



**DEPT. OF HEALTH AND HUMAN SERVICES** 

10.12.22 - NE Tribal/Medicaid Monthly Call Agenda

Conference Access Number (888) 820-1398

Attendee Code- 7300221

**Present:** Jacob Kawamoto, Danielle Juracek, Chris Morton, Aaron Reece, Cathy Kearney, Audrey Parker (Omaha), Crystal Appleton (Omaha), Lisa Miller (Omaha), Nancy Mackey (Santee), Becky Crase (Ponca), Chasity Davis (White Cloud), Alex Arobba (IHS), RickyAnn Fletcher (MCNA), Tracy Nelson (MCNA), LeAnn Ortmeier (UHC), Jennifer Newcombe (NTC), Tuesday Kuhlman (NTC), Gelisha Jeffers (HBN)

## **SPA/Waiver Updates**

- SPA
  - o NE 22-0007
    - Allows for the Tribes to bill and be reimbursed at the AIR for services appropriately provided via telehealth. This SPA would make this permanent, and not contingent on the PHE.
- Waiver Authority
  - o None at this time

## **Managed Care**

In keeping with recent guidance from CMS and initiatives coming from the National Indian Health Board and Federal Government, a recurring agenda item to discuss managed care delivery to Tribal Medicaid beneficiaries in Nebraska is being added to this meeting series. The goal of adding this item is to ensure the Tribes have a dedicated time to discuss any managed care questions or concerns.

- Santee (Nancy): Optum Pay with United Health Care; One Healthcare ID is now requiring a cell phone number and then a text message. This is difficult for Santee because cell services will sometimes not work very well and there can be a delay to get the code. By the time the code does come through, it can be too long and the facility number doesn't work. When Santee calls customer services there is no solution and Nancy had to use her personal cell phone number to get it to work.
  - UHC (LeAnn): LeAnn was not aware of this but will reach out to the appropriate contact to find a solution for this.
    - Santee: Nancy will forward LeAnn the UHC emails she received in September about the phone number requirements. They informed that they were not going to do this right away, but just last week Nancy had to put her cell phone number in to utilize the service.

- **Omaha (Audrey):** During the pandemic, was there guidance on leniency on telehealth and the four walls rule?
  - MLTC: During the PHE, a provision was adopted to allow the Tribes to bill for qualifying services delivered via Telehealth at the all-inclusive rate (AIR). However, the four walls rules has always applied, meaning that either the beneficiary or provider is required to be within the "four walls" of the clinic when services are delivered via Telehealth.
  - Santee (Nancy): Does this apply to mental health/behavioral health?
    - **MLTC (Jacob):** We will check in on this, but current understanding is that the four walls rule should still apply.
  - Santee (Nancy): This has never applied before, behavioral health has always been different because they can deliver them in schools and the prisons etc., and for these behavioral health services they don't have to stay in the four walls.
    - MLTC: Jacob will look into this and follow up with the Tribes.
- **MLTC:** Any updates from White Cloud on pharmacy visits being billed and reimbursed at the all-inclusive rate?
  - White Cloud (Chasity): This is still being worked on. It has not been resolved, but we do have responses from all of the MCOs that it is being worked on.
    - NTC (Jennifer): The issue here was with NTC and not White Cloud. NTC is going back to retro pay past claims too. We will send an email with a little more explanation included. NTC's teams are doing a claims impact report.
  - Omaha: Is White Cloud a new facility?
    - White Cloud: No, White Cloud is not new, but recently entered into a self-governance compact in 2019. White Cloud is located physically in Kansas, but the reservation covers some of SE Nebraska and a significant portion of their clients live in Nebraska (Richardson County).
- **Ponca (Becky):** Ponca is changing from Practice Insight (clearing house) to EMEDIX. Just wanted to make sure the MCOs were aware, and that there are no issues with crossover claims going through.
  - NTC: That is good to know, and there shouldn't be any issues. Let NTC know if they need to send the Payer ID.
    - Ponca: Should have all of the Payer IDs for the MCOs, just wanted to give a heads up.
- Omaha (Audrey): Omaha is having issues with Maximus. They sent in some provider requests and have not heard back for a couple of weeks. They need to get these providers enrolled with the MCOs and have four providers to get enrolled.
  - MLTC (Jacob): Send an email with some of the details and I will follow up with provider enrollment team and check in on it and help trouble shoot.
- MCNA (RickyAnn): There are times that we receive information from a provider, but on the provider file the state sends over they are not on the file. Is there a number we can call as an MCO to ensure the provider information is correct? A lag for about a month makes it difficult for providers to enroll quickly with the MCOs if we can't confirm their Provider ID.
  - o MLTC (Jacob): I will follow up with provider enrollment team at MLTC.
    - MCNA: will send follow up email
- Santee: Where is MCNA at with previous claims that were denied?
  - MCNA: MCNA was waiting for confirmation of the Medicaid ID, and all of these claims have now been reprocessed.

