



January Care Management Webinar

Wednesday, January 17, 2024

CountyCare

A MEDICAID HEALTH PLAN

A large, stylized logo featuring a dark blue '1' and a '0' that is a ring composed of various shades of blue segments. The 'C' is a solid dark blue letter.

Referrals Process -Centauri

Ekaterina Pelepelina, MS

BEST BENEFITS



In-Service Training

Best Benefits In-Service Training for Cook County Health

January 17th, 2024

Presentation Objective

- Company Overview
- Social Security Disability
- Centauri's Service and Process
- An Integrated Partnership



Company Overview

Centauri Health Solutions provides services to payors and providers across all healthcare programs, including Medicare, Medicaid, Commercial, and the Exchange.

In partnership with our clients, we improve the lives and health outcomes of their members and patients through compassionate outreach, sophisticated analytics, clinical data exchange capabilities, and data-driven services and solutions.

Company Snapshot

Experience:	35+ years of government program experience, expertise & leadership
Headquarters:	Phoenix, AZ
Headcount:	~1,500 employees
Customer Base:	70+ Payors 500+ Providers 50 HIEs (serving 2.7 million providers)

Accolades:



Medicaid Eligibility & Enrollment

Addresses risk of uncompensated care with patient Medicaid eligibility enrollment services and connection to local community support organizations.

Out-of-State Medicaid

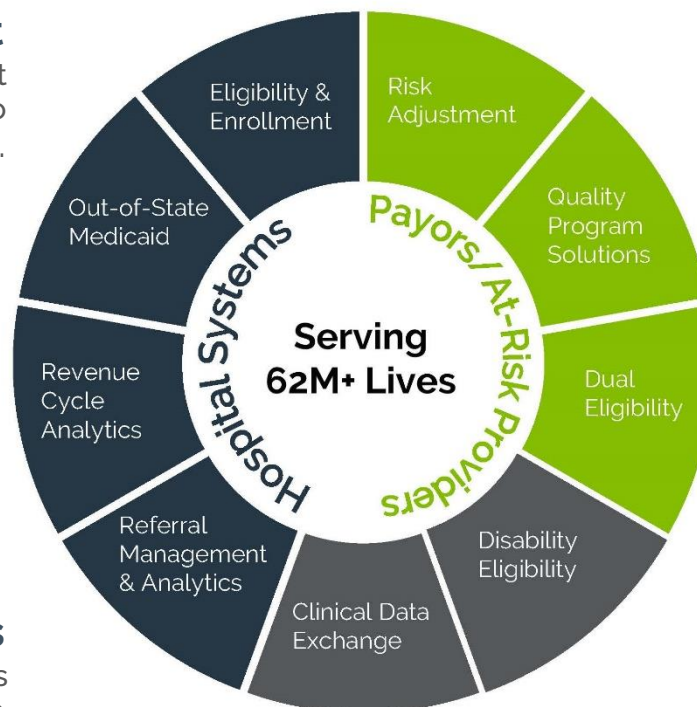
Addresses risk of uncompensated care with Provider Medicaid enrollment support.

Revenue Cycle Analytics

Analyzes hospital claims and pricing data using proprietary algorithms that enable providers to identify, quantify, resolve and measure key revenue cycle issues.

Referral Management & Analytics

Personalizes the referral process, providing referring physicians and their patients a single point of contact for quicker, more effective care coordination and scheduling, driving up physician and patient satisfaction and hospital revenue.



Risk Adjustment

Provides comprehensive software and services for retrospective campaign management, retrieval, coding, IVA, RADV, and risk adjustment submissions.

Quality Program Solutions

Clinical data acquisition and physician engagement solutions, as well as care gap identification

Dual Eligibility

Identifies potential Medicaid Eligible members, application assistance, retention services and Social Determinants of Health support.

Disability Eligibility

Identifies and engages potential at risk members and patients, Social Security application assistance and Social Determinants of Health support.

Clinical Data Exchange

Protects, streamlines, and delivers sensitive and critical health care information through cloud-based clinical data exchange software and solutions; ensures compliance and improves efficiency and quality.



Social Security Disability

The Social Security Administration (SSA) does not grant partial or short-term disability benefits.

ADULTS

The inability to do any substantial gainful activity (SGA) by reason of any medically determinable physical or mental impairment which can be expected to result in death, or which has lasted or can be expected to last for a continuous period of not less than 12 months.

CHILDREN

The child must have a physical or mental condition, or a combination of conditions, that results in "marked and severe functional limitations". This means that the condition(s) must very seriously limit your child's activities. The child's condition(s) must have lasted, or be expected to last, at least 12 months; or must be expected to result in death.

BENEFITS

Supplemental Security Income (SSI) is for children and adults without a work history

Social Security Disability Insurance (SSD or SSDI) is for adults with a work history

Service and Process

How Does Our Process Work?

