North Carolina Department of Health and Human Services (DHHS)
Advanced Medical Home Technical Advisory Group (AMH TAG) Data Subcommittee Meeting
December 5, 2023, 3:30-5:00 PM ET

Attendees:

AMH TAG Data Subcommittee Members	Organization Type
Blue Cross and Blue Shield of North Carolina	Health Plan
Carolina Complete Health	Health Plan
UnitedHealthcare Community Plan of North Carolina	Health Plan
WellCare of North Carolina	Health Plan
Atrium Health Wake Forest Baptist	Provider (CIN)
Community Care Physician Network (CCPN)	Provider (CIN)
Duke Health [Duke Connected Care]	Provider (CIN)
ECU Health [Access East]	Provider (CIN)
Mission Health Partners	Provider (CIN)
North Carolina Community Health Center Association [Carolina Medical Home Network]	Provider (CIN)
Children First of NC	Provider (Independent)
Sandhills Pediatrics	Provider (Independent)
Blue Ridge Pediatrics	Provider (Independent)
Cherokee Indian Hospital Authority	Tribal Option
NC DHHS Staff and Speaker	**Title**
Kristen Dubay	Chief Population Health Officer
Loul Alvarez	Associate Director
Chameka Jackson	Senior Program Manager
Saheedat Olatinwo	AMH Program Lead
Evelin Lazaro	AMH Program Specialist
Advisors	**Title**
Vik Gupta	Medicaid Transformation Project Executive, Quality & Population Health, Accenture
Sachin Chintawar	Medicaid Transformation Project Manager, Quality & Population Health, Accenture
Gigi Cloney	Medicaid Transformation Project Management Lead, Quality & Population Health, Accenture
Lammot du Pont	Senior Advisor, Manatt Health Strategies

Agenda

- Welcome
- Progress on Data Issues
    - Risk Stratification Guidance
    - PHP-AMH Data Transmission Timing Standardization
    - Claims Interfaces
    - Beneficiary Assignment
- AMH Data Topics Prioritization
- Public Comments
- Next Steps

Progress on Open Data Topics (Saheedat Olatinwo)

Key Takeaways
- The Department provided a progress update on four data topics:
  - Risk Stratification Guidance
  - PHP-AMH Data Transmission Timing Standardization
  - Claims Interfaces
  - Beneficiary Assignment

Progress on Data Issues: Risk Stratification Guidance (Saheedat Olatinwo)

Key Takeaways
- Standard Plans and AMH Tier 3 practices and CINs reported difficulty interpreting and using risk stratification information they receive due to: (1) variability in risk categorization and (2) lack of information on how to interpret the risk categorization.

- The AMH TAG Data Subcommittee recommended the Department to: (1) improve the interpretation of key terms, and (2) improve communication of risk stratification approaches.

- The Department has developed Risk Stratification Guidance to require PHPs to share descriptions of their risk stratification approaches with AMH Tier 3 practices and CINs in a standard format and manner. AMH TAG Data Subcommittee Members provided feedback on draft Risk Stratification Guidance earlier this year.

- The Department will finalize the Guidance once the winter Standard Plan contract amendment becomes effective. Upon publication, Standard Plans will be required to transmit a description of their risk stratification approach with AMH/CINs by June 30, 2024 and annually thereafter.

Discussion/Feedback from AMH TAG Data Subcommittee Members
- **Comment:** Several AMH TAG Data Subcommittee Members suggested Standard Plans to describe when their risk stratification approaches may differ between adults and children.
  - **Response:** As part of the Risk Stratification Guidance requirements, Standard Plans will be required to describe any differences in their risk stratification approaches by sub-population, which may include segmentation by age.

PHP-AMH Data Transmission Timing Standardization (Sachin Chintawar)

Key Takeaways
- Standard Plans have different schedules for sharing standard AMH data interfaces between them, AMHs and/or their CINs/Data Partners.

- Receiving data on differing schedules impacts AMH/CINs' ability to:
  - Efficiently execute downstream processes (e.g., automated ETL) to provide more complete, accurate, and timely data to their care managers; and
  - Provide timely updates to their care management systems, creating a data lag in what is getting reported back to the Standard Plans.

