

NC DEPARTMENT OF **HEALTH AND HUMAN SERVICES** Division of Health Benefits





### **COVID-19 Webinar for Medicaid Providers**

August 13th, 2020

Shannon Dowler, MD Chief Medical Officer, NC Medicaid

**Tom Wroth, MD, MPH** President and CEO, Community Care of North Carolina

> Hugh Tilson, JD, MPH Director of North Carolina AHEC

### Agenda

- Welcome & Logistics
- Medicaid Policy Updates
- Keeping Kids Well Initiative
  - Well Child Visits and Immunizations Data Trends
  - Lessons from the Field
  - Project Overview & Interventions
- Questions & Resources

# Logistics for today's COVID-19 Forum

### **Question during the live webinar**



questionsCOVID19webinar@gmail.com

Technical assistance

technicalassistanceCOVID19@gmail.com



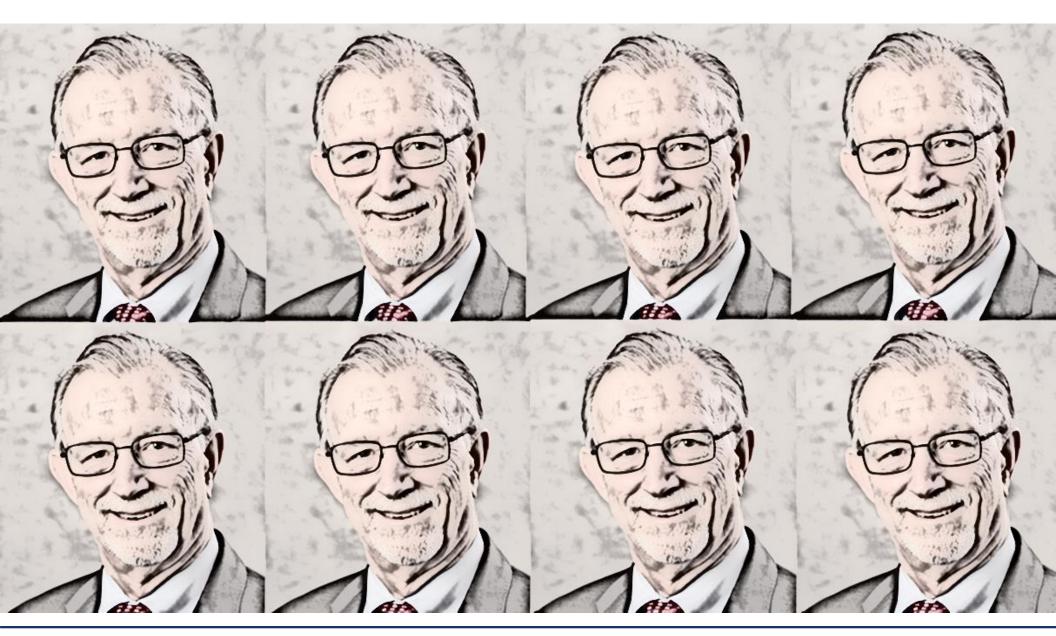


# NC Department of Health and Human Services **NC Medicaid Updates**

Shannon Dowler, MD Chief Medical Officer

8/13/20

# Behind every great boss...



### **NC Medicaid COVID-19 Response Accomplishments**



Member Enrollment

- 497k (~23% of NC Medicaid population) Medicaid eligibility extensions conducted
- 1.2M Letters mailed to members stacked together would be taller than the Statue of . Liberty
- 318K Enrollment applications processed since March 1st, 2020, averages to 2,304
   applications processed per day

পেন্টে Provider Enablement আক্র and Financial Support

- \$1.6B DSH MRI GAP net payment issued to hospitals as a single payment – this can pay for 3,000 SpaceX trips to Mars
- **\$49.6M+** Advanced payments issued to Providers; this is enough to pay for tuition for 225 Medical School students.
  - ~\$16M to 23 Outbreak Providers
  - **~\$30.8** to Rural Independent Hospitals
- 97 Provider Disaster applications processed to extend Provider coverage for Medicaid members, approximately equal to the number of counties in North Carolina



- 135 Telehealth flexibilities implemented to enable continuity of care for Medicaid beneficiaries across 482 health services codes
- **527,156** Telehealth claims processed successfully since March 10th, 2020, averaging 4,217 telehealth claims per day
- **41,224** Pharmacy orders were mailed to beneficiaries, an estimated saving of 107,000 miles in trips to the Pharmacy, using 2.6 mile per trip average.
- **272** PA & Service Limits waivers were put in place, this is more than double the number of hospitals in North Carolina
- 200 individual flexibilities implemented across Behavioral health services offered through LME- • MCO, this would be equivalent to one flexibility per mile of the entire Outer Banks



#### **Federal Authority**

**15** Federal waiver documents submitted to CMS to request temporary flexibilities during the pandemic, as compared to 5 waivers documents submitted for Hurricane Dorian last year



- Communication and Education
- 90 Provider webinars hosted with 38,416 attendees, which would fill the Dean Dome and Duke Stadiums
- 879 inquiries processed through COVID-19 inbox, enough to average 8.79 inquiries per each NC county
- 97 NCTracks special bulletins to providers covering 115+ topics, 1
   topic per every mile of hiking trails in Raleigh, NC
- 67,429 calls handled, 33 sec avg wait time – the number of people served could fill the Carolina Panthers stadium
- COVID-19 Triage Plus line enabled with CCNC, 23,577 calls received since launch, averaging 231 calls per day



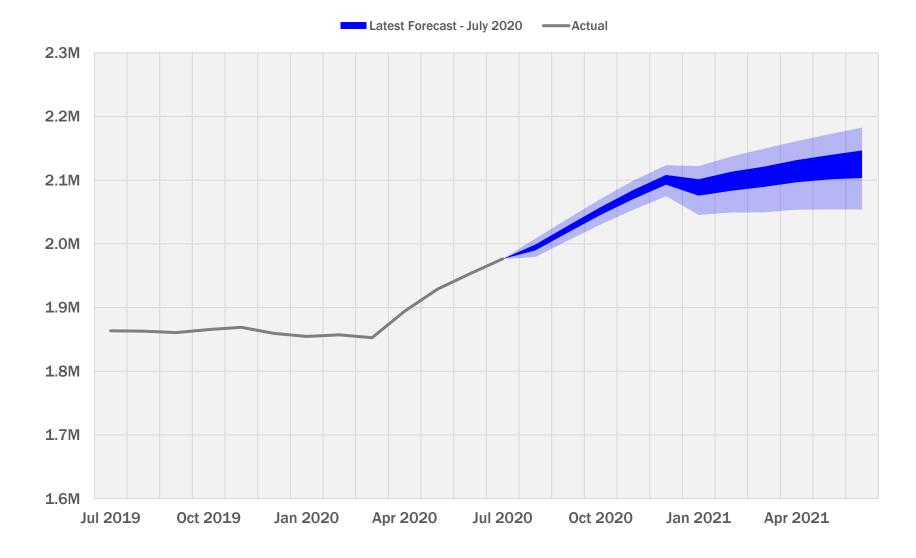
#### **Continuous Evaluation**

 All implemented Flexibilities are being continuously evaluated to track utilization and care impact to drive improved access and health outcomes

•

# **Total Monthly Medicaid & NCHC Enrollment**

### Not including family planning



# **Medicaid COVID-19 Testing for the Uninsured**

- Families First Coronavirus Response Act (FFCRA) allows states to pay for COVID-19 testing for uninsured individuals through Medicaid
- Provides another source of federal funding for testing, freeing up CARES Act and HRSA funding
- States will receive 100% federal funding for COVID-19 testing
- Does not pay for the treatment of COVID-19
- Testing/collection site providers must be enrolled in Medicaid to receive reimbursement through NCTracks
- Available September 1, 2020 through the end of the federal public health emergency (PHE)
- Requires an application and approval of application prior to payment for testing services
  - Simplified application available online September 1, 2020 paper application available August 17, 2020 for download
  - Accepts self-attestation of uninsured status, residency, and citizenship/immigration
  - Must meet citizenship/immigration status requirements State will verify
  - Allows up to 3 months retro-eligibility
- NC Medicaid Bulletin on process forthcoming

# "I need a Doctors Note"

- Indoor exercise facility use is meant to be limited – indoor exercise facilities carry an increased risk of viral transmission, so we need to limit the number of people(and especially high risk people) being potentially exposed.
- This should be reserved for people who must use the indoor equipment as part of a specific treatment plans – again for something specific like rehab or PT where a specific exercise, treatment plan is prescribed.
- Outdoor fitness is lower risk and allowable and would be a good option for people with chronic conditions or elevated BMI.