IDENTIFICATION OF PROSPECT POOL

- Physician-driven disability modeling, enhanced with machine learning
- Claims, member, and pharmacy claims data
 - Append file to include identification of member
- Referrals from Plan
 - Referral Portal
 - Specialized monthly files
 - ESRD, NICU
- Monthly re-prospecting

OUTREACH & SCREENING

- State approved outreach letters sent through strategic mail campaigns
- Outbound call campaigns
- Once contact is made:
 - Education
 - Eligibility screen: financial, clinical
- Authorization forms sent upon acceptance:
 - SSA- 1696
 - SSA 827
 - Internal ATR

REPRESENTATION IN SSA PROCESS

- Application submission
- Schedule SSA appointment
- Adjudication of claim
 - Collection of supporting evidence
 - Consultative Exam
- Claim decision
- Appeal (as appropriate)
- Reconsideration submission
- Representation at Administrative Law Judge level

An Integrated Partnership

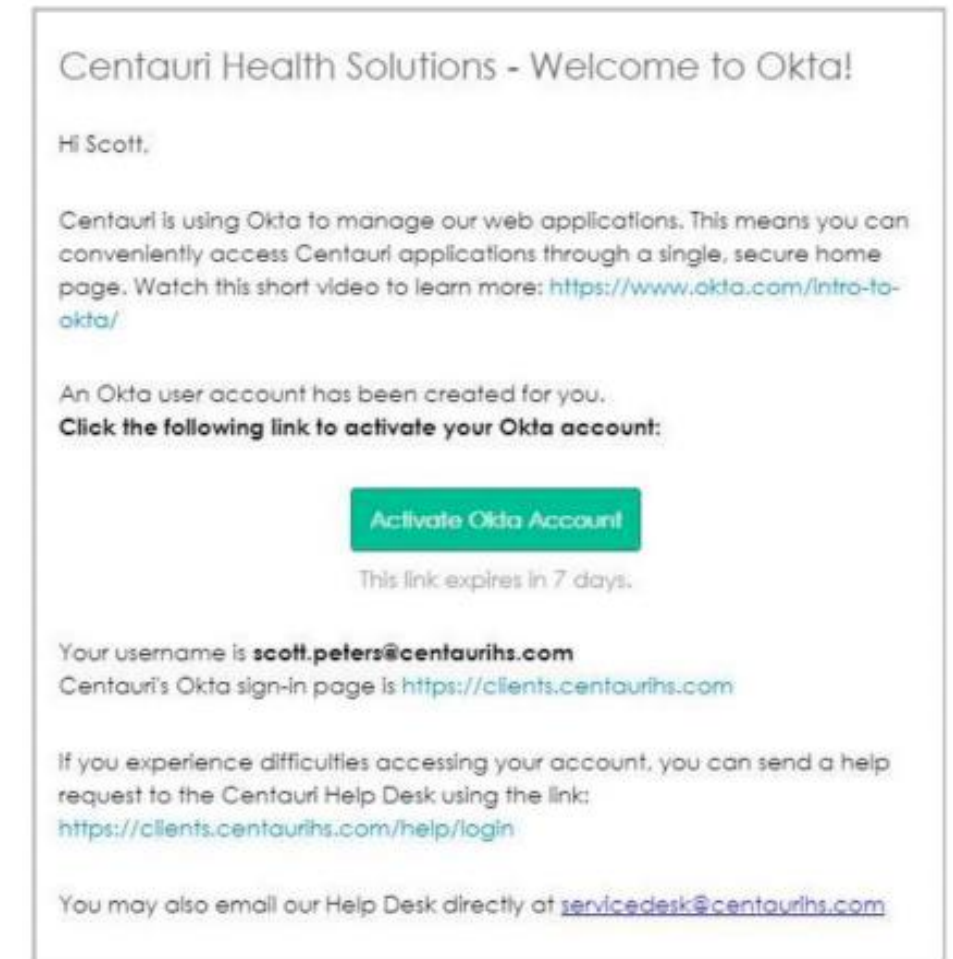
- Help motivate members who are not interested in applying by confirming Centauri is conducting outreach on behalf of their health plan. Assure them that our services are not only legitimate but offered as a free service and are completely voluntary. The member may change their mind at any point in the process.
- Encourage members to find out if they are potentially eligible for disability while educating them about our partnership. If the member is approved, they can receive up to \$914 a month in extra income.
- Refer members you feel may qualify for disability to Centauri.
- We understand turnover can cause knowledge gaps about our partnership, so be sure to spread the word on what Centauri can do for your members.

- Refer members you feel may qualify for disability to Centaury
 - 1-866-879-0988
 - Web Referral Portal

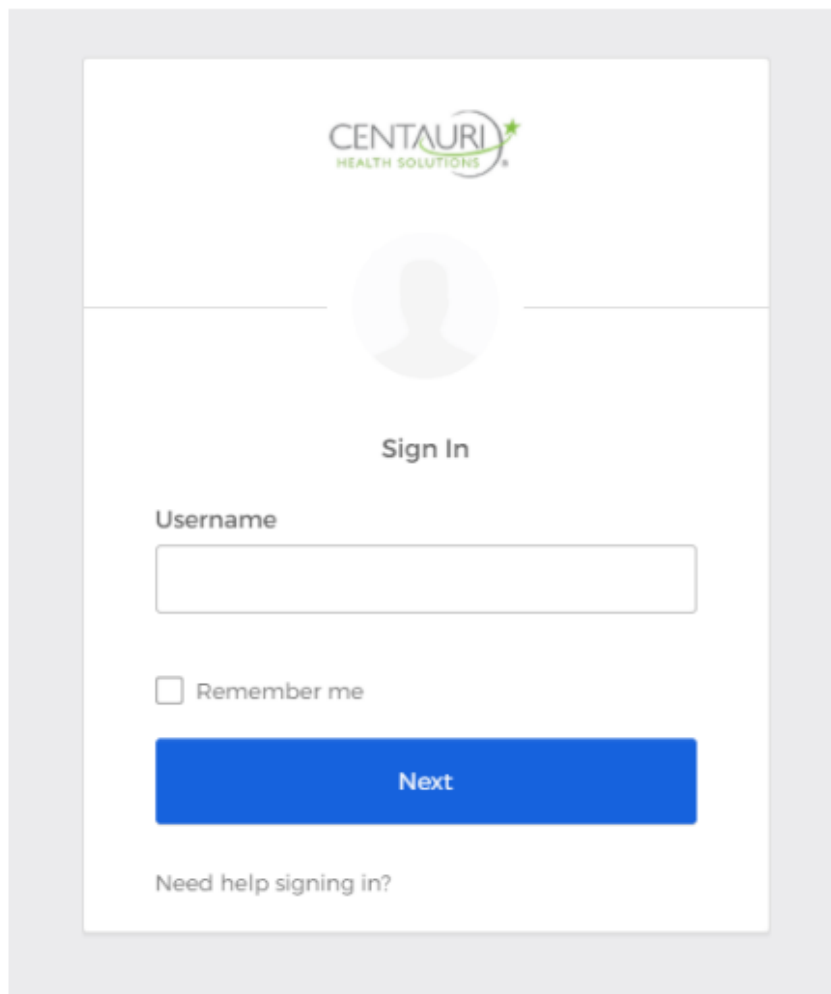
- Web Referral Portal
 - You are required to notify a member of the web referral
 - Centaury will contact any member referred within a minimum of 5 business days


