

Network Communication Bulletin #107

Transforming Lives. Building Community Well-Being.

To: All Providers of State and Medicaid Funded Services

From: Khristine Brewington, VP of Network Management, MS, LCMHC, LCAS, CCS, CCJP

Date: August 7, 2020

Subject: Extension of Temporary Policy Modifications & Rate Enhancements, Special Bulletin

COVID-19 #118, Clinical Coverage Policy 8P Comment Period, Executive Order #155, The ASAM Criteria Training Project for NC, Volunteers Needed, 2020 Perception of Care

Survey Information, Important NCSNAP Reminders

REMINDER:

PLEASE SEND ANY RE-OPENING PLANS TO NETWORKMONITORING@TRILLIUMNC.ORG.

EXTENSION OF TEMP POLICY MODIFICATIONS & RATE ENHANCEMENTS

NC Medicaid is committed to ensuring beneficiaries continue to receive Medicaid and NC Health Choice services with no interruptions or delays due to COVID-19. Recently, the federal Declaration of Emergency scheduled to end July 25, 2020, was extended through October 25, 2020. In response to this new date, NC Medicaid has extended its COVID-19 related temporary Clinical Coverage Policy provisions to December 31, 2020.

NC Medicaid has also determined that it is both necessary and feasible to continue temporary enhanced rates related to COVID-19 through September 30, 2020. In the fall, NC Medicaid will reassess both needs and available funding.

Please refer to relevant COVID-19 Medicaid Bulletins and Medicaid fee schedules for details.

Additionally, public comments are being accepted on <u>proposed Medicaid and NC Health Choice</u> <u>policies</u> to adopt permanent changes based on certain temporary modifications. All stakeholders are encouraged to provide feedback. The process of making select temporary provisions permanent will continue through this calendar year.



SPECIAL BULLETIN COVID-19 #118: NEW OPPORTUNITIES FOR MEDICAID PROVIDERS APPLYING FOR FEDERAL RELIEF FUNDS

The Centers for Medicare & Medicaid Services (CMS) announced changes to the Provider Relief Fund opportunities for Medicaid providers:

- 1. Application deadline extended to August 28, 2020, for Medicaid providers to receive funding through the Provider Relief Fund
- 2. Certain providers who previously received Medicare funds can apply for Provider Relief Funds
- 3. Payments for providers who have changed ownership

APPLICATION DEADLINE EXTENDED TO AUGUST 28, 2020

CMS announced the deadline for Medicaid/CHIP providers to submit their financial data to apply for federal Provider Relief Funds has been **extended to August 28, 2020**. Providers that have not yet submitted their applications are encouraged to apply.

North Carolina providers that participate in Medicaid may be eligible to receive federal relief as a result of lost revenue or new expenses relating to the COVID-19 Public Health Emergency. **Providers can apply by August 28, 2020, to receive payments.**

Eligible providers will receive at least 2% of reported annual gross revenue from patient care. North Carolina providers may qualify and are encouraged to apply if they meet all the following criteria:

- Providers have directly billed Medicaid for health care related services during the period of January 2018 to December 31, 2019;
- Continue to provide patient care after January 31, 2020; and
- ▲ Did not receive a payment from either distribution of the <u>CARES Act Provider Relief General</u> Allocation.

CERTAIN PROVIDERS WHO PREVIOUSLY RECEIVED MEDICARE FUNDS CAN APPLY FOR PROVIDER RELIEF FUNDS

North Carolina providers may be eligible to receive federal relief as a result of lost revenue or new expenses relating to the COVID-19 Public Health Emergency. **Providers can apply beginning the week of August 10, 2020, through August 28, 2020, to receive payments.**

Eligible providers will receive at least 2% of reported annual gross revenue from patient care. North Carolina providers may qualify and are encouraged to apply if they received a payment from Phase 1 of the CARES Act Provider Relief General Allocation.

PAYMENTS FOR PROVIDERS WHO HAVE CHANGED OWNERSHIP

Starting the week of August 10, providers who experienced change in ownership challenges may submit their revenue information, along with documentation proving a change in ownership, by August 28, 2020, for consideration for Provider Relief Fund payment.

CLINICAL COVERAGE POLICY 8P: NORTH CAROLINA INNOVATIONS OVERVIEW OF PROPOSED REVISIONS

This overview provides the background and context for policy changes proposed by NC Medicaid.

