

## **Network Communication Bulletin #229**

Transforming Lives. Building Community Well-Being.

**To:** All Providers

From: Cham Trowell, Utilization Management Director

**Date:** July 6, 2022

Subject: Special Bulletin COVID-19: Ending of NC State of Emergency Flexibilities for both

Medicaid AND State Providers

## SPECIAL BULLETIN COVID-19: ENDING OF NC STATE OF EMERGENCY FLEXIBILITIES FOR BOTH MEDICAID AND STATE PROVIDERS

In accordance with NC Medicaid SPECIAL BULLETIN COVID-19 #237: Extension of NC State of Emergency Temporary

Flexibilities, all COVID-19 flexibilities not made into permanent policy will be ending for members with Medicaid B insurance on August 31, 2022. <u>SPECIAL BULLETIN COVID-19 #237: Extension of NC State of Emergency Temporary Flexibilities I NC Medicaid (ncdhhs.gov)</u>

This means several changes to our service array for Medicaid and State Benefit Plans.

- **1.** Disaster codes CR and GT CR will be end dated effective August 31, 2022 in the Medicaid B Benefit Plan and in all provider contracts.
- **2.** Any permanent additions will be added to the Medicaid Benefit Plan and made available in In-Network provider contracts.
- **3.** Prior authorization rules will resume on September 1, 2022. This means that services requiring prior authorization must be requested by August 15, 2022. Visit counts for all services will start over July 1, 2022.
- **4.** Enhanced rates associated with COVID-19 will be ending on August 31, 2022, with the exception of Mobile Crisis services. Community-based Mobile Crisis Intervention services will have a 5% rate increase through April 1, 2027, as authorized by section 9813 of the American Rescue Plan Act of 2021 (ARPA) (Pub. L. 117-2). This rate will be added to the HCPCS code H2011.
- **5.** All In Lieu of (ILOS) and Alternative Service Definitions associated with COVID-19 will no longer be a benefit in the Medicaid B or State-funded service array.



## **SERVICES EFFECTED INCLUDE:**

- Assertive Engagement YA341 CR
- Disaster Outreach and Engagement H0038 HI CR
- Disaster Coordination Rehabilitation and Support H2017 CR
- Home Monitoring through Virtual Supervision S5135 GT U5
- A Rapid Response Team H2011 U5 CR
- ▲ Community Inclusion and Support T2021 HI CR (individual)
- △ Community Inclusion and Support T2021 HI HQ CR (Group)

As previously discussed, many flexibilities were made into permanent policy. We will be adding permanent flexibilities to our Trillium Medicaid B Benefit Plan and In-Network provider contracts and providers may start requesting these new codes on August 1, 2022. A quick overview of these changes are provided on the chart below:

<u>SERVICE</u>	POLICY CHANGE	BENEFIT PLAN UPDATE
Outpatient Codes	CPT codes 90785, 90832, 90834, 90837, 90839, 90840, 90846, 90847, 90849, and 90853 were made telephonic eligible.	KX modifier added to codes for service provided telephonically. All codes count towards outpatient visits limits except 90785, 90839 and 90840 regardless of using KX or not.
Peer Support	Services may be provided by telehealth or telephonically, audio-only communication but limited to 20% or less of total service time provided per beneficiary per fiscal year.	GT and KX modifier added to H0038 for service provided by telehealth or telephonically.  Prior Authorization requirements apply.
(b)(3) Individual Support:	Service may be provided by two-way, real-time audio and video as well as telephonically.	GT and KX added to T1019 U4. Prior authorization is required
RH- BHT	CPT codes 97151, 97152, 97153, 97154, 97155, 97156, 97157, were made telehealth-eligible.  If two-way audio-visual options are not accessible to the beneficiary, the following services may be offered by telephonic modality: 97156 and 97157	GT and KX added to applicable codes. Prior Authorization requirements apply

One caveat to the flexibilities ending is the B3 Supported Employment. This flexibility will remain in place to allow telehealth according to JCB # 42O.

The flexibilities will end for Members receiving Innovations services on January 16, 2023, unless an extension of the Public Health Emergency.

We are currently working on these changes and will have this completed by August 1, 2022, to allow providers to begin entering authorization requests for a start of date of September 1, 2022. Benefit Plans on posted Trilliums website will also be updated to highlight these changes.

More specific information can be found about the changes <u>SPECIAL BULLETIN COVID-19 #237:</u> <u>Extension of NC State of Emergency Temporary Flexibilities | NC Medicaid (ncdhhs.gov)</u>.

▲ Clinical Communication Bulletin 029

All questions related to this Clinical Communication Bulletin can be sent to <u>UM@TrilliumNC.org</u>. Questions will be responded to as quickly as possible.