- Please do not refer the following:
 - Working members
 - Member 62.5+ years old
 - Members in the following aid categories - ABD, SSI/SSD, Long-Term Care
 - Members receiving SSI/SSD monthly payments
 - Members working with an attorney or other representation

- Account Set-Up
 - Once your Centauri application account is created, you will receive a "Welcome to Okta!" email
 - In the email, click "Activate Okta Account" to be taken to the signup page where you will create your password
 - Your username is your full email address
 - Example: firstname.lastname@healthplan.com
- Web Referral Portal
 - To refer a member, go to clients.centaurihs.com
 - Once your referral has been submitted, you will receive confirmation that it was successfully created
 - Members will reflect on the monthly reports following our outreach. However, if a status update is urgent, please reach out to your CSM



Web Referral Portal Instructions

A screenshot of the "Sign In" form for the Centauri Health Solutions web referral portal. The form is white with a light gray border. At the top, the Centauri Health Solutions logo is displayed. Below the logo is a circular placeholder for a user profile picture. Underneath the picture is the text "Sign In". The form contains a "Username" label followed by a text input field. Below the input field is a checkbox labeled "Remember me". At the bottom of the form is a blue button with the text "Next". Below the button is a link that says "Need help signing in?".



Sign In

Username

☐ Remember me

Next

[Need help signing in?](#)

- To log on, visit clients.centaurihs.com
- Username is full email address
- Click Next
- Enter Password
- Select Sign In
- If you forget your password or experience issues, click "Need help signing in?" Click "Forgot Password" and follow the prompts to recover access.

News and Highlights

There's currently no news

Notice

This application belongs to Centauri Health Solutions Corporation and may be accessed and used by authorized personnel only. Centauri Health Solutions Corporation reserves the right to monitor use of this application to ensure security is not compromised and to respond to specific allegations of any misuse.

Use of this application shall constitute consent to monitoring for such purposes. In addition, Centauri Health Solutions Corporation reserves the right to consent to a valid law enforcement request to search the application for evidence of a crime stored within the system.

OK

Features

Secure File Repository

The portal simplifies the process of uploading and downloading sensitive data files **securely over the web**. In addition to Centauri Health Solutions's FTPS services, you may now submit or retrieve data files and ad-hoc reports via the portal.

[Explore »](#)

erve Reporting

portal provides a central platform hub for users to be a multitude of reports across various Service Lines Centauri Health Solutions. Each user will be able to e of Centauri's ability to put the **Reporting Power** in the users.

e Support

Need assistance? Centauri Health Solutions's technical support portal provides a full-featured tool for submitting, tracking, and following up with support cases for any of Centauri Health Solutions's software or service offerings.


[Support »](#)

 Reporting

 Repository

 Referrals

 Account

 Support

 Docs



There's currently no news

☰ Submit a Referral

PLEASE SELECT A SERVICE LINE FOR WHICH YOU WOULD LIKE TO CREATE A REFERRAL:

SERVICE LINE

BestBenefits



HAS THE MEMBER BEEN NOTIFIED OF THE REFERRAL?

☐ YES ☐ NO

IS THE MEMBER CURRENTLY RECEIVING SSI OR SSD BENEFITS?

☐ YES ☐ NO

IS MEMBER CURRENTLY WORKING WITH AN ATTORNEY TO ASSIST WITH SSI OR SSD PROCESS?

☐ YES ☐ NO

IS MEMBER A US CITIZEN OR GREEN CARD HOLDER OF AT LEAST 5 YEARS?

☐ YES ☐ NO

HAS THE MEMBER EVER APPLIED FOR SSI OR SSDI BENEFITS BEFORE?

☐ YES ☐ NO

* - INDICATES FIELD IS REQUIRED

- Answering **YES** or **NO** on certain questions may block you from submitting the referral.
- All fields denoted with an **asterisk*** are required and cannot be left blank.