<sup>--</sup>The Betsey Tilson

NCDHHS, Division of Health Benefits | NC MEDICAID UPDATE | 8/13/20

# **Medicaid Announcement:**

- <u>https://medicaid.ncdhhs.gov/about-us/covid-19-guidance-and-resources/providers/covid-19-special-medicaid-bulletins</u>
- <u>https://medicaid.ncdhhs.gov/providers/fee-schedules</u>

# **COVID-Rate Extensions**

- Special Bulletin announced continuation of rate changes through 9/30/20
- What's Included and What's Not?

In	In	Not Necessarily In
Home Health	LHD Rate Changes	LME/MCO Rate increases will depend on <i>their</i> determinations to pass on rates
CAP C/DA Waivers	FQHC Core Rate Adjustments	
Pharmacy Delivery	Medical Home PMPM Increase	
Swing Beds	Skilled Nursing Facilities	
Home Health	Hospice	
ICF	Private Duty Nursing	
All Provider 5% increase(GA)		
NCDHHS, Division of Health Benefits   NC	MEDICAID UPDATE  8/13/20	

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **Telehealth Utilization – Outpatient Specialized Therapy**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Service Category

Service Provider County		Record Type			
(AII)	•	(AII)			•
Telehe	alth Claims by Se	rvice Categor	ry Counts		
	March 2020	April 2020	May 2020	June 2020	July 2020
Speech Evaluation and Therapy	4,948	56,937	57,357	43,360	22,289
PT & OT Evaluation and Therapy	2,026	20,779	18,726	12,885	6,400
Nutrition/Dietary Eval and Counseling	36	359	438	435	188
Audiology	40	147	119	152	118
Outpatient Respiratory Therapy	1	2	6	2	C

Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **Virtual/Telephonic Utilization – Outpatient Specialized Therapy**





#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Service Category

Service Provider County			Record Type			
(AII)	•	(AII)			•	
Virtual Tel	ephonic Claims by	/ Service Cat	egory Counts	6		
	March 2020	April 2020	May 2020	June 2020	July 2020	
PT & OT Evaluation and Therapy	176	310	215	124	43	
Speech Evaluation and Therapy	0	0	0	0	(	
Outpatient Respiratory Therapy	0	0	0	0	(	
Nutrition/Dietary Eval and Counseling	0	0	0	0	(	
Audiology	0	0	0	0	(	

Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

#### **Telehealth Utilization – Behavioral Health Services**





Service Provider County			Reco	Record Type		
(AII)	•	(AII)			•	
Telehealth	Claims by Se	rvice Categor	ry Counts			
	March 2020	April 2020	May 2020	June 2020	July 2020	
Psychiatric Diagnostic Evaluation and Psychotherapy	13,335	62,735	64,253	60,972	14,341	
Enhanced Behavioral Health Services	1,237	14,789	22,948	24,815	5,952	
Autism Spectrum Disorder	253	2,434	3,744	2,789	393	
Developmental/Behavioral Screening and Testing	113	807	1.373	1,461	541	

Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

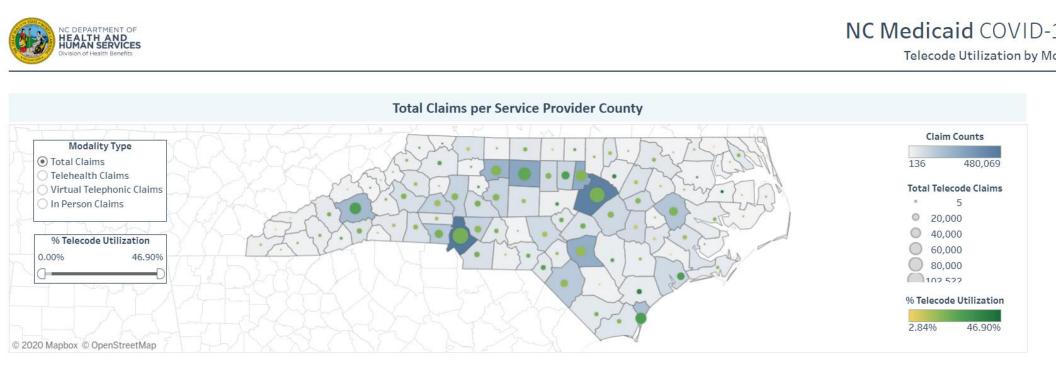
NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Service Category

### **Virtual/Telephonic Utilization – Behavioral Health Services**

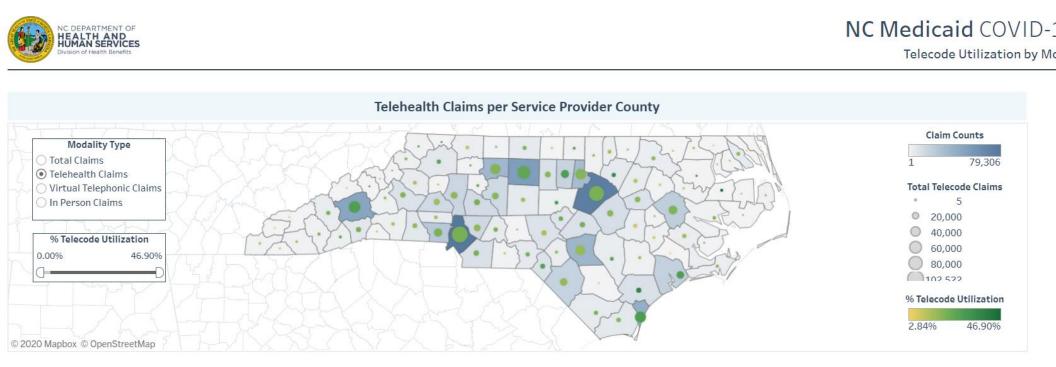
#### NC Medicaid COVID-19 Monitoring NC DEPARTMENT OF HEALTH AND HUMAN SERVICES Telecode Utilization by Modality - Service Category Modality Type Service Category Service Provider County Record Type • (AII) • (AII) Virtual Telephonic Claims • (Multiple values) • Virtual Telephonic Claims by Service Category Trend Virtual Telephonic Claims by Service Category Counts **Claims Lag** 6K March 2020 April 2020 May 2020 June 2020 July 2020 Enhanced Behavioral Health Services 5,194 1,918 19,777 24,643 Psychiatric Diagnostic Evaluation and Psychotherapy Developmental/Behavioral Screening and Testing 43 48 62 27 4K 47 Autism Spectrum Disorder 52 50 1đ 8 claims 2К 0K Mar 8 Mar 22 Apr 19 May 17 May 31 Jun 14 Jun 28 Jul 12 Jul 26 Apr 5 May 3 Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **All Claims – COVID Flexibilities Utilization**



