North Carolina Department of Health and Human Services (DHHS)

Advanced Medical Home Technical Advisory Group (AMH TAG) Meeting #05 (Hybrid: In-person and Virtual)

October 27, 2026

AMH TAG Attendees:

- Coastal Children's Clinic
- North Carolina Academy of Family Physicians
- Cherokee Indian Hospital
- Community Care Physician Network (CCPN)
- Atrium Health
- Mission Health Partners (MHP)
- Carolina Medical Home Network (CMHN)
- CHESS Health Solutions
- Duke Connected Care
- ECU Health Physicians
- AmeriHealth Caritas North Carolina, Inc.
- Blue Cross and Blue Shield of North Carolina
- NC Area Health Education Centers (NC AHEC)
- WellCare of North Carolina, Inc.
- Carolina Complete Health, Inc. (CCH)
- United Healthcare (UHC)
- Children First of North Carolina

NC DHHS Staff and Speakers Name	Title
Dr. Shannon Dowler	Nurture NC Strategic Advisor
Andrea Price-Stogsdill	Senior Policy Advisor – Policy, Strategy, and Planning
Kristen Dubay	NC Medicaid Chief of Population Health
Liz Kasper	Care Delivery and Payment Reform Senior Advisor

Agenda

1. NC Nurture's Value-Added Benefits Resources
2. HOP Relaunch Designz
3. AMH-Related Medicaid Assessment
4. PCP Assignment Changes

NC Nurture's Value-Added Benefits Resources

- Materials available include brochures, posters, and a "secret shopper" survey for real-time member experience feedback.
- Feedback is shared directly with plans to identify issues and improve systems.

- Providers can guide patients to benefits during visits using QR codes; many patients are unaware of available benefits.
- Example shared: A patient discovered a gym membership benefit and was highly motivated to use it.
- Real-time resource guidance builds patient trust and improves engagement with managed care plans.
- Practices are encouraged to integrate these resources at check-in, not only during clinical visits.
- Posters and brochures are free and available via an online order form.
- Teams are distributing materials at conferences and community events across North Carolina.
- Strong public engagement has led to high social media reach and over 1,500 website views.
- Increased participation in the secret shopper survey is needed to identify service problems.
- Announcement of the upcoming "Nurture From the Start" maternal health research and policy conference next year in Cary.

- Questions and Discussion
    - Tailored Plans offer similar value-added benefits, though structured differently.
    - Current focus is on standard plans due to larger membership, but updates to Tailored Plan benefits are underway.

Healthy Opportunities Pilot (HOP) Relaunch

- Funding secured: $9M state funds + federal match, totaling ~$25M.
- Goal: Resume services as soon as possible, prioritizing populations with high potential impact on health outcomes and cost.
- Offer one service and streamlined operations due to reduced funding; most spending will go directly to service delivery, not admin costs.
- Providers asked how the relaunched program will differ from the previous, more prescriptive version.
    - State response: Expect a largely similar structure; contracts will be updated to reflect available services, populations, and other program changes.
- There will not be HOP-specific Per Member Per Month payments made to delegated care management entities as part of HOP restart. All care managers should address members' whole person health. Care management entities may refer members to plans if unable to directly support HOP needs.
- Plans will manage services within allocated funding. Plans will need to monitor authorizations against available funding.
- Services need to be provided by June 30, 2027.
- State acknowledged plans' need for clearer guidance and will follow up with webinars and other communications.

Medicaid Assessment Findings (Manatt Review)

- Assessment compared NC Medicaid to other states to identify strengths and improvement opportunities.
- Key focus areas: program sustainability, slowing cost growth, and improving care quality.
- North Carolina's Medicaid cost growth is lower than many states; share of state revenue remains stable.
- Federal match rate reductions and HR1 changes will affect long-term funding.
- Recommendation to pilot "next generation primary care" models emphasizing prospective payment to support rural practices.
- Aim to increase primary care investment and offer more financial stability to providers.
- Discussion of reconstituting the statewide primary care task force (legislatively required).
- NC Medicaid plans to strengthen statewide collaboration on maternal health, aligning with external partners and existing workgroups.
- Plans to develop clearer performance metrics for both plans and providers.
- Interest in improving case management within waiver programs and onboarding more consistent expectations.

PCP Assignment Improvements

- Updated algorithm moves claims-based history to the top priority in auto-assignment.
- Quarterly "assignment refresh" process created to correct outdated assignments.
- Guidance clarified on when member consent is or is not required for reassignment.
- Emphasis on accurate NCTracks data, clear escalation paths, and standardized reassignment request forms.
- Implementation planned for April 1, 2027.
- Age/Gender Misassignment Review
    - Analysis found overall low age/gender misassignment rates, with some practices disproportionately impacted.
    - Standard Plans were asked to review all the identified misassignments at the most impacted providers (top 5th percentile of misassignments)
    - Many apparent errors were appropriate exceptions or already corrected.
    - Plans are reassessing members and correcting true mismatches.
- Technical Barriers Identified (834/NC FAST/NCTracks Alignment)
    - Issues arise when eligibility changes cause unintended PCP unassignments.
    - State and plans will continue working on solutions; may consider flexibilities for members who temporarily lose coverage and re-enroll.

Meeting Schedule Discussion

- December meeting conflicts with a state holiday; options include rescheduling, canceling, or moving to January.
- Feedback also requested regarding continuing Monday 3–4pm meetings for the upcoming year.