North Carolina Department of Health and Human Services (DHHS)
Advanced Medical Home Technical Advisory Group Data Subcommittee Meeting #3
October 3, 2019

Meeting Attendees	Organization
AMH TAG Data Subcommittee Members, Designees, and North Carolina DHHS	
Adam LoCasale (*by phone*)	AmeriHealth Caritas North Carolina, Inc.
Seth Morris (*in-person*)	Blue Cross and Blue Shield of North Carolina
Carla Slack (*in-person*)	Blue Cross and Blue Shield of North Carolina
Stephanie Boschenreither (*by phone*)	Carolina Complete Health, Inc.
Amy Fromm (*in-person*)	Carolina Complete Health, Inc.
Julie Ghurtskaia (*in-person*)	Carolina Complete Health, Inc.
Barbara Williams (*in-person*)	Carolina Complete Health, Inc.
Rick Doten (*in-person*)	Carolina Complete Health, Inc.
Mark Massing (*by phone*)	Carolina Medical Home Network
Kristen Dubay (*in-person*)	Carolina Medical Home Network
Lauren Lowery (*by phone*)	Carolina Medical Home Network
Chris Danzi (*in-person*)	Carolinas Physician Alliance (Atrium)
Jason Durham (*by phone*)	Carolinas Physician Alliance (Atrium)
Carlos Jackson (*in-person*)	Community Care Physician Network (CCPN)
Christoph Diasio (*by phone*)	CCPN
Greg Adams (*absent*)	CCPN
Anna Boone (*in-person*)	CCPN
Mary Schilder (*in-person*)	Duke
Tara Kinard (*absent*)	Duke
Brad Horling (*by phone*)	Emtiro Health
Ryan Maccubbin (*by phone*)	Mission Health Partners
Shaun McDonald (*by phone*)	UNC Alliance Network
Michael Rogers (*in-person*)	UnitedHealthcare of North Carolina, Inc
Cybele Kanin (*by phone*)	UnitedHealthcare of North Carolina, Inc.
Nathan Barbur (*in-person*)	WellCare of North Carolina, Inc.
Jagruti Ajvalia (*by phone*)	WellCare of North Carolina, Inc.
Kelly Crosbie (*in-person*)	DHHS
Shannon Dowler (*in-person*)	DHHS
Jessie Tenenbaum (*in-person*)	DHHS
Sateesh Venumbaka (*by phone*)	DHHS
Amanda Van Vleet (*in-person*)	DHHS
Kelsi Knick (*in-person*)	DHHS
Aaron McKethan (*by phone*)	Advisor to the State
Vikas Gupta (*in-person*)	Accenture
Public Attendees	
Damali Alston (*by phone*)	Alliance Health Plan
Joey Dorsett (*by phone*)	Alliance Health Plan
Sherry Perkins (*by phone*)	Alliance Health Plan
Monica Portugal (*by phone*)	Alliance Health Plan
Jon Copley (*in-person*)	Centene Technologies

Meeting Attendees	Organization
Ted Rooney (*by phone*)	Health and Work Outcomes
Amy Bedingfield (in-person)	i2i Population Health
Tameka Bates (*by phone*)	My Health NC
Nick Brown (*by phone*)	UnitedHealthcare of North Carolina, Inc.
Andrew D'Onofrio (*by phone*)	Vaya Health

Manatt Health Strategies Facilitators:
- Jonah Frohlich (*by phone*)
- Lammot du Pont (*in-person*)
- Edith Stowe (*in-person*)
- Bardia Nabet (*in-person*)

Agenda
- Welcome and Re-Introductions
- Recap of Data Subcommittee #2
- Update on Testing/Implementation of Beneficiary Assignment and Encounter Data
- Availability and Use of Financial Data to Support Care Management and Value-Based Payment (VBP): Research Findings and Discussion
- Other Data Topics to Address

Please refer to the 10/3/2019 Advanced Medical Home Technical Advisory Group (AMH TAG) Data Subcommittee slide deck, available [here](#).

