Nebraska Prenatal Plus Program

Coming January 1, 2025



Agenda

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 - General Patient Education & Health Promotion
 - Breastfeeding Support
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 - Billing Requirements



NEBRASKA

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Meeting Objective

Today's meeting objectives are to:

- Provide a brief overview of the Legislative Bill 857 in Nebraska;
- Review the Prenatal Plus Program (PPP) design; and
- Address any questions regarding service delivery.



BACKGROUND



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Legislative Bill 857

Create the Nebraska Prenatal Plus Program



Purpose: reduce the incidence of low birth weight, pre-term birth, and adverse birth outcomes while also addressing other lifestyle, behavioral, and nonmedical aspects of an at-risk pregnant individual's life that may affect the health and well-being of the individual or the child

Program sunset June 30, 2028

NEBRASKA PRENATAL PLUS PROGRAM OVERVIEW



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PPP: Patient Eligibility Requirements

Population: at-risk mothers

Defined as an individual who is:

- Enrolled in Medicaid
- Pregnant
- Determined by the healthcare provider to be at risk of having a negative maternal or infant health outcome
- PPP does not apply to patients with 599 CHIP





PPP: Enrollment

- Enrollment can begin at any point in pregnancy
- Services are provided through the prenatal period, concluding at the birth event
- There is no limit on how many pregnancies an individual can participate in the program





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PPP: Roles & Responsibilities

Established roles:

- The provider/clinic will identify patients for PPP and provide the specific PPP services
 - Reasons a patient is at-risk:
 - Listed in the intake packet
 - https://public-dhhs.ne.gov/Forms/Home.aspx
- The Managed Care Organization (MCO)
 will collaborate with the provider and
 patient; and reimburse for service
 execution as appropriate





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PPP: MCO Contact Information

For questions related to the patient or MCO case management:

Molina- NE_CM@MolinaHealthCare.Com

Nebraska Total Care- <u>cmcoordinators@nebraskatotalcare.com</u>

United HealthCare- NE_UHCMLTC_PPP@UHC.com

For all other questions, refer to the MCO websites or call Provider Services @ the following MCO numbers:

Molina- 844-782-2678 TTY 711

Nebraska Total Care- 844-385-2192 TTY 711

United HealthCare- 866-331-2243 TTY 711



PPP: Services

PPP services include:

- Targeted Case Management (TCM)
- Nutrition Counseling
- Psychosocial Counseling & Support
- General Patient Education & Health Promotion
- Breastfeeding Support





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TCM includes the initial comprehensive and periodic assessment of the pregnant person's needs, development of the care plan that specifies the goals and actions, referrals for linkage to clinical and non-clinical services, monitoring, and follow-up activities to ensure the care plan is implemented.

TCM can be provided:

- under the care of a Physician, Physician Assistant (PA), Nurse Practitioner (NP), or Certified Nurse-Midwife (CNM) who is actively managing the pregnancy
- in a clinic, Federally Qualified Health Center (FQHC), or Rural Health Clinic (RHC) setting

A designated Care Coordinator (CC) will provide TCM to the PPP patient and must have one of the following licenses/certifications:

- Registered Nurse (RN)
- Licensed Practical Nurse (LPN)
- Certified Medical Assistant (CMA)
- Licensed Clinical Social Worker (LCSW)
- Certified Health Coach (CHC)

The CC:

- is employed by the provider/clinic
- can provide patient encounters inperson, by audiovisual telehealth, or via telephone
- can connect with the patient as many times as needed each month



The CC completes the **Nebraska PPP Intake Assessment Packet** during the first month of enrollment

- The CC should bill CPT code 96160 when the PPP intake assessment packet is completed
- Based on the PPP Intake Assessment, the CC develops an individualized care plan with the patient



CC collaborates with the patient's MCO Nurse Case Manager to ensure service delivery, and to meet clinical and non-clinical needs

- MCOs utilize social care referral platforms, such as FindHelp, to partner with community resources to help patients meet non-clinical needs.
- Link to FindHelp https://findhelp.org/



- The CC uses the Nebraska PPP Care Coordinator Checklist for activities that need to be performed
- CC must document all activities performed in the patient's medical record
 - activities include educating patients, providing resources, scheduling referrals, addressing barriers to ongoing care, and engaging family members or other clinicians/entities as indicated
- CC provides ongoing TCM through the course of the pregnancy and must connect with the patient for this purpose at a minimum of once per month



- Reimbursement of care coordinator services, which includes targeted case management and general patient education and health promotion, will be a monthly rate
- PPP enrollment and billing can begin at any point in pregnancy
- For each month of the pregnancy (not to exceed 10 months) the CC must have at least one TCM encounter with the patient
- The clinic should submit one claim each month, using code H1002 (\$89.58)