Web Referral Portal Instructions

*FIRST NAME

*LAST NAME

*PHONE NUMBER

ALTERNATE PHONE NUMBER

DATE OF BIRTH



*HEALTH PLAN MEMBER ID

SOCIAL SECURITY #

MEMBER/POWER OF ATTORNEY/GUARDIAN NAME

TRANSLATOR NEEDED

☐ YES ☐ NO

CURRENT MEDICAL CONDITION

List all health condition(s) member states is causing problem or disability...

ADDITIONAL NOTES

Best time to call, other pertinent info...

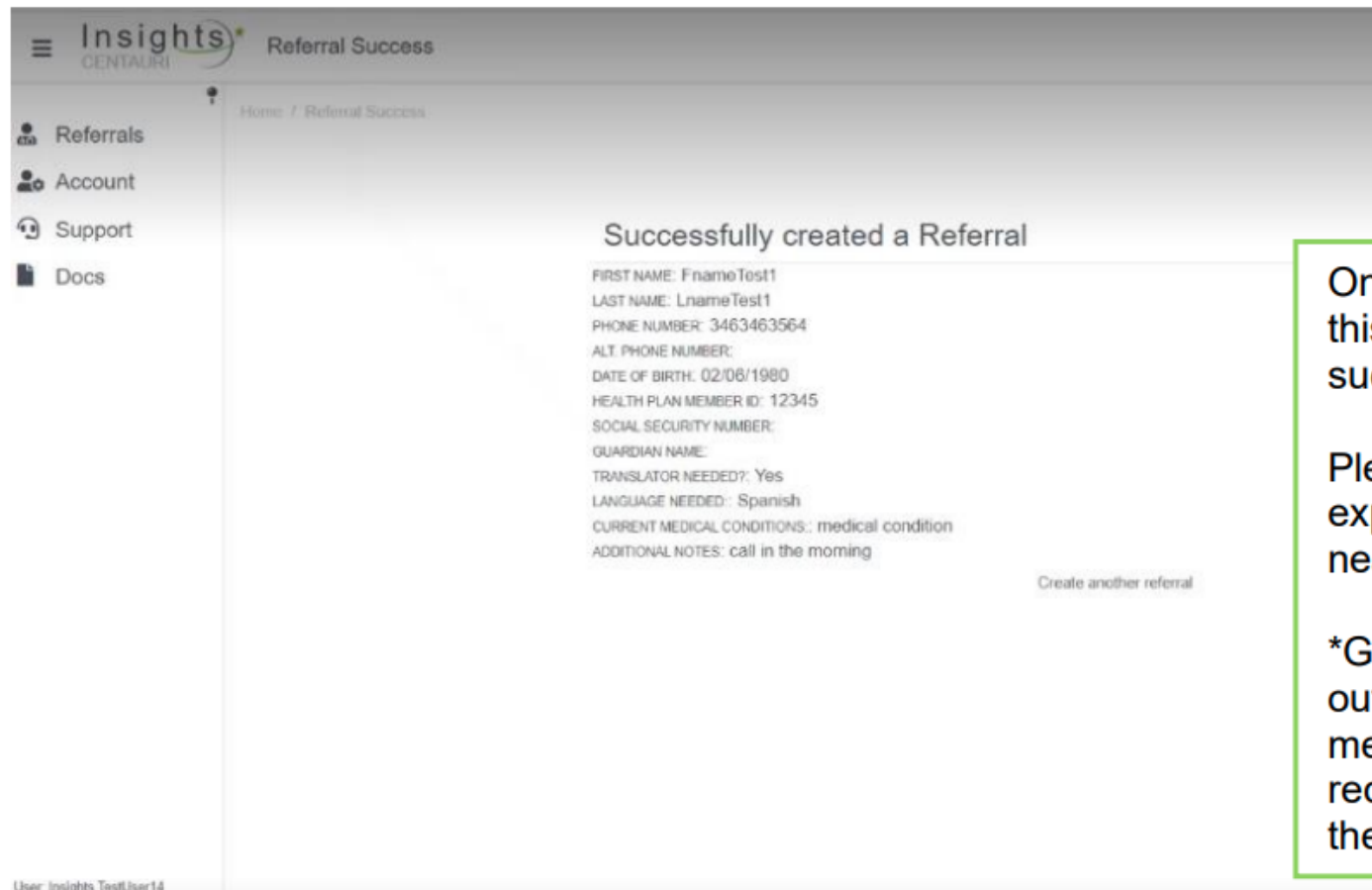
Submit Referral

* - INDICATES FIELD IS REQUIRED

Once you submit the referral, you will see a confirmation that the referral was successfully submitted.

Centauri will contact referred members approximately within 5 business days.

Referral Confirmation



Once your referral has been submitted, this screen will populate to indicate a successful referral.

Please let the member know s/he should expect a phone call from Centauri in the near future*

*Generally, Centauri will attempt to outreach within 3-5 business days, but if member demographics have not been received, we will wait to outreach until the data is received from the health plan.

Kat Pelepelina
Client Services Manager
216-270-4834 : Telephone Number
Ekaterina.Pelepelina@centaurihs.com
Time Zone: Eastern

Thank You!

