



11.02.22 - NE Tribal/Medicaid Monthly Call Agenda

Conference Access Number **(888) 820-1398**

Attendee Code- **7300221**

Present: Jacob Kawamoto, Danielle Juracek, Chris Morton, Craig Steele, Aaron Reece, Jeshena Gold, Stacy Schenk, Brenda Worrell (Omaha), Audrey Parker (Omaha), Nancy Mackey (Santee), Vietta Swalley (Santee), Donna Polk (NUIHC), Sylvia Allen-Lopez (Ponca), Alex Arobba (IHS), RickyAnn Fletcher (MCNA), Tracy Nelson (MCNA), LeAnn Ortmeier (UHC), Jeff Stafford (UHC), Jennifer Newcombe (NTC), Gelisha Jeffers (HBN), Stacey Steiner (CMS)

SPA/Waiver Updates

- SPA
 - o None at this time
- 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.

Additional Items

- Medicare Crossover Claims – Update
 - o Re-run crossover claims reports were sent out by MLTC to the Tribes on 10.31.22.
 - Next Steps: Confirm that all claims information and payment amounts on the reports are accurate, and then MLTC will get payments out to the Tribes for past crossover claims on the reports for the period of 7.1.17-6.30.22
 - o Omaha: There are discrepancies between the report sent from MLTC and the data that the Omaha Tribe has at their facility for these crossover claims. Examples include discrepancies in the previous Medicaid paid amount, some of the amounts that are paid have been adjusted, discrepancies in the previous Medicare paid amount, and all of this leads to discrepancies in the

total amounts owed. Omaha would like to meet with the Finance team to understand how they are getting these reimbursement figures.

- MLTC: We can set up a meeting with the Finance team. If the Omaha Tribe could share claims data or reports that they have at their facility regarding these crossover claims that would be helpful for MLTC. Jacob and Dani can review this information and communicate to Finance to help prepare for the meeting. A lot of this data is based on how the reports were pulled from claims data in MLTC's systems. However, resolving this might also involve the MCOs and their data systems since most of these claims in question and on the reports were managed care claims. It may be helpful to understand the MCO claims systems and how that overlaps with MLTC's systems, and the data used to run the current reports.
- QUESTION (Omaha): What about claims that did not pay after July 1, 2019?
 - ANSWER (MLTC): It is MLTC's understanding that crossover claims on/after 7.1.19 have been paid up to the AIR by the MCOs, and that any back payments that were needed have been paid.
 - Omaha: The Omaha Tribe will work on this with the MCOs because they are showing that some of these claims have not been paid correctly.
 - MLTC: Feel free to send over any information that might be helpful or reach out if there are any issues resolving this with the MCOs.
 - Omaha: We have collected all the cases that have discrepancies to be able to quickly identify and resolve these issues
- Santee: There are some patients missing from 2017 and not on the report sent over by MLTC. Based on Santee's claims reports and EOBs, there should be crossover claims for these beneficiaries. They do show up for later years, but not for 2017. There is also a patient on the claims report from MLTC that Santee's health center does not see.
 - MLTC: Please send over the patient information and MLTC can check internal records to see if these discrepancies can be resolved.
- Feedback from the Tribes on draft PHE Unwind Materials
 - MLTC: For this item we have been working over a year on drafting and putting materials together for the PHE unwind which is currently slated to end in January, and we are still expecting a 60 day notice ahead of this end date. We want to reach out and engage with stakeholder groups and incorporate their feedback into our materials. And the Tribes are one stakeholder group that MLTC wants to ensure is involved in this process. At the upcoming Tribal Consultation we will be sharing draft PHE unwind communications outlining what stakeholders can expect and asking for feedback on how to ensure the materials we ultimately use at the end of the PHE are accurate, specific, and useful. MLTC will send these draft communication materials out to the group after the monthly call. Please review these materials prior to the consultation so you come to the consultation with any feedback, questions, or concerns about the materials. These materials are 'Do Not Distribute,' so MLTC asks that those on this group do not share any of this information as it is still in the early stages of preparation and has not been finalized.
 - QUESTION (Omaha): On a similar but unrelated note, has the Tribal Telehealth SPA been approved?
 - ANSWER: MLTC is still in the approval process with CMS and entering negotiations to finalize this SPA. The Tribal and Public notices have been completed, and MLTC will keep the Tribes informed on the process and when CMS officially approves the SPA.
- Second Booster Dose Guidance