## **Additional Items**

- Medicare Crossover Claims Update
  - o Payments for past FFS crossover claims from 7/1/17 went out to the Tribes
  - MLTC Policy is looking into the crossover claims payments for the period of 7/1/17 6/30/19 in light of the discussion at the August Quarterly Consultation meeting.
    - The MLTC Finance team has begun to pull all Tribal crossover claims for 7/1/17-6/30/19.
      MLTC will continue to keep the Tribes informed and will cross reference the claims pulled with any claims/reports that the Tribes have.
      - Each of the MCOs confirmed that they did not pay Tribal crossover claims for the
        period of 7/1/17-6/30/19 up to the AIR. The claims report being worked on by
        MLTC Finance will include all claims from this time period, and what MLTC would
        need to pay (i.e. the difference between what was paid and the IHS AIR for that
        year).
    - MLTC did make payments for FFS Tribal Crossover Claims, reimbursing up to the appropriate AIR all applicable FFS crossover claims from 7/1/17 – Present. MLTC Finance also created a standard operating procedure (SOP) to ensure all FFS crossover claims are paid regularly moving forward.
    - QUESTION (MLTC): For Tribal Crossover claims from 7/1/17-6/30/19, were payments made by the MCOs for these claims, just not up to the AIR? Or were there potentially no payments made at all on these claims?
      - NTC: Confused on the question.
    - MLTC: During 7/1/17-6/30/19, were the Tribal Crossover Claims paid at the Medicaid rate and not reimbursed up to the AIR, or were some of those tribal crossover claims just not paid?
      - Ponca (Becky): We got paid but not at the AIR.
      - NTC: They would have been paid at to FFS lesser than logic until 7/1/19 when the state required the MCOs to pay these claims up to the AIR.
    - Question to clarify further.
      - MLTC (Jacob): Tribal Crossover Claims for the period from 7/1/17-6/30/19 were paid by the MCOs, just not up to the AIR. They were paid according to the state's standard lesser of methodology without utilizing the AIR. Accordingly, the state will reimburse these claims up to the AIR rate as required per state/federal regulations. What needs to be paid versus what has not been paid to the AIR. The report Finance is working on will show the Tribal Crossover Claims for the period in question and what will need to be paid on them in order to reimburse them up to the applicable AIR. If there are claims that have not been paid at all we can work on them on a case-by-case basis.
    - Santee: Most of the 2017 crossovers were not paid or didn't crossover.
      - MLTC: Jacob will get a timeline to meet one on one and get all this information accounted for. Will touch base with Finance and get a timeline for everyone.
         Additionally, any claims the Tribes have that are not on the report from Finance, MLTC can meet one on one with the Tribe to discuss.
- RFP
  - o Contracts have been awarded to United Healthcare, Nebraska Total Care, and Molina Healthcare

- CORRECTION from last month's call: New Contracts will begin effective January 1, 2024
- Second Booster Dose Guidance
  - IHS has responded that there is not a new CPT code for the 2<sup>nd</sup> or 3<sup>rd</sup> booster doses, so all booster doses are assigned the same administration code.
    - It is still unsure if there is any guidance for the Tribes/MCOs to ensure proper documentation for beneficiaries and reimbursement for providers.
  - IHS (Alex): If there is a need to clarify proper documentation requirements, Alex can follow up on this. Regarding the clinical/CPT code question, he will need to reach out to the IHS Director of Nursing to see if there is any newer guidance around CPT codes for additional boosters. Alex did reach out to federal contacts for guidance around reimbursement of receiving traditional second Moderna booster shot. There has been no feedback or response yet that IHS/Tribal providers have not been receiving reimbursement. He is expecting to have answers back by tomorrow on issues regarding receiving payments for those booster shots.
    - Ponca: Pfizer and Moderna have some codes, is this information needed?
    - MLTC: It has been noted that there was not a new CPT code for the second Moderna booster specifically.
  - MLTC: Have any of the Tribes run into issues with documentation?
    - Santee: Reported they have not billed the 4th Moderna dose (second booster) because there is no new CPT code for it. Worried that since it is the same code as the 3<sup>rd</sup> dose (first booster) that it won't be reimbursed. Santee could possibly run them and see what happens. But it will look like the payment will be for two 3rd doses for the Moderna. All Santee has is Moderna, as they don't have the storage for Pfizer.
  - o **MLTC:** Alex has sent an email on the guidance from IHS and the 0013A code was included on there. Jacob will forward this email to the group which might include helpful information.
    - Santee: Santee has no issue billing these fourth doses, but it will look like a duplicate of services.
  - O IHS (Alex): Curious if on the Nebraska Medicaid side are there instructions on how to submit these claims to separate or distinguish them? This is how IHS has worked things out in a lot of cases; they've worked with the Medicaid program for each state to understand or set requirements and expectations around billing. It is normal for state programs to make certain modifications on the billing requirements. The state may need to coordinate to make certain modifications for billing requirements, and this may not affect CPT coding or medical record documentation. It could be that the state adds a modifier for the 4<sup>th</sup> Moderna dose. Alex would need more information from Nebraska Medicaid and is still learning about this program. He typically works with South Dakota which does not have Medicaid expansion. Answers on this may need to come from the state, not from IHS.
    - MLTC will follow up internally on this and reach out to the MCOs and Tribes to coordinate any updates.
    - Santee may need to just submit the claims to avoid timely filing penalties and continue to work with the state and MCOs around billing practices and re-submit if they are denied.
- 2022 Quarterly Consultation In-Person Meetings
  - O November 9<sup>th</sup> hosted by Ponca's Health Facility in Lincoln
  - o 1:00pm 4:00pm @ 1600 Windhoek Drive, Lincoln, NE
- NEMT

- At the August Quarterly Consultation meeting, it was agreed that the MCOs and Tribes would discuss how to improve access to transportation services for Tribal beneficiaries.
  - Have the MCOs and Tribes been able to work together on the question about family and friends providing NEMT services to beneficiaries?
    - The family or friend must enroll as a Medicaid transportation provider first, then
      they can enter into a contract with the MCO to provide transportation services.
      They can sign up for Nebraska Medicaid by working with Maximus:
      <a href="https://www.nebraskamedicaidproviderenrollment.com/Account/Login.aspx?R">https://www.nebraskamedicaidproviderenrollment.com/Account/Login.aspx?R</a>
      eturnUrl=%2f
- Summer Youth Program Follow Up
  - Emails were sent to Omaha, Santee, and Winnebago inquiring about details regarding their summer youth programs to help the Dept. potentially establish income verification work arounds for those who participate.