

NCDHHS/Division of Health Benefits

NC Medicaid

Provider Contract Review

- ❖ PHPs must have provider contract templates approved by DHHS.
- ❖ The PHP Contract requires the PHPs to include certain specific provisions in their provider contracts, including some provisions which must be used verbatim.
- ❖ DHHS's approval is not an endorsement of the contract but represents that the document has been found to comply with the standards found in the PHP Contract, specifically Section VII – Attachment G.
- ❖ PHPs have ability to use proposed templates in contracting while awaiting DHHS approval, as long as provider is informed the contract could change based upon approval. Must only use approved templates once approved.
- ❖ PHPs have flexibility to design provider contract templates to meet their business needs.
- ❖ DHHS recently instructed PHPs to:
 - Review previously approved templates to ensure that all special payment provisions found in PHP Contract Section V.D.4.d. through p. were specifically addressed in the PHP's templates.
 - All PHPs will submit evidence that approved contracts contain the information and/or suggested amendments from all PHPs.
 - A PHP will incorporate the provisions into applicable provider contracts once DHHS has accepted the PHP's plan
 - For contracts with Local Health Departments (LHD) the contract shall indicate:
 - That the PHP shall reimburse enhanced role registered nurses providing EPSDT well child exams, low-risk family planning, and obstetrical services according to the enhanced local health department Medicaid fee schedule. (Section V.D.4.i.i)
 - That for PHP Contract years 1-3, the PHP shall pay in-network LHDs for Care Management for At Risk Children services an amount no less than the amount paid in the Fee-for-Service program prior to the start of the PHP Contract (\$4.56 for all enrolled children ages 0-5). (Section V.D.4.i.ii)

- That for PHP Contract years 1-3, the PHP shall pay in-network LHDs for Care Management for High Risk Pregnant Women services an amount no less than the amount paid in the Fee-for-Service program prior to the start of the PHP Contract (\$4.96 for all enrolled children ages 0-5). (Section V.D.4.i.iv)
 - That the negotiated base reimbursement amounts to in-network LHDs shall be no lower than the rates paid to non-public providers for similar services. (Section V.D.4.i.v.)
 - That the PHP shall make AUDPs in addition to base reimbursement amounts as directed in the PHP Contract. (Section V.D.4.i.vi.)
 - That the PHP shall reimburse in-network LHDs providing lab services at no less than 100% of the Medicare fee schedule unless the PHP and LHD have mutually agreed to an alternative reimbursement arrangement. (Section V.D.4.i.vii.)
- ❖ Remove all non-applicable provisions from a contract before issuance to a provider when the provision does not apply to the provider, such as provisions for primary care, AMH, or other care management provisions when the provider has not contracted to provide those services.