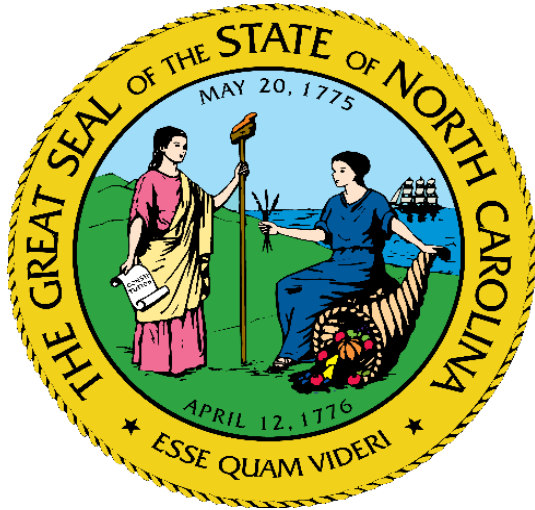


# Fireside Chat: COVID-19 & Other Hot Topics



**RCC (Relay Conference Captioning)**  
Participants can access real-time  
captioning for this webinar here:

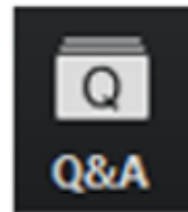
[<Enter Link Here>](#)



**January 20, 2022**

# Logistics for today's webinar

**Question during the live webinar**



**Technical assistance**

[technicalassistanceCOVID19@gmail.com](mailto:technicalassistanceCOVID19@gmail.com)

# AGENDA

01

2022 & 2023 Lookahead

02

Quick Updates on Hot Topics

03

COVID Surge Response

04

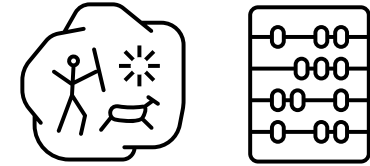
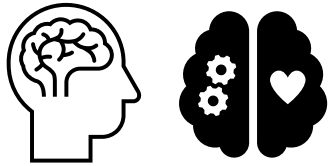
COVID Vaccine Member Incentives

05

Q&A

# Looking Ahead for NC Medicaid

- CMO Priorities for 2022



- Big Things Launching:

- NC Integrated Care for Kids (InCK) Program Launch
- Healthy Opportunities Pilots Enabled
- BH I/DD Tailored Plan Launch
- Specialized Foster Care Plan Launch

## New Evusheld & Oral Antivirals Provider Registration

Providers can register with the state's COVID-19 treatment program for oral antiviral pills and all other COVID-19 therapeutic products by completing [NC DHHS Therapeutics New Provider Request Form](#). Once completed, NC DHHS will create your account in HPOP as a registered provider.

### Registration Requirements:

- When your account is created in HPOP you will receive an email shortly from [vpop\\_no\\_reply@cdc.gov](mailto:vpop_no_reply@cdc.gov) allowing you complete the enrollment process
- To activate your account, you must verify your sites address and receiving hours. You must complete these steps in order to request allocations

For additional guidance, you can visit the [HPoP Provider Portal - Get Started](#)

Please note that it will take 2-3 business days to process your registration. Registration does not guarantee that you will receive allocation.

## New Mabs Provider Registration

Providers can register with the state's COVID-19 treatment program for mAbs, oral antiviral pills, and all other COVID-19 therapeutic products by completing [NC DHHS Therapeutics New Provider Request Form](#). Once completed, NC DHHS will submit the request to AmerisourceBergen (ABC) for processing.

### Registration Requirements:

- **Locations with an active NC Board of Pharmacy License:**
  - Must include the license # and expiration date in the Therapeutics New Provider Request Form
  - Upload copy of active NC BOP license for location
- **Locations that DO NOT have an active NC Board of Pharmacy License:**
  - Complete [Letter of Affiliation Form](#) and upload in the Therapeutics New Provider Request Form
  - Upload copy of active NC medical license showing practitioners name & address

ABC reviews all requests to ensure requests are in line with the federal guidance on credentials.

If registration is approved, mAb provider locations will be eligible to request and receive mAbs allocations.

[View the Provider Handbook for more details on Therapeutics](#)

## Legislative Updates to Highlight

- Coverage Expansions
  - Post-Partum 12 month
  - Parents of Foster Children
- Copayments for many services increase to \$4.00 starting July 1, 2022
- Home & Community Based Services (HCBS) Investments
  - Direct Care Worker Wage Increases
  - Direct Care Worker One Time Bonus
  - Waiver Slots (Innovations 1,000, CAP-DA 114)

On November 18, 2021, Senate Bill 105 was enacted as S.L. 2021-180

<https://www.ncleg.gov/EnactedLegislation/SessionLaws/PDF/2021-2022/SL2021-180.pdf>

# Provider Changes

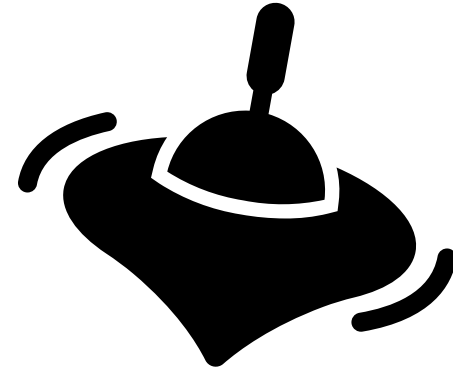
- From November 18, 2021, to June 30, 2023, provider enrollment and revalidation fees are waived. (§ 9D.9).
- From November 18, 2021, to June 30, 2023, podiatrists reimbursed for prescribing durable medical equipment (DME). (§ 9D.19).
- From November 18, 2021, to June 30, 2023, PHPs must reimburse prescription ingredient cost and dispensing fee at 100% of fee-for-service rate. (§ 9D.19A).

# LME/MCO Changes

- LME/MCOs may select any nationally recognized accreditation organization that DHB approves for purposes of operating a BH I/DD Tailored Plan during the initial contract. (§ 9D.17).
- Starting July 1, 2022, LME/MCOs required to pay for behavioral health services while discharge from emergency department is pending (§ 9D.22).

# Managed Care Updates

- Advanced Medical Home (AMH)
- Claims Dashboard
- Continuity of Care for Pregnant Women & Newborns
- Standard Plan Member Transitions





# Advanced Medical Home Provider Manual 2.2 Update

NC Medicaid is releasing the AMH Provider Manual 2.2, which reflects program modifications and changes that impact AMH Tier 3 contracts with Standard Plans. Only select AMH Tier 3s are impacted by this change. Those AMH Tier 3s and their Clinically Integrated Networks (CINs) will have already received targeted outreach on the program from Medicaid and the InCK program team. This manual supersedes the previous April 23, 2021, version (AMH Provider Manual 2.1).

Additional guidance and program information is available on the [Advanced Medical Home webpage](#).

# New Dashboard Tracks NC Medicaid Managed Care Claim Denials

Since the launch of NC Medicaid Managed Care on July 1, 2021, providers have submitted claims to the prepaid health plans (PHPs) for services provided to beneficiaries who are enrolled with that PHP. NCDHHS established provider payment requirements for PHPs to encourage continued provider participation in the Medicaid program, to ensure beneficiary access and support safety net providers and to ensure continuation of current reimbursement levels.

**The Department worked closely with PHPs to share information on the [steps needed to file a claim for each PHP](#). In alignment with NCDHHS' proactive communication and transparency values, a new NC Medicaid Managed Care dashboard has been added to the [Reports page](#) of the [NC Medicaid website](#) with [top reasons for claim denials for each PHP](#). The dashboard will be updated monthly and includes notes to give context to the data.**

Providers are encouraged to work directly with the [PHPs](#) to resolve any issues with their claim submissions. If a provider continues to have unresolved payment issues, they should contact the Provider Ombudsman at [Medicaid.ProviderOmbudsman@dhhs.nc.gov](mailto:Medicaid.ProviderOmbudsman@dhhs.nc.gov) or 866-304-7062.

