North Alabama Community Care

Delivering Health Care Professionals

Bi-Annual Meeting

September 23, 2021

Agenda

- Welcome – Dana Garrard Stout, Executive Director
  - Housekeeping Reminders, etc.
    - Signing in
    - Muting
  - Introductions

- New Payment Methodology – Dr. Thotakura, Medical Director

- Medicaid Maternity Related Alerts – Dr. Thotakura, Medical Director

- Quality Related Updates – Laura Thompson, Director of Quality

- Maternity Program Operation Updates – Virginia Wiggins Motton, Family Planning and Maternity Manager

- Questions/Comments

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Dr. N. Rao Thotakura
Medical Director
North Alabama Community Care

Rate Increase for Global Maternity Procedure Codes & Bonuses

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August 11, 2021

TO: All Delivering Healthcare Professionals (DHCPs)

RE: Rate Increase for Global Maternity Procedure Codes & Bonuses

The Medicaid Agency is pleased to announce rate increases for global maternity procedure codes and Delivering Healthcare Professional (DHCP) bonus payments. Beginning with dates of service October 1, 2021, DHCPs will be reimbursed the following new rates for the specified procedure codes:

Procedure Code	Description	New Rate (for RURAL area providers)	New Rate (for URBAN area providers)
59400	Obstetrical Care	$2,090	$1,690
59409	Obstetrical Care	$1,640	$1,340
59410	Obstetrical Care	$1,690	$1,390
59510	Cesarean Delivery	$2,090	$1,690
59514	Cesarean Delivery	$1,640	$1,340
59515	Cesarean Delivery	$1,690	$1,390
59610	Vbac Delivery	$2,090	$1,690
59612	Vbac Delivery Only	$1,550	$1,250
59614	Vbac Care After Delivery Only	$1,600	$1,300
59618	Attempted Vbac Delivery	$2,090	$1,690
59620	Attempted Vbac Delivery Only	$1,600	$1,300
59622	Attempted Vbac After Care	$1,600	$1,300

Vbac- Vaginal birth after cesarean

Reimbursement for DHCP bonus payments will also increase. Beginning with dates of service October 1, 2021, DHCPs will be reimbursed for the specified DHCP bonus payments at the following new rates:

Procedure Code	Description	New Rate (for RURAL area providers)	New Rate (for URBAN area providers)
H1000	Prenatal Visit Bonus	$150	$150
G9357	Postpartum Visit Bonus	$150	$150

The prenatal bonus payment may be available to providers who render services to pregnant recipients within 90 days of the last menstrual period. The postpartum bonus payment may be available to providers who render services to recipients between 21-56 days after delivery. The DHCP bonus payment procedure codes must be billed on a separate claim for reimbursement.

Physicians will be reimbursed at 100% for the new global rates and DHCP bonus payments. Nurse practitioners, physician assistants, and nurse midwives will be reimbursed 80% of the physician rate for the new global rates and DHCP bonus payments.

For questions related to the new rates outlined above, you may e-mail ACHN@medicaid.alabama.gov.

Notice of Issuance of New Medicaid IDs to SSI Recipients

ALABAMA MEDICAID AGENCY

ALERT

July 15, 2021

TO: All Providers

RE: Notice of Issuance of New Medicaid IDs to SSI Recipients

By August 2021, Alabama Medicaid recipients whose Medicaid benefits were awarded through Supplemental Security Income (SSI-Certifying Agency "S") should have received a new Medicaid identification card, with a new Medicaid number that starts with 530. A notification was mailed to recipients letting them know to expect a new Medicaid ID card with their new number by the end of August. The letter also informed recipients to present both Medicaid cards to their Medicaid providers. **The new Medicaid IDs will be effective on August 1, 2021.**

These guidelines will assist with eligibility verification/claims submission for those recipients during this transition:

- **All information for the previous Medicaid ID and the new Medicaid ID are being combined to allow providers to use either the previous card or new card for eligibility verification and claims submission**. When the merging process occurs, all eligibility, Prior Authorizations (PAs), and claims history will be combined and transferred to the new ID. However, due to the large amount of SSI certified recipients affected, this process may not be completed until Labor Day, September 6, 2021.

- Therefore, during the month of August before all Medicaid IDs are combined, providers must use the new Medicaid ID (beginning with "530") when checking current eligibility and submitting claims for any recipient whose ID has not been merged by August 1. If the data has not been transferred to the new number yet, the provider may need to ask for the old "500" eligibility number to verify eligibility for previous months.