County Care Contact/Liaison

- Any questions about access to the portal or Centauri itself please reach out to Lauren Dillon
[@lauren.dillon@cookcountyhealth.org](mailto:lauren.dillon@cookcountyhealth.org)





LGBTQ+ Sensitivity Training

**Kai Vanta - Medical Case
Manager, Care Coordination
Services, Core Center**

**Cindy San Miguel – Director of
Health Equity, CountyCare**



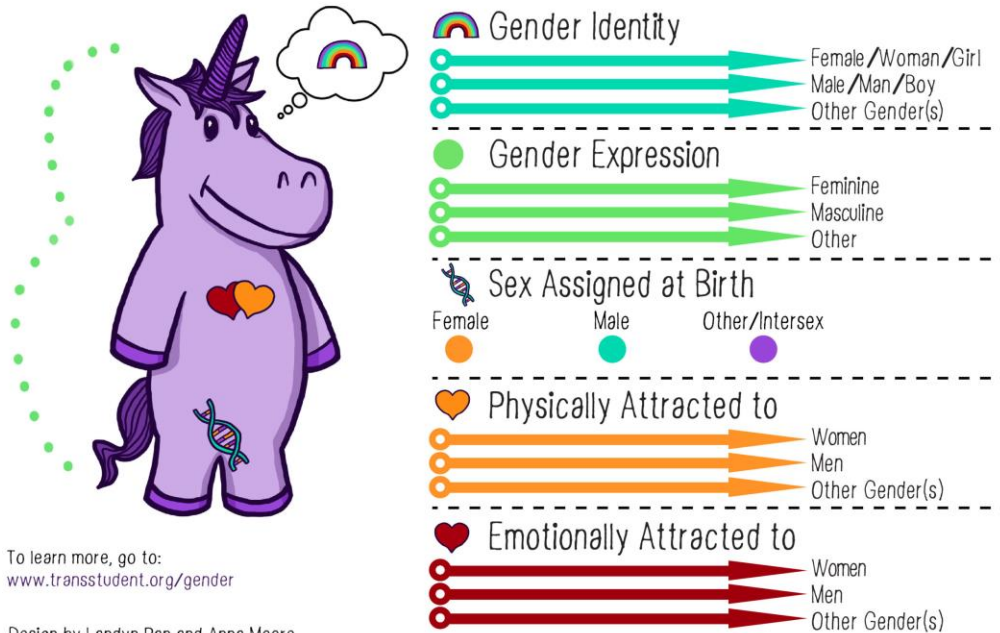
Term to know

- **Transgender:** a gender identity and umbrella term for people whose gender differs from, or does not sit comfortably within, the gender they were assigned at birth.
- **Cisgender:** someone whose gender identity aligns with their sex assigned at birth.
- **Non-Binary:** a gender identity and an umbrella term for people whose identity falls outside the gender binary.
 - Some people do not identify wholly or at all with the gender they were assigned at birth—some people have no gender at all. The term non-binary comes under the trans umbrella.
 - **Agender:** a non-binary identity for people that have no gender at all. This term also falls under the trans umbrella.
 - Gender-non conforming, genderfluid, two-spirit
- **Gender euphoria:** The feeling of harmony with our gender, experiencing comfort in our body as it relates to gender and being seen consistently by others as we see ourselves.
- **Gender dysphoria** - Distress experienced by some individuals whose gender identity does not correspond with their assigned sex at birth. Manifests itself as clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- **Assigned Sex at Birth:** medically defined as the distinguishing biological features of a person that they are born with
 - Female – Assigned Female at Birth (AFAB)
 - Male – Assigned Male at Birth (AMAB)
 - Intersex
- **Sexuality:** refers to one's sexual, physical and emotional attraction to others
 - Asexuality - Someone could also experience an absence of sexual attraction towards others
 - A person's sexual orientation can be fluid and change over time
- **Gender vs. Sex – Two very different concepts!**
 - While one's gender is not necessarily determined by biology, their sex is. Gender is dependent upon a person's self-perceptions and expressions.
 - Sex is primarily used for the defining of a person's physical and bodily characteristics.

Gender Identity, Expression and Sex Assigned at Birth

The Gender Unicorn

Graphic by:
TSER
Trans Student Educational Resources



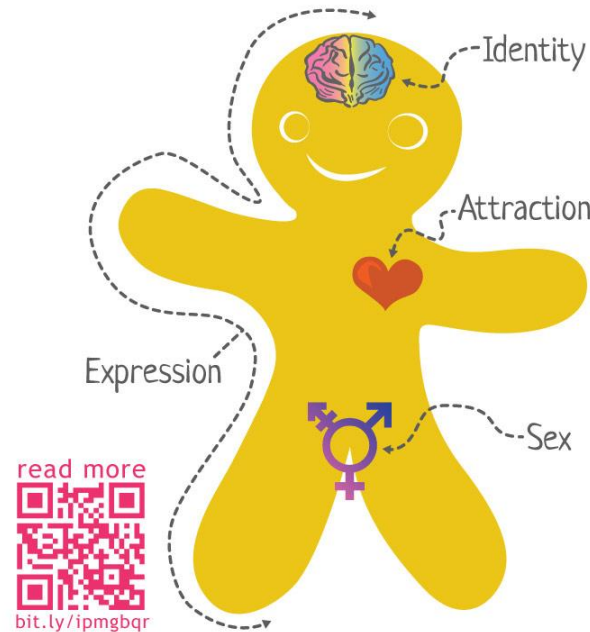
To learn more, go to:
www.transstudent.org/gender