# Reminder: Continuity of Care for Pregnant Woman and Newborns

- **Transition of Care Protections for Pregnant Women Receiving Care from Out of Network Providers**
  - If a Beneficiary has entered her second trimester of pregnancy and the provider was treating the Beneficiary before the Beneficiary's enrollment into a Standard Plan, the Department requires the Standard Plan to honor a transitional period established in N.C.Gen.Stat. §58-67-88, which extends through 60 days of postpartum care
  - During this transitional period, a Standard Plan must treat the Beneficiary's OON provider the same as in-network providers for both rate reimbursement and prior authorization (PA) requirements.
- For more information, the Department has the following fact sheets:
  - [NC Medicaid Fact Sheet, "Ensuring Continuity of Care for Medicaid Beneficiaries: Protections for Pregnant Women and Newborns"](#)
  - [NC Medicaid Fact Sheet, "Managed Care Eligibility for Newborns: What Providers Need to Know"](#)

# Reminder: Standard Plan Member Transitions

| <i>Plan Change Type</i>                   | <b>Standard Plan Without Cause Health Plan Change Request</b>  | <b>Standard Plan With Cause Health Plan Change Request</b>  | <b>Request to Move to NC Medicaid Direct or LME-MCO</b>   |
|---|--|---|---|
| <i>When the request is used</i>           | <p>Within the first 90 days of health plan enrollment, beneficiaries can change health plans for any reason (without cause). This applies to:</p> <ul style="list-style-type: none"> <li>• New Medicaid beneficiaries</li> <li>• Current Medicaid beneficiaries following recertification</li> </ul> | <p>After the first 90 days of health plan enrollment, beneficiaries can change health plans if they have a special reason (with cause), such as:</p> <ul style="list-style-type: none"> <li>• Have a family member in a different health plan</li> <li>• Long-Term Services and Supports (LTSS) provider is not in their current health plan</li> </ul> | <p>If a health plan member needs services only offered by NC Medicaid Direct or LME-MCO for a serious mental health disorder, severe substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI)</p> |
| <i>Who can submit the request</i>         | Beneficiary via <a href="https://ncmedicaidplans.gov">ncmedicaidplans.gov</a> or calling the Enrollment Broker   | Beneficiary via <a href="https://ncmedicaidplans.gov">ncmedicaidplans.gov</a>   | Provider or Beneficiary via <a href="https://ncmedicaidplans.gov/submit-forms-online">ncmedicaidplans.gov/submit-forms-online</a>   |
| <i>When the request becomes effective</i> | 1 <sup>st</sup> of the following month   | 1 <sup>st</sup> of the following month  | <ul style="list-style-type: none"> <li>• <i>Non-service Associated Requests:</i> 1<sup>st</sup> of the following month</li> <li>• <i>Service Associated Requests:</i> Retroactive to the date of the request</li> </ul>                       |

**For more information, Providers can reference the below fact sheets:**

- [NC Medicaid Managed Care: Request to Move to NC Medicaid Direct Process](#)
- [Managed Care Populations \(Do I need to Choose a Health Plan?\)](#)

# Medicaid COVID-19 Surge Response Levers

| Lever   | Impact                                | COVID -19 Bulletin  |
|---|---------------------------------------|---|
| Medicaid/PHP Waive Prior Authorization for Post Acute Care            | Opening Beds                          | <a href="#">Bulletin 210</a>                                |
| Home Health Skilled Nursing Visits – Prior Authorization not Required | Opening Beds                          | <a href="#">Bulletin 210</a>                                |
| Swing Beds  | Opening Beds                          | <a href="#">Bulletin 210</a>                                |
| Skilled Nursing Surge Facilities                                      | Opening Beds                          | <a href="#">Bulletin 210</a>                                |
| Monoclonal Antibody Treatments  | Prevent Hospitalization               | <a href="#">Bulletin 208</a>                                |
| Remdesivir Ambulatory Infusion  | Prevent Hospitalization, Opening Beds | <a href="#">Bulletin 210</a>                                |
| Oral Treatments   | Prevent Hospitalization, Opening Beds | <a href="#">Bulletin 216</a>                                |
| Boosters/Additional Doses   | Increase vaccination                  | <a href="#">Bulletin 211</a> ; <a href="#">Bulletin 217</a> |
| Counseling Code (99401)   | Increase vaccination                  | <a href="#">Bulletin 210</a>                                |
| COVID Vax Admin Rate Increase (\$65)                                  | Increase vaccination                  | <a href="#">Bulletin 210</a>                                |
| COVID Vaccine Member Incentives                                       | Increase vaccination                  | N/A   |
| Standard Plan Incentives Program                                      | Increase vaccination                  | N/A   |
| Testing   | Broad impact                          | <a href="#">Pharmacy Newsletter</a>                         |
| Comms   | Increase vaccination                  | N/A   |
| Prior Authorization Extension for Elective Procedures                 | Reduce administrative burden          | <a href="#">Bulletin 215</a>                                |
| Waiver of Medical Necessity Determination for COVID-19 Admissions     | Reduce administrative burden          | <a href="#">Bulletin 215</a>                                |
| CMS Omnibus COVID-19 Health Care Staff Vaccination Mandate            | Increase vaccination                  | <i>To be released</i>                                       |

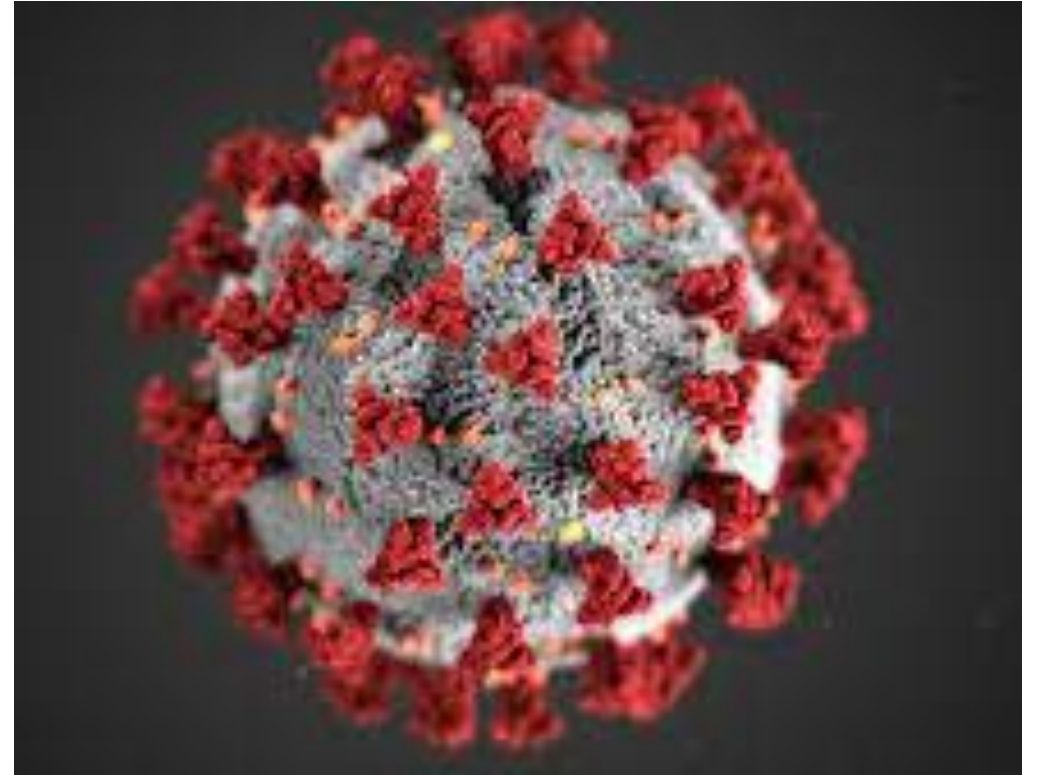
# COVID Flexibilities Made Permanent

| Provision  | Made into Permanent Policy | Sunsetting 3/31/22 | Ending at/ after Federal PHE | Comments   |
|--|----------------------------|--------------------|------------------------------|--|
| Allow provider to provide teledentistry services (D9995 Teledentistry – synchronous, real time encounter) via synchronous, live audio and video transmission when reported with oral evaluation codes D0140 or D0170.    | X                          |                    |                              |  |
| Allow the application of silver diamine fluoride (D1354 Interim caries arresting medicament application per tooth) for all ages.   | --                         |                    |                              | <i>This is in review for permanent placement in policy.</i>  |
| Allow the application of silver diamine fluoride (D1354 Interim caries arresting medicament application per tooth) for all permanent teeth (1-32).   | --                         |                    |                              | <i>This is in review for permanent placement in policy.</i>  |
| Allow provider to provide teledentistry services (D9996 Teledentistry – asynchronous, information stored and forwarded to dentist for subsequent review) when reported with oral evaluation codes D0140 or D0170.        | --                         |                    |                              | <i>This is in review for permanent placement in policy.</i>  |
| Allow the topical application of fluoride varnish (D1206) once per three calendar month period (approximately every 90 days) for patients at high risk for caries (active disease or previous caries related treatment). |                            | X                  |                              | This reverts to the original coverage for D1206 under age 21.  |
| Allow the application of silver diamine fluoride (D1354 Interim caries arresting medicament application per tooth) for all ages.   |                            | X                  |                              | This reverts to the original coverage for D1354 for ages 1-5.  |
| Allow the application of silver diamine fluoride (D1354 Interim caries arresting medicament application per tooth) for all primary teeth (A-T) and permanent teeth (01-32).  |                            | X                  |                              | This reverts to the original coverage for D1354 for primary teeth (A-T) and permanent first molars (3-14-19-30). |
| Allow provider to provide teledentistry services (D9995 Teledentistry – synchronous, real time encounter) via synchronous, live audio and video transmission when reported with oral evaluation codes D0140 or D0170.    |                            | X                  |                              |  |
| Allow provider to provide teledentistry services (D9996 Teledentistry – asynchronous, information stored and forwarded to dentist for subsequent review) via synchronous, live   |                            | X                  |                              |  |

**Bulletin to be published by the end of January**

# COVID-19 Updates for Medicaid

- **Booster Updates**
- **Vaccine Reimbursement**
- **Surge Response**
- **Vaccine Rates for Medicaid**
- **Vaccine Incentives**
- **Vaccine Counseling**
- **Communication Opportunities**



On January 18, 2022 NC DHHS leaders provided an update for providers on current COVID-19 trends, vaccination, testing, treatment, and other relevant topics. The intended audience was North Carolina providers who are caring for COVID-19 patients and their families.