- To address these challenges, the Department plans to update the AMH Data Specifications to provide descriptive guidance for standardized file generation and data delivery transfers between Standard Plans and AMH/CINs. The updated data specifications will:
  o Implement a long-term, structural solution to resolve core data reporting issues raised by AMH/CINs;
  o Streamline when data moves from Standard Plans and AMH/CINs, improving data timeliness; and
  o Align data interface exchange timelines across care management programs (AMH/Standard Plans, Tailored Care Management/Tailored Plans).

- To inform implementation activities, the Department will convene an "AMH Interface Timeline Standardization Workgroup" to understand concerns and identify solutions around resource constraints, costs, and technological challenges related to implementation.
  o The Workgroup will be tasked with (1) reviewing current data interface transmission schedules; (2) identifying key considerations and challenges with implementation of a standard data interface transmission schedule; and (3) developing recommendations to address identified challenges.
  o The Workgroup will consist of the following AMH partners: all Standard Plans and selected CINs and independent AMH Tier 3 practices, of various sizes by members served.
  o The Workgroup will host its kickoff meeting in December 2023 and conclude activities by March 2024.

Discussion/Feedback from AMH TAG Data Subcommittee Members
- **Comment:** An AMH TAG Data Subcommittee Member thanked the Department for the collaborative approach to addressing considerations for AMH partners to standardize data transmission timing.
  o **Response**: The Department appreciates the feedback and looks forward to the Workgroup discussions.

- **Comment:** An AMH TAG Data Subcommittee Member requested clarification on how Workgroup members were selected and if additional organizations can volunteer to join the Workgroup.
  o **Response:** Workgroup participants were selected by the Department to represent a diverse range of perspectives. The Department limited participation to selected organizations to better engage and facilitate discussions among Workgroup participants. In the meantime, the Department will continue to provide general updates and solicit feedback from AMH TAG Data Subcommittee Members about this issue.

- **Comment:** An AMH TAG Data Subcommittee Member asked whether the Workgroup would also consider data interface enhancements for the AMH program similar to those deployed for Tailored Care Management.
  o **Response**: The scope of the Workgroup is limited to identifying and building alignment on key considerations and decisions for standardizing AMH data transmission timing. The Department will separately track and consider additional enhancements to the data interfaces.

Claims Interfaces (Madhu Patel)

Key Takeaways

- AMH/CINs have raised data quality and completeness concerns for claims files transmitted by Standard Plans, including:
    - Inconsistency in populated fields across Standard Plans;
    - Mismatched information between header and line files; and
    - Incomplete or missing data.

- The Department has identified the following root causes for this data issue:
    - Ambiguity in requirements to populate fields shared across AMH partners
    - Varying data completeness definitions for claims and identifying information across header and line files

- To help improve the data quality of claims interfaces, the Department plans to update the AMH claims interfaces data specifications to:
    - Provide standardized guidance on required, optional, and situational data elements; and
    - Create a "single source of truth" checklist for the claims interface that provides consistency across all partners.

- These data specifications updates will apply to all claims interfaces and are expected to:
    - Remove ambiguity for required and optional data elements;
    - Define standardized specifications to streamline data consumption; and
    - Improve data completeness across all Standard Plans.

Discussion/Feedback from AMH TAG Data Subcommittee Members

- **Comment:** An AMH TAG Data Subcommittee Member noted challenges with claims data exchange among individuals with non-Medicaid primary insurance.
    - **Response**: The Department appreciates the feedback and requests the Data Subcommittee Member submit additional detail to the Department for troubleshooting.

- **Comment:** An AMH TAG Data Subcommittee requested the Department also consider inconsistencies in claims file formats between Standard Plans and impacts on transitions of care.
    - **Response:** The Department agrees with the suggestion. The Department anticipates that the proposed updates to the AMH claims interfaces data specifications will include both plan-to-plan and plan-to-provider data exchange and consider data exchange for transitions of care.

- **Comment**: An AMH TAG Data Subcommittee Member noted variance in whether certain data elements, such as substance use disorder diagnoses and other sensitive data, are shared downstream from health plans to providers.
    - **Response**: The Department will review the feedback.

Progress on Data Issues: Beneficiary Assignment (Loul Alvarez)

Key Takeaways
- AMH/CINs reported that PHPs have assigned members to providers who do not serve the member population type (e.g., an adult assigned to a pediatric practice) or who are not accepting new patients (e.g., assignment exceeds the provider's panel size limits). Many of these misassignments may be due to errors in Standard Plans' auto-assignment algorithms.