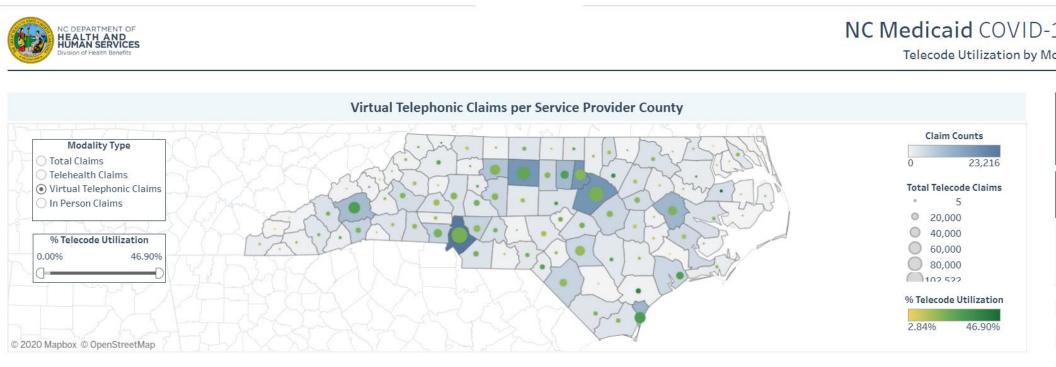
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **Telehealth Claims – COVID Flexibilities Utilization**



Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

#### **Telephonic Claims – COVID Flexibilities Utilization**



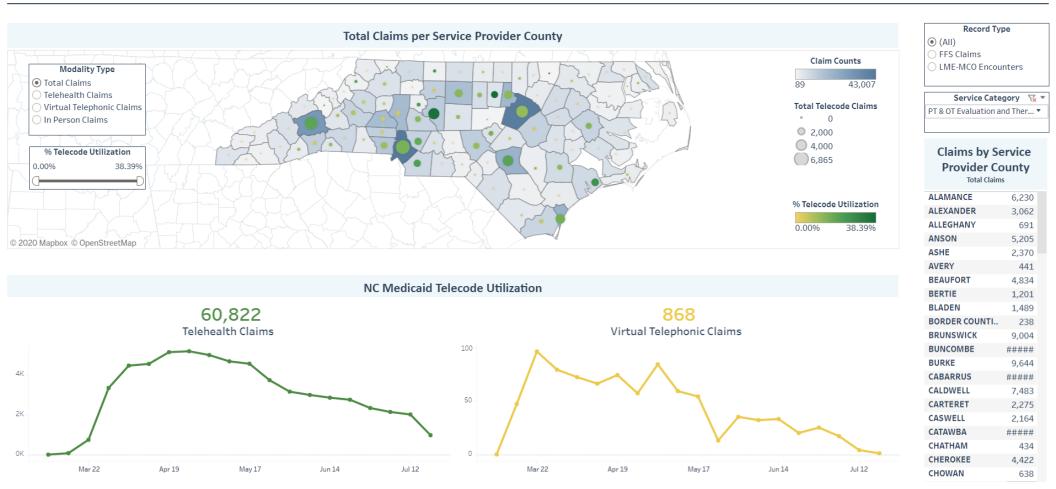
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### All Claims – COVID Flexibilities PT/OT



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County



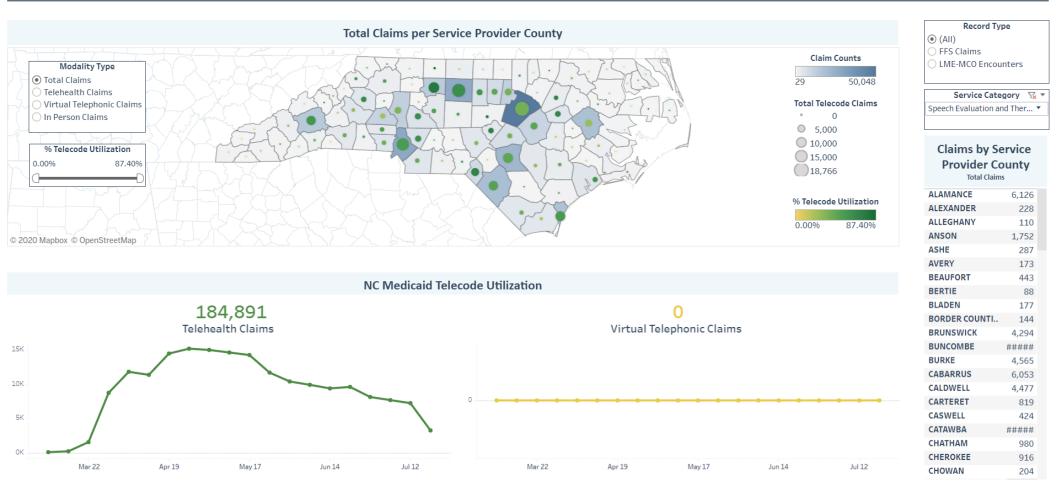
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **All Claims – COVID Flexibilities Speech**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County



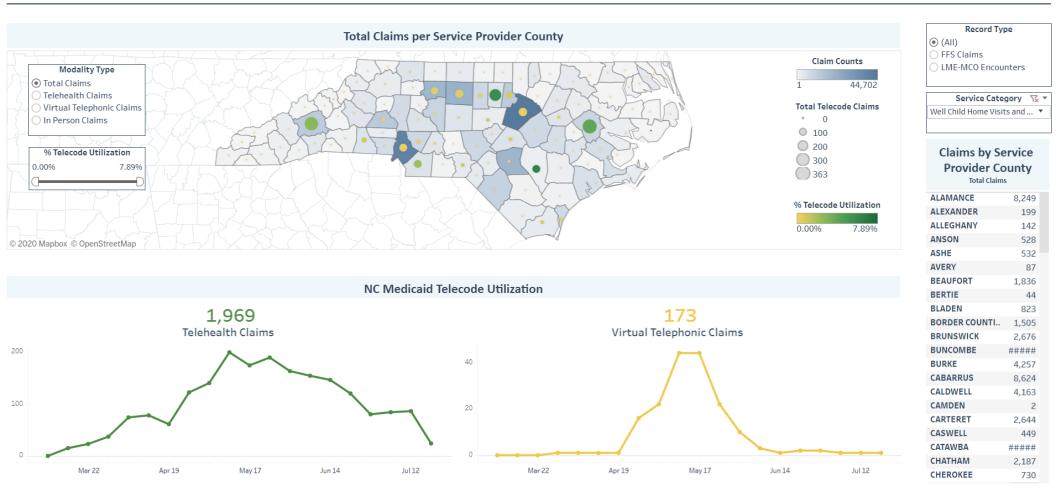
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **All Claims – COVID Flexibilities Well Child Care**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County



