured services included free blood pressure checks from New Heights Clinic and liver screenings from Verity Health, enabling attendees to monitor their health and detect potential conditions early.
- On-site vaccinations were offered to protect against influenza and COVID ahead of the winter season.
- Attendees engaged with the Whole Health, Health Equity Director, and Marketing Communications Representatives to learn about accessing health insurance and other Wellpoint resources.
- Nutritious food options and family-friendly entertainment were enjoyed by all.
- The event also offered additional services such as ID assistance, Columbia Sportsman Jackets giveaways, mobile showers, and a clothing closet for the homeless, and more!





The Impact, the outcome

Community partners involved: Living Hope Church, CoHeart Douglas, Live Love Outreach, EOCF, Safeway/Albertsons, Pink Lemonade Project, New Heights Clinic, Ethnic Support Council, Council for the Homeless, Latinos Unidos Y Floreciendo, Red Leaf Organic Coffee, NAACP State Area Conference, SWACH, and Verity Health.

Attendance and engagement:

- Approximately 70 people attended, with insurance coverage from Wellpoint, Regence, Molina, and Legacy. 21 partners/vendors are also connected to receive services. Multiple people attended without signing in.
- The event successfully addressed the noticeable social and clinical resource needs under one roof, prompting requests to continue it with additional services/resources next year (for example, the DOH Mobile Van, ID assistance, and an outside fair).

Next steps:

- Plan next year's event, incorporating participant feedback to further enhance offerings.
- Continue to strengthen partnerships with local organizations and explore new opportunities to support the community's health and well-being. (*NCQA HEA+).





The Impact, the outcome (cont.)

Whether participants aimed to kickstart their wellness journey or build on existing habits, the event provided a welcoming environment to explore new activities and connect with services supporting physical, mental, and emotional well-being.

Inaugural Wellpoint Health Fair:

- RFP
- Whole Health Initiative CSA (Consumer Supported Agriculture)
- Health Equity (NCQA Health Equity Plus Accreditation)
- Annual Enrollment (Likely to attend a health fair for gaps in care.)
- Apple Health Scorecard focus



One community, many needs, boundless love



Your whole health is our whole point

Yesenia Felix

Provider Relationship Account Manager

Availity

Roster automation

Claim functionality

PCP change requests



Availity Essentials: roster automation

Roster automation:

- You may continue to use the WA MCO-approved [Roster Automation Template](#). This template can be found via our Wellpoint Provider website under the Resources heading and Forms tab.
- Live Webinars for training on topics such as Roster Automation Template, Rules of Engagement, and PDM are available via Availity Essentials. To access these trainings, log in to Availity and navigate to the [Get Trained](#) section to find the next live training date.
- No future dates are currently available. Sign up for our [Provider Newsletter](#) to remain up to date when new live webinar dates are scheduled.
- There are also pre-recorded **Roster Automation Template** and **Rules of Engagement** trainings available through Wellpoint's [Availity Learning Hub](#).
- For any questions about **Roster Automation** or submitting through **Availity PDM**, please reach out to your provider **relations rep**, or you may submit an email request through our website via the [Contact Us Webform](#). Please allow 48 business hours for a response to your email submission.



Availity Essentials: claim functionality

Availity Essentials allows providers to complete many claim-related functions via self-service

You are able to:

- Submit and view the status of claims
- Upload attachments
- View Remittances
- Submit claim reconsiderations and appeals
 - Please ensure you have followed the disputes and appeals process prior to escalating a claim issue to your Provider Representative.

Resources for disputes and appeals can be found on our provider website, under the [Claims](#) section.



Availity Essentials: PCP change requests

Providers are now able to submit PCP change requests for members via Availity Essentials

This can be accomplished by navigating to **Payer Spaces > Wellpoint > PCP Change Request** within Availity and submitting the required Member and Provider information.

Once the request is submitted, you will receive a confirmation of the submission, and the change will take effect immediately



Gizelle Daugherty

Senior, Network Management

Wellpoint's Medicare D-SNP

D-SNP model of care



D-SNP model of care

All D-SNP plans are required by CMS to have a model of care that provides the basic framework under which the D-SNP will meet the needs of each of its members. **What does the model of care do?**

Identifies and evaluates D-SNP population

Details care coordination procedures

Details importance of the provider network and role of the provider

Identifies quality measurement protocols and expectations



D-SNP model of care (cont.)

The model of care is a vital quality improvement tool and integral component for ensuring that the unique needs of each member are identified by the D-SNP and addressed through the plan's care management practices.

The model of care provides the foundation for promoting D-SNP quality, care management, and care coordination processes.