- Jacob sent out guidance from IHS and MLTC in an email on 10.24.22.
 - Was this helpful, or are there still outstanding questions?
 - Santee: Santee did upload claims using this guidance. These did go out and NTC is paying properly. Santee had to do some more work with coding, but it should be all good to go
- 2022 Quarterly Consultation In-Person Meetings
 - November 9th hosted by Ponca’s Health Facility in Lincoln
 - 1:00pm – 4:00pm @ 1600 Windhoek Drive, Lincoln, NE
 - MLTC will send out an agenda prior to the meeting. If there is anything that the Tribes would like to discuss, please reach out and MLTC will add it.
 - Ponca: Can we talk about Personal Assistance Services (PAS)? It is becoming more common that patients are requesting PAS and would rather have their family member take care of them at home. Some of our patients do not have access to online forms, so if case workers could have a step-by-step of the enrollment process to know what forms and things are necessary it would be helpful. Is there also any way to expedite the provider enrollment process?
 - MLTC: MLTC has been looking into the PAS program and doing research and gathering resources that will assist Tribal case workers with PAS. There is a specific provider enrollment process outlined by state regulation and statute, and so there may not be any way to expedite that. But MLTC will keep this in mind when reviewing and preparing these materials for the consultation meeting.
 - Ponca: That would be helpful if MLTC could keep that in mind. There are patients who are very sick and need assistance as soon as possible.
- 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.
 - Is there any support that MLTC can offer the Tribes or MCOs?
 - Santee: Santee would like each MCO to provide the Tribes with their NEMT program guidelines and program details (e.g., what is offered and how to enroll). For example, some allow reimbursement for gasoline for family members, and some don’t.
 - UHC: Would it be helpful if the MCOs put the detail of their NEMT services together in a grid?
 - Yes
 - Ponca: We reached out to Healthy Blue about reimbursement for NEMT services and were referred to Maximus. Then unable to reach a representative from there. Ponca would like more clarification on the process as there are two assistants that need assistance, and do not understand why they were referred to Maximus.
 - MLTC: Maximus is MLTC’s provider enrollment vendor. Can Gelisha from HBN speak to this at all?
 - HBN: HBN does not have reimbursement for family members but does not have a gas card that members can request. This information was sent over to Sylvia at Ponca, but there is not actually a form or process to sign up for gas reimbursement
 - Santee: This is an example of why the NEMT info for each MCO would be helpful. Each MCO has a different program, and the Tribes would like a comparison chart to understand the differences and see how the programs would work for their patients.
 - Can we also speak about PAS services?

- Santee: Has MCNA processed the claims from Wallman?
 - o MCNA: Yes
 - o Santee hasn't received these yet – MCNA will call them to discuss further.
- Donna Polk with Nebraska Urban Indian Health Coalition (NUIHC): We have major concerns about approval of behavioral health services. It takes 2-3 weeks to get approval for treatment, and this is not acceptable as individuals need assistance as soon as possible, both inpatient and outpatient. We are in the middle of an epidemic, and it is hard for individuals to wait a long time for services when they are in need.
 - o MLTC: We can set up a meeting to discuss and figure out how best to resolve these concerns and the issues and experiences that have led to them. Is the main issue with provider reimbursement?
- NUIHC: Yes, that is correct, provider reimbursement is the biggest issue. The whole system is not working correctly, and especially with the beneficiary assessment and approval timelines and procedures. And provider enrollment is an issue to. It is very frustrating. Please advise who NUIHC should call or talk to to address these concerns. Please email your contact information and we will be in touch.
 - o MLTC: Jacob will send an email today with his contact info. We can meet and figure out who at MLTC would be best equipped to talk with to resolve these issues.