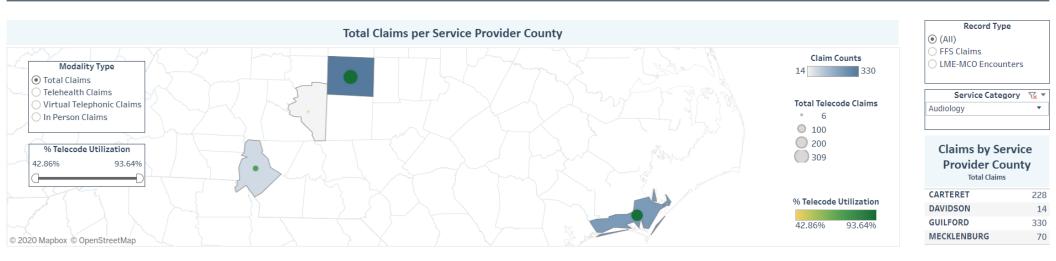
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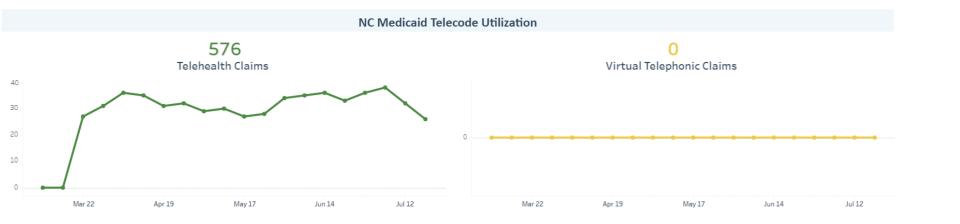
### **All Claims – COVID Flexibilities Audiology**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County





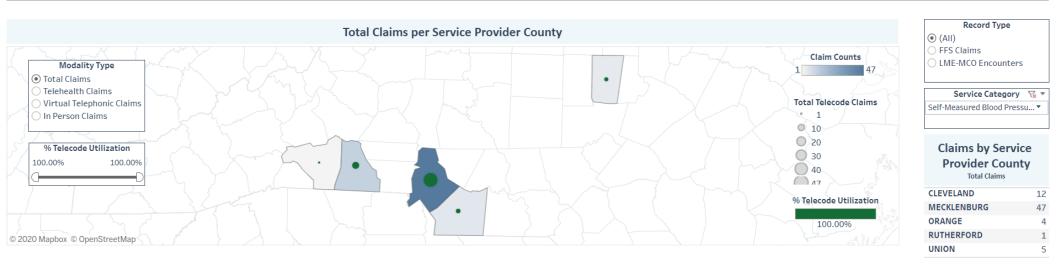
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

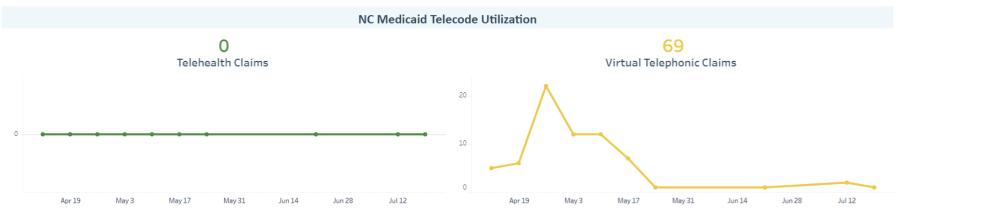
### **All Claims – COVID Flexibilities Self Measured Blood Pressure**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County





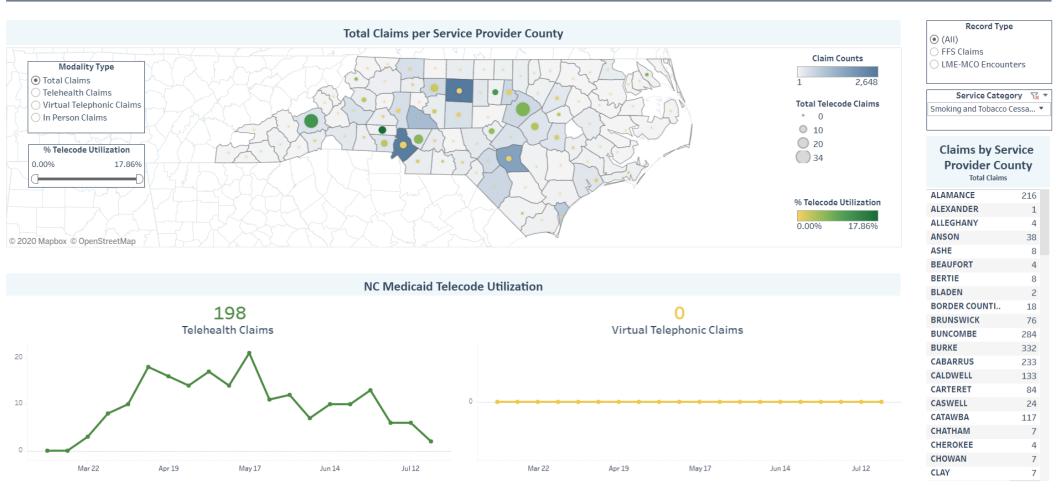
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **All Claims – COVID Flexibilities Smoking and Tobacco Cessation**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County



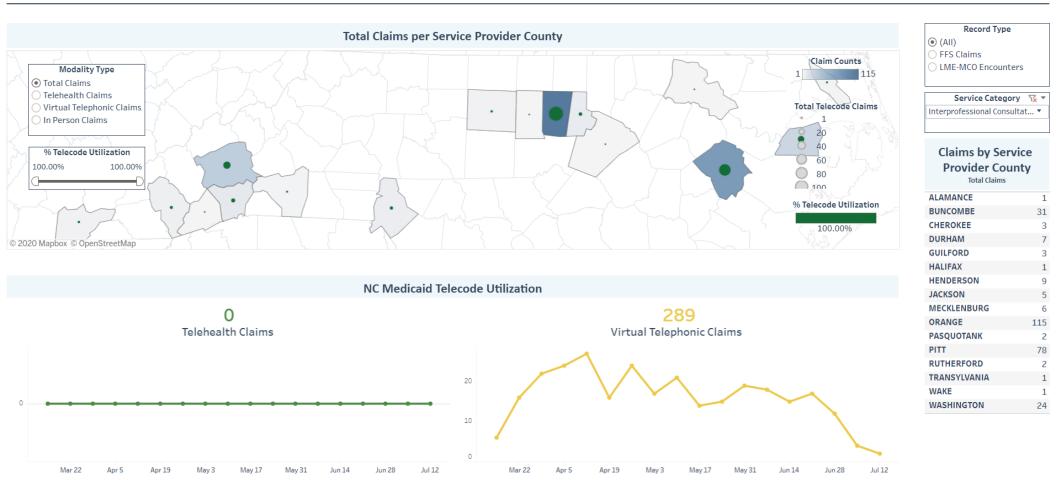
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **All Claims – COVID Flexibilities Interprofessional Consult**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County



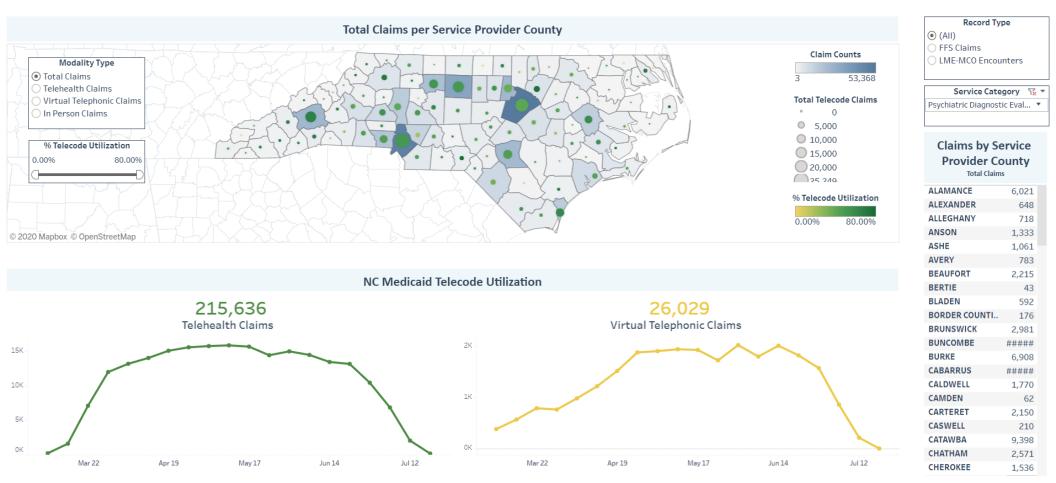
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### **All Claims – COVID Flexibilities Psych Diagnostic Eval**



