

North Carolina Department of Health and Human Services (DHHS)

Advanced Medical Home Technical Advisory Group (AMH TAG) Meeting #48 (Conducted Virtually)

July 8, 2025

AMH TAG Attendees:

- 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)
- CHES Health Solutions
- Duke Connected Care
- 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
Saheedat Olatinwo	Advanced Medical Home (AMH) Program Manager
Hannah Fletcher	Program Evaluation Survey Team Lead
Eumeka Dudley	Tailored Care Management (TCM) Program Manager
Andrea Price-Stogsdill	Healthy Opportunities Pilots (HOP) Program Manager

Agenda

- Welcome and Roll Call – 5 mins
- Standard Plan Performance Comparison Tool – 15 mins
- TCM Certification for AMH Tier 3 Practices – 5 mins
- Healthy Opportunities Pilot (HOP) – 5 mins
- AMH TAG Highlight Topics – 15 mins
 - Topic: Community Health Workers in Primary Care: A Strategy for Inclusive, Equitable Healthcare and Enhanced Community Engagement
 - Presenter: Teresa Wiley, Director of Health Equity and Community Network Development, Community Care of North Carolina
- Wrap-up and Next Steps – 5 mins

Standard Plan Performance Comparison Tool

- DHHS provided an overview of the Standard Plan Performance Comparison Tool, which included its purpose, development, methodology, instructions, use cases and relevant links.
 - DHHS highlighted that Calendar Year 2024 CAHPS data and Measurement Year 2023 Quality Measure rates were used in this first iteration, since these are the most currently available data. DHHS is now receiving Calendar Year 2025 CAHPS data and Measurement Year 2024 Quality measure rates, which will take some time to be validated and finalized.
 - In future years, the goal will be to release the tool in approximately February.
 - Helpful Links:
 - [NC Medicaid 2025 Standard Plan Performance Comparison Tool](#)
 - [NC Medicaid 2025 Standard Plan Performance Comparison Tool Technical Guide](#)
 - More information on Medicaid and CHIP quality rating system requirements- <https://www.medicaid.gov/medicaid/quality-of-care/medicaid-managed-care-quality/quality-rating-system>
 - Please reach out to Medicaid.Quality@dhhs.nc.gov with any additional questions regarding the Standard Plan Performance Comparison Tool.
- AMH TAG members raised the following questions:
 - Do other states have similar tools or is this exclusive to NCDHHS?
 - DHHS noted that the creation of this tool is in preparation to meet new 2027 MAC QRS CMS requirements. Other states have similar tools. Here is an example from Washington State showing a similar 3-point comparison: [Washington Apple Health Plan Report Card](#).
 - How much impact does the Department expect this to have in Plan selection, since almost all members are auto assigned?
 - Given that this is the first iteration of the tool, DHHS cannot comment on its impact at this time. The team is working with the enrollment broker to ensure information about the tool is included in beneficiary welcome packets.
 - Would a member know what “statistically significant” means?
 - DHHS has worked diligently with our communications team to ensure the materials meet the literacy standards for beneficiary readers.
 - While this is available to members, how do you see AMH's using this to evaluate plan performance?
 - DHHS wants to reiterate that the tool is intended for use by beneficiaries only, to help them select the plan that best meets their needs. AMH's should not use this tool when evaluating plan performance or making

contracting decisions. AMH's may share the tool as a resource with members if they wish.

- Multiple AMH TAG members provided feedback that the tool may be communicating major differences between the Plans due to the 3-point scale, meanwhile the actual numeric/percentage difference in performance may be small.
 - AMH TAG members stated that the minimal difference may be difficult to communicate to members.
 - A non-arbitrary threshold was applied to each individual measure that accounts for the nuanced differences in each measure's data set. Above average performance is defined as more than one standard deviation above the Standard Plan average, average performance is defined as within (+/-) one standard deviation from the Standard Plan average, and below average performance is defined as more than one standard deviation below the Standard Plan average. While these definitions remain the same, standard deviation accounts for the differences within a measure's data set and adjusts the thresholds accordingly. This methodology was reviewed by an independent research organization to ensure it was statistically appropriate to convey above average, average, and below average differences.
 - A companion Technical Guide was published as DHHS wanted to provide transparency on the underlying methodology. DHHS worked diligently with our communications team to ensure the Technical Guide materials meet the literacy standards for beneficiary reader accessibility.
 - AMH TAG members are concerned that members are unlikely to go beyond what is presented in the tool to decide which may penalize plans that appear lower, even if it is a small difference.
 - The tool makes the most current data more accessible and empowers beneficiaries to make informed decisions; it is not intended to penalize any plans. The methodology employed ensures a non-arbitrary threshold was applied to each individual measure that accounts for the nuanced differences in each measure's data set. Additionally, DHHS has chosen to include many measures to provide robust options for beneficiaries and highlights plan strengths across domains. The tool compares plan performance against each other, and beneficiaries will be able to select plans based on the services most important to them. There are many factors that may influence a health plan choice for a beneficiary, and this will likely only be one component of that decision.
 - AMH TAG member suggested using a 1-100 scale to be more useful to patients.
 - DHHS appreciates all the feedback from AMH TAG members and will continue to gather feedback from other forums. DHHS solicited input from a wide range of stakeholders including members directly and

Standard Plan Quality Directors in developing the tool and the final methodology that was presented at the 7/8/25 AMH TAG call. DHHS will continue to iterate and improve the tool in future years. It is important to remember that the tool is beneficiary-facing, and meant not to capture overall performance, but relative performance from plan to plan, so that beneficiaries can make meaningful and informed decisions.

TCM Certification for AMH Tier 3 Practices

- DHHS notified the AMH TAG that the application period for Round 4 of TCM Certification for AMH+ applicants is July 15, 2025 - September 1, 2025.
 - DHHS provided additional information on the certification process and eligibility requirements.
- AMH TAG member asked the following question: Are there any changes to the potential role of CINs in AMH+ round 4?
 - DHHS noted that there are no changes to the role of CINs in AMH+ round 4 TCM certification. Tailored Plans will continue to contract with AMH practices that decide to contract with CINs for support.
- Please share any TCM related questions to: Medicaid.TailoredCareMgmt@dhhs.nc.gov

Healthy Opportunities Pilot (HOP)

- DHHS noted that HOP services have stopped as of July 1, 2025 due to the absence of funding in the state budget for State Fiscal Year (SFY) 2026 – 2027. DHHS continues to be in close conversation with the North Carolina General Assembly and will notify stakeholders of updates, if any.
- DHHS provided a summary of HOP services outcomes through May 31, 2025 and immediate next steps.

Community Health Workers in Primary Care: A Strategy for Inclusive, Equitable Healthcare and Enhanced Community Engagement

- Teresa Wiley, Director of Health Equity and Community Network Development at Community Care of North Carolina, presented their approach to increase member engagement through the community health worker (CHW) expansion strategy.
- CCNC highlighted that CHWs are recruited based on the geographical areas of member outcome data. CHWs are trusted community members with shared life experiences with members to find and link them to AMHs.
- CCNC showcased a success story from Hodges Family Practice Community Partnerships to address health barriers and coordinate outreach efforts.

Wrap-up and Questions

- N/A