

Community Care Network (CCN) —Regions 1-5 For Community Providers

The Department of Veterans Affairs (VA) is committed to providing eligible Veterans with the care they need when and where they need it. To streamline VA's community care programs, the VA MISSION Act was signed into law on June 6, 2018, providing more choices and robust care coordination for Veterans by consolidating multiple programs into one. A significant component of having one method for Veterans to receive care from community providers are the CCN contracts awarded to third-party administrators (TPAs). The contracts and associated TPAs each cover established regions, which are aligned to state boundaries to ensure that health care services and resources are available to our diverse Veteran population. CCN's goal is to improve transparency, accountability, quality, and communications between Veterans, community providers, and VA staff.

The CCN TPAs develop and administer regional networks of high-performing credentialed community health care providers working together with VA providers and practitioners. Collaboratively, they work alongside one another providing medical, surgical, Complementary and Integrative Health Services (CIHS), durable medical equipment, pharmacy, and dental services to eligible Veterans who are unable to receive care at a VA medical center (VAMC).

On Dec. 28, 2018, VA announced a new partnership with Optum Public Sector Solutions, Inc. (Optum), a subsidiary of UnitedHealth Group, Inc., to manage CCN Regions 1, 2 and 3.

On Aug. 8, 2019, VA announced a new partnership with TriWest Healthcare Alliance (TriWest) to manage CCN Region 4. On Oct. 1, 2020, VA announced TriWest will manage Region 5.

Optum and TriWest bring years of experience successfully delivering services to beneficiaries associated with federal and state agencies.

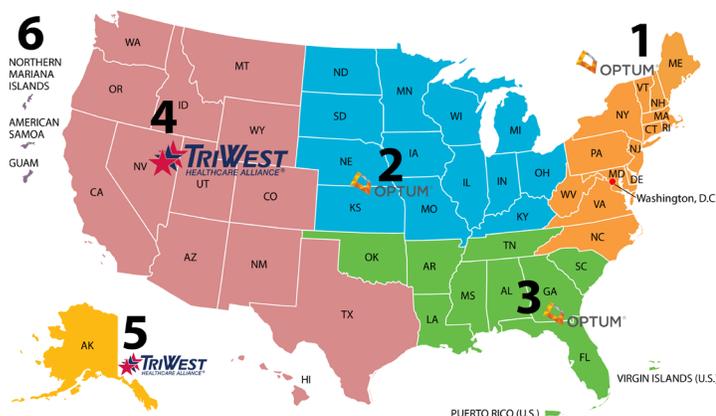
Overview

Q1. Can community providers have an agreement directly with VA or do they have to sign up with Optum or TriWest, depending on the region?

As VA transitions to CCN, community providers who wish to continue serving Veterans in partnership with VA medical centers must sign up with either Optum or TriWest, depending upon their region.

In Regions 1, 2, and 3, community providers must sign up with Optum and their United Healthcare Group (UHG) affiliates. In Regions 4 and 5, community providers must sign up with TriWest.

Once CCN is deployed, Patient-Centered Care Contracts (PC3) will be phased out by VAMCs and community providers will need to join CCN, as mentioned above. Some providers may have received auto-amendments to their existing PC3 contracts that do not require a signature, while others need to sign an updated or new contract to continue seeing Veterans under CCN. Veterans Care Agreements (VCAs) and direct local contracts will be the only other avenue in which providers may be able to provide services to Veterans. However, these agreements will be very limited and, in most instances, will only be approved if the services cannot be provided under CCN.





Q2. Are community providers currently in the TriWest network under a PC3 contract required to do anything to join CCN?

Community providers will not be automatically enrolled in CCN. They must sign up with their respective third party administrator to continue providing service to Veterans under CCN. In Regions 1, 2 and 3, they must sign up with Optum. In Regions 4 and 5, they must sign up with TriWest.

While TriWest is serving as the TPA for both PC3 and CCN contract vehicles in Regions 4 and 5, community providers must ensure their agreements with TriWest are updated to CCN and compliant with all program requirements. For more information about CCN provider contracts, visit <https://ccn.triwest.com>.

Q3. Can providers be excluded from CCN due to quality of care?

Yes. CCN is focused on ensuring the providers in the network are delivering quality care for Veterans. As such, VA may prohibit network participation of providers listed on the U.S. Department of Health and Human Services (HHS) Office of Inspector General (OIG) List of Excluded Individuals/Entities (LEIE) and/or providers listed on the General Service Administration (GSA) System of Award Management (SAM) exclusionary lists.

Eligibility

Q4. Will CCN have eligibility requirements?

Eligibility for community care is determined before a Veteran can be referred to a CCN community provider. Additional information on eligibility for community care can be found here: https://www.va.gov/COMMUNITYCARE/programs/veterans/General_Care.asp.

Referrals

Q5. Are referrals from VA required for Veterans to visit a community provider?

Yes. Before a Veteran receives care or services from a CCN-participating provider, VA must issue a referral for the Veteran to a specific community provider. If a community provider delivers care or services without an authorized referral, the care or services may not be reimbursed.

Community providers will receive a referral packet for a specific Standardized Episode of Care (SEOC). The referral packet will include the SEOC, its title, and its content

including a start and end date, along with a specified number of visits and/or services. Services provided within the SEOC are approved for the specified episode of care. However, providers are to look at the consult/order itself to see that services are specifically requested. If the community provider deems additional services are clinically necessary which are not on the consult/order but found on the SEOC, the community provider should contact the VA Medical Facility Community Care Office to coordinate services that are reasonably available within the VA system.