*Link to the audio recording can be found [here](#).*

# Immunocompromised Individuals NOW ELIGIBLE FOR a Booster Dose



## Update:

- **Some** moderately or severely immunocompromised people who received **THREE (3)** doses of the Pfizer-BioNTech or Moderna primary series may now be eligible for a booster dose.
- Everyone 12 years and older, including immunocompromised people, should get a booster shot. If you are eligible for an additional primary shot, you should complete all three doses first before you get a booster shot.

## Connecting the dots:



- According to recently released recommendations by the CDC, **some immunocompromised individuals** can get what would amount to a fourth dose (booster shot) of the COVID-19 vaccine **as early as this coming week due to the shortened wait period of 5 months.**
  - **This dose would be a booster dose of the Pfizer/Moderna vaccine**, beyond the third additional dose that was originally authorized for immunocompromised individuals in August of 2021
  - **This does NOT apply to individuals who received a Johnson & Johnson primary vaccine**

*For more information, please see the booster qualification chart on the next slide*



# Medicaid COVID Vaccination Rates

Through 11/30/2021

## ALL OF MEDICAID

- 32.5% of Medicaid beneficiaries ages 12+ are fully vaccinated (587,393)
- 35.8% of Medicaid beneficiaries ages 12+ are partially or fully vaccinated (665,093)

## STANDARD PLANS

- Full vaccination rate for 12+ is 25.9% (232,453)
- Partial vaccination rate for 12+ is 27.7% (248,280)

## MEDICAID DIRECT

- Full vaccination rate for 12+ is 38.2% (368,761)
- Partial vaccination rate for 12+ is 43.1% (416,813)

## TRIBAL OPTION\*

- Full vaccination rate for 12+ is 45.9% (1,652)
- Partial vaccination rate for 12+ is 54.2% (1,951)
- The fully vaccinated rate for the entire AI/AN population (all ages) is 28% (NCDHHS dashboard)

## Vaccination Rate by PHP

Through 11/30/2021

| PHP            | Total Beneficiaries | Fully Vaccinated Count | Fully Vaccinated Rate |
|----------------|---------------------|------------------------|-----------------------|
| UHC            | 198,236             | 51,020                 | 25.74%                |
| WellCare       | 186,045             | 46,807                 | 25.16%                |
| AmeriHealth    | 163,507             | 39,368                 | 24.08%                |
| Healthy Blue   | 234,618             | 64,679                 | 27.57%                |
| CCH            | 115,529             | 30,579                 | 26.47%                |
| <b>Overall</b> | <b>897,935</b>      | <b>232,453</b>         | <b>25.89%</b>         |

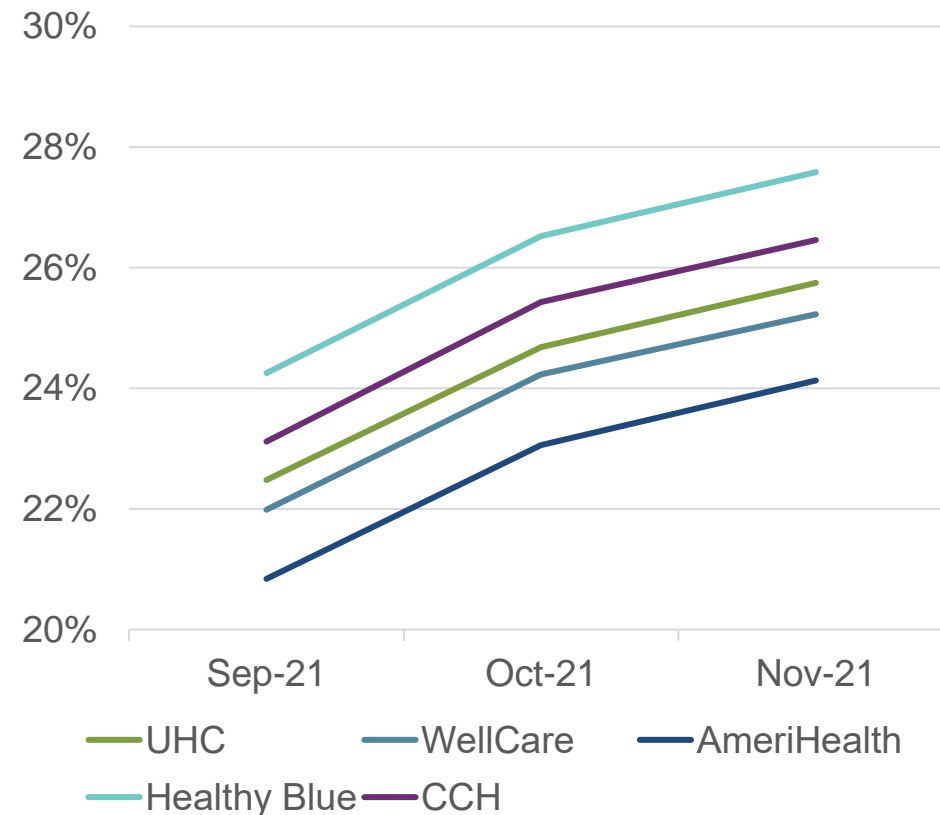
Ages 11 and younger excluded

# Fully Vaccinated Rate by PHP

Through 11/30/2021

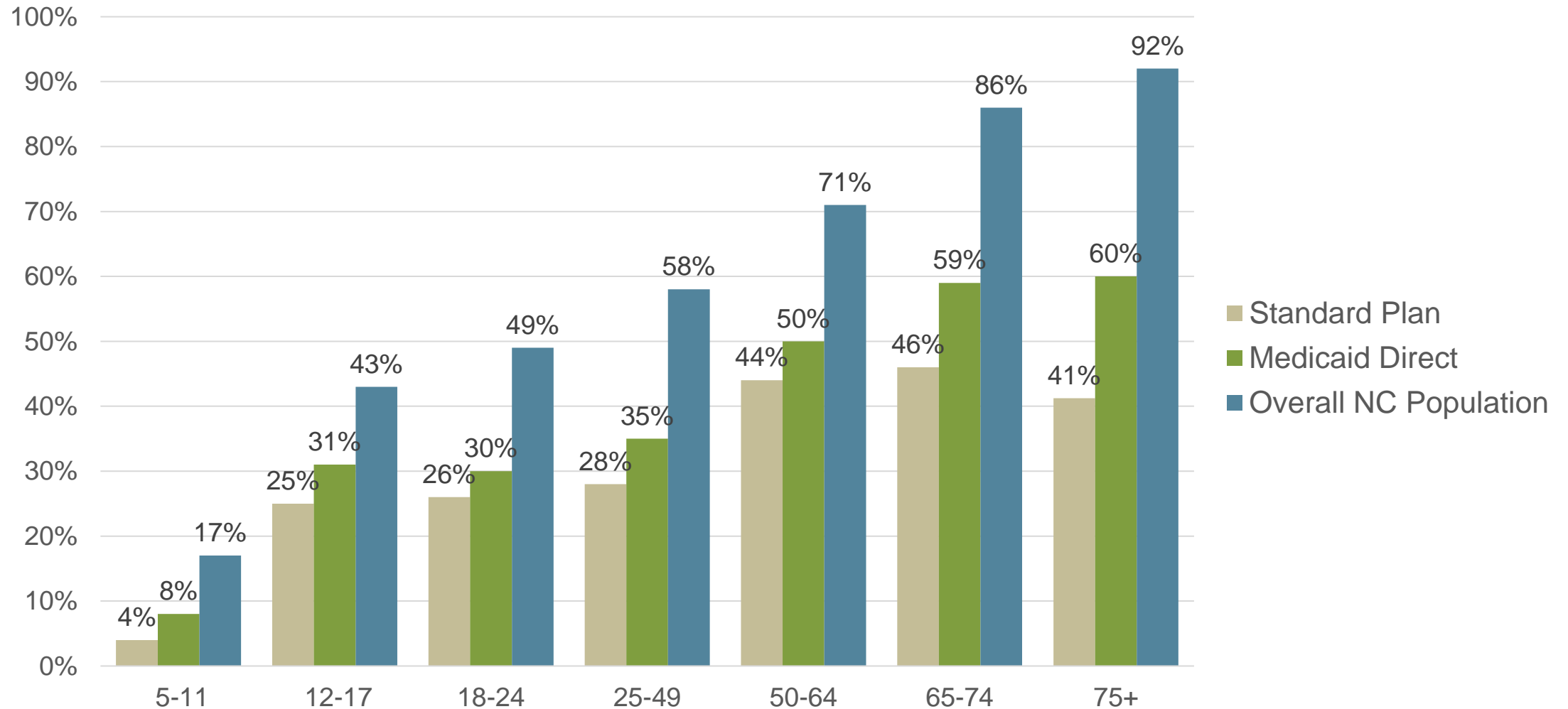
|                  | Rate (9/2021) | Rate (10/2021) | Rate (11/2021) | Net Change |
|------------------|---------------|----------------|----------------|------------|
| Overall Medicaid | 30.64%        | 31.70%         | 32.50%         | 1.86%      |
| Medicaid Direct  | 37.94%        | 37.94%         | 38.57%         | 0.63%      |
| Standard Plan    | 22.62%        | 24.86%         | 25.89%         | 3.27%      |
| UHC              | 22.48%        | 24.68%         | 25.74%         | 3.26%      |
| WellCare         | 21.99%        | 24.23%         | 25.16%         | 3.17%      |
| AmeriHealth      | 20.84%        | 23.06%         | 24.08%         | 3.24%      |
| Healthy Blue     | 24.25%        | 26.52%         | 27.57%         | 3.32%      |
| CCH              | 23.12%        | 25.43%         | 26.47%         | 3.35%      |

