

NC Department of Health and Human Services NC Medicaid

Medicaid Enterprise Systems (MES)

Provider Data Management / Credentialing Verification Organization
(PDM/CVO) Module Overview

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February 9, 2023

Agenda Item	Presenter	Duration
Journey to Modernization	Larhonda Cain, DHHS/Division of Health Benefits Provider Operations Stakeholder Relations Manager	5 Minutes
PDM/CVO Module Introduction	Serja Goram DHHS/Division of Health Benefits Provider Operations Provider Relations Representative	5 Minutes
Module Implementation	Michael Herrera DHHS/Division of Health Benefits Provider Operations Supervisor, Provider Relations	5 Minutes
Next Steps and Communications	Michael Herrera DHHS/Division of Health Benefits Provider Operations Supervisor, Provider Relations	5 Minutes
Questions and Discussion	Larhonda Cain DHHS/Division of Health Benefits Provider Operations Stakeholder Relations Manager	15 Minutes

PDM/CVO Procurement Status

Please Note: The PDM/CVO module procurement is currently in silent period.



Journey to Modernization

NCDHHS Vision

To improve the health of North Carolinians through an innovative, whole-person centered, and well-coordinated system of care that addresses both the medical and non-medical drivers of health.

In 2017, Session Law 2017-57 authorized the replacement of current Medicaid Management Information System (MMIS) technologies with modular systems. As a result of this change, the following developments can be anticipated.

1. NC Medicaid Managed Care Transformation Roadmap will:
 - ✓ Ease the provider administrative burden
 - ✓ Modernize PDM/CVO technologies
 - ✓ Simplify and enable responsive access for Medicaid providers to participate in NC's Medicaid Program
2. PDM/CVO will be operational early 2024 and will:
 - ✓ Align with NC Medicaid Managed Care Transformation Roadmap
 - ✓ Streamline data intake and maintenance throughout provider lifecycle
 - ✓ Perform provider enrollment and credentialing on behalf of NCDHHS
 - ✓ Detect and prevent fraud, waste and abuse

Managed Care Commitments

Whole-Person Care



Buy Health



Local Care Management



Member Experience



Provider Access



North Carolina has matured its vision for the PDM/CVO as a core part of Transformation since Aug 2017

Improve User Experience

- Mitigates administrative burden of completing data entry across multiple plans
- Collects data using common accreditation standards
- Allows providers to delegate access within their organization allowing multiple users to complete an application
- Offers interactive enrollment process, automatically guided step-by-step and real-time online assistance
- Improves the notification process to streamline collaboration
- Simplifies registration for multi-payer providers
- Offers enhanced security controls and protocols

Meet State Program Needs

- Addresses administrative burden of multiple credentialing standards across programs and health plans
- Utilizes nationally-recognized credentialing and accreditation standards
- Supports a multi-payer, multi-health plan program
- Matures data architecture and interfaces
- Establishes a representative centralized credentialing committee with multi-payers

Meet CMS Requirements

- Provides more efficient, economical, and effective administration of State plan
- Supports seamless coordination and integration, allowing interoperability
- Ensures HIPAA privacy, security, transaction and section 508 standards
- Increases flexibility to modify individual services efficiently and effectively to address the changing local and national health and human service environment
- Aligns with Centers for Medicare & Medicaid Services (CMS) requirements



PDM/CVO Module Introduction

Key Metrics



99,000

Actively enrolled individuals, organizations, and atypical providers



1,750

Applications received from newly enrolling providers
(monthly)



7,650

Managed change request applications
(monthly)



19,800

Providers are recredentialled/reverified
(annual approximation)



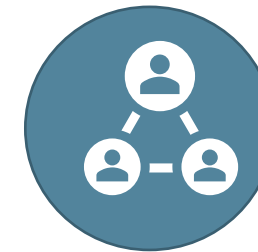
37

Fingerprint-based background checks
(monthly)