For community providers that choose to use HealthShare Referral Manager (HSRM), VA's referral and authorization system, they will be able to see the relevant information related to a specific referral through the tool.

Q6. What happens if a referral is needed for additional health care services beyond what was requested in the original referral?

In the event that a community provider identifies a need for additional care that falls outside of the original SEOC or needs to extend the duration under the original SEOC, a Request for Services (RFS) is sent to VA for review and processing. Once the RFS form is received by the VA, it will be clinically reviewed by Community Care staff for approval. If approved, the completed referral will then be sent back to the community provider via their preferred communications method.

Q7. When will community providers receive a new referral from VA for a Veteran they are currently seeing?

Community providers will start receiving new referrals as CCN is deployed to VAMCs in the respective regions.

Claims and Provider Reimbursements

Q8. Will the new CCN contract improve the timeliness of payments to community providers?

Yes. Community providers under CCN will be paid within 30 days of submitting a clean claim to their region's respective third-party administrator. Optum will pay claims submitted by community providers in Regions 1-3; TriWest will pay claims submitted by community providers in Regions 4 and 5. To ensure timely claims processing, Optum and TriWest will educate community providers in their respective regions on how to submit clean claims.



Q9. How will community providers file a claim, and who do providers call if there is a payment issue?

In Regions 1-3, providers can find instructions for filing electronic and paper CCN claims for medical, behavioral health, dental, and pharmacy services at Optum's CCN website, <https://vacomunitycare.com>. All claims must have a referral number. Claims issues will be able to be resolved through Optum's CCN Provider Services Line, 888-901-7407.

In Regions 4 and 5, providers can find instructions for filing electronic and paper CCN claims for medical, behavioral health, dental, and pharmacy services from the TriWest Payer Space -- Availity -- accessible at <http://www.availity.com/>.

Availity is an online platform where providers can manage the multiple health plans they accept, all in one place. Availity is a one-stop shop for information related to CCN. Providers can use Availity to submit claims, access authorization information, receive training, and access resources and information.

Q10. What is the CCN reimbursement rate for approved services?

For claims submitted with a valid referral number, services will be reimbursed at 100% of the Centers for Medicare & Medicaid Services (CMS) Fee Schedule amount. Covered services that are not covered by CMS or for which CMS does not have local pricing, reimbursement will be made according to the VA Fee Schedule. If the VA Fee Schedule does not include a rate for the covered service provided, reimbursement will be made at 100% of customary charges. For services that have a negotiated rate between VA and the TPA, providers will be paid at a negotiated rate between Optum or TriWest, respectively, and the provider. Dental providers are reimbursed according to contract schedule.

Additional Information

Q11. Where can community providers find additional information on CCN?

VA information on CCN, including upcoming trainings, can be found here: <https://www.va.gov/COMMUNITYCARE/providers/index.asp>.

Optum has launched their official CCN website, <https://vacomunitycare.com>. This site includes:

- Administrative tools to help you submit claims, as well as track and submit referrals
- CCN announcements and news
- Program forms, the provider manual and provider materials
- Links to VA policies and procedures
- Information on joining Optum's CCN network

TriWest's official CCN website is at <http://www.triwest.com/provider>. This site includes access to:

- Webinars
- Bite-sized videos called MicroLearnings, and eSeminars that train on the CCN processes for appointing and authorizations, claims submission, and referral requests
- A library of Quick-Reference Guides
- The CCN Provider Handbook
- How to join the TriWest CCN network

Q12. Who do community providers contact if they have additional questions?

Community providers who have received a contracting packet from Optum for Regions 1-3 or TriWest for Regions 4 and 5 may reference it for contact information to address additional questions and provide general CCN information.

Additionally, Optum has set up a Provider Services line for Regions 1, 2 and 3 available from 8 a.m.- 6 p.m., local time, Monday – Friday for community providers to obtain approved referral information, check claims status and request information about the appeals and grievance process.

The customer service lines for providers in Regions 1-3 are:

- Region 1: 888-901-7407
- Region 2: 844-839-6108
- Region 3: 888-901-6613



For providers who are interested in participating in CCN, but have not received an amendment to an existing contract or a new contract, please e-mail Optum at VACCNProviderContracting@optum.com to request participation. To ensure that Optum can route the inquiry to the most appropriate network affiliate and provide a comprehensive response, it is helpful if providers include the following information in the e-mail:

- Provider name
- Provider location(s) (at a minimum city/county and state)
- Provider type(s) / specialty(ies)
- Number of providers (e.g. 2 physicians, 1 general acute care hospital, etc.)
- National Provider Identifier (NPI) and/or Tax identification number(s)
- Point-of-contact name, phone number, e-mail and mailing address
- Note that you are requesting to participate in CCN.

TriWest's Provider Services line for Regions 4 and 5 is available from 8 a.m. – 6 p.m., all time zones, for community providers.

Regions 4 and 5 providers can call 877-CCN-TRIW or directly at 866-284-3743 to speak to a provider services representative for questions relating to referrals, claims, how to join the network, and more.

For Regions 4 and 5 providers interested in joining the CCN network, please visit <http://joinournetwork.triwest.com> or email providerservices@triwest.com for more information.

For additional questions regarding the CCN Regions 4 and 5 third party administrator, TriWest, visit <https://ccn.triwest.com/>.

CCN community providers with additional questions can visit https://www.va.gov/COMMUNITYCARE/providers/Community_Care_Network.asp or call the toll-free VA CCN Customer Service number at 877-226-8749.