Full Vaccination Rates (Ages 12+) by PHP Since Program Start



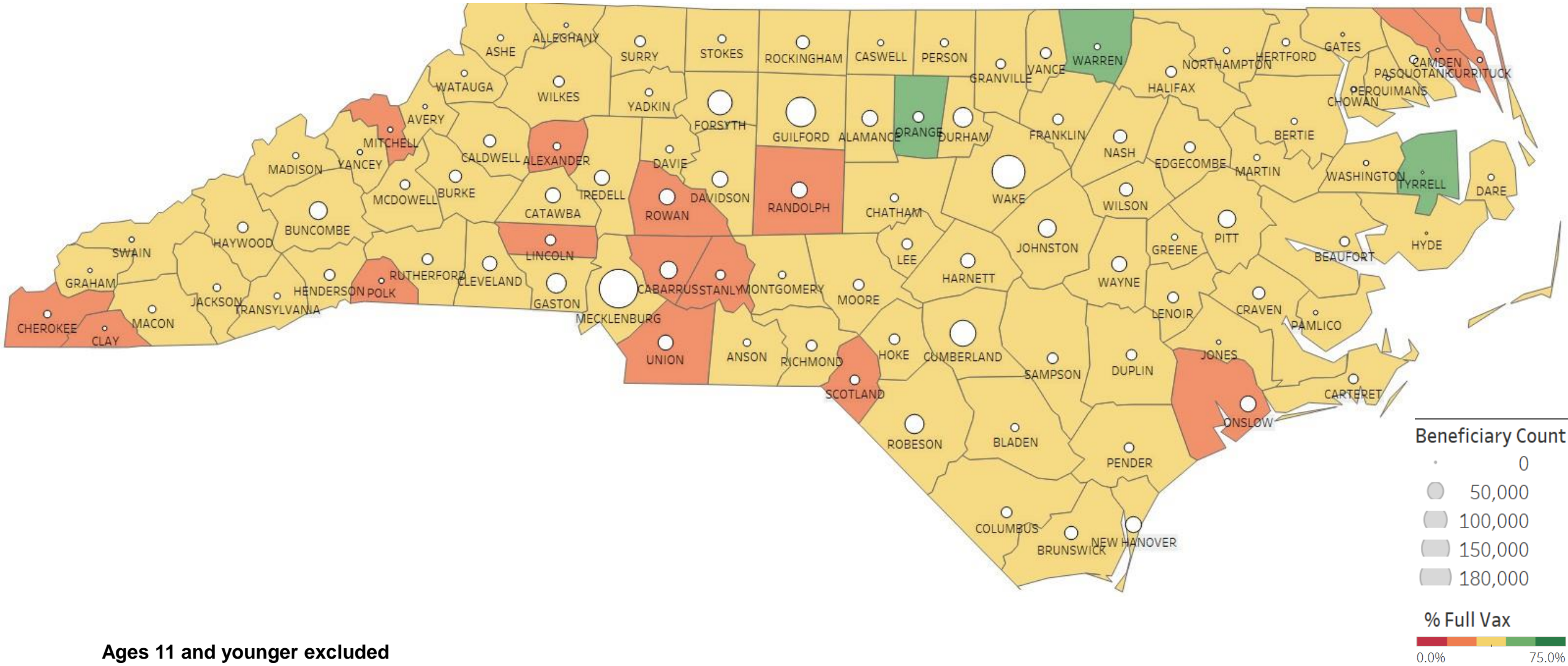
Ages 11 and younger excluded

# Medicaid Fully Vaccinated Rate Compared to NC Overall Vaccination Rate Through 11/30/2021



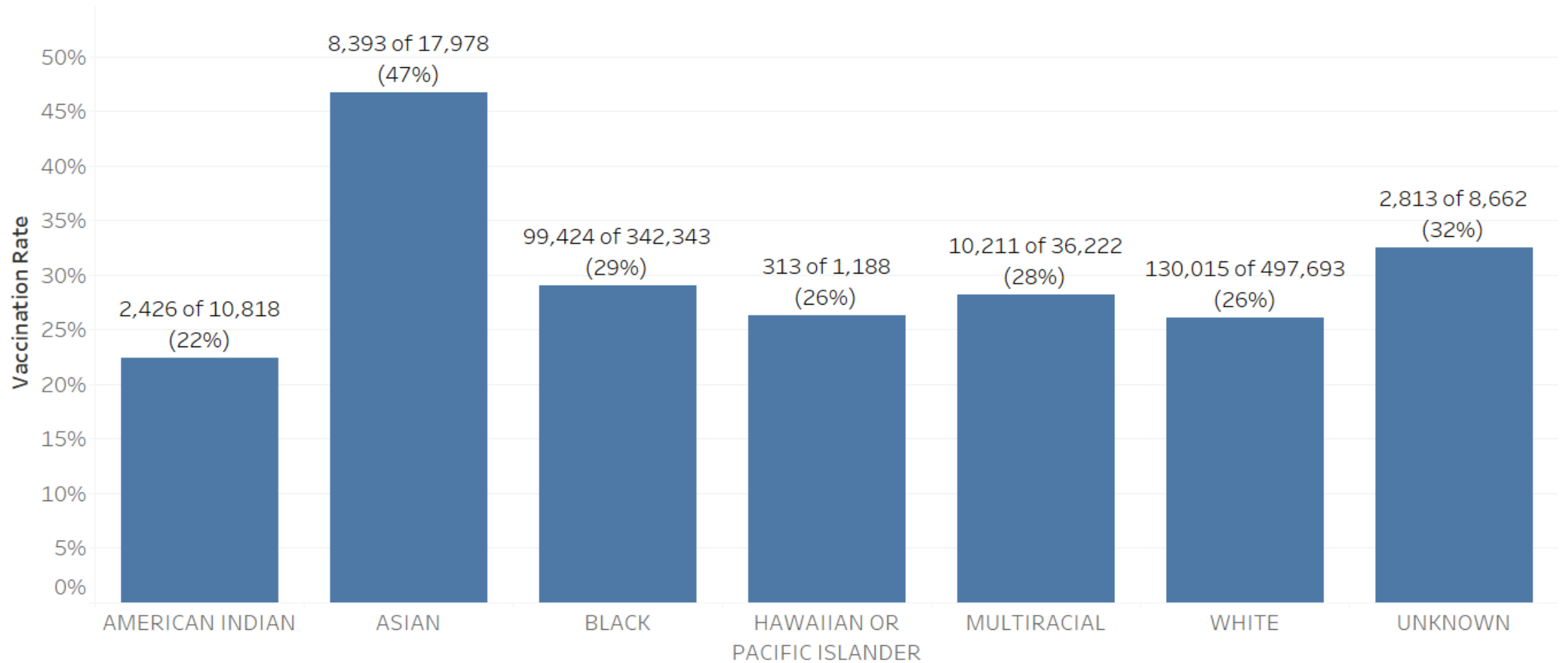
\*Federal Pharmacy Programs excluded from state data  
Source: <https://covid19.ncdhhs.gov/dashboard/vaccinations>