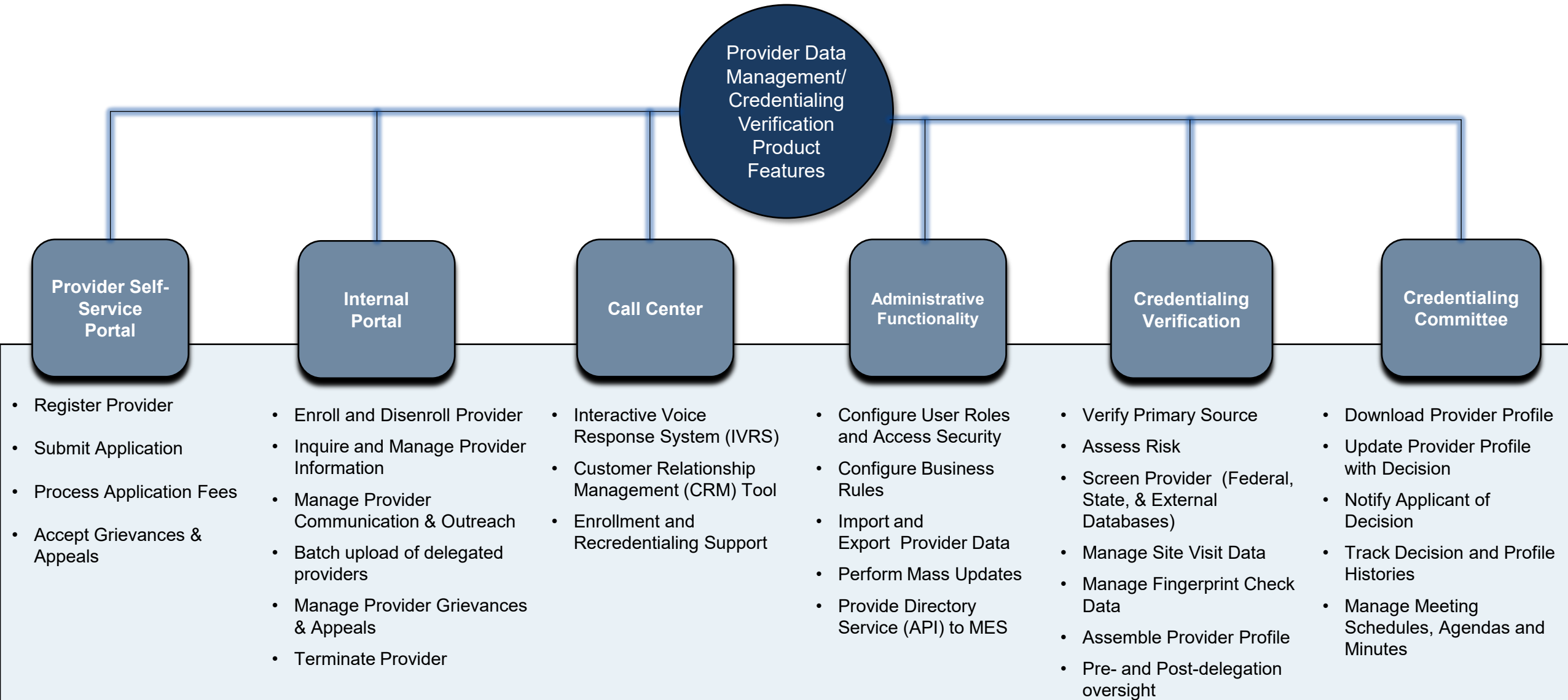
315

Site Visits
(monthly)



1,500

Newly Enrolling Provider Trainings
(monthly)





PDM/CVO Module Implementation

How will NCDHHS acquire, test, and implement the new PDM/CVO module?

Acquire

- Define business driven requirements and expected outcomes
- Procure solution from the vendor that provides best value

Configure & Test

- Coordinate with NC Medicaid providers to proactively communicate changes and solicit design input
- Selected vendor will configure the module to meet NC Medicaid needs
- Solicit testing input from various provider communities

Implement

- Train users and implement module
- Ensure minimal disruption of services and smooth transition
- Demonstrate that operations staff are implementation ready