Design by Landyn Pan and Anna Moore

The Genderbread Person v2.0

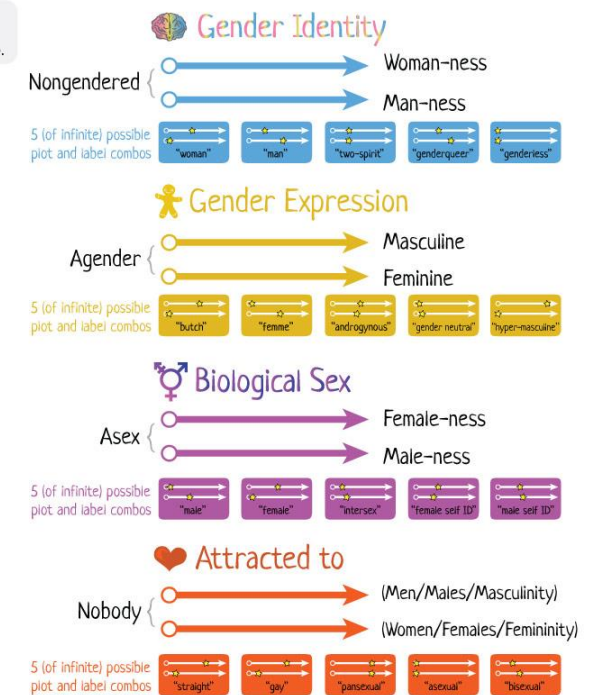
by its pronounced **METROsexual**.com

Gender is one of those things everyone thinks they understand, but most people don't. Like *Inception*. Gender isn't binary. It's not either/or. In many cases it's both/and. A bit of this, a dash of that. This tasty little guide is meant to be an appetizer for understanding. It's okay if you're hungry for more.



read more

bit.ly/ipmgbqr



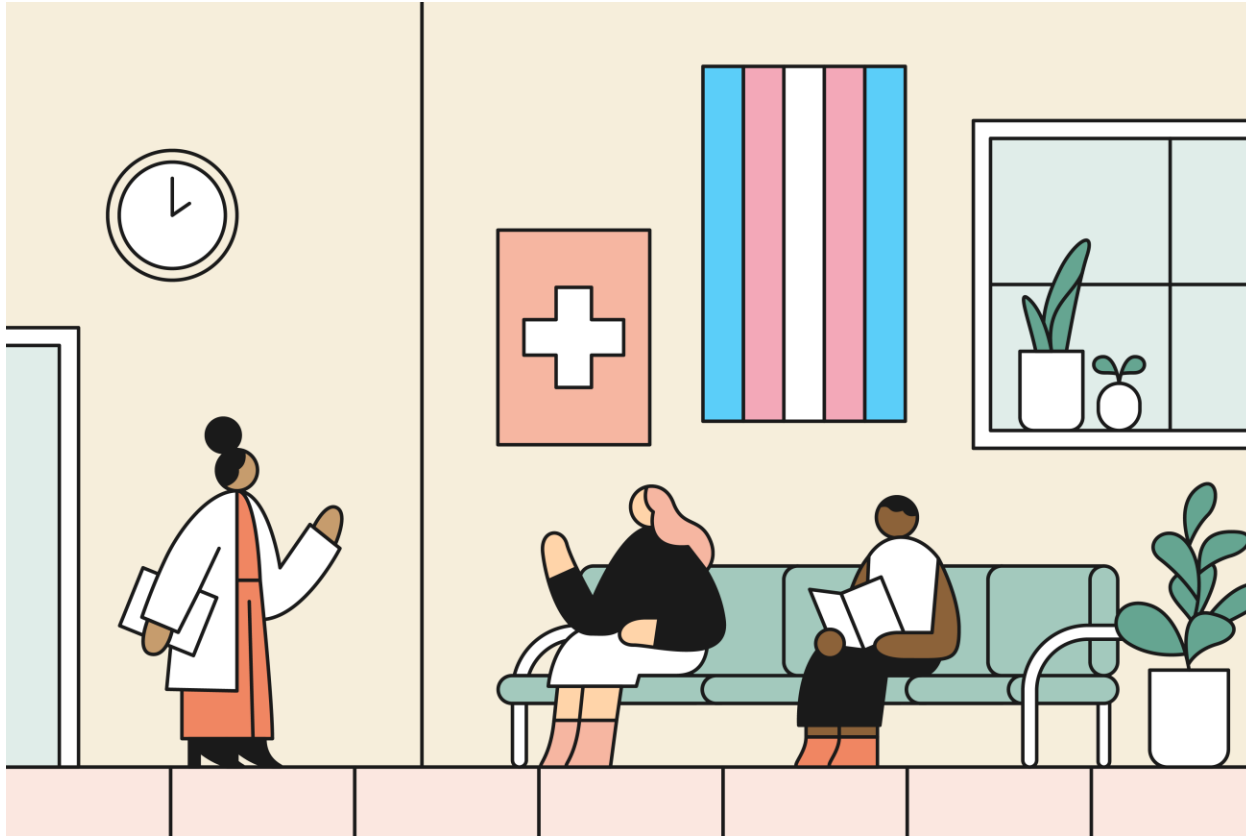
Intersex: is **not** a gender identity and should not be lumped under the trans umbrella. It describes someone born with anatomical, hormonal and/or chromosomal variations in their sex characteristics. Some intersex people self-define as trans and/or non-binary, others with the gender they were assigned at birth.