# Proportion Fully Vaccinated (All Medicaid) Through 11/30/2021



Ages 11 and younger excluded

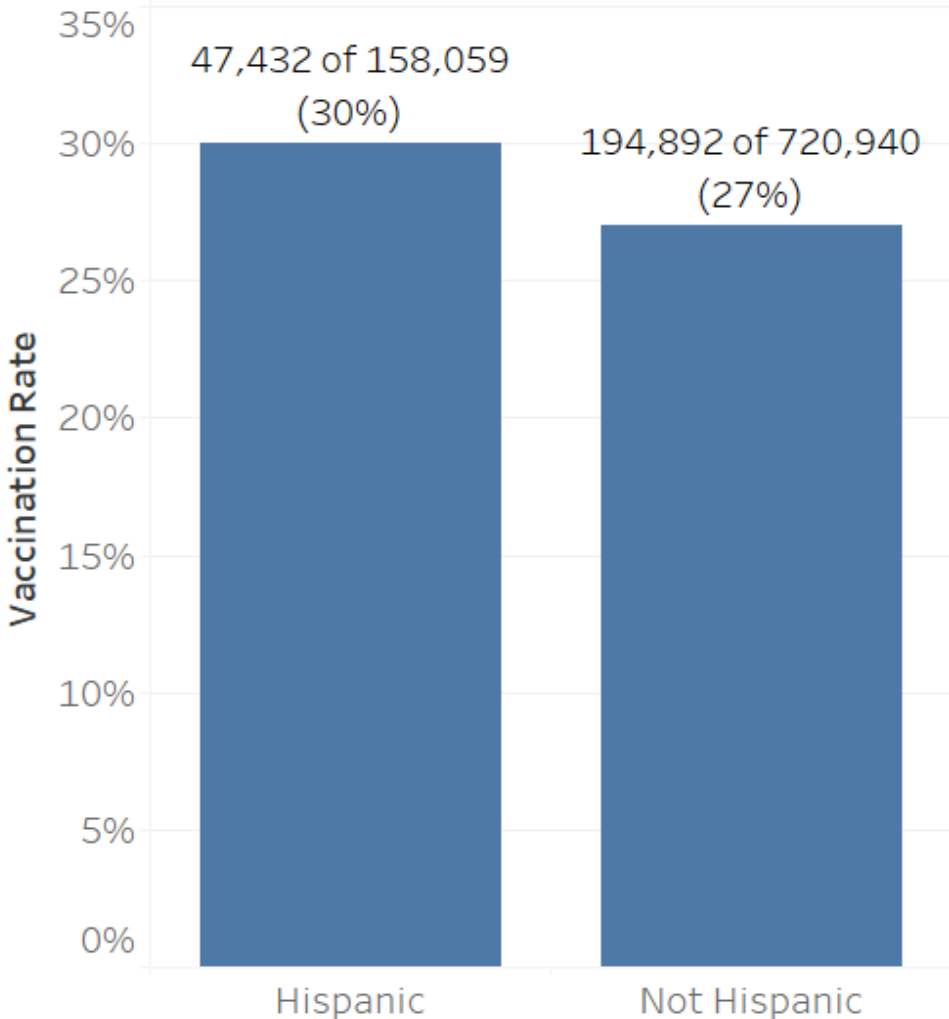
# Proportion of Vaccinated Beneficiaries by Race Group Through 11/30/2021



Standard Plan beneficiaries only. Ages 11 and younger excluded because not eligible for vaccine at time of data pull

# Proportion of Vaccinated Beneficiaries by Ethnicity

Through 11/30/2021



Standard Plan beneficiaries only. Ages 11 and younger excluded because not eligible for vaccine at time of data pull

# Medicaid Vaccine Counseling (99401)

Through 11/30/2021

## Vaccine Counseling for the 12-17 Population

- The vaccination rate for the 12-17 counseled population is 40% greater compared to the non-counseled population after 6/1\* (25.14% vs 18.02%)
- Early data suggests 14 people ages 12-17 need to receive counseling for 1 beneficiary to be vaccinated beyond what would have occurred without counseling. With an average of 1.25 counseling sessions per beneficiary at a cost of \$32 per claim, this correlates to \$560 to shift one person to vaccination.\*\*

## Key Takeaways

**Initial evidence indicates that vaccine counseling increases the likelihood that beneficiaries for all age groups will make the decision to get vaccinated;** being vaccinated in NC means they are 5X less likely to get COVID infection and 13X less likely to die from COVID-19 (based on our state epidemiologic evaluation of infection and death rates as a function of vaccination status).

\*Beneficiaries 16 and older: Hesitant if not vaccinated by 6/1/21. Beneficiaries 12-15: Hesitant if not vaccinated by 6/26/21 (45 days after becoming eligible).

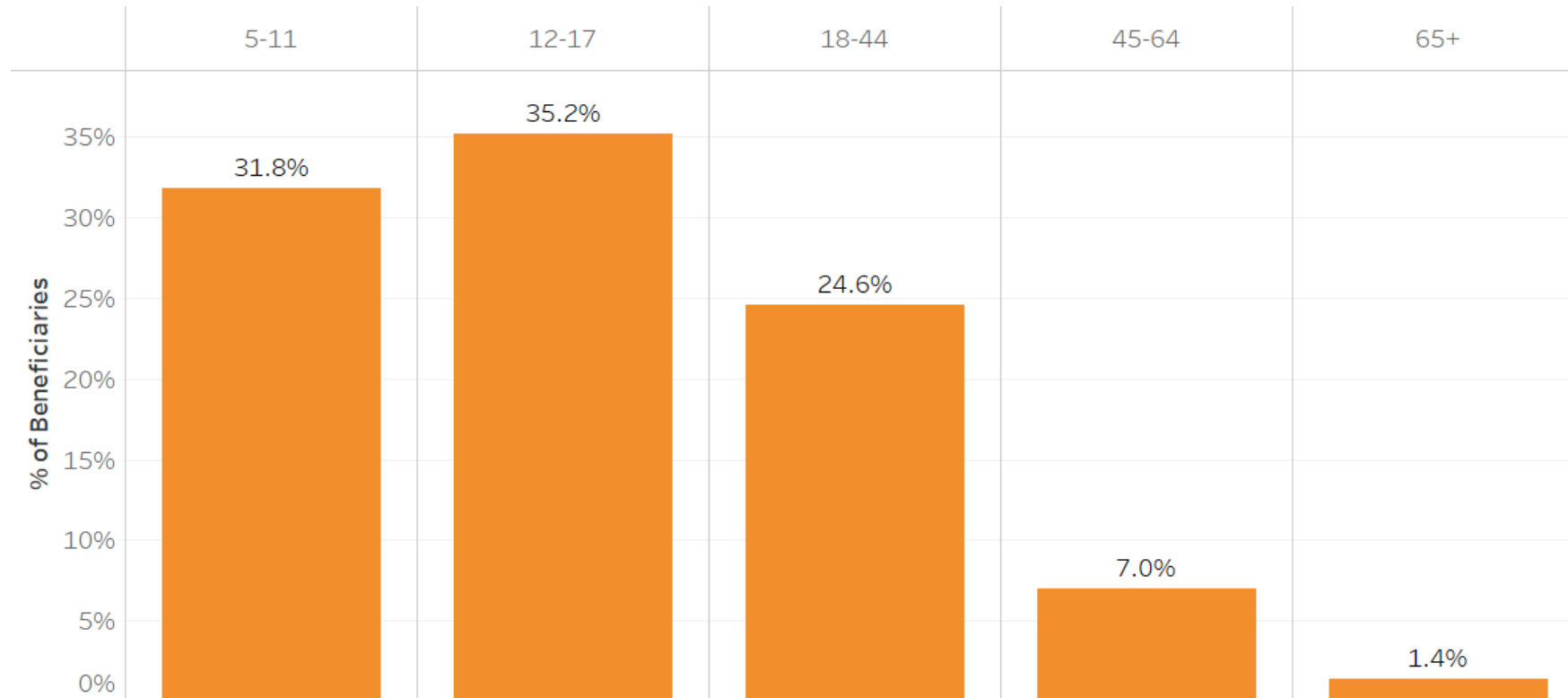
\*\*Avg Cost of a pneumonia hospitalization with ICU stay is \$88,000(non-COVID)