#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County



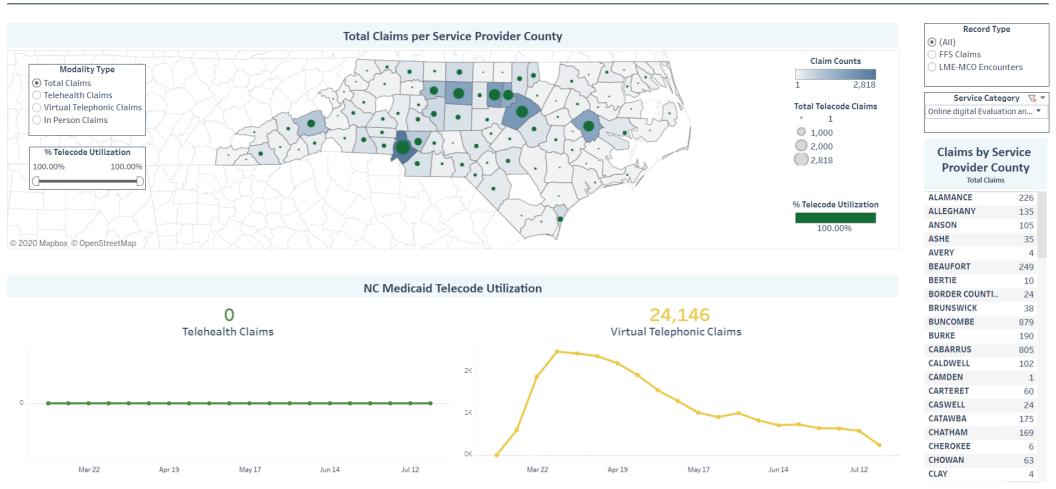
Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

### All Claims – COVID Flexibilities Online Digital E/M



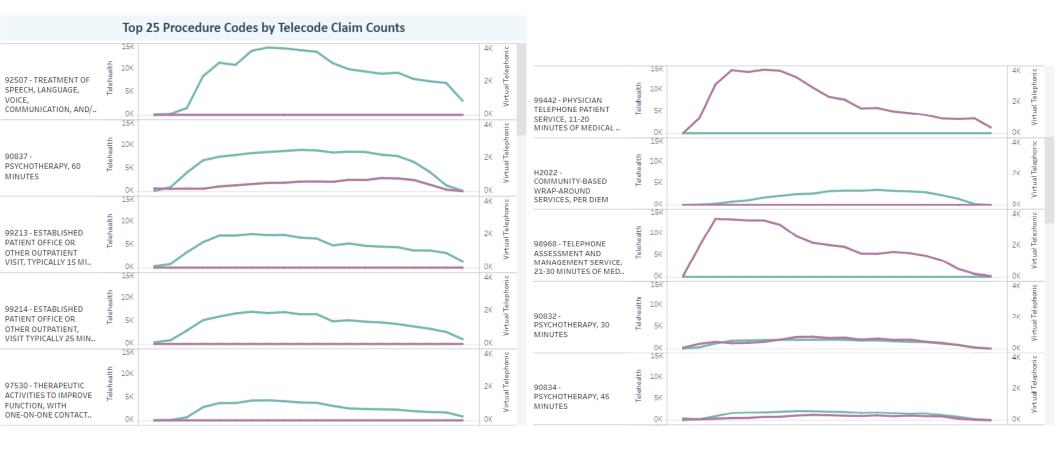
#### NC Medicaid COVID-19 Monitoring

Telecode Utilization by Modality - Provider County



Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

#### **Top 10 Utilized COVID Flexibilities Telecodes**



📕 Telehealth Clai... 📕 Virtual Telepho...

Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

#### **Bottom 10 COVID Flexibilities Utilized Telecodes**



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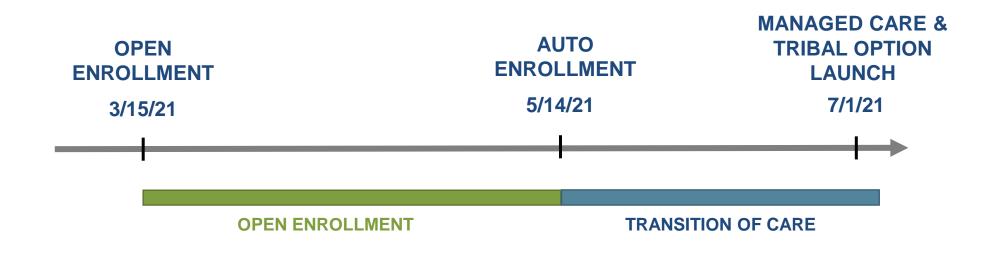
29

29

Telehealth Clai... 📕 Virtual Telepho...

Data refreshed as of 8/3/2020, and claims data reflective of 7/24/2020 service begin date.

# **Managed Care Launch Timeline**



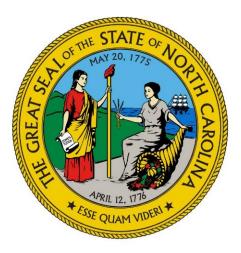
#### **RISK: COVID-19 Pandemic**

# **Telehealth Billing Updates**

- 88.87% processed, 11.13% denied(may include duplicates)
  - Only 7% of denied from tele
- Most utilized Service Category:
  - Psychiatric Diagnostic Evaluation and Psychotherapy
    - 43,267 of 130,835 Telehealth/Telephonic paid claims
- Most denied Claims Service Category:
  - Office or Other Outpatient Service and Office and Inpatient Consultation
    - 4,479 of 20,662 Telehealth/Telephonic denied claims
- Trends:
  - Increase in claims volume
    - (From 66,542 to 207,230 claim lines)

# **October 1 Extension...**

- We are writing to make you aware of a new <u>Executive Order</u> issued today by Governor Roy Cooper and a <u>State Health Director Memo</u> issued by State Health Director Dr. Elizabeth Tilson that <u>suspends</u> but does not waive documentation deadlines for <u>proof-of-immunization and</u> <u>health assessment requirements</u> for school and child-care facilities. Students and families will receive additional time to address access to care disruptions they may have experienced as a result of the COVID-19 pandemic.
- Families are strongly encouraged to obtain the required immunizations for their children on a timely basis. Extending these deadlines by several weeks will allow more time to work with families, providers, local health departments and schools on facilitating access to needed immunizations and health assessments.
- The Executive Order and State Health Director Memo will apply to students enrolled in public, private, or religious educational institutions, including child care facilities and K-12 schools as well as colleges and universities. The Order also extends the deadline for each child entering a North Carolina public school for the first time to submit proof of a health assessment.