- During check-in, providers and staff are encouraged to ask recipients if they have received a new Medicaid ID card, and whether they have more than one Medicaid number.

- Providers may use the eligibility verification function in the Provider Web Portal, Provider Electronic Solutions (PES) or the Automated Voice Response System (AVRS) to determine whether a recipient's Medicaid IDs have been combined.

- If a provider encounters a recipient who does not have an ID card with their new "530" number, the provider can log into the Provider Web Portal, PES or AVRS and enter the card number the recipient has presented. An eligibility verification request performed using the previous Medicaid ID will return the new Medicaid ID if the IDs have been combined. If the IDs have **not** been combined, the "530" number will not be displayed. The Provider may then contact the Provider Assistance Center for guidance at 1-800-688-7989.

If you experience any issues related to Prior Authorizations which were previously approved, please contact the Prior Authorization vendor for assistance.

Provider Enrollment Revalidation

September 20, 2021

TO: All Providers

RE: Provider Enrollment – Revalidation

All Medicaid providers are required to revalidate (or renew) their enrollment record periodically to maintain Medicaid billing privileges. If providers do not revalidate, their enrollment will be closed.

At the onset of the COVID-19 pandemic, Medicaid temporarily ceased revalidation for providers. Medicaid has now resumed revalidation for providers. Affected providers may contact the Gainwell Provider Enrollment Unit at **1-888-223-3630** and speak to a Provider Enrollment Specialist.

COVID 19 Emergency Expiration Date Extended to October 13, 2021

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September 13, 2021

TO: All Providers

RE: COVID-19 Emergency Expiration Date Extended to October 31, 2021

All previously published expiration dates related to the COVID-19 emergency are once again extended by the Alabama Medicaid Agency (Medicaid). **The new expiration date is the earlier of October 31, 2021, the conclusion of the COVID-19 national emergency, or any expiration date noticed by the Alabama Medicaid Agency through a subsequent ALERT.**

A listing of previous Provider ALERTs and notices related to the health emergency is available by selecting the Agency's COVID-19 page in the bottom section: https://medicaid.alabama.gov/news_detail.aspx?ID=13729.

During the COVID-19 emergency, it is important to file claims as quickly as possible to ensure payment from Medicaid is made to Medicaid providers close to the date of service. The Centers for Medicare and Medicaid Services has increased the federal matching percentage for the emergency time frame, but states can only receive the increased match on claims that are paid during the emergency. Providers should include appropriate COVID-19 diagnosis code(s) on claims submitted to help with tracking of COVID-19.

Maternity Quality Updates

Laura Thompson, RN
Director of Quality

Maternity Quality Updates

2020 Quality Measure Incentive Reports
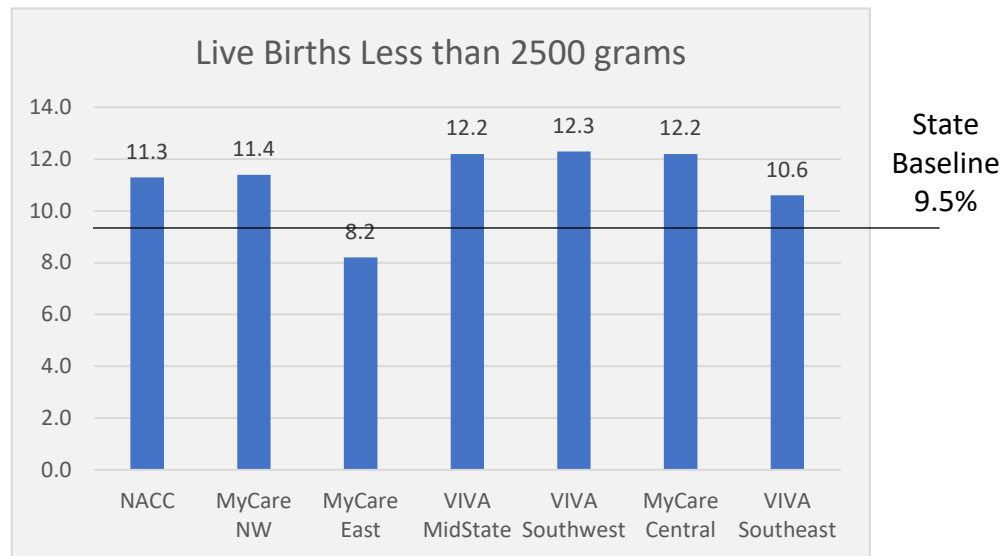## Maternity Indicators

LBW-CH
Live Births Weighing Less than 2,500 Grams

2019 Data

State-Wide Baseline	*9.5%*
NACC Baseline	*9.0%*
NACC 5 Year Target Rate	*8.6%*

2020 Results

NACC 2020 Improvement Target	*8.9%*
NACC 2020 Annual Rate	*11.3%*
DID NOT MEET FOR INCENTIVE	