Personal pronoun use

- **Pronouns** are the words we use to refer to a person when not using their name.
- We want to avoid assuming someone's pronouns based on factors like appearance.
- Avoid using prefixes and gendered terms if you are unsure of what to use. Work on inclusive language.
Mr./Miss/Mrs. "sir" "ma'am" "miss" "young man" "young lady"
- If you are unsure which pronoun to use, wait for an appropriate moment and simply ask.
 - Until a patient's gender pronouns are known, it's best to refer to that patient by name.
 - Indicate the pronouns you use first – this gives people an opportunity to say theirs too.
"Hello, I'm Kai. My pronouns are they/them. What pronouns do you use?"
- Practice! Making changes in your speech can be a challenge and awkward. Practice with colleagues, work on incorporating a quick mention of pronouns at the beginning of all new patient visits.
- Made a mistake? A short apology and a correction to the proper pronouns is usually all that's necessary.



Best Practices



Inclusive intake forms
legal name for insurance
chosen name/nickname
sex assigned at birth
sex listed on insurance
policy pronouns
gender identity
sexual orientation

De-gendered language for health services
“vaginal health” vs.
“women’s health”
gender-neutral bathroom
access
mandatory LGBTQIA+
health competency

Visibility
display brochures and
educational materials
about LGBTQ health
staff wearing their own
pronoun pins
visibly post
nondiscrimination policy
posters, flags or art

Email Signatures:
Kai Vanta | *they/them*
*Medical Case Manager | Care
Coordination Services Department*
Office: 312-572-4977
Fax: 312-572-4597
Ruth M. Rothstein CORE Center
2020 W. Harrison St
Chicago, IL 60612

Transgender Health Considerations

- Many transgender people delay or decline to seek care due to discrimination in health care settings.
 - The National Center for Transgender Equality and the National Gay and Lesbian Task Force found that **1 in 5 people have been refused medical care** because of their transgender or gender-nonconforming status
 - Patients teaching their providers about transgender people are far more likely to delay seeking care.
 - Healthcare** is listed as the most common setting in which transgender individuals experience discrimination compared with other settings such as housing and employment.
- Gender-affirming care**
 - A range of social, psychological, behavioral, and medical interventions designed to support and affirm an individual's gender identity.
 - Medical:** hormone replacement therapy (HRT), mental health services, reproductive health, facial surgery, breast augmentation, hysterectomy/orchiectomy, phalloplasty/vaginoplasty
 - Legal:** legal name change, gender marker change, State ID/Driver's License update, birth certificate, social security card and medical record
 - Social:** coming out, using a new affirming name, preferred pronouns, gender expression classes, community support network, clothing and aesthetic
- Transgender non-inclusive healthcare** occurs when a healthcare provider demonstrates a lack of competence, attention, and/or initiative in adequately providing medical treatment to and affirming the identities of transgender patients according to the best available science.
- A 2018 American College of Obstetricians and Gynecologists survey of healthcare providers found **three-quarters of clinicians** said they had never encountered a transgender person.
- 72%** of providers did not feel comfortable with providing for the health care needs of the LGBGTQ community
- 86%** of physicians said they were willing to provide care for transgender patients, **only two-thirds said they felt they'd received enough education to do so**



Fig. 2i: "Do you feel your health care needs are being met?" by cis/trans identity

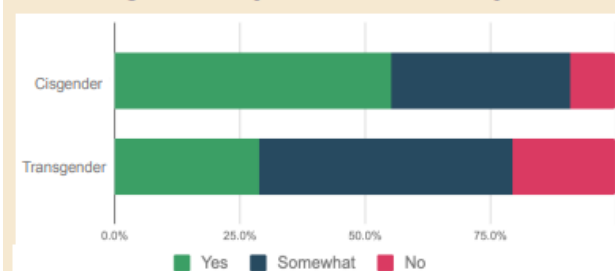
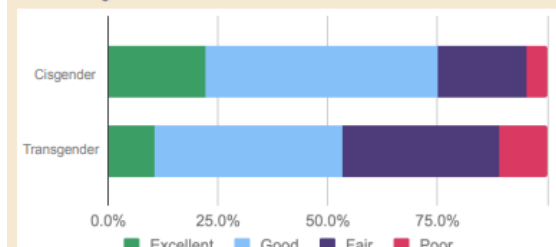


Fig. 2j: "How would you rate your overall quality of medical care?" by cis/trans identity



Transgender people and HIV

- Research is limited for transgender people and HIV
- A 2019 review of 88 studies found an estimated HIV prevalence of laboratory-confirmed HIV among transgender women of 14.2%
- Racial and ethnic disparities in HIV infection among transgender women
 - African American/Black Trans Women: **44.2%**
 - Latina/Hispanic Trans Women: **25.8%**
- HIV prevention programs and HIV care services designed for other at-risk groups may not address all the needs of transgender people, particularly transgender women of color.
- The Centers for Disease Control and Prevention (CDC) suggests certain risk factors directly tied to transphobia and the marginalization that transgender people face that may contribute to such high infection rates
- High levels of HIV testing among transgender women
- 96% of transgender women had ever tested for HIV
- 82% of transgender women were tested for HIV in the last 12 months Low levels of PrEP uptake
- Despite PrEP awareness ◦ 92% of transgender women without HIV aware of PrEP ◦ 32% of transgender women without HIV used PrEP
- Worldwide, 19.1% of transgender women are living with HIV.
- In the US, 21.6% of transgender women are living with HIV.



