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All Providers

To:

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

Date: June 30, 2023

Subject: Provider Reverification Process, Provider Enrollment Fee Changes, New Abortion Requirements, Medicaid Managed Care Updates

SPECIAL UPDATE BULLETIN MEDICAID TRANSFORMATION

PROVIDER REVERIFICATION REMINDER

A Provider-Reverification-Reminder

Avoid Suspension and Termination by completing reverification upon notification.

Re-credentialing/reverification is an evaluation of a provider's ongoing eligibility for continued participation in NC Medicaid, normally conducted every five years as mandated 42 CFR 455.414. The COVID-19 federal Public Health Emergency (PHE) paused reverification from March 2020 through May 11, 2023, delaying the due date for nearly 30,000 providers over that three-year period. Now that the federal PHE has ended, NC Medicaid must ensure that all enrolled providers, including those whose reverification was delayed, are compliant with the federal regulation.

Reverification is required for continued participation with NC Medicaid programs. Providers for whom reverification was delayed have been organized into groups to ensure the timely completion of the reverification process.

- Providers should monitor their secure NCTracks Message Inbox for notifications and the Re-verification section of their NCTracks Status and Management page for the option to reverify.
- Reverification notifications are sent to the provider 70 days prior to the reverification due date, with reminders at 50 days, 20 days and five days.
- Non-responsive providers receive a notice of suspension offering an additional 50 days to submit their reverification application before being terminated from the program.



- Including the notice of termination, and depending on the provider's responsiveness, each will receive up to 6 targeted notifications over the 120-day reverification period.
- A If terminated, the provider may re-enroll at any time.

For help with the reverification process, providers can refer to the Provider Re-credentialing/Reverification webpage in the NCTracks public facing portal. Providers are also encouraged to review Provider Announcements, User Guides and Frequently Asked Questions.

As a convenience, NC Medicaid offers a list of "Active Provider Re-Verification Due – July 2023 – Dec 2023" dates (updated biannually). The reverification due date displayed is also the suspension date if no action is taken to submit the reverification application under the applicable NPI. If the provider record is suspended, claims payment will stop until the reverification application is submitted.

Providers are encouraged to review the reverification due date list, and frequently check their NCTracks Provider Message Inbox for notifications or the reverification section of the Status and Management page in the NCTracks Secure Portal for the option to reverify.

NORTH CAROLINA MEDICAID PROVIDER ENROLLMENT FEE REINSTATED JULY 1, 2023

North Carolina Medicaid Provider Enrollment Fee Reinstated July 1, 2023 | NC Medicaid (ncdhhs.gov)

Providers submitting enrollment or reverification applications will be assessed the \$100 NC Medicaid Provider Application Fee.

NC Senate Bill 105 Session Law 2021-180 Section 9D.9(a) waived the \$100 North Carolina Medicaid application fee for new provider enrollment and reverification applications effective from Jan. 9, 2022, through expiration on June 30, 2023.

Beginning July 1, 2023, providers submitting enrollment or reverification applications will be assessed the \$100 NC Medicaid Provider Application Fee. This is in addition to the Federal Fee imposed for specified taxonomies. For more information, see Federal Fee and NC Application Fee FAQs.

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NEW REQUIREMENTS TO ABORTIONS EFFECTIVE JULY 1, 2023

New Requirements Relating to Abortions Effective July 1, 2023 | NC Medicaid (ncdhhs.gov)

New requirements for informed consent, reporting and patient information relating to abortions.

The NC Department of Health and Human Services has developed materials to comply with new requirements for informed consent, reporting and patient information relating to abortions that will take effect July 1, 2023 as required by Session Law 2023-14.

The required NCDHHS documents are listed below and are also available at the North Carolina Reproductive Health Services webpage under the "For Providers" heading.

NCDHHS CONSENT FORMS

- A NCDHHS Medical Abortion Informed Consent (English/Spanish)
- A NCDHHS Surgical Abortion Informed Consent (English/Spanish)
- A NCDHHS Physician Declaration Form (English/Spanish)
- A NCDHHS Abortion Life Limiting Anomaly Consent (English/Spanish)

NCDHHS REPORTING FORMS

- A NCDHHS 1891 Abortion Case Report Form (English/Spanish)
- A NCDHHS Abortion Complications Reporting Supplement 1891a (English/Spanish)

ADDITIONAL RESOURCES FOR PROVIDERS ARE LISTED BELOW

- What to Know about Abortion in NC (English/Spanish)
- NC Resource Directory

NC MEDICAID MANAGED CARE PROVIDER UPDATE- JUNE 16, 2023

NC Medicaid Managed Care Provider Update – June 16, 2023 | NC Medicaid (ncdhhs.gov)

Includes provider recredentialing/reverification, billing requirement modifications, Tailored Plan implementation, upcoming key milestones, playbook updates and more.

PROVIDER REVERIFICATION

Providers for whom recredentialing/reverification was delayed are being notified of their requirement to complete the reverification process.

