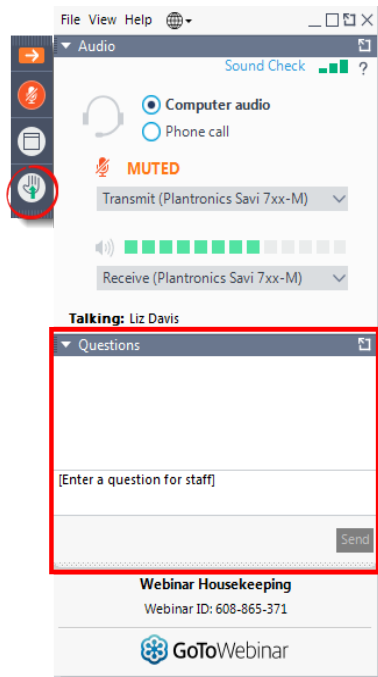


Behavioral Health I/DD Tailored Plan Update

October 28, 2020

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Today's Agenda

- Overview of Medicaid Transformation in North Carolina
- Behavioral Health I/DD Tailored Plan Design
 - Eligibility and Enrollment
 - Benefits
 - Care Management
 - Community Inclusion
 - Quality
 - State-Funded Services
- What's Next?

Overview of Medicaid Transformation in North Carolina

What is happening in NC Medicaid?

North Carolina is changing how most beneficiaries get Medicaid. Beginning in July 2021, most people will get the same Medicaid services, but in a new way—through health plans.

NEW

NC Medicaid Managed Care

- Name for new Medicaid program
- Offered by “**health plans**”
- One health plan for most of your health services, including physical health, behavioral health, and pharmacy and addressing unmet health related resource needs

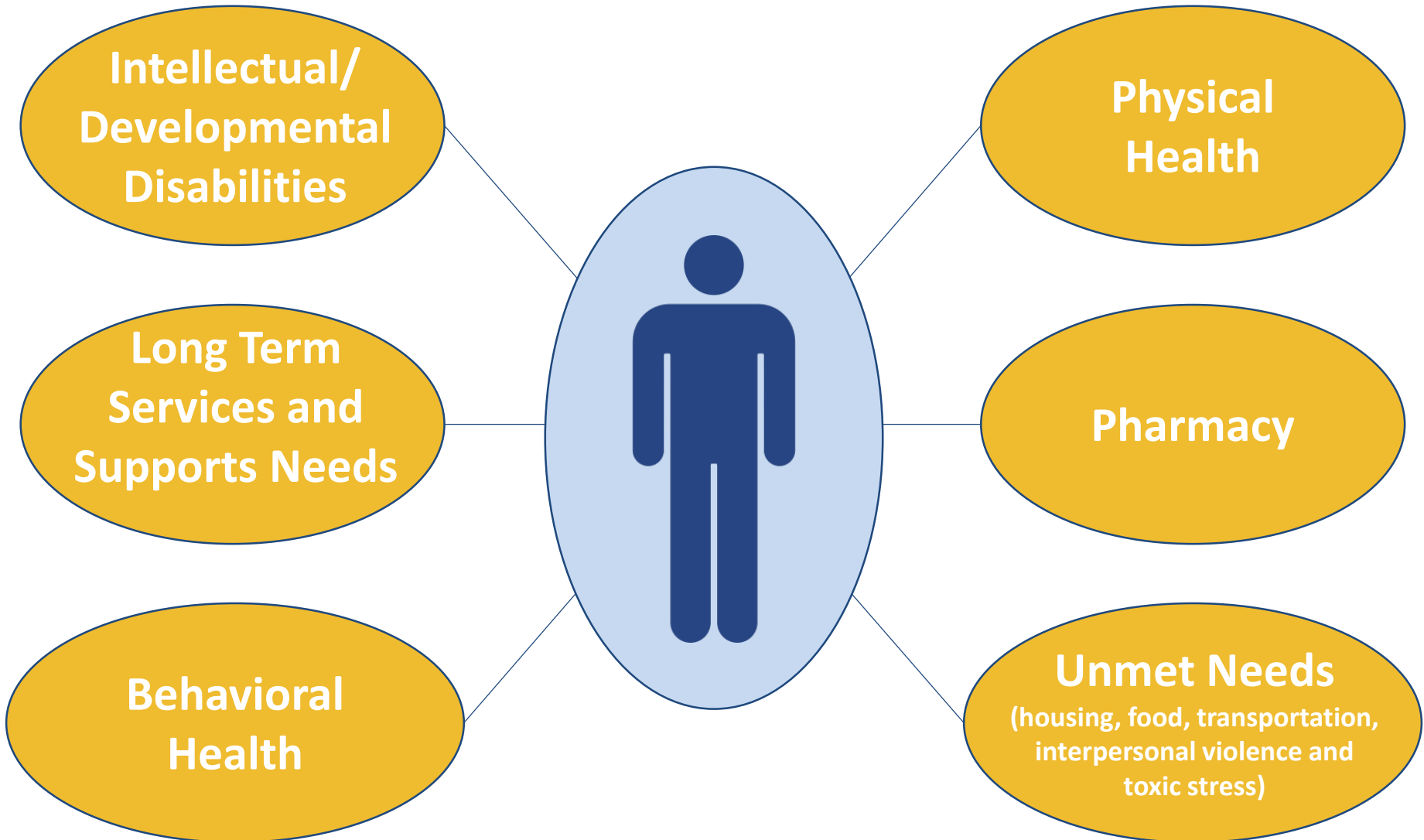
There will be multiple types of health plans