# **Keeping Kids Well**

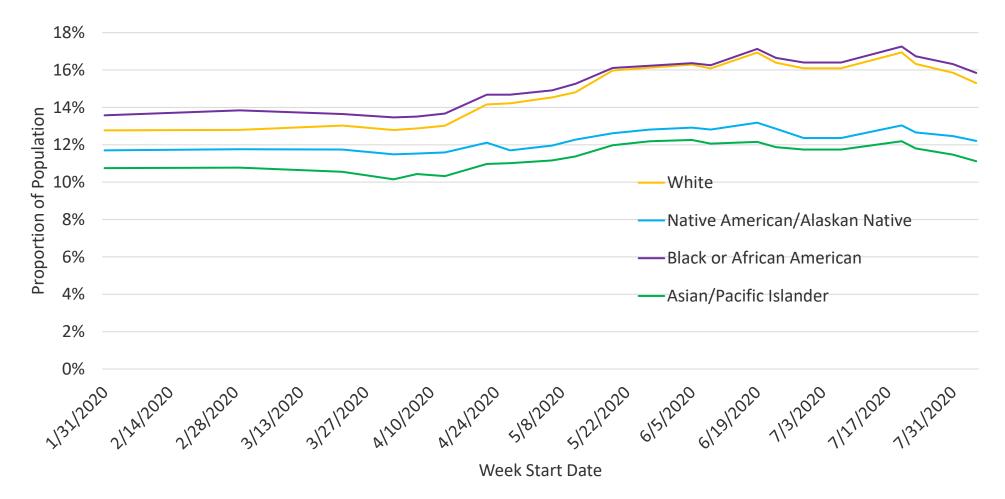
### **NC Medicaid/CCNC/AHEC**

### **Problem Summary**

- COVID-19 has led to a measurable decrease in pediatric preventative care across all populations. Disparities in rates across populations seen historically persist.
- Parents are not certain if vaccines are required with virtual education.
- Parents are afraid they and their children will contract COVID-19 or experience barriers visiting their pediatrician or family physician.
- Under-utilization of well-child visits are missed opportunities to identify physical, developmental, and behavioral concerns – many of which can be managed or treated.
- Missed vaccinations can eventually lead to community outbreaks of preventable disease during a busy COVID19 and influenza season. We don't want another pandemic on top of a pandemic.

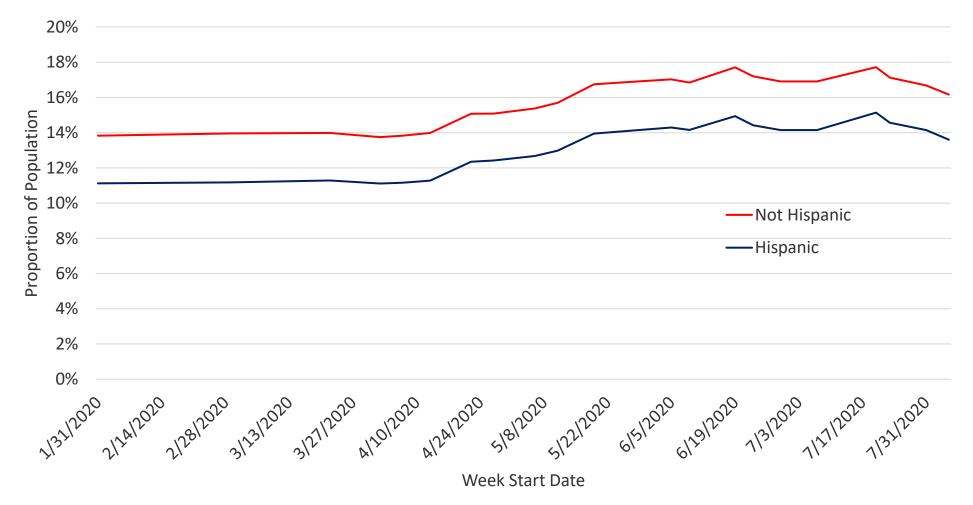


# Proportion of Population<sup>1</sup> with Overdue Well Child Visits 0-2 by Race



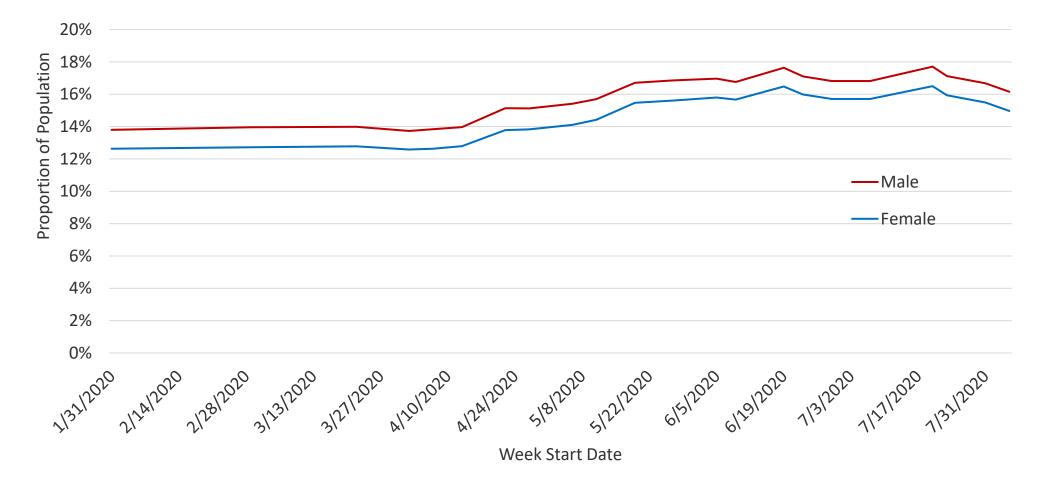
<sup>&</sup>lt;sup>1</sup>A higher value is NOT favorable

# Proportion of Population<sup>1</sup> with Overdue Well Child Visits 0-2 by Ethnicity



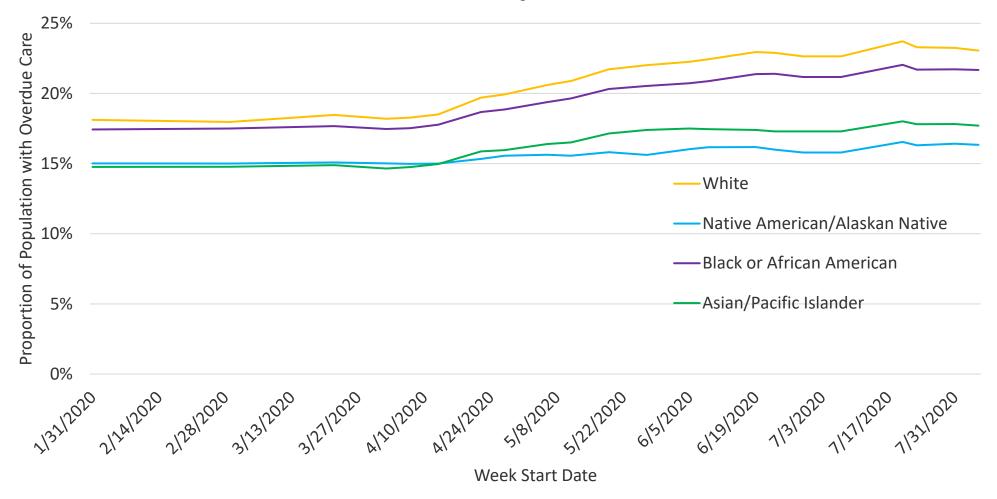
<sup>&</sup>lt;sup>1</sup>A higher value is NOT favorable

