

DHB ADMINISTRATIVE LETTER NO: 01-20, MEDICAID/NCHC PROCEDURES FOR COVID-19

DATE: March 20, 2020

SUBJECT: Medicaid/NCHC Procedures Due to COVID-19 Public Health
Emergency

DISTRIBUTION: County Directors of Social Services

Medicaid Supervisors

Medicaid Eligibility Staff

I. BACKGROUND

On March 13, 2020, President Donald Trump issued a proclamation declaring a national emergency concerning the Coronavirus Disease outbreak (COVID-19).

This letter contains guidance on processes for all Medicaid/NC Health Choice for Children programs to address potential issues caused by COVID-19 Public Health Emergency. As other situations are identified, further guidance will be provided.

II. SPECIAL POLICY PROCEDURES

A. Face-To-Face Interactions

Due to the declaration of COVID-19 Public Health Emergency, NCDHHS recommends that any in-person events be postponed for groups of 50 people or more. This may include closing lobbies and restricting face-to-face interactions to ensure social distancing (maintaining six feet between individuals). Guidance from CMS suggests that applicants and beneficiaries must be clearly advised of the alternate methods for contacting the county departments of social services or applying for assistance, including ePASS, telephone, mail and e-mail. Counties should make every effort to provide these methods of contact without significant wait times.

Some of the suggestions or practices that have been reported are:

1. Schedule appointments for individuals who need in-person assistance to ensure a low number of individuals are present in the county office.
2. Advise individuals to call the agency, as many of their issues may be handled by phone, e-mail or mail.
3. Stagger call center staff to expand the hours individuals may get information or assistance.

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4. Work with local IT staff to ensure telephone capacity and band width can handle the increased workload.
5. Set up specific mailbox for individuals to contact the agency.
6. Set up drop box or other method for applicants/beneficiaries to provide information.
7. Post contact information on county and agency web or social media sites and signage at the physical location, if closed to the public.

B. Case Terminations

As part of the Families First Coronavirus Response Act passed by the U.S. Congress this week, states may be eligible for an emergency increase in the Medicaid federal match rate with certain requirements.

During the COVID-19 Public Health Emergency, states must not terminate Medicaid eligibility, except for the following reasons:

1. The individual moves out of state, or
2. The beneficiary voluntarily requests termination of Medicaid benefits.

Effective immediately, do not apply changes or accept determination of ineligibility or reduction of benefits for ongoing cases except for the reasons stated above.

Work is underway with NC FAST for specific documentation process in cases that appear to be ineligible based on change in situation, either during the certification period or during renewal. Detailed instructions will be included in future guidance.

C. Self-Attestation for Eligibility Criteria

Accept self-attestation for all eligibility criteria, except citizenship and immigration status, when documentation and/or electronic sources are not available. This includes but is not limited to state residency, financial resources and medical expenses.

1. Document state residency in NC FAST by entering Written declaration from Third Party twice to satisfy the verification requirement for **Residency** on both Income Support and Insurance Affordability (MAGI) cases.
2. Document resources by entering applicant/beneficiary statement, if other documentation is unavailable. The applicant/beneficiary statement must include the number and type of resource(s), amount/value, location and name of the financial institution, if applicable.

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3. Document incurred medical bills/expenses (needed to meet spend-down for medically needy eligibility) by entering applicant/beneficiary statement, if other documentation is unavailable. The applicant/beneficiary statement must include the dates of service, provider names and the amount of the medical expenses.

The caseworker must verify in the case record that the medicals bills/expenses were not applied to a previously met deductible.

4. Enter the applicant/beneficiary statement in the NC FAST evidence and document the case notes, that the method of verification was self-attestation and notating "COVID-19, see Administrative Letter 01-20".

Self-attestation does not apply to citizenship/immigration status, as verification is required by federal regulations. However, the caseworker must apply reasonable opportunity to provide these verifications as stated in policy, if applicable.

D. State Residency - Temporary Absence

Individuals who are temporarily absent from North Carolina continue to meet state residency requirements, unless another state has determined the individual is a resident of their state. Follow the temporary absence rules in the Medicaid policy manual. Consider applicants/beneficiaries who are displaced from the state due to COVID-19 Public Health Emergency as temporarily absent when evaluating for state residency.

E. Fair Hearings - 60/90-day Timeframe

Individuals have 60 days from the date of notice to request a hearing for changes in eligibility and may be extended to 90 days for good cause. The COVID 19 Public Health Emergency will be considered as good cause for allowing 90 days to request a hearing until further notice.

F. Waiver of Enrollment Fees/Premiums

Individuals who are required to pay an enrollment fee for NC Health Choice or an enrollment fee and/or premium for Health Care for Workers with Disabilities (HCWD) will be exempt from this requirement until further notification.

Document in NC FAST the reason as "COVID-19, see Administrative Letter 01-20." Until further notice, do not request payment for enrollment fees (including unpaid balances) and/or premiums.

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G. Non-Emergency Medical Transportation

1. As a result of COVID-19 Public Health Emergency, the local department of social services (dss) agency may establish alternate arrangements to provide transportation to Medicaid covered services. In some instances, transportation may be required to a provider at a significantly greater distance or the use of a vendor or provider who is not currently under contract with the local agency.
2. Policy requires documentation on the [DMA-5048](#), Medicaid Transportation Exception Verification, from a provider when transportation is a significantly greater distance for medical reasons, limited access or continuity of care. Due to the impact of COVID-19 Public Health Emergency, the DMA-5048 will not be required until further notice. Document the transportation log/record noting “COVID-19” as the reason.
3. If a transportation vendor who is not under contract is used to provide the required transportation during this time, document the transportation log/record. Further instructions will be provided for coding to request reimbursement. This reimbursement request will be submitted to NC Medicaid and not approved for payment through NC Tracks.

H. Hawkins Extension

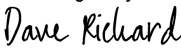
DHB is working closely with NC FAST to develop the extension requirements. Please note these extensions will be different than the Hawkins Court order extensions. Once the process is finalized, details will be included in a future Administrative Letter. The Hawkins extensions will occur as usual at the end of March.

III. IMPLEMENTATION

These policies and procedures are effective immediately for applications and recertifications. This also includes applications or recertifications currently in process.

Counties will also be notified of any changes or revisions to the above guidance.

If you have any questions regarding the guidance in this letter, please contact your [Medicaid Operational Support Team Representative](#).

DocuSigned by:

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Dave Richard

Deputy Secretary, NC Medicaid