

**NC Providers Council** **Regulatory/ Business Practices Committee Meeting**

**March 4th @ 10:00 a.m. – 12:00 p.m.**

**Draft Minutes**

**Join Zoom Meeting:**

**REGULATORY/BUSINESS PRACTICE:**  <https://zoom.us/j/182548674>

By phone: 646-558-8656

Meeting ID: 182 548 674

**Welcome and Introductions –** *Kerri Massey & Wilson Raynor, Co-Chairs*

**Attendance –** Devon Cornett, Kerri Massey, Laurie Urland, Robin Devore, Ryan Parker, Joel Maynard, Ann Newsome, Debbie Spry, Gina Lemons, Doug Finley, Sheryl Zerbe, Anthony Devore, Kaye White, Sara Huffman, Seslie Roughton, Jessica Boles, Teri Hermmann, Lindy Davis, DeVault Clevinger, Helen Austin, Wilson Raynor, Chris Brigman, Peyton Maynard, Lee Dobson, Marika Whack, Julie Bowden, Sarah Pfau, Jan Herring, Stacy Wilson, Dawn Allen, Christopher White, Margaret Mason, Lindy Davis, Donna Heatherly, Stacy Garnett, Kenneth Bausell (11:05 to 11:50), Brad Owen (11:30 – 12:00)

**Approval of Committee Meeting** **Minutes** (*see attachment*) Wilson Raynor made a motion to approve and Devon Cornett seconded. Minutes approved unopposed.

**New at DHB –** *Kenneth Bausell*

* Appendix K update – [Special Bulletin #153](https://medicaid.ncdhhs.gov/blog/2021/01/21/special-bulletin-covid-19-153-temporary-provider-rate-increases-and-clinical-policy) talks about it to end 6 months after PHE ends which currently ends on 4/21/2021 with potential extensions to come. CMS has stated that Appendix K will continue and be backdated once finalized. Same for CAP C and CAP DA. On the TBI side they are going to allow for individuals who are related to provide services as well.
* No updates on Retainer payments. They are focused on helping people that have already maximized their 3-30 day periods.
* COVID Money & Budgeting Expectations
  + Staffing expense and Heroes Act pay into the 3rd and 4th quarters
  + Language encouraging LMEs to extend pay until State Emergency status is lifted
  + Auditing, Monitoring, and post payment review
* EVV update:
  + Version 5 spec is being released from HHA
  + Vaya and Sandhills are switching from Alpha to a new system
  + Providers need to verify the information in HHA – go to office setup and each office has a code. You need to open each office and make sure that the setup is correct. Inside the setup is the tax id, provider id, NPI and the provider zip code + 4
  + MCOs are starting to set up mandated training on EVV. Is the state requiring this or are the MCOs just doing this on their own? A lot of the trainings seem to be redundant. Kenneth believes that each MCO will tailor their training to the EVV services that the MCO provides.
  + Community component for CLS on PCS side has a geofence of 30 feet but it is not turned on.
  + Full discussion with Kenneth and providers about barriers that still concern providers about a go live at the end of this month. Discussed version 5 is still in draft and not yet available, testing not sufficient at this time, concerns with how RDSE/RADSE will be separated out, additional administrative burdens, adjustments for Appendix K, unanswered questions about scheduling, unanswered questions about IVR.

**Visitation Guidance: Discussion**

* When new guidance is coming out – Michelle Elliott referenced visitation guidance to one of our providers:
  + 1. Visitation Guidance - Currently per state and federal guidance, long-term care facilities must facilitate indoor visitation adhering to infection prevention practices if there are no new cases of COVID-19 in the facility in the last 14 days and the facility is not conducting outbreak testing. Nursing homes that are certified by CMS are required to follow applicable federal requirements and guidance on visitation as well. Given rapid declines in COVID-19 cases in facilities, many facilities meet criteria for resuming indoor visitation. In addition, facilities can conduct compassionate care visits as needed at any time per state and federal guidance. Please review your visitation policies and communicate your policy to residents and families. CMS guidance outlining visitation requirements are here and state guidelines are here. We will continue to monitor for any updates in visitation guidance from CMS and CDC.
* Vaccine requirements

