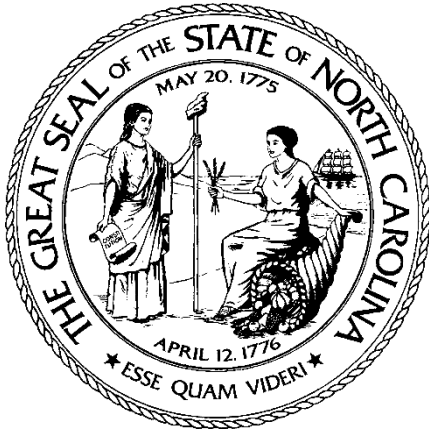


NC Department of Health and Human Services



# MCAC MEDICAID UPDATE

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**Deputy Secretary for NC Medicaid**

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**Assistant Secretary for NC Medicaid**

**March 20, 2020**

# Agenda

- General COVID-19 Information
- DHHS & NC Medicaid Response to COVID-19
- Medicaid Managed Care Update
- Provider Information
- Q&A

# COVID-19

- State of Emergency (national and state)
  - Federal provisions which impact NC Medicaid
  - Current recommendations by Governor
- Current situation - confirmed cases
- State Actions
  - Coordinating state efforts through Governor's Novel Coronavirus (COVID-19) Task Force
  - Developing response plans that address a range of scenarios
  - Implementing control measures, including self-monitoring with local public health supervision, isolation and quarantine
  - Activating a Joint Information Center and COVID-19 hotline: 866-462-3821
  - Updating COVID-19 website [ncdhhs.gov/coronavirus](https://ncdhhs.gov/coronavirus)
  - Appointing a new Education and Nutrition Working Group to develop a plan to ensure that children and families are supported while schools are closed.

# NC Medicaid COVID-19 Response Philosophy

- Bidirectional Communication
- Iterative Cycles of Improvement
- Stepwise Approach
- Transparency
- Maintaining Access through Proactive Policy
- Action Oriented



# Medicaid COVID-19 Immediate Next Steps

- Allow Medicaid providers to bill for defined telehealth services
- Update pharmacy policies to allow orders for 90-day generic and brand; remove refill limits; eliminate 30-day requirement to qualify for 90-day supply
- Allow reimbursement for masks for ill patients requiring frequent transportation/public presence (i.e. dialysis)
- Eliminate Prior Authorizations for oxygen equipment and related supplies (including CPAP, respiratory assist devices, ventilator)
- Reinforce co-pay not required at time of office visit
- Encourage providers to use home visits for vulnerable populations and group living
- Finalize first responders ability to treat with no transport 911 calls; study impact of developing reimbursement for paramedics/caramedics to evaluate and treat in the home

# COVID-19 – What you can expect from Medicaid

- Transparency
  - Regular communication
  - Calls, emails, webinars, updated Bulletins, updated web resources
- Staff remain available and working from home
  - Limiting face-to-face contact
  - Limiting travel
  - Reprioritizing meetings
- Continued work on policies which support our beneficiaries, providers and staff
  - Adopting phased approach (outlined on Slide 4)

# RESOURCES

- **Medicaid COVID-19 website:**  
[medicaid.ncdhhs.gov/coronavirus](https://medicaid.ncdhhs.gov/coronavirus)
- **Medicaid Bulletins:** [medicaid.ncdhhs.gov/providers/medicaid-bulletin](https://medicaid.ncdhhs.gov/providers/medicaid-bulletin) (search for “COVID” to retrieve all related bulletins)
- **Rates:** [medicaid.ncdhhs.gov/providers/fee-schedules](https://medicaid.ncdhhs.gov/providers/fee-schedules)
- **State COVID-19 website:** [www.ncdhhs.gov/coronavirus](https://www.ncdhhs.gov/coronavirus)
- **NC Medicaid Webinars: TBD**
- **NC COVID-19 Hotline: 866-462-3821**
- **Division of Public Health and AHEC Medical Update Call:**
  - Fridays 12:30-1:30 p.m.
  - <https://zoom.us/j/705979628>
  - Audio-only access: (646) 558-8656, Webinar ID: 705979628

# Medicaid Managed Care Update



# Medicaid Managed Care Suspension

- Managed Care Remains Suspended
- New date pending approval of right budget
- Open Enrollment cancelled
- Enrollment Broker Call Center remained open through 1/31/20
- PHP Call Centers will close 3/31/2020
- Continue to meet regularly with the health plans to move forward
- Engage with counties and other stakeholders to continue to facilitate the transition to managed care
- Moving forward with managed care related procurements

# Managed Care Progress (as of November 2019)

## Key Milestones

- Enrollment Broker & Health Plan contract awarded
- Managed Care Waiver approved from CMS
- Enrolled member information sent to PHPs
- Provider information sent to health plans for contracting
- Health plan readiness reviews in progress

## Program Progress Summary

- Over 109,000 Medicaid Members selected a PHP as of November 8
- The formal PHP Readiness Review Process included 111 Medicaid Staff, evaluation of 4,431 readiness criteria, and 148 individual onsite readiness review sessions
- 38 provider sessions - webinars, meet and greets, virtual office hours, and webinar training - attended by over 15,000 providers
- Almost 6,000 PHP deliverables documents received, reviewed and feedback provided
- 86 training sessions attended by 5,862 DSS county staff

# Restarting Managed Care Implementation – Highlights

- Update all stakeholder materials, websites, smart phone apps and technical systems across multiple platforms (Enrollment Broker, health plans, NCTRACKS)
- Formulate capitation rates and submit to CMS for approval
- Re-review and resubmit to CMS for approval several health plans' contractual policies and procedures deliverables (annual compliance plans, call scripts, member marketing, value added service materials, and clinical coverage policies)
- Upgrade the Consolidated Provider Directory (NC DHHS, Enrollment Broker, health plans)
- Test Primary Care Provider Auto Assignment between NCFAST, NCTRACKS, health plans and providers
- Complete key testing activities to finalize data, analytics, reporting functionality including Transition of Care (NC FAST, Enrollment Broker, NC TRACKS, health plans, LME-MCOs, UM Vendors & CCNC) and Data Warehouse
- Re-review and re-validate Enrollment Broker readiness including call center staff and scripting once rehired
- Re-evaluate internal Division of Health Benefit staff readiness
- Complete provider contracting (health plans and providers)
- Analyze health plan network adequacy to ensure adequate provider networks and processes

# Questions / Discussion