Our model of care is unique and distinct to our plan. Another payer's model of care cannot be applied Wellpoint Full Dual Advantage (HMO D-SNP).

Participating providers are required to take Wellpoint's model-of-care training annually. The training can be found under training & education on our [provider website](#)

Adherence to our model of care ensures that members have improved quality of care and better health outcomes.



What providers need to do

- Complete the Model of Care Training and Attestation
- As part of our Care Coordination procedures from the Model of Care training, access your members' Care Plans in Availity, review them, and complete any required fields.
- Care providers can find the HRA and ICP in Availity, under the Total Member View (TMV) dashboard, in the care management tab.

The screenshot displays the Availity Care Management Summary dashboard. At the top, there is a navigation bar with tabs: Monitor Care Summary, Claims, Pharmacy, Labs, Care Management, Lab Reports, Provider Data, and Feedback History. The Care Management tab is currently selected. Below the navigation bar, the dashboard is divided into several sections. On the left, there is a 'Care Plan & Assessments' sidebar with a 'Summary' section. The main area on the right is titled 'Care Management Summary' and features a large calendar view showing dates from 2022 to 2024. Below the calendar, there are sections for 'Identifications' (with links for Assessments, CM Program Enrollment, and CM Program Enrollment), 'Tasks' (with a table for Due Date, Subject, Assigned To, Created By, Created Date, Status, and Source), and 'Chronic Conditions'.

| Due Date | Subject | Assigned To | Created By | Created Date | Status | Source |
|----------------|---------|-------------|------------|--------------|--------|--------|
| No Tasks Found | | | | | | |

Chronic Conditions:
N/A



Chrissie Hollkamp

Provider Relationship Account Director, BH

Behavioral health reminders

Infant-Early Childhood Mental Health (IECMH)

Clinical Data Repository (CDR)

Autism center of excellence training



Infant-Early Childhood Mental Health (IECMH)

In 2021, the Washington State Legislature introduced a new policy to support Apple Health providers in implementing best practices for mental health services in children aged 0-5 years. Under this policy, mental health professionals are required to use the Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC: 0-5) framework for assessing and diagnosing children in this age range.

Free training in DC: 0-5 and other supports connected to Infant and Early Childhood Mental Health (IECMH) are available year-round for relevant Apple Health providers. The clinical DC: 0-5 training aims to develop a deeper understanding of this diagnostic classification system and effectively employ it in creating child-focused solutions.

Two training variations are offered: DC: 0-5 Clinical Training for Mental Health Providers and DC: 0-5 Overview Training for Allied Professionals. The interactive trainings include activities and case-based learning. With a focus on developmental diagnosis, relationship-based approaches, and culturally inclusive methods, the training will equip professionals with skills to identify and respond to mental health concerns early on in a child's life.

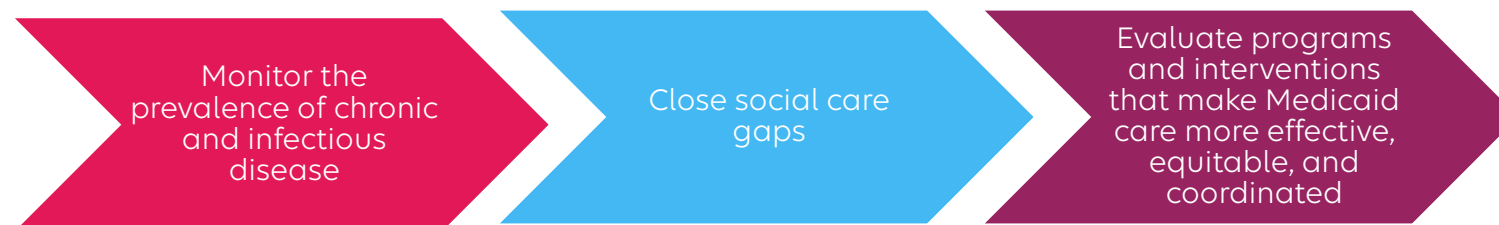
To participate, attendees must complete the full training session. The training program has been approved for CEUs and counts towards the WA-AIMH Infant Mental Health Endorsement. For further information and inquiries on how to enhance IECMH services in your program or organization, please review the materials provided at [DC:0-5 Clinical Training - Center for Early Relational Health](#). The next training is scheduled for December 3.



Clinical Data Repository (CDR)

The Clinical Data Repository (CDR) is our state's mandated reporting program for collecting clinical data on Apple Health (Medicaid) patients.