## Proportion of Population<sup>1</sup> with Overdue Well Child Visits 0-2 by Gender



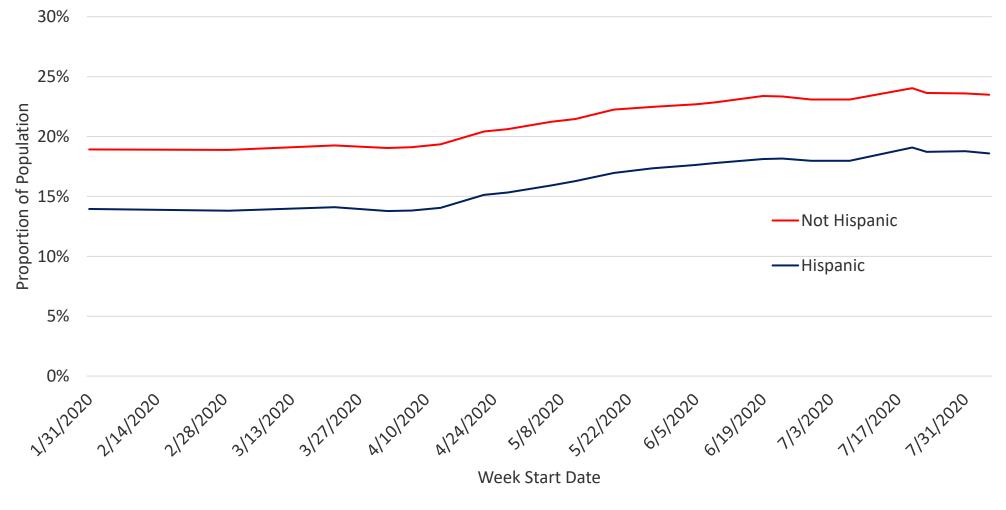
<sup>&</sup>lt;sup>1</sup>A higher value is NOT favorable

## Proportion of Population<sup>1</sup> with Overdue Well Child Visits 3-6 by Race



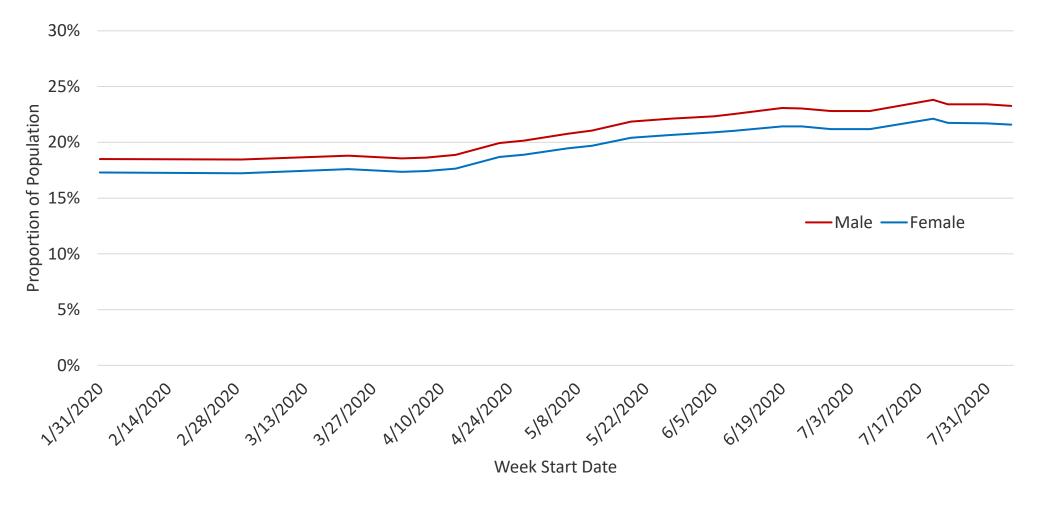
<sup>&</sup>lt;sup>1</sup>A higher value is NOT favorable

# Proportion of Population<sup>1</sup> with Overdue Well Child Visits 3-6 by Ethnicity



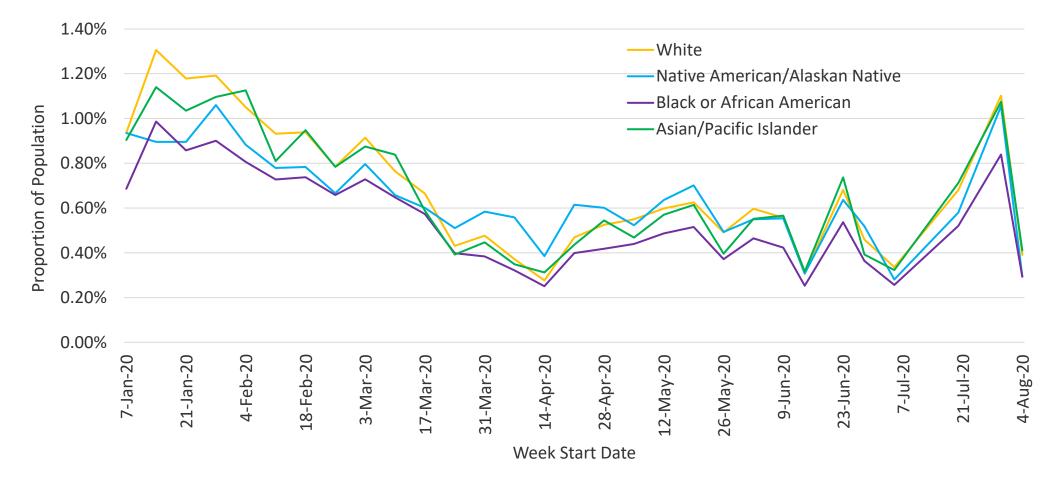
<sup>&</sup>lt;sup>1</sup>A higher value is NOT favorable

# Proportion of Population<sup>1</sup> with Overdue Well Child Visits 3-6 by Gender



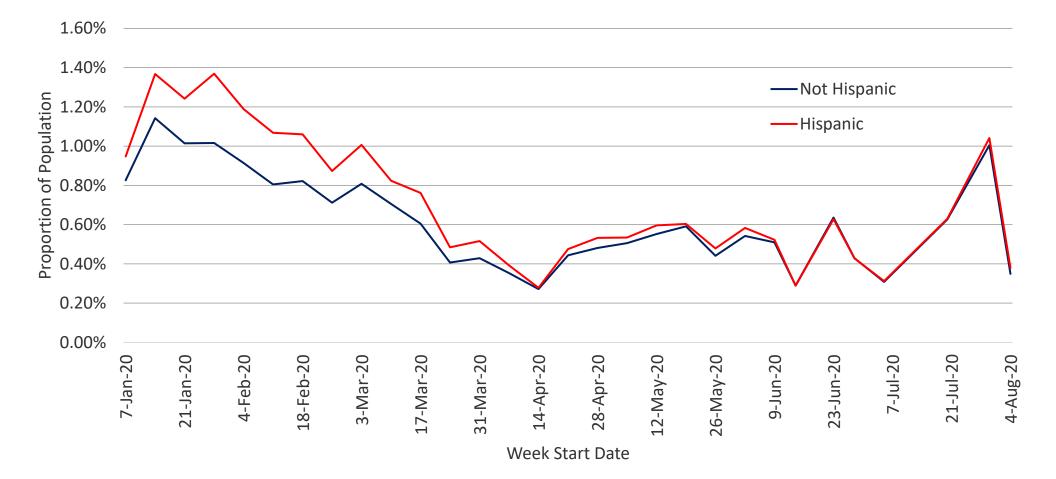
<sup>&</sup>lt;sup>1</sup>A higher value is NOT favorable

