



**[SPECIAL BULLETIN COVID-19 #93: Targeted Rate Increase, Additional Hours and Associated Reporting Requirements for In-Home Personal Care Services \(PCS\) Providers under State Plan PCS and CAP/C and CAP/DA Programs](#)**

FRIDAY, MAY 29, 2020

NOTE: UPCOMING PROVIDER WEBINAR  
NC Medicaid COVID+ Rate Reporting Technical Assistance Session  
Wednesday, June 3, 1:00 p.m.

[More](#)

**[SPECIAL BULLETIN COVID-19 #92: Coronavirus \(COVID-19\) EviCore Chest Computed Tomography \(CT\) Auto-Approval Ending May 31, 2020](#)**

FRIDAY, MAY 29, 2020

Effective Sunday, May 31, 2020, NC Medicaid is terminating the auto approval for lung imaging requested through EviCore, NC Medicaid's contracted vendor for imaging services. [More](#)

**[SPECIAL BULLETIN COVID-19 #91: Federal Provider Relief Fund: Guidance on How to Access "General Distribution" Funds](#)**

FRIDAY, MAY 29, 2020

Congress created a \$175 billion Provider Relief Fund to support providers as they deal with COVID-19. Recently, the federal Department of Health and Human Services (HHS) began distribution of the first \$50 billion of this fund—through the so-called "General Distribution" mechanism—for providers who billed Medicare in 2019. To help providers understand how to access funding, NC Medicaid has developed the Federal Provider Relief Fund: Guidance on How to Access "General Distribution" Funds. [More](#)

**[Continuous Glucose Monitoring Systems Coverage Transition](#)**

FRIDAY, MAY 29, 2020

Effective July 1, 2020, coverage of therapeutic Continuous Glucose Monitoring products will transition from the Durable Medical Equipment Program to the Outpatient Pharmacy Point of Sale Program. [More](#)

**[SPECIAL BULLETIN COVID-19 #90: Telehealth and Virtual Patient Communications Clinical Policy Modifications - Smoking and Tobacco Cessation Counseling](#)**

WEDNESDAY, MAY 20, 2020

NC Medicaid has temporarily modified its Telemedicine and Telepsychiatry Clinical Coverage Policy to better enable the delivery of remote care to Medicaid and Health Choice beneficiaries. [More](#)



**[Trastuzumab-pkrb for Injection, for Intravenous Use \(Herzuma®\) HCPCS Code Q5113: Billing Guidelines](#)**

TUESDAY, MAY 19, 2020

Effective with date of service March 16, 2020, the Medicaid and NC Health Choice programs cover trastuzumab-pkrb for injection, for intravenous use (Herzuma®) for use in the Physician Administered Drug Program (PADP) when billed with HCPCS code Q5113 - Injection, trastuzumab-pkrb, biosimilar, (Herzuma®), 10 mg. [More](#)

**[Peanut \(Arachis hypogaea\) Allergen Powder-dnfp Powder for Oral Administration \(Palforzia™\) HCPCS Code J3590: Billing Guidelines](#)**

TUESDAY, MAY 19, 2020

Effective with date of service April 2, 2020, the Medicaid and NC Health Choice programs cover peanut (Arachis hypogaea) allergen powder-dnfp powder for oral administration (Palforzia™) for use in the Physician Administered Drug Program (PADP) when billed with HCPCS code J3590 - Unclassified biologics. [More](#)

**[Isatuximab-irfc Injection, for Intravenous Use \(Sarclisa®\) HCPCS Code J9999: Billing Guidelines](#)**

TUESDAY, MAY 19, 2020

Effective with date of service March 19, 2020, the Medicaid and NC Health Choice programs cover isatuximab-irfc injection for intravenous use (Sarclisa®) for use in the Physician Administered Drug Program (PADP) when billed with HCPCS code J9999 - Not otherwise classified, antineoplastic drugs. [More](#)

**[Eptinezumab-jjmr Injection, for Intravenous Use \(Vyepti™\) HCPCS Code J3590: Billing Guidelines](#)**

TUESDAY, MAY 19, 2020

Effective with date of service April 6, 2020, the NC Medicaid and NC Health Choice programs cover eptinezumab-jjmr injection, for intravenous use (Vyepti™) for use in the Physician Administered Drug Program (PADP) when billed with HCPCS code J3590 - Unclassified biologics. [More](#)