When your organization shares data with the CDR, you help improve the health of Washingtonians far beyond your own patient population. The CDR provides the clinical insight needed to:



Key Points:

- Providers may not realize they have become disconnected or are not connected
- There is no additional Health Information Exchange (HIE) cost to restart submissions to the CDR for providers who have an active agreement

Please let us know if you have any questions — we can schedule a brief 20-minute call to discuss CDR compliance or confirm that you have what you need to start or restart submissions.



WA State Autism Center of Excellence (COE) Training December 5th

Live Zoom Training

Friday, December 5th, 2025

8:30a-4:30p

To register online, visit

<https://medicalhome.org/coe>

Please register no later than Monday of the training week you want to attend

Email for information:

autismcoe@uw.edu



Washington State Autism Center of Excellence (COE) Certification Training

Completion of a free online 3 credit CME 1 course – "Autism Identification and Collaborative Care" from the American Academy of Pediatrics/ Pedialink is required before the training. Details can be found on the Medical Home website found below.

To register online, visit

<https://medicalhome.org/coe>

Please register no later than Monday of the training week you want to attend

Email for information:

autismcoe@uw.edu

Training based on the user friendly "Washington State Autism COE Quick Start Guide"!

<https://medicalhome.org/COEquickstart.pdf>

CENTER OF EXCELLENCE (COE) certification allows eligible providers to diagnose autism spectrum disorder for pediatric patients with Washington State Medicaid insurance.

Live ZOOM Training: Friday, Dec 5, 2025, 8:30-4:30 pm

Eligible COE providers: MD, DO, ARNP, ND and PA-C.

Note: Neurologists, psychiatrists, licensed psychologists and developmental behavioral pediatricians are recognized as COEs without attending the training.

SLPs, OTs, mental health clinicians, care coordinators, school personnel, administrators and other partners in evaluating and /or caring for autistic children and youth are also welcome.

Presenters:

- Gary Stobbe, MD: Attending Neurologist, Seattle Children's Autism Center, Director, UW Medicine Adult Autism Clinic
- Jim Mancini, MS, CCC-SLP: Speech-Language Pathologist, University of WA, Director of WA INCLUDE and Project ECHO WA
- Jen Gerdtz, PhD: Psychologist
- And additional multi-disciplinary experts

The free COE training focuses on current research and thinking regarding the evaluation, treatment and continuing care for autistic children and youth and their families including:

- Getting support from your administration
- Screening, evaluation and diagnosis
- Differential diagnosis and co-occurring diagnoses
- Diagnostic evaluation models
- Applied Behavioral Analysis (ABA) and other Interventions
- Documentation, billing codes and orders
- Lived experience perspectives from autistic and family advocates
- Advice from current community COE clinicians
- Resources for families
- ECHO Autism Washington and other follow up support
- Q & A and connect with regional partners

Applied behavior analysis providers

Certified behavior technicians (CBT) and licensed assistant behavior analysts (LABA) must be enrolled with Apple Health as a servicing provider (also known as rendering or performing provider), and their National Provider Identifier (NPI) must be listed on claims for services provided.

As of July 1, 2025, all CBTs and LABAs working with Apple Health clients must meet the following requirements:

Have an active CBT or LABA license with the Department of Health (DOH)

Have an NPI

If part of a health care group or organization with a CPA, enroll with HCA as a servicing provider or non-billing provider under the group's CPA

If applicable, be listed as a servicing provider on the group's roster submitted to the managed care organization (MCO)



New BHSS provider standards

Behavioral health support specialist (BHSS) is a new provider type effective as of January 1, 2026

This provider type will be recognized by provider taxonomy 101Y00000X

SERI and Mental Health Part 2 users are no longer required to use the HN modifier

Removal of the HN modifier will be published in a SERI interim guidance document and effective as of January 1, 2026





BH provider supports contacts

Denise Abreu, BH Provider Relationship Account Manager

denise.abreu@wellpoint.com

Chrissie Hollkamp, BH Provider Relationship Account Director

chrissie.hollkamp@wellpoint.com



We'll tie it up with *Open discussion*

We want to hear from you.

Steven.Romero@Wellpoint.com
(Director, Provider Relationship)

Jady.Au@Wellpoint.com (Senior,
Provider Relationship)

Reminder:

Please complete the post-event
survey after the town hall.





Coverage provided by Wellpoint Washington, Inc. Wellpoint Washington, Inc. profoundly acknowledges and respects the inherent sovereignty of the federally recognized Tribes in Washington state. In our efforts to promote high-quality healthcare, we honor the Tribal right of self-governance, holding in deep esteem the government-to-government relationship existing between the state and the Tribes, a bond reiterated by the Centennial Accord and established by RCW 43.376. We heartily commit to enhancing our coordination, collaboration, and recognition of the deeply rooted traditions and values of the Tribal communities.