Welcome, Re-Introductions, and Recap of Data Subcommittee Meeting #2 (slides 1 – 8)
Ms. Kelly Crosbie of the North Carolina Department of Health and Human Services (DHHS) convened the meeting at 10:00 am and welcomed meeting attendees. Ms. Crosbie reviewed the meeting objectives (**slide 2**) and led a rollcall of attendees participating both in person and via phone, and introduced DHHS staff and advisors (**slide 5**). Ms. Crosbie then proceeded to review the key takeaways and next steps from the previous Data Subcommittee meeting on 8/21/2019. Ms. Crosbie then transitioned to an update on AMH beneficiary assignment and encounter data testing and implementation.

Update on Testing/Implementation of Beneficiary Assignment and Encounter Data (slides 9 – 14)
Ms. Crosbie reviewed the updated Medicaid Transformation milestones for Prepaid Health Plan (PHP) Regions 1 – 6 (**slide 10**). Ms. Crosbie reinforced that although the timing of Managed Care launch has been extended, PHPs and AMHs are still actively working to prepare for beneficiary assignment. She highlighted that provider contracts must be signed by mid-November in order for providers to be included in auto-assignment. Ms. Crosbie then asked Mr. Vikas Gupta, of Accenture, to review the updated timelines for implementation and testing of: 1) beneficiary assignment, 2) pharmacy lock-in, and 3) claims and encounter data specifications (**slides 11 – 13**). With respect to claims and encounter data specifications, Data Subcommittee Members asked for clarification regarding the sharing of claims and encounter files and whether they could send both in a single file. Mr. Gupta clarified that testing partners could share both claims and encounters in a single file. Data Subcommittee Members also requested clarification on the differences between dates for the production release of claims and encounter data (**slide 13**). Mr. Gupta clarified that on 1/26/2020, PHPs are expected to share historical claims information, whereas on 2/17/2020, PHPs would be transmitting encounter data as well. However, PHPs may share encounter data

earlier than the 2/17/2020 date, if they choose to do so. Mr. Gupta then asked Ms. Crosbie to discuss the process for updating AMH data specification guidance and updates since the last meeting (**slide 14**).

Research Findings and Discussion on Use of Financial Data (slides 15 – 20)

Ms. Crosbie and Mr. du Pont, of Manatt Health Strategies, led the discussion on the availability and use of financial data to support care management and VBP. Ms. Crosbie reviewed the impetus for this discussion and the Department's initial decisions (**slide 16**):

1. The Department's initial decision to not require PHPs to include payment amounts in the line-level encounter data they transmit to Tier 3 AMH practices, clinical integrated networks (CINs)/other partners.
2. The Department's initial specification guidance for PHPs' transmission of encounter data to Tier 3 AMH practices, CINs/other partners did not include fields for payment-related information.

Ms. Crosbie stressed that the Department's goal for its decision making was to ensure that providers have actionable and appropriate information to support both their care management efforts and participation in VBP. To assess options, the Department researched how financial information is accessed by Medicaid stakeholders in other states share and PHPs' and CINs' current and planned approaches to transmit and utilize financial information (**slide 17**).

Mr. du Pont then reviewed the research process and key findings from discussions with six states on how financial information is shared between the Medicaid agencies, payers, and providers (**slide 18**). Mr. du Pont noted that only one of the six state Medicaid agencies interviewed, New York, had a mandate that required managed care organizations (MCOs) to transmit "complete, accurate, and timely" payment information. However, New York Medicaid staff noted that the terms "complete, accurate, and timely" have yet to be fully defined. PHP Data Subcommittee Members validated this research and noted that New York also anonymizes payment amount information.

Mr. du Pont then discussed the research process, interviewees, and key findings from discussions with PHPs and CINs on accessing financial information for care management and VBP (**slide 19**). Mr. du Pont noted that although payment amounts are an important input for some CINs' risk stratification methods, they are not the sole driver for care management. Mr. du Pont also emphasized that PHPs are eager to transmit actionable and appropriate financial information, and work to ensure that their contracts have minimal non-disclosure requirements. Data Subcommittee Members not interviewed were asked if they agreed with the findings, and they agreed with the Department's research.