Live Births Less than 2500 grams

Region	Value
NACC	11.3
MyCare NW	11.4
MyCare East	8.2
VIVA MidState	12.2
VIVA Southwest	12.3
MyCare Central	12.2
VIVA Southeast	10.6

State Baseline 9.5%

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Maternity Quality Updates

2020 Quality Measure Incentive Reports
Maternity Indicators

PPC-CH
Prenatal Care: Timeliness of Prenatal Care

2019 Data

State-Wide Baseline	*58.7%*
NACC Baseline	*54.1%*
NACC 5 Year Target Rate	*79.2%*

2020 Results

NACC 2020 Improvement Target	*59.1%*
NACC 2020 Annual Rate	*55.9%*
DID NOT MEET FOR INCENTIVE	
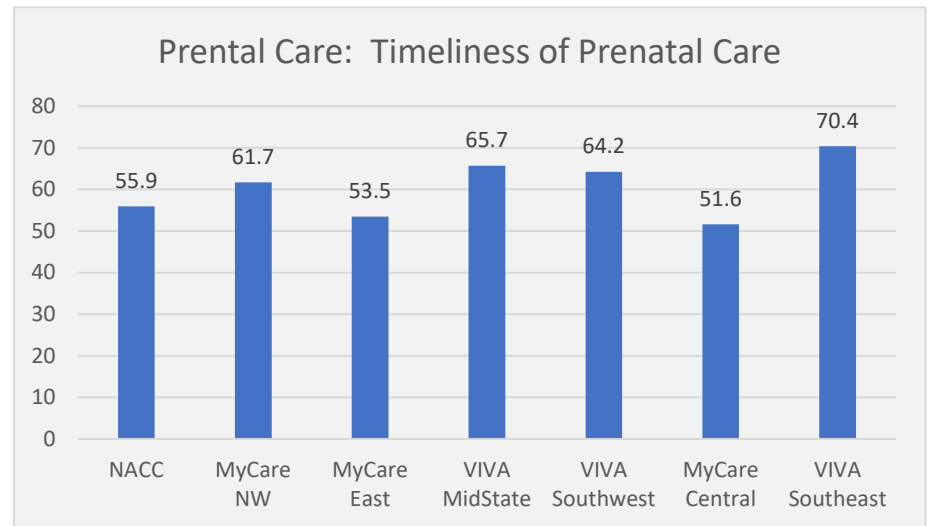
Prental Care: Timeliness of Prenatal Care

Category	Value
NACC	55.9
MyCare NW	61.7
MyCare East	53.5
VIVA MidState	65.7
VIVA Southwest	64.2
MyCare Central	51.6
VIVA Southeast	70.4

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Maternity Quality Updates

The DHCP's of NACC are leaving money on the table that is available for your practice through Bonus Payments

H1000   Prenatal Visit Bonus $150 per EI
The prenatal bonus payment may be available to providers who render services to pregnant recipients within 90 days of the last menstrual period.

G9357   Postpartum Visit Bonus $150 per EI
The postpartum bonus payment may be available to providers who render services to recipients between 21-56 days after the delivery.

The DHCP bonus payment procedure codes must be billed on a separate claim for reimbursement.

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Maternity Quality Updates

The DHCP's of NACC are leaving money on the table that is available for your practice through Bonus Payments

G9357   Postpartum Visit Bonus $100/150 per EI
January 2021 – May 2021 in the Northeast Region, there were 263 Postpartum visits not completed. This left $26,300 in bonus payments not awarded.

G9357   Postpartum Visit Bonus $100/150 per EI
January 2021 – May 2021 in the Northeast Region, there were 2451 1st Trimester prenatal care visits not completed. This left $245,100 in bonus payments not awarded.

Individual DHCP Practice rates are available upon request. Email laura.thompson@northalcc.org for your rates.

