



NC Department of Health and Human Services

Personal Care Services Stakeholder Meeting

Renee Stapleton LTSS Service Operations Manager April 20, 2022

Agenda

- Welcome and Introductions
- Stakeholder Feedback
- Program Updates
 - Sunsetting the COVID Flexibilities
 - Return to Face-to-Face Assessments
 - Quality Assurance Update
- Managed Care Updates
- Transitions of Care
- Electronic Visit Verification
- Reports from Other DHB teams and DHHS Divisions

Welcome and Introductions DHB LTSS

- Sabrena Lea, Deputy Director LTSS
- Beverly Bell, Associate Director LTSS
- Renee Stapleton, Service Operations Manager
- Juanita Jefferson, PCS Unit Manager
- Linda Rascoe, Sr. Policy Analyst, EVV Lead PCS Staff
- Candace Stancil, PCS Nurse Consultant (Adult)
- Shada Baumgardner, PCS Nurse Consultant (EPSDT)
- Augustie Patel, PCS Nurse Consultant (EPSDT)
- Evah Glielmi, Administrative Officer
- Sherle James, Administrative Assistant

Personal Care Services Vendors

- Liberty Healthcare
 - Natalie Peterson
 - Jeremy Owen
 - Penny Waters
- Viebridge
 - Kevin Goddard
 - Emonique Whitfield
- Sandata
 - Tashina Hamilton

DHB Teams

- Standard Plans
 - Cassandra McFadden
- Finance
 - Reggie Little, Jackie Holloway and Sally Hines
- Office of Compliance and Provider Integrity
 - Patrick Piggott
- Communications
 - Lynette Harris
- Contracts and Procurement
 - Ted Fort
- Provider Operations
 - Chandra Lockley and Alicia Chapman

DHHS Divisions

- Division of Mental Health
 - Tamara Smith
 - Division of Health Service Regulation
 - Megan Lamphere and Libby Kinsey

PHP Standard Plan

- Carolina Complete
 - Veronica Piper
 - Tonya Wilson
 - Julie Ghurtskaia
 - Monica Hamer
 - Angela Johns

- Wellcare Care
 Management Team
 - Lawanna Gaddy
 - Wyvondylann
 Scovens
 - Marla Matthews
 - Linda Purdie
 - Heather Wilman
 - L. Branche
 - Michele Phillips

Welcome and Introductions PHP Standard Plan

- AmeriHealth
 - Shawna Sumerlin
 - Healthy Blue
 - Melinda Combast
 - Mary Beth Dahlstein
 - Carole Slocum

- United
 - Bonnie Batten
 - Amanda Taylor
 - Torri Thompson

Stakeholder Feedback

- Open forum to hear from you.
- To ask a question
 - Raise your hand to be unmuted.
 - Enter a question in the chat.
 - Email your questions to PCS email address <u>PCS Program Questions@dhhs.nc.gov</u>
- All questions received, along with the response will be included in the Q&A document on the PCS webpage along with the PowerPoint presentation.
- When asking a question, include your name and agency name or whether you are a caregiver or advocate

Program Updates

Return to pre-COVID Processes -

- In response to the State of Emergency, temporary COVID Flexibilities were put in place for PCS by Special Bulletins.
- PCS policy flexibilities established in:
 - COVID-19 Special Bulletin #30 March 31, 2020
 - COVID-19 Special Bulletin #58 April 22, 2020
 - COVID-19 Special Bulletin #73 April 30, 2020
 - Will sunset June 30, 2022, and face to face assessments will resume July 1, 2022

SPECIAL BULLETIN COVID-19 #226, 234 and 237 address the winddown of these flexibilities

Return to pre-COVID Processes

- SPECIAL BULLETIN COVID-19 #226, 234 and 237 address the winddown of these flexibilities.
- The table below summarizes the PCS flexibilities which will end effective June 30, 2022, or at/after the end of the Federal PHE:

| Provision |
|---|
| Use of telephonic assessments in place of in-person assessments. |
| Use of virtual real-time supervisory visits in place of in-person. |
| Use of telephonic mediation and appeal resolution. |
| Extension from 90 days to 120 days for the requirement to meet with |
| practitioner in the preceding period for new referrals. |
| Authorization for In-Home PCS delivered in a temporary alternate |
| primary private location. |
| In situations where beneficiary or legally responsible person's written |
| consent cannot be attained, acceptance of a "verbal signature" or |
| "verbal concurrence". |