# Age Distribution of Counseling Population (99401)

As of Nov 30, 2021

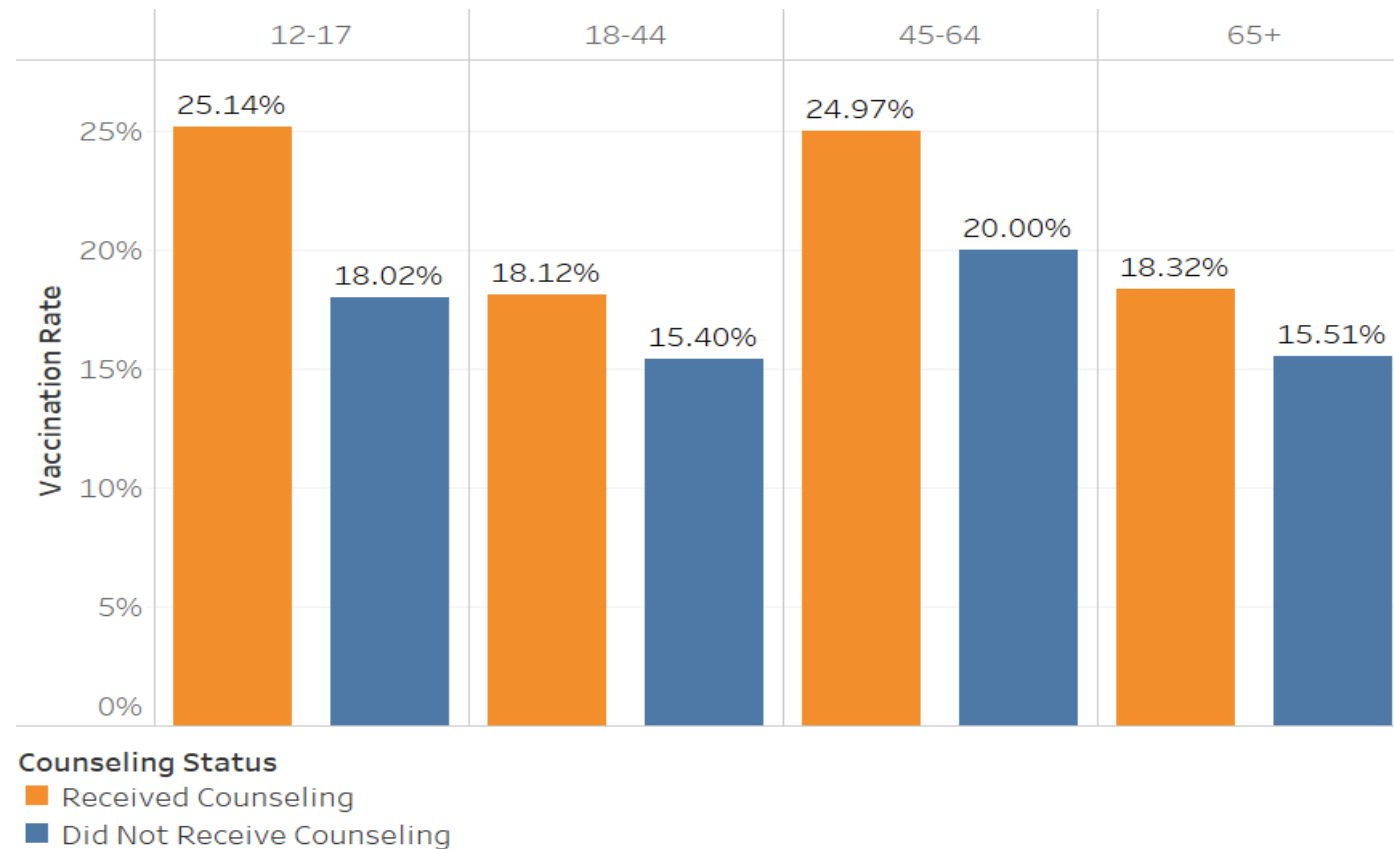
- **Counseling recipients consists of more vaccine hesitant populations (67% are 17 or younger, compared to 38% of overall Medicaid population)**



# Vaccination Rate for Hesitant Population by Age Group by Counseling Status

As of Nov 30, 2021

- For all age groups, the population that was counseled had higher vaccination rates



## Vaccination Rate by Age Group by Volume of Counseling

As of Nov 30, 2021

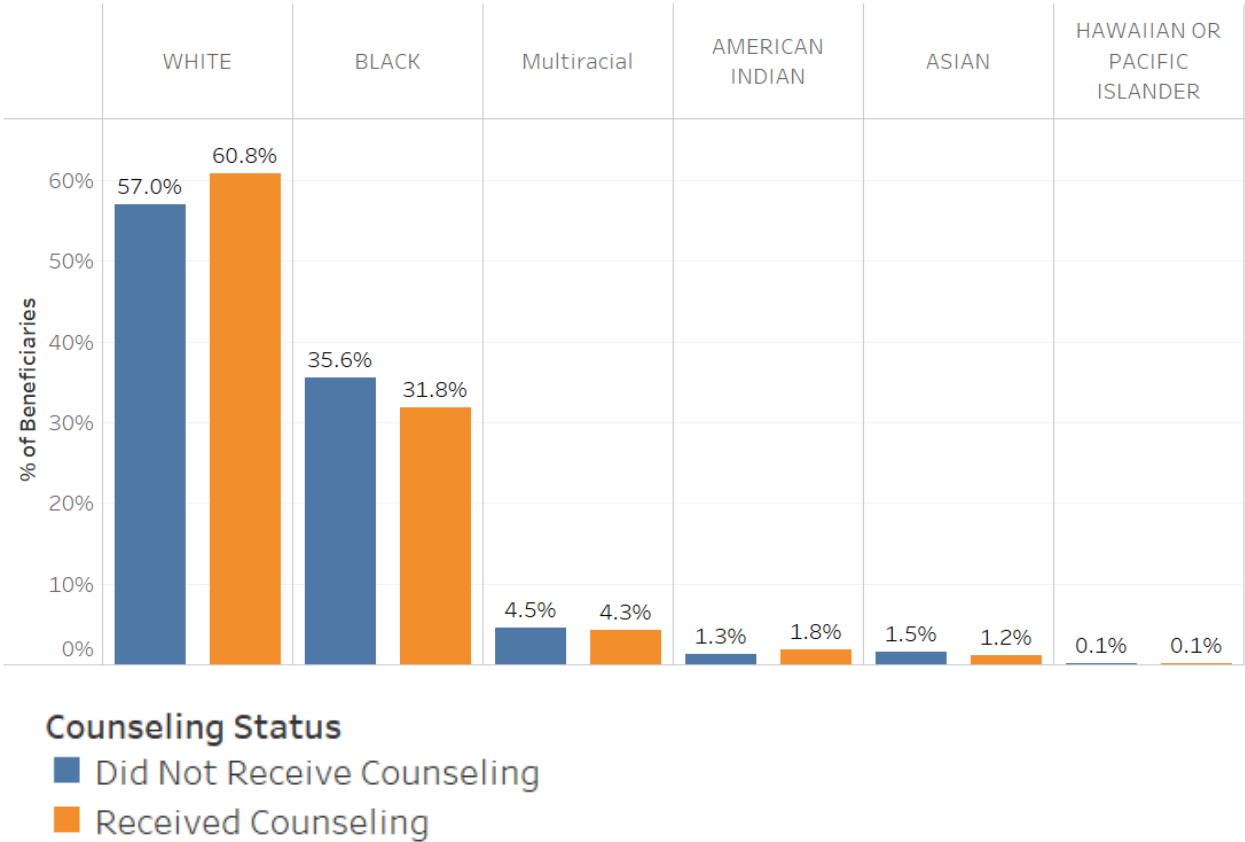
- In most age groups, more than 1 counseling session resulted in higher vaccination rates

|       | 1 Counseling Session | >1 Counseling Session | Ratio |
|-------|----------------------|-----------------------|-------|
| 12-17 | 24.43%               | 29.06%                | 1.19  |
| 18-44 | 17.83%               | 19.27%                | 1.08  |
| 45-64 | 25.11%               | 24.64%                | 0.98  |
| 65+   | 18.11%               | 19.30%                | 1.07  |

# Distribution of Hesitant Population by Counseling Status Ages 12-17

As of Nov 30, 2021

- Counseling has been utilized unequally by race



# Audience Response Question 1

Genie

**Are you aware of the prepaid health plan member incentives?**

- A. What? Never heard of them...
- B. Yes – vaguely aware that I heard of that somewhere...
- C. Yes – read about them in my specialty society newsletter but I'm not sure how they apply to me in my practice
- D. Yes – read about them, and I have mentioned them to a few of my patients when counseling about getting vaccinated
- E. Yes – I mention them to all my Medicaid patients when doing vaccine counseling!