**[SPECIAL BULLETIN COVID-19 #89: Prescription Fluoride Available to Beneficiaries](#)**

MONDAY, MAY 18, 2020

In response to CDC recommendation regarding non-aerosolizing dental treatment during COVID-19, NC Medicaid is reminding dentists of the prescription fluoride products for patients at high-risk for caries. [More](#)



**[Immune Globulin Subcutaneous, Human – kllhw 20% Solution \(Xembify®\) HCPCS code J3590: Billing Guidelines](#)**

TUESDAY, MAY 12, 2020

Effective with date of service Oct. 4, 2019, the Medicaid and NC Health Choice programs cover immune globulin subcutaneous, human – kllhw 20% solution (Xembify®) for use in the Physician Administered Drug Program (PADP) when billed with HCPCS code J3590 - Unclassified biologics. [More](#)

**[Community Alternatives Program for Children Amended Waiver Application Approved](#)**

TUESDAY, MAY 12, 2020

The Community Alternatives Program for Children (CAP) §1915( c) Home and Community-Based Services (HCBS) waiver application has been amended and approved by the Centers for Medicare and Medicaid Service (CMS), effective May 1, 2020. [More](#)

**[SPECIAL BULLETIN COVID-19 #88: Additional Temporary Rate Increases for Skilled Nursing Facilities, LTSS Personal Care Service Providers and Home Health Providers to support Strengthening Infection Prevention Activities](#)**

MONDAY, MAY 11, 2020

NC Medicaid continues provide support to Skilled Nursing Facilities (SNF) and Personal Care Services (PCS) and Home Health (HH) providers to strengthen their infection prevention and management activities as they serve beneficiaries at high risk of contracting COVID-19. [More](#)

**[SPECIAL BULLETIN COVID-19 #87: Additional Dental Clinical Coverage Policy Provisions](#)**

MONDAY, MAY 11, 2020

NC Medicaid is implementing temporary clinical policy revisions that will allow dentists to provide additional services to Medicaid and NC Health Choice beneficiaries. These temporary policy changes were applied in the NCTracks system with a retroactive effective date of March 10, 2020. [More](#)

**[SPECIAL BULLETIN COVID-19 #86: Telehealth and Virtual Patient Communications Clinical Policy Modifications - Family Planning Services for MAFDN Beneficiaries](#)**

MONDAY, MAY 11, 2020

NC Medicaid has temporarily modified its Telemedicine and Telepsychiatry Clinical Coverage Policy to enable eligible providers to deliver family planning services to NC Medicaid Be Smart Family Planning Medicaid program (MAFDN) eligible beneficiaries via telemedicine or virtual patient communication (telephone call, only) in light of social distancing measures that may prevent in-person visits. [More](#)



**[SPECIAL BULLETIN COVID-19 #85: New Legislation Extends Connection Date to State Health Information Exchange - NC HealthConnex](#)**

FRIDAY, MAY 8, 2020

All providers required to connect and submit data by June 1, 2020, according to House Bill 70/Session Law 2019-23 have been granted an extension and shall begin submitting demographic and clinical data by Oct. 1, 2021. [More](#)

**[SPECIAL BULLETIN COVID-19 #84: Telehealth and Virtual Patient Communications Clinical Policy Modifications – Maternal Support Services Provided by Local Health Departments](#)**

THURSDAY, MAY 7, 2020

This bulletin temporarily enables eligible local health departments to deliver maternal support services via telemedicine in light of social distancing measures that may prevent in-person visits. [More](#)

**[SPECIAL BULLETIN COVID-19 #83: Title II Americans with Disabilities Act \(ADA\) and Section 504 Rehabilitation Act \(RA\) Protections during the COVID-19 Pandemic](#)**

WEDNESDAY, MAY 6, 2020

Federal law requires all Medicaid providers in North Carolina to comply with the Americans with Disabilities Act (ADA) and Rehabilitation Act, which includes providing reasonable accommodations for people living with disabilities. [More](#)

**[SPECIAL BULLETIN COVID-19 #82: Expedited Hardship Advances and Retroactive Targeted Rate Increases for Skilled Nursing Facilities and Adult Care Homes Serving COVID-positive Patients](#)**

WEDNESDAY, MAY 6, 2020

This bulletin replaces SPECIAL BULLETIN COVID-19 #68 in its entirety. NC Medicaid is directing increased financial assistance to North Carolina Skilled Nursing Facilities (SNF) and Adult Care Homes (ACH) to support addressing the increased costs of caring for COVID positive (COVID+) residents in a congregate care setting. [More](#)