Expected changes for providers at PDM/CVO full implementation



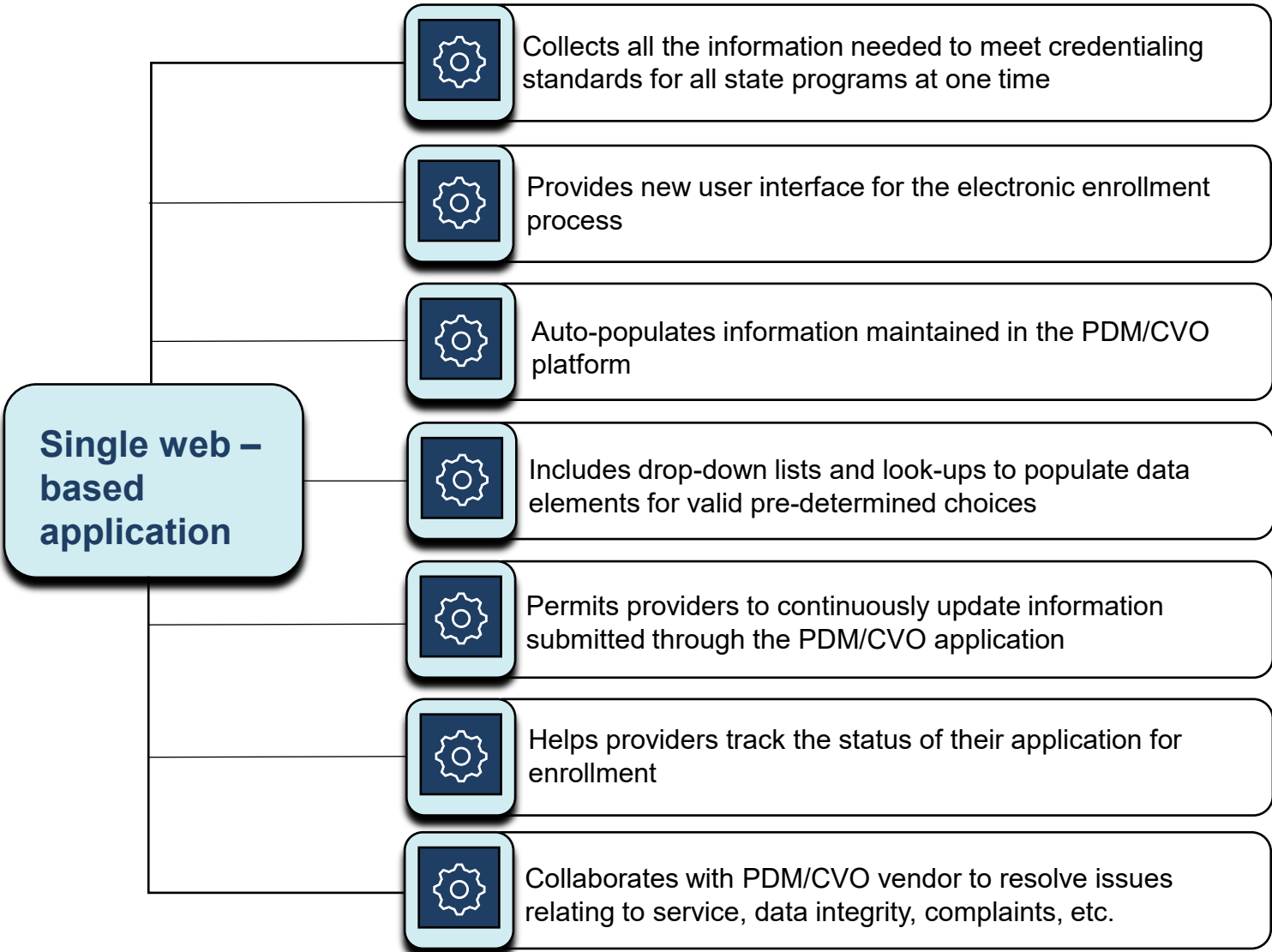
Notable Mentions

- Upon implementing the PDM/CVO, all current recredentialing due dates will remain unchanged.
- The PDM/CVO will offer delegated credentialing to qualifying hospital systems.



Communication

- Provider community will remain informed by way of webinars, arranging training and frequent communications.





Next Steps & Communications

Next Steps:

NCDHHS will engage in **provider-focused education** and **outreach** to help providers transition from the current Medicaid provider enrollment process to the transition period processes, and then to the entire centralized credentialing process under full implementation.

Communications include:

- Provider Association Webinars
- Ongoing Stakeholder Meetings
- Training
- Outreach to enrolled providers, prospective providers, associations, and stakeholders
- NC Medicaid website for updates:
<https://medicaid.ncdhhs.gov/PDM-CVO>

THANK YOU



Questions

