



11.13.24 - NE Tribal/Medicaid Monthly Call Agenda

Conference Access Number **+1-408-418-9388**

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Present: Jacob Kawamoto (MLTC, Policy), Kendra Wiebe (MLTC, Policy), Jeshena Walker (MLTC, Plan Management), Jackie Orth (MLTC, Eligibility), Echohawk Lefthand (Public Health)

RickyAnn Fletcher (Ponca), Michelle Runyan (Ponca), Becky Crase (Ponca), Sylvia Allen-Lopez (Ponca), Crystal Appleton (Omaha), Tashina Provost (Omaha), James Ridgeway (Winnebago), Nancy Mackey (Santee), Sky Black Elk-Volkman

Adam Proctor (NTC), Tim Easton (NTC), Kiernan Scott (Molina), Angi Tran (Molina), Gelisha Palma (Molina), Jessica Daake (Molina), Janine Fitzpatrick (Molina), Bethany Stech (Molina), Morgan Horst, DDS (Molina), Theresa Ellenwood (Molina), Cynthia Goslin (UHC), Tracy Nelson (UHC), Lise Williams (UHC), Jonathan Rich, DMD (Centene)

SPA/Waiver Updates

- SPA
 - o NE 24-0019: Katie Beckett Cost-Effectiveness Tribal Notice
 - Updates the Katie Beckett Program cost-effectiveness calculation for hospital, intermediate care facility (ICF), and nursing facility (NF) level of care recipients. This would apply to Tribal beneficiaries enrolled in this program, but the change is meant to make the calculation more understandable and accessible for beneficiaries and providers.
- Waiver Authority
 - o None

Additional Items

- Heritage Health – Open Enrollment is currently underway
- Medicare Crossover Claims – Update
- PHE Data Sharing Agreements
 - o MLTC has received a point of contact for each of the Tribes, and these have been forwarded to the MLTC Legal team who is drafting the Data Sharing Agreement. Once drafted, this will be sent out to the Tribes for review and feedback/approval.
 - UPDATE: the Medicaid Policy team has continued to work through the operational considerations involved in establishing, running, and sending out a report of this scope. The MLTC Legal team is drafting the Data Sharing Agreements, and the Data & Analytics Team has been working to run reports that would provide the relevant information.

- NEMT
 - At the August 2022 Quarterly Consultation meeting, it was agreed that the MCOs and Tribes would discuss how to improve access to transportation services for Tribal beneficiaries.
 - Jacob spoke with the PSC, brought more information to the November 2023 Tribal Consultation, and sent a follow up email to each of the Tribes. The Tribes should submit an exemption request to the PSC. If granted the exception, the Tribe will then need to enroll with Maximus as a PSC-exempt NEMT provider and can then provide the approval from the PSC to Maximus to complete this enrollment.
 - PSC contact: PSC.motorfilings@nebraska.gov
- **QUESTION (Winnebago):** Winnebago has been working with the MCOs on this topic, but does MLTC have any guidance on how the Tribe should bill for OB care – global or non-global billing? The same provider is providing all the care, but they are doing the deliveries at a different facility. Facility charges would be billed by the same institution (same Tax ID), but if the services were billed globally/bundled, Winnebago wouldn't get the inpatient rate. It seems like this would be billed at the facility rate per visit then.
 - **ANSWER (NTC):** NTC has guidance on their website for Global vs non-Global billing and when each would be appropriate. However, in this situation, the solution may be non-global billing. NTC will continue to work with the Tribe and the state to determine how best this should be billed.
 - **PONCA:** Ponca used to have an OB that delivered at a different hospital, and they would bill for each visit (non-Global).
 - **ANSWER (MLTC):** MLTC will continue to look into this and provide guidance.
- **QUESTION (Ponca):** Ponca is still waiting on guidance for how to bill for post-op follow-up care that is needed after service like dentures and extractions. The prior authorization request process doesn't account for follow-up visits.
 - **ANSWER:** State regulations outline 180 day period after these services that includes all adjustments and follow-ups needed. Additionally, a form was created for providers to request these additional visits to receive reimbursement.
 - **Ponca:** The issue with the Form that was circulated for this is that the provider may not know how many follow-up visits are needed ahead of time.
 - **ANSWER (Molina):** MLTC had issued guidance that dropped the adjustment period for IHS/Tribal providers, allowing them to bill the adjustment code for these follow-up visits.
 - **ANSWER (MLTC):** MLTC will coordinate and follow up with guidance on this topic.