NC Medicaid Direct

- New name for current Medicaid fee-for-service program
- Provides many of the same health services as health plans
- People who do not get their Medicaid services through a health plan will continue to receive health care through NC Medicaid Direct and LME/MCOs

Every person who is eligible to get Medicaid will still get Medicaid

Medicaid changes put YOU at the center of care



What will the new health plans look like?

A health plan coordinates your health care with your doctors, hospital, and other providers. They work together to provide you with health care, including physical and behavioral health services and medicine prescribed for you. There will be four (4) types of health plans:

Standard Plan

Standard Plans will provide integrated physical health, behavioral health, pharmacy, and long-term services and supports to the majority of Medicaid beneficiaries, as well as programs and services that address other unmet health related resource needs.

Behavioral Health I/DD Tailored Plan

Behavioral Health Intellectual/ Developmental Disability (I/DD) Tailored Plans will provide the same services as Standard Plans, as well as additional specialized services for individuals with significant behavioral health conditions, I/DDs, and traumatic brain injury, as well as people utilizing state-funded and waiver services.

Specialized Plan for Children in Foster Care

A Specialized Plan for Children in Foster Care will be available to children in foster care and will cover a full range of physical health, behavioral health, and pharmacy services.

EBCI Tribal Option

The Eastern Band of Cherokee Indians (EBCI) Tribal Option will be available to tribal members and their families and will be managed by the Cherokee Indian Hospital Authority (CIHA).

Health plans will start at different times

Managed care implementation was “paused” in early 2020 due to the delayed State budget and COVID-19. The Department continued its planning efforts to prepare for launch.

**Standard Plans &
EBCI Tribal Option**

(July 1, 2021)

**Statewide Foster Care Plan &
Behavioral Health I/DD
Tailored Plans**

Proposed implementation date
(July 1, 2022)

2020

2021

2022

Medicaid Managed Care Health Plans

NC Medicaid Direct

Some people will not be eligible to enroll in a health plan; they will stay in NC Medicaid Direct and LME/MCOs.

What will the new health plans look like?

A health plan coordinates your health care with your doctors, hospital, and other providers. They work together to provide you with health care, including physical and behavioral health services and medicine prescribed for you. There will be four (4) types of health plans:

Standard Plan

Standard Plans will provide integrated physical health, behavioral health, and long-term services and support for Medicaid beneficiaries. These plans will provide services that address other unmet health-related resource needs.