PUBLIC COMMENT PERIOD: August 4, 2020 to September 18, 2020

NC Medicaid is proposing telehealth-related changes to Clinical Coverage Policy 8P: North Carolina Innovations to complement and build upon the new 1H: Telehealth, Virtual Patient Communications and Remote Patient Monitoring policy, which expands coverage of remote physical and behavioral health care to Medicaid and North Carolina Health Choice (NCHC) beneficiaries.

Proposed revised 8P will:

A Enable select waiver services to be delivered via telehealth.

When revisions to Policy 8P are approved, the former policy will be replaced in its entirety on a date to be determined later in 2020. Additionally, NC Medicaid has issued several temporary Special Medicaid COVID-19 Bulletins related to telehealth coverage that remain in effect until further notice. A list of Special Medicaid COVID-19 Bulletins can be found on the NC Medicaid COVID-19 Guidance and Resources web page.

NC Medicaid will provide 30 days' notice before this policy becomes effective and when the temporary Special Medicaid COVID-19 Bulletins will be retired.

- Proposed Medicaid and NC Health Choice Policies
- Llinical Coverage Policy 8P: North Carolina Innovations: Overview of Proposed Revisions

EXECUTIVE ORDER #155

The link below will take you to Executive Order #155, outlining the extension of the Phase 2 restrictions through September 11, 2020 at 5pm.

This Executive Order, along with the extension of Phase #2 re-opening plans, continues the requirements outlined in Executive Orders 141, 147 and 151 with the exception of two amendments to Executive Order 141. The amendments relate to the Governor requiring school and health officials to "maintain and implement measures to provide for the health, nutrition, safety, educational needs, and well-being of children being taught by remote learning" and extends the prohibition against price gouging to September 11, 2020.

As a reminder:

Executive Order #141 discusses:

- Guidance for High Risk Individuals
- Activities outside the home
- Information on the impact to houses of worship/religious services
- Restrictions for certain types of businesses/operations
- Limits on gatherings

Executive Order #147 outlines:

- Amends guidance from #141 related to requirements for Face Coverings, including in retail businesses, restaurants, child care facilities, state and government buildings, Long-Term Care Facilities and other Health Settings
- Skilled Nursing Facility visitation restrictions
- Statewide COVID Testing

Executive Order #151 clarifies:

- The use of specific facilities like gyms
- A Restricts mass gatherings to 10 people indoors and 25 people outdoors

Read the Executive Order #155

THE ASAM CRITERIA TRAINING PROJECT FOR NORTH CAROLINA

The Division of Health Benefits NC Medicaid and the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) are pleased to offer a variety of opportunities to participate in *The ASAM Criteria* Training. This training project is a part of the 1115 Substance Use Disorder Demonstration Waiver implementation plan. The plan includes: 1) the use of *The ASAM Criteria* to determine the appropriate level of care required for beneficiaries and 2) ensuring direct enrolled professionals providing comprehensive clinical assessments (CCA), diagnostic assessments (DA) and other evaluations have the knowledge, skills and ability to make an ASAM level of care determination for beneficiaries with a substance use disorder diagnosis.

AUDIENCE

Behavioral health clinicians in North Carolina (Licensed Psychologists, LCSW, LCSW-A, LCMHC, LCMHC-A, LCAS, LCAS-A, LMFT, LMFT-A, PA, NP, MD) who are contracted with an LME/MCO or a Standard Plan to provide CCA, DA, and other evaluations.

ASAM training flyer

VOLUNTEERS NEEDED

THERE IS NO "I" IN TEAM...BUT THERE IS A "U" IN VOLUNTEER!

Looking to get involved? Wanting to make an impact in the lives of members we serve?

Trillium is recruiting for volunteers to support the work of our

Human Rights Committee (HRC) and Global Quality Improvement Committee (GQIC).

| HRC representatives unite to: | |
|-------------------------------|------------------------------|
| ✓ | Protect member rights |
| ✓ | Ensure quality in services |
| ✓ | Safeguard access to care |
| √ | Oversee procedure compliance |

| GQIC representatives unite to: | |
|--|--|
| ✓ Support our provider network | |
| ✓ Explore provider quality improvement efforts | |
| ✓ Advocate for best practices | |
| ✓ Perform blinded peer reviews | |

Membership consideration is open to all interested parties, including Psychiatrists and Psychiatric-Mental Health Nurse Practitioners.

To get involved with HRC, please fill out our online application for membership consideration.

To get involved with GQIC, please reach out to QMInfo@TrilliumNC.org.