LGBTQ+ Health Status

Research suggests that lesbian, gay, bisexual, and transgender (LGBT) individuals face higher rates of injuries, illnesses and deaths linked to years of societal stigma, discrimination, and denial of civil and human rights. According to [Healthy People 2020](#),

- LGBT youth are 2 to 3 times more likely to attempt suicide and are more likely to be homeless.
- Lesbians are less likely to get preventive services for cancer.
- Lesbians and bisexual females are more likely to be overweight or obese.
- Transgender individuals have a high prevalence of victimization, mental health issues, and suicide and are less likely to have health insurance than heterosexual or LGB individuals.
- Elderly LGBT individuals face additional barriers to health because of isolation and a lack of social services and culturally competent providers.
- LGBT populations have the highest rates of tobacco, alcohol, and other drug use.



[LGBTQ Equity Statement - Cook County Department of Public Health \(cookcountypublichealth.org\)](#)



Community Resources

- [Broadway Youth Center by Howard Brown Health](#)
 - Provides free resources and support to LGBTQ youth 12-24 experiencing homelessness including social, educational and health services
- [Brave Space Alliance](#)
 - Black- and trans-led organization that works to empower and provide resources to queer and trans people, particularly those of color.
 - Community food pantry, housing resources, employment resources
- [Transformative Justice Law Project of IL \(TJLP\)](#)
 - [Name Change Mobilization](#)
 - Free legal services with a focus on gender-affirming legal services
- [Center on Halsted](#)
 - Offers a variety of programs including support peer groups, rapid HIV testing, housing for older LGBTQ people, therapy and job training
- [Affinity95](#)
 - Black led, queer led organization on Chicago's Southside dedicated to social justice in Black LGBTQ+ communities
- [The Crib by The Night Ministry](#)
 - Provides emergency housing and other services to young Chicagoans



Medicaid Coverage

- Hormone therapy is covered
- Gender-affirmed surgeries are covered under the following circumstances:
 - Member is 18 years old
 - Member is able to provide consent
 - Member is diagnosed with gender dysphoria



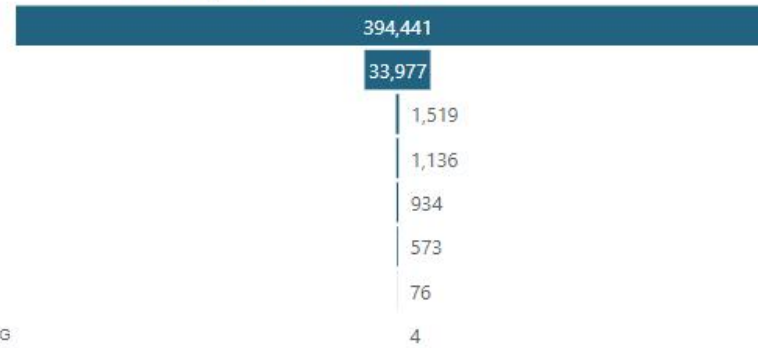
432,660

Members

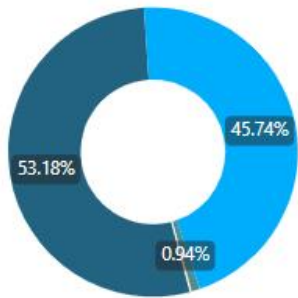


STRAIGHT/HETEROSEXUAL
DONT KNOW
DECLINED TO ANSWER
LESBIAN/GAY/HOMOSEXUAL
BISEXUAL
OTHER
QUEER/PANSEXUAL/QUESTIONING

Members by Sexual Orientation

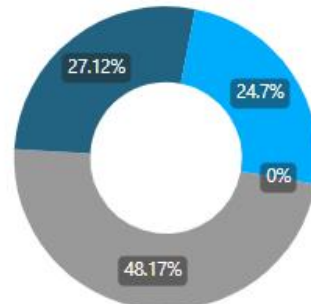


Members by Gender



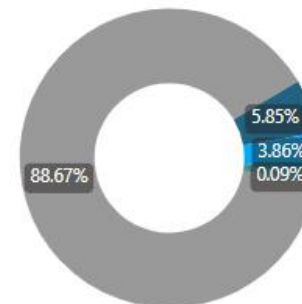
Female Male Other D Genderqueer

Members by Assigned Sex



Female Male Decline to Answer

Members by Pronoun



She/Her He/Him DECLINE... Other They/Th.

Data Collection Efforts

Can now document pronouns, gender, sex assigned at birth and sexuality

How Data are collected

Vendor/ Source	Assigned Sex	Gender	Pronouns	Sexual Orientation	Race	Ethnicity
HFS-834	N/A	N/A	N/A		2	
EVH CS		1		N/A	1	
Access	1					
MHN	1					
CMT	N/A	3	N/A	N/A	3	
CCH (CMIS)	1					
FIRST TRANSIT	N/A	1	N/A	N/A	1	

Questions ?



County Care Kudos

Donna Bakare

Care Coordinator- Elderly- Tishawn Mitchell

Extraordinary advocacy for her member. Donna arranged effective communication between all parties involved to assist her member with immediate supports and housing.

Angela Walker

Clinical Case Manager - Melissa Peel

Angela continues to go above and beyond to ensure her members have the best CountyCare experience. Angela continues to demonstrate effective communication and guidance to our community partners to ensure CountyCare members have the resources and supports needed. She continues to be a beacon of hope and guidance for members transitioning back into the community.

Thank you, Donna & Angela

Announcements

- FoodSmart In-Service Presentation
- Next webinar is February 21th, 2024!
- Slides posted on CountyCare Care Coordination Webpage:
 - <http://www.countycare.com/carecoordination>
- Have feedback? Please share.
 - <https://redcap.link/23k1fzzb>



- Please email questions/concerns: raphael.daniels@cookcountyhealth.org