# COVID Member Incentives

| WellCare  | United HealthCare   | Healthy Blue  | AmeriHealth Caritas NC   | Carolina Complete Health   |
|---|---|---|--|--|
| <b>Who is Eligible?</b> <ul style="list-style-type: none"> <li>All members 5 years of age and up.</li> </ul>  | <b>Who is Eligible?</b> <ul style="list-style-type: none"> <li>Members 5 years of age and up.</li> </ul>  | <b>Who is Eligible?</b> <ul style="list-style-type: none"> <li>All members 5 years of age and up.</li> </ul>  | <b>Who is Eligible?</b> <ul style="list-style-type: none"> <li>Members age 5 years and older who receive 1<sup>st</sup> or 2<sup>nd</sup> COVID Vaccine Doses during the campaign.</li> </ul>  | <b>Who is Eligible?</b> <ul style="list-style-type: none"> <li>Current eligible members for the vaccination incentive are age 5 years and older.</li> </ul>  |
| <b>Incentive Dates/Timeline</b> <ul style="list-style-type: none"> <li>Members who completed their vaccination (series) on or after 9/1/21 through 6/30/22 are eligible for a \$50 Walmart gift card. Members may attest to their (or their dependent's) vaccination status via web portal, and gift card will be provided to them.</li> </ul>  | <b>Incentive Dates/Timeline</b> <ul style="list-style-type: none"> <li>Eligible members will receive an email or direct mail with an invitation to participate</li> <li>Members who receive their first COVID vaccine dose between 11/1/21 and 1/31/22 will receive a \$50 gift card.</li> <li>Program may be extended.</li> </ul>                                    | <b>Incentive Dates/Timeline</b> <ul style="list-style-type: none"> <li>2021 pilot program dates: October 1st through January 30th</li> </ul>  | <b>Incentive Dates/Timeline</b> <ul style="list-style-type: none"> <li>First campaign from 11/1/21-2/28/22<br/>*may be extended through 6/30/22 and adapted based on campaign results and in consultation with NC DHHS.</li> </ul>   | <b>Incentive Dates/Timeline</b> <ul style="list-style-type: none"> <li>Eligible members who receive a first, second, or booster COVID-19 vaccination between 11/15/21 and 3/31/22 will receive a \$75 incentive, while rewards last.*</li> </ul>   |
| <b>Member Incentive</b> <ul style="list-style-type: none"> <li>Members will receive a Wal-Mart gift card in the amount of \$50.</li> </ul>  | <b>Member Incentive</b> <ul style="list-style-type: none"> <li>Incentive offering to all vaccine-eligible members in the form of a \$50 gift card with appropriate restrictions.</li> </ul>   | <b>Member Incentive</b> <ul style="list-style-type: none"> <li>Members who receive a series of 2 Moderna, 2 Pfizer, or 1 Johnson &amp; Johnson vaccine(s) choose from a digital or physical gift card received via U.S. postal service. Multiple card selections from retailers, restaurants, Amazon.</li> <li>Reward value: <ul style="list-style-type: none"> <li>November \$100</li> <li>December \$100</li> <li>January \$50</li> </ul> </li> </ul> | <b>Member Incentive</b> <ul style="list-style-type: none"> <li>Pfizer or Moderna 1<sup>st</sup> Shot: \$60</li> <li>Pfizer or Moderna 2<sup>nd</sup> Shot: \$100</li> <li>Johnson &amp; Johnson Single Shot: \$100</li> </ul> <p>Rewards are loaded onto the member's pre-paid CARE Card and can be used to purchase OTC health products, wellness products and healthy foods at participating retailers. Member is notified by mail when rewards are loaded to CARE Card.</p> | <b>Member Incentive</b> <ul style="list-style-type: none"> <li>Members will receive \$75 on their My Health Pays Rewards card when they receive a first, second, or booster vaccination.*</li> <li>Every member receives a My Health Pays card within two weeks of enrollment. If the member does not have a My Health Pays Rewards card, they should contact member services.</li> </ul>                |
| <b>How is it verified?</b> <ul style="list-style-type: none"> <li>WellCare of North Carolina members will attest to their vaccination status or a minor under their care's vaccination status by: <ul style="list-style-type: none"> <li>following a link to a microsite</li> <li><a href="https://wellcarewards.inspireandperform.com">https://wellcarewards.inspireandperform.com</a> entering identifier information</li> <li>entering vaccine information (vaccine brand, date of each shot depending on vaccine)</li> </ul> </li> <li>The site will perform authentication by comparing identifier information to enrollment files.</li> </ul> | <b>How is it verified?</b> <ul style="list-style-type: none"> <li>Members will attest to their vaccine status by providing name of vaccine, date received and location</li> <li>Incentive fulfillment available online or by phone</li> <li>Monitoring of vaccination rates of those receiving the incentive will be performed by comparison to state data</li> </ul> | <b>How is it verified?</b> <ul style="list-style-type: none"> <li>Proof of vaccination provided by member: <ul style="list-style-type: none"> <li>Submit a photo of CDC vaccination card via the HealthyBlueNC.com member portal</li> <li>Call Healthy Blue Member Services to verbally provide vaccination information.</li> </ul> </li> </ul>   | <b>How is it verified?</b> <ul style="list-style-type: none"> <li>ACNC tracks vaccine claims paid to pharmacies or providers</li> <li>ACNC identifies a member in a data source from the State</li> <li>Member attestation via Member Services or the secure contact form on our website <a href="http://www.amerihealthcaritasnc.com">www.amerihealthcaritasnc.com</a> and validated by ACNC</li> </ul>   | <b>How is it verified?</b> <ul style="list-style-type: none"> <li>Carolina Complete Health will use claims data to determine when members receive the vaccination and are eligible for the incentive.**</li> <li>If there was not a claim, the member can provide proof of vaccination by uploading a copy of their vaccination card online or mailing a copy to Carolina Complete Health.***</li> </ul> |
| <b>More information for members:</b><br><a href="https://www.wellcarenc.com/covid-19/count-on-me.html">https://www.wellcarenc.com/covid-19/count-on-me.html</a> [wellcarenc.com]  | <b>More information for members:</b><br><a href="https://myuhc.com/CommunityPlan/HealthWellness">https://myuhc.com/CommunityPlan/HealthWellness</a> [myuhc.com]   | <b>More information for members:</b><br><a href="https://member.healthybluenc.com/public/login">https://member.healthybluenc.com/public/login</a>   | <b>More information for members:</b><br><a href="https://www.amerihealthcaritasnc.com/covid-19/vaccine-carecard.aspx">https://www.amerihealthcaritasnc.com/covid-19/vaccine-carecard.aspx</a>  | <b>More information for members:</b><br><a href="http://www.carolinacompletehealth.com/vaccine">www.carolinacompletehealth.com/vaccine</a>   |

## Audience Response Question 2

Michelle

**How do you leverage the PHP member incentive programs with your patients?**

- A. Not aware that Managed Care offers any incentives/rewards to patients
- B. Only aware of the COVID Member Incentive Program
- C. Aware of all PHP incentive programs, but only target education for patients when there are care opportunities that align with my provider incentives
- D. Leverage the incentives to encourage preventive services (well child, vaccines, maternity visits etc.) for all eligible patients
- E. Proactively educate on all the PHP Member Rewards to support families receiving preventive services at all ages regardless of appropriateness for that patient

## Audience Response Question 3

George

**Have your patients encountered problems with accessing the PHP member incentives?**

- A. Most patients don't know that they may need to submit information for the incentive
- B. Most patients have had trouble submitting information when needed
- C. Most patients have submitted information, but they are waiting for the incentive
- D. Most patients have not experienced issues to our knowledge
- E. We haven't been asking



# Audience Response Question 4

Michael

**Which communication modalities has your practice found useful for COVID vaccine counselling?**

- A. Telephonic outreach from staff
- B. Mail (or email) campaign to inform unvaccinated members
- C. Taking time in a sick or well visit to incorporate counselling for patient/parents
- D. Public and community events where providers speak to groups
- E. Through care managers as an AMH3/CIN enabled group

# Audience Response Question 5

William

**Are there other ways that the PHPs can support you with engaging with your patients?**

- A. Targeted messaging from PHPs to share in clinical encounters (in person and/or virtual)
- B. Recommended list of high-integrity web resources that help break down myths and misinformation
- C. Specific marketing to assist members in claiming PHP incentives
- D. Nothing really – I'd prefer to do individual counseling as I am doing already
- E. I have a much better suggestion and want to share it!!

# COVID-19 Vaccine Communications

## Medical providers remain a trusted source of information on the COVID-19 vaccine

- The unvaccinated ranked talking to a nurse or doctor as a top factor to make them more likely to get vaccinated<sub>1</sub>
- 77% of parents say they trust their child's pediatrician to provide reliable information on vaccines for children<sub>2</sub>
- Vaccine counseling from a medical provider increases the likelihood that Medicaid beneficiaries for all age groups will make the decision to get vaccinated<sub>3</sub>



1. KFF COVID-19 Vaccine Monitor: Winter 2021 Update On Parents' Views Of Vaccines For Kids
2. Neimand Collaborative, November 2021 Benchmarking Research & Analysis: Wave 4 Parent Focus
3. NCDHHS: 2021 NC Medicaid Internal Analysis of Claims and Vaccination Data

# COVID-19 Vaccine Communications

Building on local and trusted networks, NCDHHS is partnering with local healthcare providers to offer virtual webinars about COVID-19 vaccines.

- These webinars give people an opportunity to learn about COVID-19 vaccination and have their questions answered live by a trusted and local medical expert.
- We make the process easy for providers. We have the presentation, provide technical assistance and customize to local needs.
- **Will you partner with NCDHHS and host a webinar on vaccines?**  
Contact [kelly.wright@dhhs.nc.gov](mailto:kelly.wright@dhhs.nc.gov)



NC DEPARTMENT OF  
HEALTH AND  
HUMAN SERVICES

Burlington Pediatrics  
Mebane Pediatrics  
By your side for a healthy future

## Understanding COVID-19 and Vaccinating Kids: NCDHHS & Burlington/Mebane Pediatrics COVID 101 Presentation

Tuesday, December 14th  
6 - 7pm EST

Tune in as Burlington/Mebane Pediatrics' Dr. Yun Boylston and NCDHHS's Dr. Susan Kansagra host a COVID 101 presentation and share more information on the recently authorized Pfizer COVID-19 vaccine for children ages 5-11. COVID-19 vaccines are the best way to protect against severe illness, hospitalization and death. Hear directly from health experts and get answers to your questions about COVID-19 and vaccinations.