Together, we can support the well-being, potential, and quality of care for all Trillium members.

Get involved today!

IMPORTANT INFORMATION REGARDING THE 2020 PERCEPTION OF CARE SURVEYS

Every year Trillium Health Resources and other MCOs across the state assist the North Carolina Department of Health and Human Services (DHHS) with a mandatory annual survey of members who receive Mental Health (MH) and/or Substance Use (SU) services. This survey is designed to assess member perceptions of the services they have received in the past year.

The survey results are sent to the Substance Abuse and Mental Health Services Administration (SAMHSA) for required reporting, who then publish the results by LME-MCO in an annual report. The survey results <u>are not</u> used by DHHS or LME-MCOs to monitor the performance of providers. Survey results are used to inform policy decisions designed to improve the system.

Your assistance and participation is crucial to the success of this project

If you provide MH and/or SU services to members of any age, you may be contacted soon to participate in the administration of this survey. Specific instructions will be provided by Trillium staff at that time.

In response to the COVID-19 emergency, survey administration options have been adapted and expanded this year to include use of distance technologies and paperless surveys. These changes are intended to safeguard members and provider health and safety, and to significantly reduce burden for participating providers who assist with survey administration.

Administration of the 2020 Perception of Care survey will occur in the month of August. Since there is a very short administration period, surveys must be completed in a timely manner.

REQUIREMENTS FOR MEMBER PARTICIPATION IN THE SURVEY

- Must have mental health and/or substance use diagnosis
- A Must be a Trillium member, with a Trillium member ID number
- Can be State-funded OR Medicaid funded

Please follow all timelines and survey administration instructions provided by Trillium. If you are asked to participate in the administration of this survey and you have any questions, please feel free to contact Julie McCall at <u>Julie.McCall@TrilliumNC.org</u> or 866-998-2597.

Thank you in advance for your participation in this important survey! We look forward to working together with you to gather the important information that will reflect our joint efforts to help members in our area.

IMPORTANT NCSNAP REMINDERS

All Persons served by the State's Developmental Disabilities (DD) System Require an NC SNAP:

- Assessments should be completed and submitted upon initial contact with the I/DD service system (Provider)
- Assessments should be updated annually and anytime a significant change has occurred in the individual's needs/level of support

NC SNAPs Must be submitted via Email or Fax:

Email: NCsnap@trilliumnc.org

Fax Number: 252-215-6874; 910-353-4954

Ensure NC SNAPs are Filled-Out Completely Prior to Submission:

- Assessments missing pertinent information (Consumer ID Number, Type of Assessment, etc.) will be returned to the provider for correction
- Individual's Case Number should be the member's Trillium Case/Record Number
- Assessments may be completed "by hand" but should be written in clear/legible handwriting (please do not use cursive handwriting)
- Members' social security numbers should not be recorded on NC SNAPs

Each Page of the NC SNAP must be Submitted for Initial and Annual Assessments:

NC SNAP Summary Report &Supplemental Information forms may be sent insolation for Discharge NC SNAPs only Incomplete assessments will not be processed, and will be returned to the provider (via email)

Discharge NC SNAPs Should be submitted as promptly as possible:

- Please do not wait until the member is due for an annual NC SNAP update to submit discharge NC SNAP
- If a member has changed providers, the new provider should be listed on the Summary Report &Supplemental Information page of the NC SNAP

NC SNAPs submitted via email must be sent securely:

Members' names/initials should not be listed within the subject line of the email (this is an electronic HIPPA violation)

The Date of NC SNAP Assessment Should Reflect the Date That Assessments are completed:

- Assessments listing a future date cannot be entered into the database
- Assessments containing a future date will be returned to the provider for correction

Past-Due NC SNAP Notifications are Sent-Out Weekly:

- Please respond to requests for updated NC SNAPs as promptly as possible
- A Plan of Correction will be issued for providers that fail to submit assessments after the 3rd request has been sent

Necessary Corrections to a Members' NC SNAP Utilizing the Following Procedures:

- Corrections should be made by the individual who completed the assessment
- A One single line shall be drawn through the error, making sure the original entry is still legible
- 📤 The corrected information shall be recorded legibly above or near the original entry
- An explanation as to the type of documentation error shall be included whenever the reason for the correction is unclear
- Correction fluid or tape shall not be used for the correction of errors

Any questions about this Communication Bulletin may be sent to the following email:

<u>NetworkManagement@TrilliumNC.org</u>. These questions will be answered in a Q&A format and published on Trillium's website.