Today's focus

Behavioral Health I/DD Tailored Plan

Behavioral Health Intellectual/ Developmental Disability (I/DD) Tailored Plans will provide the same services as Standard Plans, as well as additional specialized services for individuals with significant behavioral health conditions, I/DDs, and traumatic brain injury, as well as people utilizing state-funded and waiver services.

Specialized Plan for Children in Foster Care

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EBCI Tribal Option

The **Eastern Band of Cherokee Indians (EBCI Tribal Option)** will be available to tribal members and their families and will be managed by the Cherokee Indian Hospital Authority (CIHA).

Behavioral Health I/DD Tailored Plan Design

What should I know about Behavioral Health I/DD Tailored Plans?

This section will review key information about the design of Behavioral Health I/DD Tailored Plans. Specifically, we will talk about:

Eligibility & Enrollment	Who is eligible and how do I enroll?
Benefits	What types of health services are covered?
Care Management	How will my care be coordinated?
Community Inclusion	How will health plans support community inclusion for people with certain types of disabilities?
Quality	How will Behavioral Health I/DD Tailored Plans make sure the care I receive is high quality?
State-Funded Services	What services are available to people who are uninsured or underinsured?

Who is eligible for a Behavioral Health I/DD Tailored Plan?

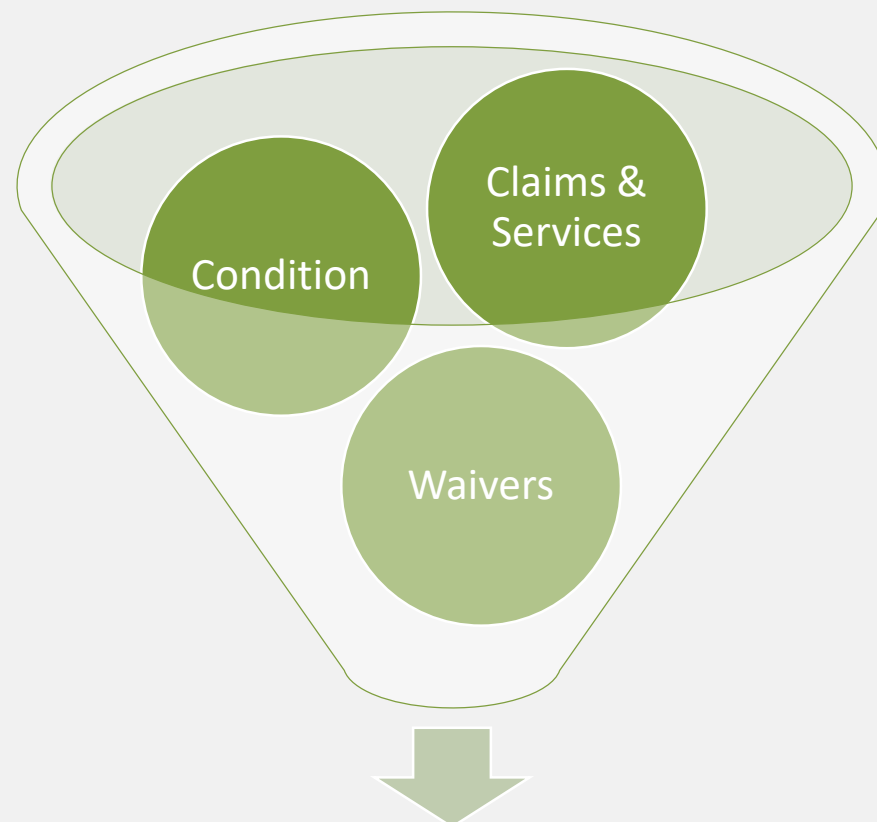
Not everyone is eligible to enroll in a Behavioral Health I/DD Tailored Plan. State law outlines who is eligible to enroll in a Behavioral Health I/DD Tailored Plan.

