PREGNANCY AND NEWBORN TRANSITION OF CARE PROTECTIONS

Transition of Care Protections for Pregnant Women Receiving Care from OON Providers

If a beneficiary has entered her second trimester of pregnancy and the provider was treating the beneficiary before her enrollment into a health plan, the Department requires the health plan to honor a transitional period established in N.C. Gen. Stat. §58-67-88, which extends through 60 days of postpartum care regardless of the amount of time following launch of managed care. During this transitional period, a health plan must treat the beneficiary’s OON provider the same as in-network providers for both rate reimbursement and prior authorization (PA) requirements.

Further, a health plan is required to allow a pregnant beneficiary to continue receiving services from their behavioral health treatment provider without any form of prior authorization until the birth of the child, the end of pregnancy or loss of eligibility whichever comes first.

Children born to mothers enrolled in Tailored Plans will not be auto-enrolled in the Tailored Plan.

MANAGED CARE ELIGIBILITY FOR NEWBORN POLICY: PARITY FOR OON PROVIDERS

As established in the NC Medicaid Fact Sheet, “Managed Care Eligibility for Newborns: What Providers Need to Know,” health plans will treat all OON providers the same as in-network providers for purposes of prior authorization and will pay OON providers the Medicaid fee-for-service rate for services rendered through the earlier of:

1. 90 days from the newborn’s birth date or
2. The date the health plan is engaged and has transitioned the child to an in-network primary care provider (PCP) or other provider.

These protections apply to beneficiaries transitioning into the NC Medicaid Managed Care option on or after July 1, 2021, and to any subsequent transitions between managed care plans.

**TRIBAL OPTION BENEFICIARY IMPACT**

Pregnant beneficiaries and newborns participating in the EBCI Tribal Option will continue to receive services from Medicaid-enrolled providers as they do today.

**MANAGED CARE PLANS WILL EXTEND GOOD FAITH CONTRACTING PERIOD**

NC Medicaid Managed Care Plans will extend their current good faith contracting timeframe for 90 days after managed care launch, in order to provide sufficient opportunity for contracting with all provider groups.

During this time, if a provider and a managed care plan are in good faith contract discussions as defined by the managed care plan’s published Good Faith Contracting Policy, the provider, including PCPs, will be treated the same as in-network providers. This means OON PCPs will be reimbursed at 100% Medicaid fee-for-service rate and will not be required to submit a PA prior to providing primary care services.

**TRIBAL OPTION BENEFICIARY IMPACT**

Members enrolled in the EBCI Tribal Option are not impacted by the health plans’ Extension of Good Faith Contracting Period outlined above and will continue to receive services from Medicaid enrolled providers as they do today.