

Statutory Changes to Provisional Licensed Providers and LME Endorsement Process

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PROVISIONAL LICENSURE CHANGES/MEDICAID

Rationale for Legislative Proposal

The Centers for Medicare and Medicaid Services (CMS) requires that licensed professionals enroll directly with the Medicaid Program in an effort to better link payments to specific providers and to enhance program integrity efforts. Part of this effort is the elimination of certain billing mechanisms that allowed an individual to bill through another provider (e.g. “incident to” a physician or through an LME). Historically, some professions have had categories of their members, generally newly licensed individuals, use these billing mechanisms instead of enrolling directly. Without making the proposed changes, these professionals will lose the ability to bill for services, which will greatly reduce access to services for those currently being served as well as create barriers for new providers entering the workforce. These individuals meet licensure standards for their professions. The title changes provide clarification to CMS that these individuals are indeed fully licensed and not in some sort of conditional or interim status.

Development of this proposal was a fully collaborative process between the professional associations and the Department and has the full support of the associations. These changes will allow for continuity of care for individuals currently receiving services and enhance workforce development, quality, and capacity. Failure to make these changes will destabilize the provider network and significantly impact access to services and workforce quality and capacity as entire groups of providers will no longer be able to bill Medicaid for services, forcing them to cease being Medicaid providers. Enhanced accountability can be achieved through direct billing and may result in some cost savings.

Synopsis of Legislative Proposal:

The legislative proposal changes the titles of some licensed professionals to provide clarification regarding their licensure status and to meet CMS requirements. The proposal also adds the changed titles to the budget provision to allow these individuals to enroll directly with Medicaid.

Stakeholders Supporting the Proposal

- Addiction Professionals of NC
- Licensed Professional Counselors Association of NC
- National Association of Social Workers-NC Chapter
- NC Association for Marriage & Family Therapy
- NC Counseling Association
- NC Nurses Association
- NC Psychiatric Association
- NC Psychological Association
- NC Society for Clinical Social Work

**ELIMINATE THE LME/MCO-LEVEL
ENDORSEMENT PROCESS**

Rationale for Proposal:

DHHS divisions and LMEs are reviewing many of the same provider qualifications and requirements. These overlapping reviews can result in inefficiency and increased administrative burden on the part of providers. As LMEs become MCOs the endorsement process becomes duplicative with the credentialing of providers. The elimination of the LME endorsement process will prevent duplication in monitoring and reduce the administrative burden on providers.

Synopsis of Proposal:

The proposal deletes the phrase “endorsement” in the applicable general statutes.