PPP: Nutrition Counseling

- Is provided by the prenatal clinician as part of routine prenatal care and is not reimbursed separately
- Or the patient can be referred to a licensed medical nutrition therapist
 - PPP provides up to 6 sessions
- Can be provided in-person or via audiovisual telehealth





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PPP: Nutrition Counseling

The Licensed Medical Nutrition Therapist should use 97802 and 97803 to bill nutrition counseling

- 97802 = Medical nutrition therapy, <u>initial</u>, individual, each 15 minutes (\$29.10)
 - Initial session should be at a minimum 60 minutes in duration (i.e. \$116.40)
- 97803 = Medical nutrition therapy, <u>reassessment</u>, individual, each 15 minutes (\$24.07).
 - Re-assessment session (up to five sessions) should be at a minimum 30 minutes in duration (i.e. \$48.14)





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Up to 5 individual Psychosocial/Psychotherapy visits are covered by the Client Assistance Program (CAP) through Nebraska MCOs, before an Initial Diagnostic Interview (IDI) with a Licensed Independent Practitioner is required.

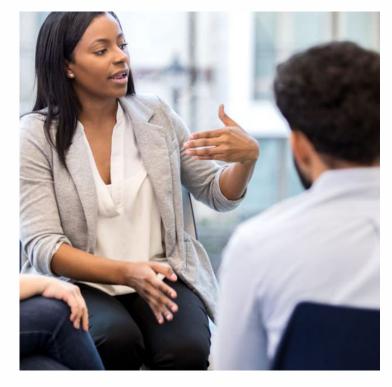
 Individual Psychosocial/Psychotherapy can be provided by the following practitioners: Physician, NP, PA, LMHP, PLMHP, LIMHP, PhD Psychology, PPhD Psychology, PLADC, LADC.





If the patient's needs exceed the 5 visits covered under CAP, an IDI would be required. The IDI is performed by a Licensed Independent Practitioner who will also diagnose and create a treatment plan.

 The IDI, diagnosis, and treatment plan can be done by the following practitioners: Physician, NP, PA, LIMHP, PhD Psychology, PPhD Psychology.





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All practitioners providing Mental Health or Substance Use Disorder services must:

- Be licensed in the State of Nebraska
- Be enrolled with Nebraska Medicaid with their appropriate Provider Type and a 26 Specialty Type
- Be enrolled with each of the Nebraska contracted MCOs
- Work within their scope of practice
- No prior authorization approval required for the 5 visits covered under CAP
- Receive a prior authorization approval for an IDI (if the patient's needs exceed the 5 visits covered under CAP)

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- Nebraska Medicaid will reimburse for authorized Mental Health/Substance Use Disorder services when provided by an enrolled provider
- The number of Mental Health and SUD services a patient can receive is not limited and is based on medical necessity





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PPP: General Patient Education & Health Promotion

- Is provided by the prenatal clinician as part of routine prenatal care and is not reimbursed separately
- Can be provided by the CC and reimbursed with the H1002 code
 - provides education to the patient as listed on the Nebraska PPP Education and Health Promotion List
 - or refers the patient to the appropriate educational resources





PPP: Breastfeeding Support

- The CC can refer the patient to a breastfeeding instruction session
- Breastfeeding Instruction Session can be provided by a:
 - Licensed Medical Nutrition Therapist
 - International Board-Certified Lactation Consultant (IBCLC)
- In-person or by audiovisual telehealth
- Individual or group setting





PPP: Breastfeeding Support

The Breastfeeding Instruction Session should be billed using S9443:

- One session is allowed under PPP
- The session should be at a minimum 60 minutes in duration
 - Reimbursement rate = \$54.20





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PPP: Documentation Requirements

Nebraska PPP Intake Assessment Packet

(Form # MLTC-102)

Nebraska PPP Care Coordinator Checklist

(Form # MLTC-101)

Nebraska PPP Education and Health Promotion List

(Form # MLTC-100)

- * All three forms must be maintained in the medical record and be made available to DHHS upon request
- These forms are available at https://public-dhhs.ne.gov/Forms/Home.aspx





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PPP: Billing Requirements

The fee schedule will be effective 1/1/2025 and include rates for the PPP Services

Billing guidance can be found in the provider bulletin at the link below:

Provider Bulletin 24-23: Prenatal Plus Program



QUESTIONS?

If you have any further questions that were not addressed in this presentation, please don't hesitate to reach out to DHHS.MLTCMaternalHealth@nebraska.gov

To stay current with program information, please refer to: https://dhhs.ne.gov/Pages/Prenatal-Plus-Program.aspx