In general, people who need certain services to address needs for an intellectual/developmental disability (I/DD), traumatic brain injury, serious mental illness, serious emotional disturbance, or severe substance use disorder may be eligible to enroll in a Behavioral Health I/DD Tailored Plan.

There is a process to determine if you are eligible for a Behavioral Health I/DD Tailored Plan

- There is a process to determine if you are eligible for a Behavioral Health I/DD Tailored Plan that uses data about your behavioral health condition, I/DD, or TBI, services you have used, and whether you are a member of the Innovations or TBI waiver.
- If you are enrolled in another plan and you need services only available in Behavioral Health I/DD Tailored Plans, your eligibility can be reassessed.

NC Will Review Data

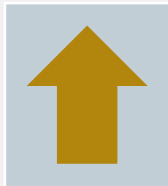


NC Will Determine Behavioral Health I/DD Tailored Plan Eligibility

What benefits are included in Behavioral Health I/DD Tailored Plans?

Behavioral Health I/DD Tailored Plans will offer physical health, behavioral health, certain long-term services and supports, and pharmacy benefits—just like Standard Plans. Behavioral Health I/DD Tailored Plans will also cover additional services for beneficiaries who have certain behavioral health, TBI, and I/DD needs.

Examples of services only covered by Behavioral Health I/DD Tailored Plans include:



More intensive mental health and substance use services (e.g., Assertive Community Treatment (ACT))



Intermediate care facilities for individuals with intellectual disabilities (ICF/IID)



Innovations, TBI, and (b)(3) waiver services



State-funded behavioral health and I/DD services

Regardless of which health plan you are enrolled in, there will be no gaps in care.

What is care management in Behavioral Health I/DD Tailored Plans?

Care management helps you coordinate your health care services, work with your health plan, communicate with your providers, and help address unmet health related resource needs. Behavioral Health I/DD Tailored Plans will offer care management—called Tailored Care Management.

Tailored Care Management will be...

Available to nearly everyone who is enrolled in a Behavioral Health I/DD Tailored Plan.*

Community-based, with requirements for frequent in-person contacts between beneficiaries and care managers.

Focused on the whole person—incorporating physical health, behavioral health, I/DD, pharmacy, and other needs (like helping find job or housing supports).