*Participants will have the chance to enter a drawing for a \$100 Target gift card!*



To register:  
<https://bit.ly/3IGEEbF>

YOU HAVE A  
**SPOT.** TAKE YOUR  
**SHOT.**

MySpot.nc.gov

**Recent Presentation: Hosted by Dr. Yun Boylston, Pediatrician, Mebane/Burlington Pediatrics and Dr. Susan Kansagra, NCDHHS Section Chief for Chronic Disease and Injury**

# COVID-19 Vaccine Communications

NCDHHS is partnering with healthcare providers to talk to their local communities about staying healthy with vaccinations, boosters and masks



- NCDHHS uses automated call technology to lift-up trusted voices across the state and encourage vaccination in their communities.
- Taking 2 minutes to record a localized message about the importance of vaccination can reach thousands of people in your community.
- **Will you partner with NCDHHS and record an automated call for your community? Contact [kelly.wright@dhhs.nc.gov](mailto:kelly.wright@dhhs.nc.gov)**

# CMS Vaccine Requirements

## Interim Final Rule-Omnibus COVID-19 Health Care Staff Vaccination

- The Medicare and Medicaid Programs; Omnibus COVID-19 Health Care Staff Vaccination interim final rule (IFC) was published by the Centers for Medicare & Medicaid Service (CMS) on November 5, 2021. The IFC requires Medicare and Medicaid-certified provider and supplier types (collectively, “facilities”) that are regulated under the Medicare health and safety standards known as Conditions of Participation (CoPs), Conditions for Coverage (CfCs), or Requirements to have a process or policy in place ensuring that all staff are vaccinated against COVID-19.
- As of December 15, 2021, implementation and enforcement of the rule was preliminarily enjoined by court order in twenty-five states. North Carolina was not one of the states to which the preliminary injunction applied and CMS had indicated that it would begin monitoring and enforcing compliance for those states that were not subject to the injunction as follows: the deadline for Phase 1 is January 27, 2022 and the deadline for Phase 2 is February 28, 2022.
- **On January 13, the U.S. Supreme Court allowed the CMS vaccination mandate to go into effect by staying the previously issued injunctions.** As such, all states are now subject to the IFC. CMS has stated that the deadlines previously set for those states not subject to the injunctions will not be affected by the ruling.

## Executive Order 14042

- President Biden issued Executive Order 14042 (EO) on September 9, 2021. The EO requires federal contracts and contract-like instruments to include a clause compelling most contractors and subcontractors to comply with prescribed Covid-19 workplace safety requirements for the duration of the contract including a mandate for federal contractor employees to be vaccinated against COVID 19 by January 18, 2022. Currently CMS has not included any such clause in any of its agreements with NC Medicaid which would require NC Medicaid to require its contractors to comply. Furthermore, a nationwide preliminary injunction stopping the enforcement of the vaccine mandate for federal contractors and subcontractors in all covered contracts was issued by a Georgia federal district court on December 9, 2021. As such, no action is required by NC Medicaid contractors at this time.

If you have questions regarding these mandates, you should consult with your compliance or legal office for specific guidance.

# Questions From the Field

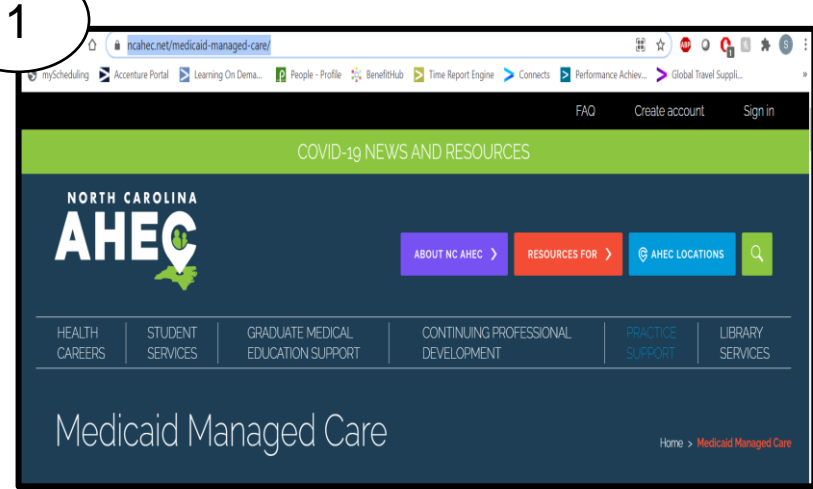


**QUESTIONS?**



# APPENDIX

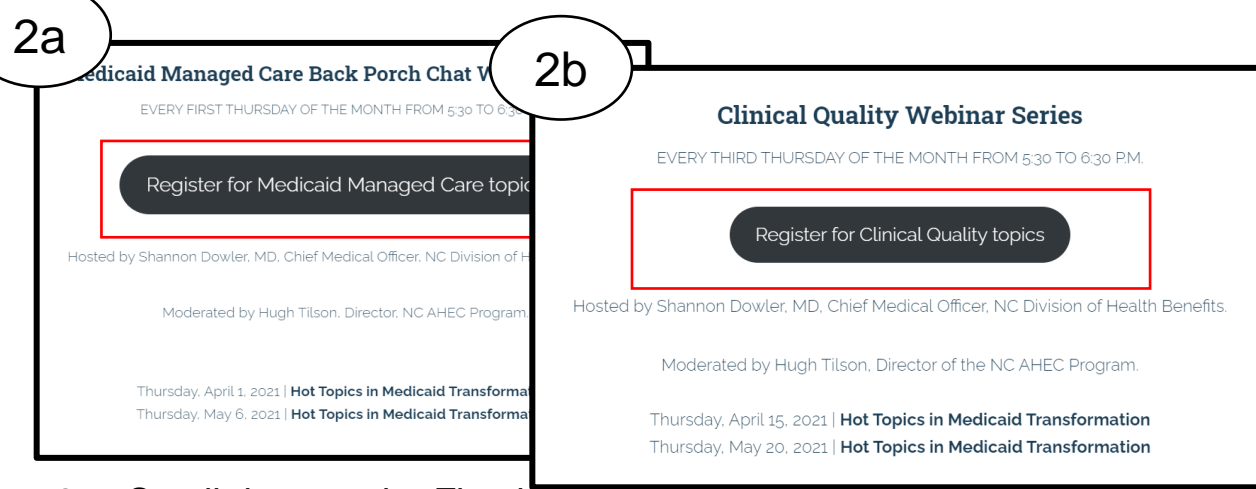
# How To Sign up for the Back Porch Chat Webinar Series



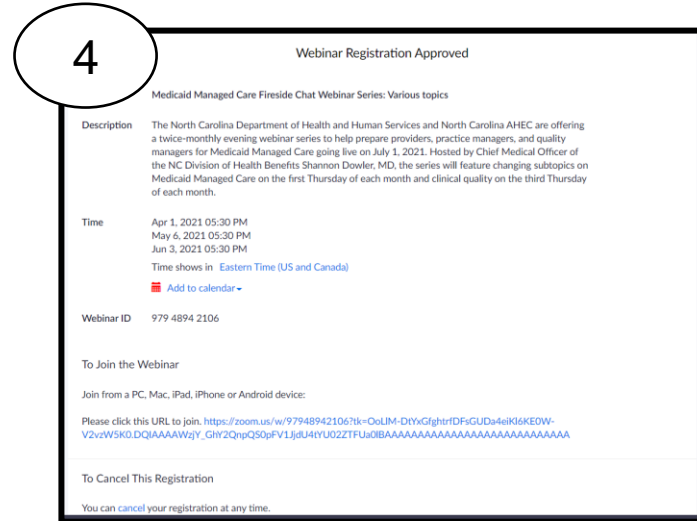
1. Navigate to the [North Carolina AHEC Medicaid Managed Care page](#)

A registration form with the following fields: 'First Name \*', 'Last Name \*', 'Email Address \*', 'Confirm Email Address \*', and 'Organization \*'. There is a red error message 'This field is required.' under the First Name field. At the bottom, there is a 'Register' button and a link to the Privacy Statement and Terms of Service.

3. Fill out all the required information and click register



2. Scroll down to the Fireside Chat Webinar Series of your choice  
2b. Click on “Register for Medicaid Managed Care topics” or “Register for Clinical Quality topics”



4. When you see this page, your registration is successful.

# Provider Resources

- **NC Medicaid Managed Care Website**
  - [medicaid.ncdhhs.gov](https://www.medicaid.ncdhhs.gov)
  - Includes County and Provider Playbooks
  - [Fact Sheets](#)
- **NC Medicaid Help Center**
  - [medicaid.ncdhhs.gov/helpcenter](https://www.medicaid.ncdhhs.gov/helpcenter)
- **Practice Support**
  - [ncahec.net/medicaid-managed-care](https://www.ncahec.net/medicaid-managed-care)
  - NC Managed Care Hot Topics Webinar Series, hosted by Dr. Dowler on the first and third Thursday of the month
- **Regular Medicaid Bulletins**
  - [medicaid.ncdhhs.gov/providers/medicaid-bulletin](https://www.medicaid.ncdhhs.gov/providers/medicaid-bulletin)



# What should Providers do if they have issues?

1

**Check in NCTracks for the Beneficiary's enrollment (Standard Plan or Medicaid Direct) and Health Plan**

If you still have questions, call the NCTracks Call Center: 800-688-6696

2

**Connect with the Health Plan (PHP) for coverage, benefits, and payment questions.**

You can find a list of health plan contact information at [health-plan-contacts-and-resources](#)  
Also, please refer to the [Day One Provider Quick Reference Guide](#) for more information on how to contact PHPs

3

**Consult with the Provider Ombudsman on unresolved problems or concerns.**

Call 866-304-7062 or email [Medicaid.ProviderOmbudsman@dhhs.nc.gov](mailto:Medicaid.ProviderOmbudsman@dhhs.nc.gov)