**ASAM Discussion –** *(continued) further guidance needed from committee…*

* ASAM – The consensus that Joel got from others is that there is a general consensus that it is confusing and costly. There is a 2-day training that providers can’t bill for that they are discounting cost of training 3 for the price of one (but that is only good until June), but that does not cover the needed costs. Joel will work with providers to figure out the potential cost for providers to include cost of training and loss from losing 2 billing days.
* If the state purchased the ASAM training license, then the only cost to providers will be the loss of 2 days of service. The company that sells the trainings more than likely will not agree to that. The states number of clinicians that need this is 5,000. Joel would like to pose potential solutions to the state.

**Minimum wage for Individuals and supported employment**

* + Olmstead and what’s to come – There are pros and cons to discussion in this meeting and it is important if you provide these services
  + Employment committee meets Wednesdays at 3. See link below. (<https://www.zoomgov.com/j/1612416551?pwd=dGJ1MUZaTFRSTG1idHlzUWhFV05iZz09>) If you have these concerns, please join the calls. The goal is for our individual’s to be self-supported and as independent as possible, but we serve a very diverse population and independence is not always attainable for the people that we serve.
  + DOL
  + Commensurate Wages/Piece Rate
    - Resident fund balance vs. Medicaid Benefits
    - Sarah noted that individual’s that sign up for an Able account and they are exempt from Medicaid eligibility and the money that goes into the account can be used under the permissions. Part of the problem is it doesn’t change the actual earnings and it does impact the amount of hours that they can work.

**DPS Wage Increase:**

* + Advocating for a DSP wage increase (for Innovations, ICF, and State-funded services) – the study that legislation has asked for has gained momentum. Previously the ask was for a raise of wages to $15/hr but that number doesn’t necessarily work. This risk is that the legislatures hear $15 and think minimum wage raise. The ask is for the state to pay a living wage for DSPs. This has not yet been defined. The phrase we propose to use is an increase to at least $15/hr. The state also needs to hear that money needs to go the providers and not the MCOs. The subcommittee is working on the numbers for the state and what it would cost the state to get us there.
  + Doug noted that Trillium started a cost-of-living program a few years ago that they have been working with and noted that some of this can be sustainable for a proper rate.
  + You may have seen this news blurb on minimum wage. Baptist/Atrium is increasing their minimum wage to $15 in NC. Novant has always paid more than Baptist/Atrium. <https://myfox8.com/news/wake-forest-baptist-health-increasing-minimum-wage-to-15-per-hour/>. These further challenges our workforce issues.

**Shared Legislative Priorities with LME/MCOs**

* + Circulating –MCOs, NCPC, and Benchmarks was finalized. NCPC Board voted and approved it. It has also been sent out in the NCPC newsletters as well.
  + Joel noted that he is working with our partners and the board to finalize.

**New Business:**

* Medicaid Transformation enrollments starts 3/15/2021.
* CMA application due date is extended to 6/1/2021. Please make sure that you send any questions in it. Still no rates but Kellie Crosbie will be
* MLF is 3/15/2021 and the following people will be speaking: Nelson Dollar, Kellie Crosbie, Doug Urland, Dave Richard and potentially 1 or 2 others.
* Vaccine Distribution Progress: Access and Participation
  + Problems? Discussed quarantine guidelines for people that have been vaccinated and what happens after they have been vaccinated for 3 months. There continues to be a lot of unanswered questions.
  + **Mandating employee vaccination**? Full time employees? This continues to be problematic for folks.

**New in DMH/DD/SAS –** *Brad Owen*

* Most recent JCB (ASAM included)

**NCPC Network Council [LME/MCO] Update –** *Wilson Raynor*

* Alliance – no updates.
* Partners - following suit with ILO services for residential and ADVP services with one rate the same that Vaya did in the past. Kenneth noted that ILO services are built by the MCO. Kenneth and Latoya will follow-up with Partners.
* Sandhills – no updates
* EastPointe – RFI out that Laurie will send out.
* Trillium – no updates
* Vaya – They have some new and continuing service rates and enhancements and can be found on the website.
* Cardinal – no new updates today

Next meeting:  Thursday, April 4th