#### Weekly Proportion of Population Receiving Childhood Immunizations<sup>1</sup> by Race



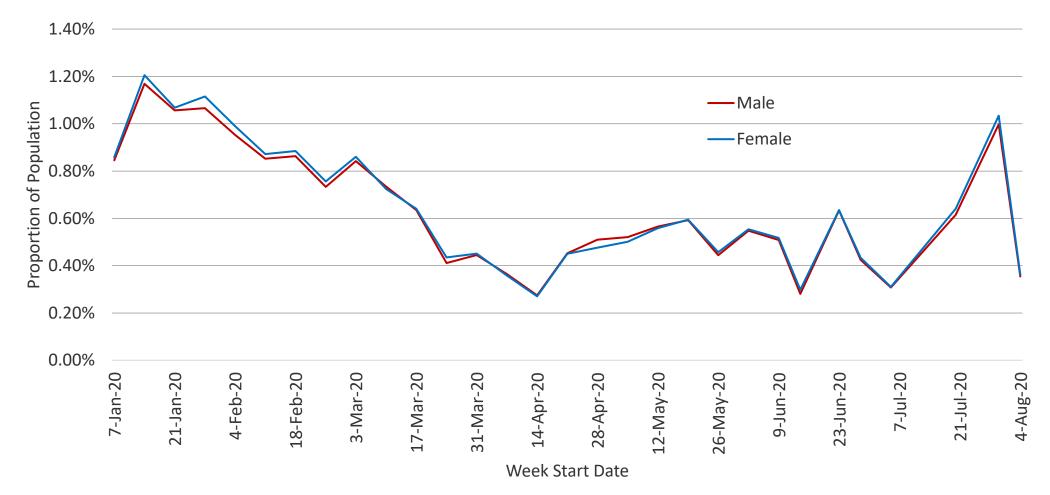
<sup>1</sup>A higher value is favorable

#### Weekly Proportion of Population<sup>1</sup> Receiving Childhood Immunizations by Ethnicity



<sup>1</sup>A higher value is favorable

#### Weekly Proportion of Population<sup>1</sup> Receiving Childhood Immunizations by Gender



<sup>1</sup>A higher value is favorable

### **Lessons From the Field**

Dr. Yun Boylston Burlington Pediatrics

Dr. Thomas Koinis Duke Primary Care – Oxford

## **Opportunity**

- CCNC, NC AHEC and NC DHHS are able to help address this important public health concern.
- Can accelerate a rebound of pediatric well-care among Medicaid beneficiaries younger than 19 years of age to the pre-COVID-19 level.
- NC DHHS has engaged stakeholders through an Advisory Group supporting a statewide campaign to address the problem.
- NC AHEC and CCNC developed a strategic and coordinated approach to improving well-child and immunization rates through provider and patient interventions. Our collective work will contribute toward preparing kids for school and for a life-time of optimal health.



## **Project Highlights**

- Project started August 3rd and will run through September and October if needed.
- DHB is engaging with patients and the public with information available in English and Spanish.
- CCNC care management programs will reach families with tailored messaging to Latinx and African-American families.
- Local Health Departments will deploy care managers with active outreach to children in care management who are missing immunizations and well visits.
- Practices with >500 care alerts for pediatric patients are included in the 1:1 practice support work. This comprises 300 independent and health system practice locations across North Carolina.
- Practice support provides 1:1 coaching support comprising recommended best practices or interventions, standardized workflows, clinical workflow redesign, educational tip sheets and toolkits.



#### **Suggested Interventions**

- Use the EHR to generate a list of children who are behind on well childcare
- Utilize the Internet and social media to reach parents and families
- Utilize your staff and physical space to promote well child visits & immunizations
- Partner with local school systems to get the message out about well childcare and immunizations
- Remind families across your catchment area of the importance of well childcare and immunizations via local news outlets
- Run a WCV/Immunization Promotion Month
- Incorporate WCCs into acute care visits
- Develop workflow to document immunizations that were received elsewhere
- Implement group visits for well childcare (Post-COVID-19 pandemic)

Helpful scripts and checklists can be found in the Keeping Kids Well Toolbox.



### **Keeping Kids Well Website**

#### https://www.communitycarenc.org/keeping-kids-well

- Provider-facing Materials
  - Tip sheets
  - COVID-specific resources
  - And more!
- Patient Education Materials
- Webinar Recordings
- Frequently Asked Questions
- Contact Information

🔉 Keeping Kitis Weil (Community ) x + - σ x
$\epsilon \rightarrow c _{0}$ a communitycarenc.org/keeping-kids-well $\dot{x}$
Information on Coronavirus (COVID-19): Learn More
Community Care Home cond-19 who we are a what we do a statewide ops knowledge center a newsroom careers a Q
KEEPING KIDS WELL
Improving Well-Child Care and Immunization Rates Across North Carolina
Community Care AROLINA
Among the many impacts of COVID-19 on North Carolina is a marked decrease in rates of well-child visits and childhood vaccinations. The problem is particularly acute in minority populations, but into the advent of COVID-19, parents across the board have been ins likely to be up-to-date on these important metal services. Well-child care includes medical and developmental correcting tests and immunistora are critical available problems such as a service includes in adder communicable diseases.
To help increase well-shid units and immunitation rates, Community Caro of North Cradinias (COK) and N. KHRC, under the direction of the North Carolina Department of Hauth and Human Services (NC DHHS), has launched the <b>Kreping Kills Well</b> program. COIC and NC AHEC will work with practices experiencing a greater number of care gaps to improve these measures and also will work to raise awareness of the problem among North Carolinas presents.
We hope the materials available on this page will be helpful to clinicians and parents alike. Many thanks for North Carolina's doctors and nurses for the work they do to keep North Carolina's children healthy despite the pandemic.
Webinar August 13 Don't miss the Keeping Kids Web Webinar event on Thursday, August 13 from 5:30 to 6:30 p.m. it's part of the NC Medicald/CCNC/XHEC Health Care Professionais Webinar Series. Click the link bilene to join the webinar.
CLICK HIBE TO CONNECT
C FAQs
Provider Facing Materials
Patient Facing Materials
Questions or concerns about Keeping Kids Well?
EMAR, CONC SUPPORT EMAR, NGAREC SUPPORT
Interested in receiving new information & guidance on COVID-19?
SICH UP HERE

#### **Well Visit Resources**

Resource	URL
AAP – Guidance on Well Visits during COVID	https://services.aap.org/en/pages/2019-novel- coronavirus-covid-19-infections/clinical- guidance/guidance-on-providing-pediatric-well-care- during-covid-19/
CCNC EPSDT Package	https://www.communitycarenc.org/sites/default/files/EP SDT%20Package.pdf
CCNC Social Determinants of Health Screening Guidance	https://www.communitycarenc.org/sites/default/files/20 19- 06/Social%20Determinants%20of%20Health%20Screenin g%20for%20Peds%20Primary%20Care.pdf

#### **Immunization Resources**

Resource	URL
NC Immunization Coalition	https://www.immunizationcoalitions.org/netwo rk-members/?coal=north-carolina- immunization-coalition_oid176
State Health Director Memo for Immunization Extension	https://files.nc.gov/covid/documents/guidance/ healthcare/State-Health-Director-Memo- Extending-Deadlines-for-Immunizations.pdf
NCDHHS Dept of Public Health Immunization Branch	https://immunize.nc.gov/
NCDHHS Recommendations for Vaccinating During COVID	https://immunize.nc.gov/pdf/Vaccine%20Advic e%20During%20COVID- 19%20webpage%20update_05182020.pdf
NC Peds Society Adolescent Immunization Project	https://www.ncpeds.org/page/CQNIIRAProject

#### **How to Contact Practice Support**

#### **CCNC Practice Support**

Email: <u>CCNCSupport@communitycarenc.org</u> OR

<u>CCPNSupport@communitycarenc.org</u>

Phone: 919-926-3895

Website: <u>https://www.communitycarenc.org/statewide-operations</u>

#### **NC AHEC Practice Support**

Email: practicesupport@ncahec.net

Phone: 919-445-3508

Website: <u>https://www.ncahec.net/practice-support/what-we-do/</u>

#### **Questions?**



NC DHHS COVID-19 Webinar Series