Notifications are sent to the NCTracks Message Center Inbox on the secure Provider Portal. Failure to respond will result in suspension and subsequent termination of the provider record.

A list of providers due for reverification through December 2023 is available on the Provider Enrollment Recredentialing webpage. The reverification due date is the suspension date if no action is taken. Please respond to notifications in a timely manner to maintain participation with NC Medicaid programs.

For additional information, please visit the Provider Re-credentialing/Re-verification page on the NCTracks Provider Portal.

IMPLEMENTATION OF TAILORED PLANS -- START DATE OCT. 1, 2023

Providers are encouraged to remain informed of the implementation of Tailored Plans through fact sheets and other resources available in the Medicaid Managed Care Provider Playbook. The following Tailored Plan fact sheets have been updated and are available under the Medicaid Transformation option:

- A Tailored Care Management
- 🔺 Tailored Plan Enrollment and Timeline
- A What Providers Need to Know Before Tailored Plan Launch
- A What Providers Need to Know After Tailored Plan Launch

These documents include the following upcoming key milestones in preparation for Tailored Plan launch:

July 15, 2023	Tailored Plan Auto-Enrollment begins.
July 17, 2023	Beneficiary Choice Period begins; Beneficiaries can choose a PCP by contacting their Tailored Plan
July 24, 2023	Enrollment Broker begins mailing transition notices to beneficiaries.
Aug. 15, 2023	Beneficiary Choice Period ends
Aug. 17, 2023	PCP Auto-Assignment by the Tailored Plan for beneficiaries who have not selected a PCP.
Aug. 25, 2023	Tailored Plans begin mailing Welcome Packets and ID cards to beneficiaries

Sept. 1, 2023	Tailored Plan Pharmacy, Nurse and Behavioral Health Crisis lines go live
Oct. 1, 2023	Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plans launch

KEEP NCTRACKS PROVIDER RECORDS CURRENT

Medicaid Managed Care health plans, as well as the NC Medicaid Provider and Health Plan Lookup Tool must use information from the NCTracks provider record for their directories. For this reason, and because NC Medicaid recently announced a <u>Provider Data</u> <u>Management/Credentialing Verification Organization Solution Coming in 2024</u>, it is essential for providers to ensure all data in each active NCTracks provider record is accurate.

To assist with this effort and allow for the organization and basic review of multiple records concurrently, the Department continues to offer <u>Provider Directory Listing and Affiliation</u> <u>Reports</u> for Standard Plans and Tailored Plans in the <u>Provider Playbook under Trending Topics</u>. These reports are updated regularly and serve as a resource for verifying the contract status with health plans.

The ongoing accuracy of provider enrollment information is not only contractually required of providers, but also vital to the successful sharing of data among health plans and the incorporation into new solutions. For additional information, see the related bulletin article Ensure Your Information Displays Correctly in NC's Provider Directory Tool – Provider & Health Plan Look-Up.

PROVIDER OMBUDSMAN

Each health plan has a grievance and appeal process for providers, separate from the process for beneficiaries, which can be found in the health plan's Provider Manual, linked on the <u>Health</u> <u>Plan Contacts and Resources Page</u>.

The Provider Ombudsman service is separate from the Health Plans' Provider Grievances and Appeals process and should be used as an escalation after contacting health plans and searching the <u>NC Medicaid Help Center</u>.

Inquiries may be submitted to <u>Medicaid.ProviderOmbudsman@dhhs.nc.gov</u> or by calling the NC Medicaid Managed Care Provider Ombudsman at 866-304-7062.

Responses to inquiries are auto generated from ServiceNow and sent directly to <u>NC Medicaid</u> <u>Help Center Now Available Convenient Way Providers Find Information</u> e inquirers email address. The subject line will read "NC Medicaid Inquiry COM00XXXXX Has Been Closed" and be sent from this email address: IT Service Desk <u>Medicaid.HelpCenter@dhhs.nc.gov</u>.

HELP CENTER AVAILABLE FOR PROVIDERS TO FIND INFORMATION

The <u>NC Medicaid Help Center</u> is an online source of information about NC Medicaid Managed Care, COVID-19, Medicaid and behavioral health services, and is used to view answers to questions from the NC Medicaid Help Center mailbox, webinars and other sources. To use this tool:

- 1. Go to the <u>NC Medicaid Help Center</u>
- 2. Type a topic or key words into the search bar
- 3. Select a topic from the available list of categories

Detailed information about the NC Medicaid Help Center is available in a Medicaid Bulletin updated on June 17, 2021.

NC MEDICAID MANAGED CARE WEBINARS

Visit the <u>AHEC Medicaid Managed Care webpage</u> for additional information and registration for upcoming webinars, as well as recordings, slides and transcripts from previous webinars.

The latest schedule, registration and information on previous webinars, including the recording, slides, and transcript are available on the <u>AHEC Medicaid Managed Care website</u>.