SPECIAL BULLETIN COVID-19#237: Extension of NC State of Emergency Temporary Flexibilities

NCDHHS, Division of Health Benefits | PCS Stakeholder Meeting | April 20, 2022

Return to pre-COVID Processes

• The table below summarizes the PCS flexibilities which will continue after the flexibility winddown.

Provision

Acceptance of electronic physician signatures for referrals.

Acceptance of electronically submitted documentation which would typically be reviewed during face-to-face assessment.

SPECIAL BULLETIN COVID-19#237: Extension of NC State of Emergency Temporary Flexibilities

PCS Unit Quality Assurance Activities

- LTSS PCS quarterly audit activities
 - Internal Audit April 2022
 - Random selection of providers will receive a certified letter requesting either
 - Documentation of mandatory competency training records
 - Documentation of in-home PCS supervisory visits performed by a qualified RN Nurse Supervisor
 - PCS Database will be reviewed to verify the timely submission of the Quality Improvement Attestation Form NC Medicaid-3136

Desktop Assessment Review – planned for May

- Beneficiary Satisfaction Survey - planned for June

Managed Care Updates

Cassandra McFadden

Deputy Directory of Standard Plans, NC Medicaid

March Enrollment Update

- **EBCI Tribal Option: 4,211** •
- **Standard Plans:** • 1,705,662
- **NC Medicaid Direct:** • 1,033,049



(including by enrollment by managed care status, program aid category and region)



NC Medicaid Enrollment Overview

| Helpful Hints: Click on a row or county in one chart to change results in other charts. Click again to reset. Counts less than 11 are not shown for privacy reasons. This may cause some totals to not match. Note: Enrollment counts are pulled the beainning of each month and do not reflect adds/drops during the month, or include retroactive enrollments. | | | | | | Select Report Month Mar 2022 | |
|---|-----------|---|-------------|---|------------------------|------------------------------|--|
| As such, these counts are paired the beginning of each month and do not relied addsdrops during the month, or include retroactive enrolments. Total Standard Plan Mandatory Standard Plan Exempt | | | | | Standard Plan Excluded | | |
| 2,742,922 | | 1,704,094 | 178,759 | | 859,494 | | |
| Plan Selected Program Aid Category: All Selected MC Status: * Selected County: * | | Managed Care Status Selected Program Aid Category: All Selected Plan: All Selected County: * | Definitions | Program Aid Selected MC Stat Selected Plan: All Selected County: | us: All | Definitions | |
| Standard Plan - Amerihealth | 307,319 | Standard Plan Mandatory | 1,704,094 | Infants and Children | | 522.05 | |
| Standard Plan - Carolina Complete | 220,149 | Standard Plan Excluded - Partial Benefit Grou | ps 531,643 | TANF (AFDC) 20 and Under | | 512,913 | |
| Standard Plan - Healthy Blue | 446,344 | Standard Plan Excluded - Full Duals | 216,031 | Family Planning | | 400,72 | |
| Standard Plan - UnitedHealthcare | 370,591 | Standard Plan Exempt - Tailored Plan Non-Du | al 172,930 | TANF (AFDC) 21 and Over | | 369,68 | |
| Standard Plan - Wellcare | 361,259 | Standard Plan Excluded - Other Full Medicaid | 66,298 | Disabled | | 303,12 | |
| Total | 1,705,662 | Standard Plan Excluded - Foster Care | 32,725 | Medicaid - Childrens Health Insurance Prg. | | 219,09 | |
| ECBI Tribal Option | 4,211 | Standard Plan Excluded - Innovations/TBI Wa | iver 12,797 | Aged | | 144,66 | |
| Vedicaid Direct | 1,033,049 | Standard Plan Exempt - Tribal/IHS Waiver | 5,829 | MQBB, MQBE, MQBQ | | 83,38 | |
| Total | 1,037,260 | Standard Plan Excluded - Tribal/IHS Eligibles | 571 | Health Choice | | 69,32 | |
| Grand Total | 2,742,922 | Grand Total | 2,742,918 | COVID-19 | | 36,65 | |
| | | | | Documented Immig | grants | 36,30 | |
| | | | | Other Child (Foster | r Care) | 30,71 | |
| Standard Plan Region | | | | Pregnant Women | | 11,14 | |
| REGION 1 | 255,238 | | | Blind | | 1,38 | |
| REGION 2 | 465,293 | | | Breast and Cervica | al Cancer | 95 | |
| REGION 3 | 653,205 | | | Refugees | | 51 | |
| REGION 4 | 544,289 | | | Emergency Service | es Only | 27 | |
| REGION 5 | 463,673 | | | Grand Total | | 2,742,92 | |
| REGION 6 | 361,224 | | | | | | |
| Grand Total | 2,742,922 | | | | | | |