- The Department will conduct an end-to-end audit of Beneficiary Assignment processes to monitor the accuracy of Standard Plans' auto-assignment algorithms and validate complete and timely transmission of the Beneficiary Assignment file.

Discussion/Feedback from AMH TAG Data Subcommittee Members
- **Comment**: Several AMH TAG Data Subcommittee Members (CINs) confirmed that they were currently receiving these incorrect assignments and asked for clarification on the process to remove these members from their patient panels.
  - **Response:** The Department appreciates the feedback. Providers should submit a Help Center ticket, which will allow the Department to track and work with Standard Plans to resolve the data issue.

- **Comment**: Several AMH TAG Data Subcommittee Members (CINs) provided feedback on additional issues observed with the Beneficiary Assignment file, including (1) inconsistent use of maintenance type codes and (2) members suddenly dropped from the file. Other AMH TAG Data Subcommittee Members (Standard Plans) suggested that some of the panel variation may be due to extensions of a Member's eligibility termination date after the initial termination date may have passed.
  - **Response**: The Department is taking a comprehensive approach to track, prioritize, and address Beneficiary Assignment data issues. The end-to-end audit of Beneficiary Assignment processes will provide additional detail into the nature and frequency of data format, completeness, and accuracy of Beneficiary Assignment data exchange.

- **Comment**: An AMH TAG Data Subcommittee Member requested clarification on whether a member who has an established relationship with a health system but assigned to a different provider would be considered incorrectly assigned.
  - **Response**: Additional data is needed to determine if the patient was incorrectly assigned. For example, if the member had actively selected the health system but was not assigned to the health system for an unacceptable reason, then the patient would have been incorrectly assigned. If no active selection was made but a different assignment was made, then the assignment may have been correct but suboptimal.

- **Comment**: An AMH TAG Data Subcommittee Member (CIN) noted that some Medicaid enrollees appear on the inbound Patient Risk List but are not included on the Beneficiary Assignment file.
  - Response: The Department appreciates the feedback and will investigate the frequency of this issue as part of the end-to-end audit of the Beneficiary Assignment file transmission and auto assignment algorithms.

- **Comment**: One AMH TAG Data Subcommittee Member (Standard Plan) noted that their auto assignment algorithms primarily considered panel restrictions data found in the Provider Enrollment File (PEF).
  - o Response: The Department appreciates the feedback and reminds all providers to ensure panel restrictions are up-to-date and accurately recorded in NCTracks.

AMH Data Topics Prioritization: AMH Data Topics Survey Refresh (Chameka Jackson)
Key Takeaways

- The Department previously administered an AMH Data Topics Survey in February 2022 to collect information on AMH data issues and their relative prioritization. As part of the survey, AMH Data Subcommittee Members were asked to comment on the nature and root causes on data issues and describe the issue's impact on operations and urgency for resolution.

- The Department used the feedback collected from the AMH TAG Data Subcommittee to inform the Department's efforts to address high-priority data topics. Since the initial survey was conducted, the Department has worked closely with AMH partners to develop and implement solutions to address high-priority data issues.

- Given the substantive progress since 2022, the Department seeks to refresh the AMH Data Topics Survey to collect new feedback on current data topics and to understand the current prioritization of these data topics.

Discussion/Feedback from AMH TAG Data Subcommittee Members

- **Comment**: AMH TAG Data Subcommittee Members suggested Medicaid unwinding and the Children and Families Specialty Plan (CFSP) as additional topics for inclusion in the Data Topics Survey.
  - o **Response:** The Department appreciates the feedback.

Public Comments (Evelin Lazaro)
Discussion/Feedback from AMH TAG Data Subcommittee Members

- **Comment**: One AMH TAG Data Subcommittee Member asked whether the Provider Data Management / Credentialing Verification Organization module of the Medicaid Enterprise System will replace NCTracks.
  - o **Response**: The Department anticipates some but not all activities will transition to the new module.

Next Steps (Evelin Lazaro)

- AMH TAG Data Subcommittee Members to provide additional feedback on today's discussion to: medicaid.advancedmedicalhome@dhhs.nc.gov.

- The Department to post a presentation and summary of meeting on the DHHS website.

- The next AMH TAG Data Subcommittee meeting is scheduled for March 5, 2024.