

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance



Health Care Delivery Management Administration

August 25, 2017

To All District Providers,

This letter is to inform you that effective October 1, 2017, **MedStar Family Choice District of Columbia (MFC)** will no longer participate in the District's Medicaid Managed Care Program that includes DC Healthy Families and the DC Healthcare Alliance Programs. MFC enrollees will be transferred to the newly awarded Managed Care Organization (MCO), **Amerigroup District of Columbia, Inc. (Amerigroup DC)** for their health care needs. These enrollees will be given an opportunity to select an MCO of their choice if not satisfied with the auto-transfer to Amerigroup DC.

As a reminder, enrollees have ninety (90) days from the effective enrollment date to select another MCO should they choose to do so. **All enrollees that voluntarily select one of the incumbent MCOs, AmeriHealth Caritas District of Columbia (AmeriHealth Caritas) and Trusted Health Plan (Trusted), will be enrolled accordingly.** Therefore, due to this activity, it is important that you verify eligibility and the assigned MCO **prior** to rendering any services. Information about your patients, prepared by MFC's medical management staff, will be provided to Amerigroup DC to make this process as seamless as possible.

MFC is responsible for all services rendered to its enrollees until 11:59pm on September 30, 2017, as well as medical/surgical inpatient admissions that begin on or before the termination date of September 30, 2017 and continue beyond that date.

To prevent any disruption in care for DC Healthy Families and Alliance beneficiaries, the Department of Health Care Finance (DHCF), in conjunction with the three (3) participating MCOs, is confirming the clinical commitments established by MFC to ensure continuity of care and service.

Beneficiary Re-Assigned to Another MCO during the Transition Period:

1. Through November 30, 2017, all participating providers shall honor referrals or prior authorizations for MFC enrollees initiated prior to October 1, 2017.
2. AmeriHealth, Amerigroup DC and Trusted agree to honor active referrals and prior authorizations (PAs) previously issued by MFC and will reimburse accordingly.

Specialist Referrals for Beneficiaries Re-Assigned to Another MCO during the Transition Period:

Upon receiving a referral to treat a former MFC Alliance or DC Healthy Family enrollee during this transition period, specialty providers are expected and authorized to initiate their own referrals for additional tests and procedures. The specialist should not refer the patient/enrollee back to their primary care physician (PCP) to obtain a referral for such services. The additional services are covered under the initial referral to the specialty provider.

If you do not have a contract with these MCOs, you may wish to contact their respective Provider.

Relations staff listed below. Representatives from the health plans will be available to answer your questions.

Amerigroup District of Columbia, Inc.

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AmeriHealth Caritas District of Columbia

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Director, Provider Network Management
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Trusted Health Plan

Kenny Greene
Vice President, Provider Relations
Office: (202) 821-1103
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We apologize for any inconvenience this necessary activity may cause. Do not hesitate to contact me directly with questions and/or comments regarding this transition. I can be reached at (202) 442-9109, or at lisa.truitt@dc.gov; my cell number is (202) 380-6899.

Thank you in advance for your cooperation and support during this transition period.

Sincerely,



Lisa Truitt
Director, Health Care Delivery Management Administration
Department of Health Care Finance

8/25/17