North Carolina Department of Health and Human Services (DHHS)

Advanced Medical Home Technical Advisory Group (TAG) Data Subcommittee Meeting #1 (Conducted Virtually)

February 08, 2022

AMH TAG Data Subcommittee Lead Members	Organization
Carla Slack	Healthy Blue
Matthew Lastrina	Coastal Horizons Center
Nathan Barbur	WellCare
Debra Roper	Viadent Health
Shaun McDonald	UNC Health
Cynthis Reese	MHP
Brad Horling	Emtiro Health
Carlos Jackson	CCPN
Misty Hoffman	Wake Health
Mary Schilder	Duke
NC DHHS Staff Members	**Title**
Kelly Crosbie	Chief Quality Officer NC Medicaid, Quality and Population Health
Jahaziel Zavaleta	Senior Program Manager, NC Medicaid, Quality and Population Health

Agenda

- Welcome and Roll Call
- AMH Data and HIT Overview
- Objectives & Role of the AMH TAG Data Subcommittee
- Known Data Concerns and Recent Resolution Activities
- Data Topics for Discussion
    - PHP & AMH Interface Timing Standardization
    - PHP and CIN Data Quality
- Public Comments
- Next Steps

Meeting Discussions
Known Data Concerns and Recent Resolution Activities

➢ **Would there be consideration for a roster assignment file to reconciling the current Beneficiary Assignment file?**

During our testing setup at PHP launch, we did not test the reconciliation process however this has been part of the Data Specification Guide where we recommend how the reconciliation should occur. The Department would like feedback if these specification documents needed to be updated or clarified.

Patient Risk List

> ➢ **Are data inconsistencies just the outbound file from PHPs to AMHs/CINs or do we see issues in both the Inbound and Outbound PRL?**

The Department has received inputs on data inconsistencies in both the outbound (PHPs to AMHs) and inbound (AMHs to PHP) files.

Health Plans have requested consistency in the way the data is being populated in the PRL coming back from the AMHs. There is opportunity to refine the process as well as develop training to support better consistency in data being shared between PHPs and AMHs through the PRL.

There is a need to update the Patient Risk List or provide additional training to help utilize the Patient Risk List between PHPs and AMHs

Regarding the PRL, there is no doubt opportunity to improve the data included in those files to paint a more complete picture of AMH CM activities, but there is also opportunity to improve *consistency in interpretation* of the data that AMHs populate in our outbound PRL files.

Data Topics for Discussion

PHP and AMH Interface

What does Standardization mean – does it mean to a set day and not the hour?

Time window would be helpful so that downstream receiving entities can schedule accordingly.

Healthy Blue acknowledged that this is not an easy task and not a high priority compared to some of the other data priorities. The changes impact internal processes and are dependent on upstream processes

Potential Pathways

- Tend to agree that Data Quality as priority compared to standardized schedule. Plans would like the state to provide a schedule for the PHPs to react to.
- CINs noted that post Tailored Plan launch they will have to struggle with aligning with 6 additional Plan schedules which will become extremely challenging.
- Based on lessons learnt with the Standard Plan Launch, for Tailored Plans the Department's data specification document identifies data transfer windows for each data interface.
- The Department has also suggested that the committee could discuss priority data interface standardization as an option beyond what was presented.

PHP and CIN Data

CINs could get access to consolidated member list associated with practices.

CIN panel report is not an option at this point, based on the inputs from the Data Subcommittee, this can be achieved as part of a long-term solution.

Some AMHs are contracted with CINs and others are not. There is a constant moving target as AMH-CIN relationships change which could complicate the solution approach.

The Department as part of designing a solution will setup clear expectation on data maintenance and data refreshes.

Additional Comments

Some of the quality measures that plans are required to monitor do not have a consistent data source for. While the contract language suggests that PHPs can request additional data, Plans request that this could be made consistent across all PHPs.

Data Source consistency should be something that the AMH Data TAG subcommittee will add as part of our future discussion.