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Managed Care Updates

- Healthy Opportunities Update
- Integrated Care for Kids (InCK)
- Public Health Emergency Unwinding
- What's Next
 - Tailored Plans and Child and Family Specialty Plan (CFSP)

Healthy Opportunities Update

Effective March 15, 2022, qualifying Medicaid Standard Plan members in 33 North Carolina counties may receive food services.

- Examples of food services include:
 - Food and nutrition access case management
 - Group nutrition classes
 - Fruit and vegetable prescriptions and healthy food boxes/meals
 - Medically-tailored meal delivery
- Additional service launches are planned as follows:
 - May 1 Housing and transportation services
 - June 15 Toxic stress and cross-domain services

Healthy Opportunities Pilot Regions



| Awarded Healthy Opportunities Network Leads |
|---|
| Access East, Inc. Beaufort, Bertie, Chowan, Edgecombe, Halifax, Hertford, Martin, Northampton, Pitt Community Care of the Lower Cape Fear Bladen, Brunswick, Columbus, New Hanover, Onslow, Pender |
| Impact Health Avery, Buncombe, Burke, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, Yancey |

Integrated Care for Kids (InCK)

- NC InCK launched in January 2022 for children who are insured by Medicaid or CHIP (NC Health Choice) in 5 counties:
 - Alamance, Orange, Durham, Granville, Vance
- CMS pilot grant aims to improve quality of care for children under 21 years of age through prevention, early identification, treatment of behavioral and physical health needs

Integrated Care for Kids (InCK)

- Builds on Medicaid's whole-person Advanced Medical Home (AMH) care management model and practice-based incentive programs.
- Brings in additional data from schools and juvenile justice to better identify children who could benefit from additional care management supports.
- Children and families will have the chance to work with a family navigator from their AMH or their Medicaid health plan

Public Health Emergency (PHE) Unwinding

- Federal PHE currently ends mid-April; expected to be extended through mid-July
- CMS plans to provide a 60-day notice to NC Medicaid prior to the end of the PHE to begin unwinding activities
 - NC Medicaid has established a workgroup to determine overall operational approach
- Medicaid priorities
 - Communications strategy/plan
 - Beneficiary redetermination approach
 - State benefit flexibility continuation
 - Provider recredentialing resumption

Public Health Emergency (PHE) Unwinding

- Key messages to share with beneficiaries:
 - Report all changes, including address and other changes, to your local DSS Office (<u>dhhs.nc.gov/localdss</u>)

- Check your mail

Next Up -

Tailored Plans

- Will provide the same services as Standard Plans, as well as additional specialized services for individuals with significant behavioral health conditions, I/DDs, and traumatic brain injury, as well as people utilizing statefunded and waiver services
- Tailored Plans, Enrollment Broker and Medicaid work continues towards December 2022 implementation.