Ms. Crosbie then discussed the Department's proposal to modify the current encounter specification to include three new fields at the header and line levels (**slide 20**). However, the Department will neither mandate nor prohibit PHPs' transmission of financial information in the required data fields. Rather than establishing a mandate, the Department seeks to provide PHPs with the flexibility to determine how best to share financial information with providers. Ms. Crosbie then asked Data Subcommittee Members whether they would prefer to have the AMH encounter data specifications updated now, during the current testing period, or after Managed Care Launch (2/1/2020). Data Subcommittee Members overwhelmingly agreed that any updates to the format and layout of the specifications should occur before testing is complete and prior to Managed Care Launch. Members also recommended that the fields be added to the end of the specification for ease of updates to their systems. The Department agreed to revise the current encounter specification to include the new fields for financial information and release the layouts to PHPs by 10/4/2019 and the revised specification guidance by 10/11/2019.

Other Data Topics to Address (slides 22 – 25)

Ms. Crosbie then discussed the Department's approach and actions to address future AMH data topics (**slide 23**). Ms. Crosbie reviewed the status of AMH data topics that are currently being addressed (**slide 24**). Ms. Crosbie explained the purpose of the Care Management Encounter Beneficiary Extract: the Department needs a data collection tool to help it conduct a robust evaluation of the provision of local care management through the AMH model. She also discussed the Department's current efforts with the PHPs to refine and streamline the Care Management Encounter Beneficiary Extract template. Ms. Crosbie noted that the Department is working to finalize the updated template by the end of the month.

Ms. Crosbie and Mr. du Pont then reviewed the prioritization of future AMH data topics and noted the differences between the suggestions from Data Subcommittee Members and AMH TAG Members at previous meetings (**slide 25**). Mr. du Pont reviewed the process for polling of AMH data topic priorities and invited Data Subcommittee Members to provide feedback on their priorities and other data topics that may not be addressed in the survey. Data Subcommittee Members noted the following:

- Members requested that the Department include information on the relevant requirements for the timing of data collection and/or sharing of information in the survey transmittal materials.
- Members identified that there may be a lag in sharing of data and requested that the Department consider opportunities to advance application programming interfaces (APIs) or other "real-time" methods for data transmittal (e.g., HL7 and FHIR). While other Members acknowledge the benefits of moving towards these standards, they also emphasized that any push for more real-time standards would require development time and resources. Ms. Crosbie stressed the Department's interest in consistency across stakeholders for data transmission while also ensuring that the standards are flexible for those who wish to develop alternative arrangements and more real-time standards.

Public Comments (slide 26)

Ms. Crosbie then opened the floor to public comment. Dr. Aaron McKethan, advisor to the State, requested a level-setting of the current admission, discharge, and transfer (ADT) access and receipt requirements in the AMH program. Ms. Crosbie stressed that AMHs and PHPs are required to have access to ADT data feeds and the ability to receive alerts of ADT information, but the Department does not identify which vendor or source of information they must utilize. Data Subcommittee Members stressed an interest in understanding how others are accessing ADT information and suggested that the Department consider performing additional outreach to determine: 1) which vendor and vendor products are used, 2) what frequency with which they are received, 3) how they are incorporated into care management data systems, 4) challenges encountered, and 5) potential challenges for accessing or receiving ADT data feeds and/or alerts. The Department agreed with the request and noted that they would follow up with an additional request for information.

Next Steps (slide 28)

Ms. Crosbie then highlighted next steps (**slide 28**):

- Data Subcommittee Members are to share key takeaways with stakeholders.
- Data Subcommittee Members are to identify the appropriate respondent and complete the AMH data topic prioritization survey, which the Department will share by 10/4/2019.
- The Department will release updated AMH encounter data layouts to PHPs by 10/4/2019 and revised specification guidance by 10/11/2019.
- The Department will finalize and share pre-read materials for the next AMH TAG meeting (10/16/2019 from 11:30 am to 2:30 pm).

- The Department will follow up with Data Subcommittee Members to understand considerations for accessing and receiving ADT data feeds and/or alerts.

Members are encouraged to send any additional feedback or suggestions to Kelly Crosbie (Kelly.Crosbie@dhhs.nc.gov) of NC DHHS.

The meeting adjourned at 12:30 pm.