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Maternity Quality Updates

2020 Quality Improvement Project
Adverse Birth Outcome

Interventions

1. Providing Nutritional Counseling by our Licensed Registered Dietician to any patient that has a BMI greater than or equal to 30.
   a. Analysis of those that gained less than 40 pounds during pregnancy
   b. Analysis of those that identified as smoking an enrollment that ceased smoking at their Postpartum Visit
   c. Analysis of those that remain breastfeeding at their Postpartum Exam
2. Providing Nutritional Counseling by our Licensed Registered Dietician to any patient that has a failed GTT.
   a. Analysis of those that gained less than 40 pounds during pregnancy
   b. Analysis of those that identified as smoking an enrollment that ceased smoking at their Postpartum Visit
   c. Analysis of those that remain breastfeeding at their Postpartum Exam

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Maternity Quality Updates

2020 Quality Improvement Project
Adverse Birth Outcome

Interventions

3. Promoting inter-conception care by referring/enrolling patients into Family Planning Case Management Services for those who had a BMI greater than or equal to 30.0 at their initial prenatal visit.

4. Promoting inter-conception care by referring/enrolling patients into Family Planning Case Management Services for those who had a failed GTT.

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Maternity Quality Updates

2020 Quality Improvement Project
Adverse Birth Outcome

WHAT DO WE NEED FROM YOU????

We need referral forms completed and faxed on every Medicaid patient who fails their GTT!!

This is a requirement as part of your ACHN contract.

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Gestational Diabetes Referral Form

Patient Name: _____

Medicaid Number: _____

Date of Birth: _____/_____/_____

Address: _____

Phone Number:_____

Due Date: _____/_____/_____

Diagnosis:

☐ Gestational Diabetes (ICD 10 code O24.4)

☐ Other: _____

Supporting Labs:
GTT   Fasting _____ 1 Hour_____ 2 Hour_____ 3 Hour _____

After receiving initial nutritional counseling with a registered dietitian with the local hospital Diabetes Education Center, the patient will be referred for follow-up nutritional counseling with NACC's Registered Dietitian.

Form Completion
Print Name of Referring Provider: _____

Provider Telephone Number: _____

Provider Signature:_____

****Upon completion, please fax to NACC at 256-382-2715.****

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Maternity Care Coordination Program Updates

Virginia Wiggins Motton
Family Planning and Maternity Manager

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What's Working Well

- Outstanding Collaboration between NACC and DHCPs

- Increase in EI awareness of the need for enrolling into required Maternity Care Coordination-Big Thank you to DHCPs

- Fantastic Efforts being made as a Network Team (NACC and DHCPs) for requesting and processing One-Time DHCP Selection Referrals- Big Thanks to our Referral Specialist, Ms. Sindy Summers, whom works directly with DHCPs

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Asking for Feedback

- NACC is always open to DHCP feedback concerning the processes of required Maternity Care Coordination as related to EIs at the DHCP level.

- NACC is available to meet with any DHCP office virtually or via teleconference to collaborate as needed concerning Maternity EIs

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Important Reminders

- Medicaid requires DHCPs to maintain records of all DHCP Selection Referral Forms received from NACC per each EI onsite per the DHCP location for auditing purposes and for billing/payment of clinical services rendered to the EI.

- One-time DHCP Selection Referrals Forms

    - Please continue to contact NACC' Referral Specialist, <u>Ms. Sindy Summers</u> to request one-time referrals. Ms. Summers' direct contact information:

        - Phone Number: 256-346-0151
        - Email Address: sindyetta.summers@orthalcc.org

        Examples warranting a one-timer referral
        - EI presents at a DHCP office needing maternal care and has not enrolled as of yet with NACC for Maternity Care Coordination but is eligible for Full or Pregnancy Medicaid and attributed to NACC via the Medicaid verification portal.

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Important Reminders (cont.)

- One-Time referral is provided upon DHCP request and the EI is rerouted to NACC for enrollment of required Care Coordination services and a standing DHCP Selection Referral is then provided to the DHCP by the assigned Maternity Care Coordinator.

- Permanent DHCP Selection Referral Forms
  - Standing/Permanent DHCP Selection Referral Forms are provided to DHCPs upon complete enrollment of the EI into Maternity Care Coordination services.

- Change of DHCP Selection Referral Forms
  - Maternity Care Coordinators assist EI with requests to change DHCPs and are required to provide the newly assigned DHCP with a new DHCP Selection Referral Form **within four (4) hours** of the requested change of DHCPs.

Questions/Comments

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