Child and Family Specialty Plan (CFSP)

- Will be available to Medicaid and North Carolina Health Choice-enrolled children, youth, and families served by the child welfare system and offer a broad range of physical health, behavioral health and I/DD services and resources to address unmet health-related need
- CFSP to launch December 2023

Transitions of Care Updates

Continuity of care process overview

- Health plan notifies current providers of the anticipated disenrollment, providing guidance and current prior authorization status
- PCS provider coordinates the completion of the <u>DHB 3051 form</u> with the beneficiary's primary care physician (PCP) or treating physician.
- PCS provider submits the signed 3051 to Liberty Healthcare of North Carolina timely to ensure no delays in payment or services.

Personal Care Services Beneficiary Managed Care Disenrollment Process and Updated Referral Form on July 17, 2021

Managed Care Provider Resources

Provider Quick Reference

https://medicaid.ncdhhs.gov/day-one-provider-quickreference-guide/open

Medicaid Managed Care Provider
 Ombudsman:

Phone: 866-304-7062

Email: Medicaid.ProviderOmbudsman@dhhs.nc.gov

NC Medicaid Managed Care Providers
 website

https://ncmedicaidplans.gov/home

Managed Care Provider Resources

Provider Playbook:

https://medicaid.ncdhhs.gov/providers/provider-playbook-medicaidmanaged-care

Fact Sheets

https://medicaid.ncdhhs.gov/providers/provider-playbook-medicaidmanaged-care/fact-sheets

Send Questions to:

medicaid.helpcenter@dhhs.nc.gov

Electronic Visit Verification Updates

Home Health EVV

- Coming Jan 1, 2023
- Soft launch expected in Oct 2022
- Virtual EVV Home Health Stakeholder Meeting
 - Monday, April 25 from 10 am 11:30 am

Personal Care Services EVV Issue Resolution

- Error Code 784 is created when:
 - No EVV data (Edit 02077) or
 - More units submitted than captured (Edit 02079)
 - Call NCTracks at 800-688-6696 for 784 questions.

Web link below for EVV Claim and Resolution Tips

https://medicaid.ncdhhs.gov/providers/programs-and-services/long-term-care/electronic-visitverification#evv-claim-and-resolution-tips

Electronic Visit Verification Updates

EVV Issue Resolution

- More than one NPI Number
 - Alt EVV users: Separate Alt EVV accounts must be created for each NPI.
 - Call Sandata Alternate EVV Support at 844-289-4246 or email NCAltEVV@Sandata.com
 - Sandata EVV users: If providers have multiple NPIs, they will have multiple STX accounts in Sandata EVV.
 - Log visits according to the correct NPI/STX combination.
 - Ensure there is a Welcome Kit for each NPI.
 - Call Sandata Customer Care at 855-940-4915 for assistance.

Electronic Visit Verification Updates

- Sandata Customer Care Center
 - Assists in providing technical guidance to fix a visit, get it to a verified state or adjusting the visit in and out times.
 - Password resets (if the agency administrator is unavailable to assist)
 - Creating manual visits
 - How to look for a visit
 - Sandata Customer Care Center Contact Info
 - 855-940-4915

• Web link below for FAQ, Terms and Acronyms

https://medicaid.ncdhhs.gov/providers/programs-and-services/long-term-care/electronic-visitverification#faq-and-terms-and-acronyms

EVV Provider Contact Information

Medicaid Direct:

- Sandata Customer Support: 855-940-4915 <u>NCCustomerCare@Sandata.com</u>
- Sandata Alternate EVV Support: 844-289-4246 or <u>NCAItEVV@Sandata.com</u>
- EVV Policy Questions: 919-855-4360 or Medicaid.EVV@dhhs.nc.gov
- NCTracks at 800-688-6696
- LME/MCOs:
 - https://www.ncdhhs.gov/providers/Ime-mco-directory
- Provider Health Plans (PHPs)
 - <u>https://medicaid.ncdhhs.gov/transformation/health-plans</u>

Reports from Division or DHB Teams

 Opportunity for any of our State partners, vendors or PHPs to make comments or provide updates.



Thank you for your time this afternoon

PCS_Program_Questions@dhhs.nc.gov

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