

Frequently asked questions

For behavioral providers

Welcome to Evernorth Behavioral Care Group

What is Evernorth Behavioral Care Group?

Evernorth Behavioral Care Group (EBCG) is a community of committed behavioral health clinicians, grounded in the core belief that high quality behavioral health care is critical to whole person health. We are focused on simplifying care delivery and enabling our clinicians to focus on their patients and our customers. EBCG helps to eliminate the administrative burden of operational management.

Why are you contacting me?

EBCG has secured a contract with the Cigna Medicare Advantage plan to perform the Guided Care for Seniors Program. We are looking for providers in your area to perform the assessments.

Why would I deliver services under EBCG?

EBCG offers a premium reimbursement plan without the administrative burden of submitting claims and collecting cost share. EBCG has expansion plans that include securing contacts with payer organizations, which may help providers expand their professional relationships and increase patient referrals.

Working with EBCG

What services do participating providers render?

EBCG-participating providers render Guided Care for Seniors Mental Health and Substance Use Assessments to patients who have a Cigna Medicare Advantage plan issued in Arizona.

What is the scheduling process?

Participating providers will receive appointments via Simple Practice EMR, scheduled 48 hours in advance by our Guided Care for Seniors scheduling team.

What are the expectations of participating providers?

As a participating provider, you would keep your Simple Practice Calendar up to date with your current availability. Once the patient is assigned to you and scheduled, our expectation is that you would see the patient and complete the appropriate assessment forms within the Simple Practice platform. The assessments are due within 2 business days after seeing the patient.

See the table on the next page for more information about the required guidelines.

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Behavioral Care Group

Guidelines	
Participating providers must follow the guidelines below:	
Action	Required time frame
Provider availability within Simple Practice	Must be maintained and updated, as necessary
Conduct assessment	Within 5 business days of outreach
Complete "Guided Care for Seniors: Mental Health and Substance Use Assessment"	Within 2 business days of date of service

Can I provide ongoing behavioral services?

Yes. If you are a contracted provider for the Cigna Medicare Advantage plan, you could offer ongoing clinical services to patients, as appropriate. However, it is *not* a requirement to see patients for ongoing care. If you are *not* willing or able to deliver ongoing care, EBCG will assist in connecting the patient to the recommended services.

If I participate with EBCG, will it affect my relationship with any other payer or any contract? No. Your participation with EBCG will not affect your relationship with other payers or contracts.

Where can I locate the Mental Health and Substance Use Assessment template?

Once an assessment is scheduled, you will see the assessment form on the Simple Practice client page as a drop-down option.

How do I complete the assessment?

Log-in to Simple Practice

- Click Clients
- Search/choose appropriate client
- From the Overview page, click New
- Click Assessment
- Pick the mental health assessment and complete all fields
 - o Supplemental documents are available for use (GAD, TAPS, PHQ-9, MDQ)

Will there be performance metrics?

The only metrics being tracked at this time are contained within the above scheduling guidelines.

Reimbursement

How long does it take to get paid?

Providers receive payment within 15 business days of EBCG approving the completed assessment document.

How do I get paid?

EBCG issues payment through a contracted service provider via electronic funds transfer (EFT).

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Eligibility and claims

Do I need to check eligibility and benefits?

No. EBCG has removed this administrative burden for providers. We only refer patients who are eligible for the service.

Do providers need to submit claims?

No. When you submit a completed assessment, there is no further action required of you. The use of a third-party biller or electronic medical record (EMR) clearinghouse is *not* required. This will be completed by the EBCG Practice Admin staff.

Do providers have to collect customer cost-share?

No. There is no patient cost-share for Medicare Advantage assessments.

What happens if a payment is missing?

If a payment cannot be located for rendered services, providers should contact ECBGPracticeadmin@evernorth.com.

Contracting

What are the contract terms with EBCG?

The term of the agreement with EBCG is for one (1) year from the effective date, and will automatically renew for an additional one (1) year period, unless terminated by the provider.

Is there a non-compete clause?

No. The agreement with EBCG does not include a non-complete clause.

What are the credentialing requirements and process?

Providers must maintain an active and accurate Council for Affordable Quality Healthcare (CAQH) profile. The CAQH number must be provided to EBCG on the Provider Screening Form.

What does it mean to be a 1099 contractor?

As an independent contractor, the provider is fully and completely responsible for appropriate selfemployment tax payments, social security, worker's compensation, health or disability insurance, unemployment compensation, and any other tax or insurance payments as may be required by law.

Providers agree to indemnify, defend, and hold harmless EBCG for any action, claim, administrative investigation or hearing, including, without limitation, all damages, assessments, back taxes, costs, or expenses (including actual and reasonable attorney fees), arising out of or relating to any challenge to the status as an independent contractor.

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What are the malpractice insurance requirements?

Throughout the term of the agreement, providers shall maintain, at their expense, general and professional liability coverage in a form and amount acceptable to EBCG. Providers must provide EBCG with evidence of coverage upon request and provide EBCG with immediate written notice of a material modification or termination of such insurance.

Additional information

- If you have questions about EBCG, non-contracted providers please contact ECBGProviderservices@evernorth.com.
- If you would like to refer behavioral providers to EBCG, please contact <u>ECBGProviderservices@evernorth.com</u>
- Contracted providers, please outreach EBCGPracticeadmin@evernorth.com.

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