**[NC Medicaid Electronic Health Record Incentive Program Announcements](#)**

WEDNESDAY, MAY 6, 2020

Program Year 2019 is Closed, NC-MIPS is Open for Program Year 2020, Program Year 2020 Webinar Series and The Security Risk Analysis (SRA). [More](#)



**[SPECIAL BULLETIN COVID-19 #81: Hospice Clinical Coverage Policy: Changes due to CMS Amendment and Other Flexibilities](#)**

MONDAY, MAY 4, 2020

On March 30, 2020, the Centers for Medicare & Medicaid Services (CMS) announced an amendment of 42 CFR 440.70 that included two policy changes that affect hospice services for Medicaid during the COVID-19 pandemic. Effective March 30, 2020, NC Medicaid is adjusting hospice requirements currently in Clinical Coverage Policy 3D, Hospice Services to align with these recent CMS regulatory changes. [More](#)

**[SPECIAL BULLETIN COVID-19 #80: NC Medicaid Temporarily Increasing Flexibility and Reimbursement Rates for Primary and Specialty Care Providers](#)**

FRIDAY, MAY 1, 2020

NC Medicaid is temporarily adding Telemedicine and Telepsychiatry clinical coverage codes for specialty providers and increasing reimbursement rates for telephonic visits and primary care medical home per member per month fees to help primary and specialty care providers continue to serve patients during the COVID-19 emergency. [More](#)

**[SPECIAL BULLETIN COVID-19 #79: Telehealth and Virtual Patient Communications Clinical Policy Modifications – Skilled Nursing Facilities](#)**

FRIDAY, MAY 1, 2020

This Bulletin clarifies that skilled nursing facilities (SNF) are eligible originating sites for telemedicine visits and enables such facilities to bill for a facility fee when a beneficiary located in a SNF receives care via telemedicine from an eligible remote provider. [More](#)

**[SPECIAL BULLETIN COVID-19 #78: Telehealth and Virtual Patient Communications Clinical Policy Modifications – Hybrid Telemedicine with Supporting Home Visit](#)**

FRIDAY, MAY 1, 2020

Update (May 8, 2020)

- Bulletin #78 includes information that Local Health Department (LHDs), Federally Qualified Health Centers (FQHCs), FQHC Look-Alikes and Rural Health Clinics (RHCs) may use, as outlined in “Telemedicine with Supporting Home Visit” below, hybrid telemedicine with supporting home visit model when the telemedicine visit is rendered by an eligible provider.
- Section “C. Coding Guidance” includes instructions that providers should choose the most appropriate code based on the complexity of the services provided. [More](#)



**[SPECIAL BULLETIN COVID-19 #77: Telehealth and Virtual Patient Communications Clinical Policy Modifications – End Stage Renal Disease Services](#)**

FRIDAY, MAY 1, 2020

NC Medicaid has temporarily modified its [Telemedicine and Telepsychiatry Clinical Coverage Policy](#) to better enable the delivery of remote care to Medicaid and Health Choice beneficiaries. [More](#)

**[SPECIAL BULLETIN COVID-19 #76: Telehealth and Virtual Patient Communications Clinical Policy Modifications - Behavioral Health Service Flexibilities – \(b\)\(3\) Services](#)**

FRIDAY, MAY 1, 2020

Effective April 30, 2020, NC Medicaid in partnership with the DHHS Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMHDDSAS), is temporarily modifying its Behavioral Health and Intellectual and Developmental Disability (I/DD) Clinical Coverage Policies to better enable the delivery of care to NC Medicaid, NC Health Choice and State-funded individuals in response to the COVID-19 Pandemic. [More](#)

**[SPECIAL BULLETIN COVID-19 #75: Telehealth and Virtual Patient Communications Clinical Policy Modifications - Behavioral Health Service Flexibilities – Innovations and TBI Waivers Appendix K and Developmental Disability State Funded Benefit Plans](#)**

FRIDAY, MAY 1, 2020

Effective April 30, 2020, NC Medicaid in partnership with the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMHDDSAS), is temporarily modifying its Behavioral Health and Intellectual and Developmental Disability (I/DD) Clinical Coverage Policies to better enable the delivery of care to NC Medicaid, NC Health Choice and State-funded individuals in response to the COVID-19 Pandemic. [More](#)