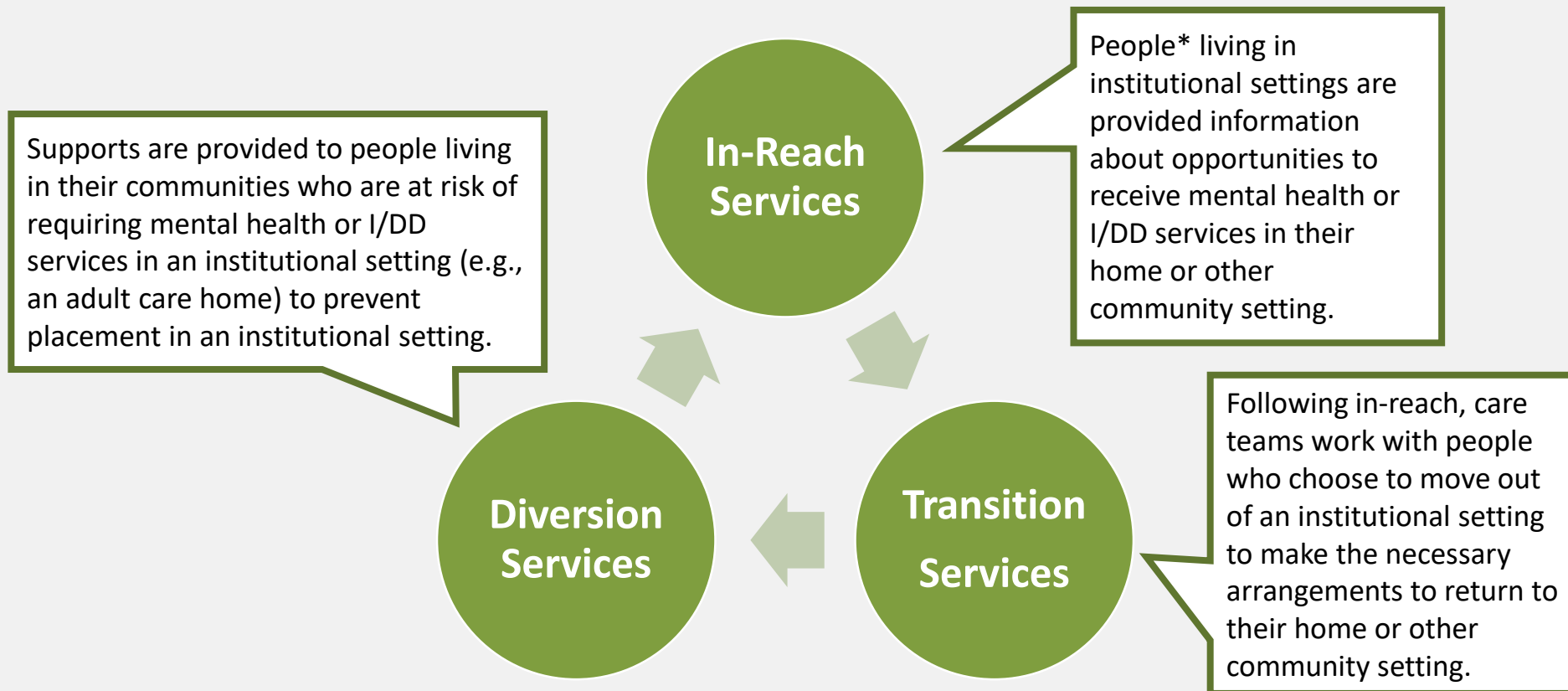
Supporting you for as long as you are in a Behavioral Health I/DD Tailored Plan.

* Tailored Care Management is not available to beneficiaries who get similar services through an Assertive Community Treatment (ACT) team, intermediate care facilities for individuals with intellectual disabilities (ICF-IID) high-fidelity wraparound program, or the Care Management for At-Risk Children program.

What is community inclusion?

Behavioral Health I/DD Tailored Plans will be required to develop a community inclusion program that helps keep people out of institutional settings, and helps transition those in certain institutional settings back to their homes or communities.

There are three types of community inclusion services.



*People and/or their families or guardians will be engaged in the community inclusion process, as appropriate.

Updates to eligibility for community inclusion services

Since January 2020, eligibility for community inclusion services has been further refined and expanded. New changes are indicated with a yellow star.

Individuals residing in the following facilities will be eligible for in-reach and transition services:

- Adult care homes
- State psychiatric hospital
- State developmental centers
- Intermediate care facilities for individuals with intellectual disabilities (ICF-IID) not operated by the state
- **Psychiatric Residential Treatment Facilities and “Residential Treatment Levels II/Program Type, III, and IV”**
- **For individuals not enrolled in Medicaid, only those eligible for the Transitions to Community Living Initiative will receive in-reach and transition services.**

Individuals enrolled in Medicaid

Updated

Updated

What is Olmstead v. L.C. and how does it impact BH I/DD Tailored Plans?

Olmstead v. L.C. is the U.S. Supreme Court case that lays the groundwork for people with disabilities across the country to live their lives as fully included members of the community.

Because of Olmstead, public entities (like the Department) must provide community-based services to people with disabilities when such services are **appropriate**, providing services in the community is **feasible**, and the affected person **doesn't oppose** receiving services in the community.

The Department is working to develop its Olmstead Plan which will impact many individuals obtaining services through BH I/DD Tailored Plans and will build on the state's community inclusion strengths, for example:

Money Follows the Person

Transitions to Community Living Initiative

The strengths of individuals and families

What are the goals of the Department's Olmstead Plan?

The goal of the Department's Olmstead Plan is to make everyday life in the community a reality for North Carolinians with disabilities. Facilities will remain available to those who prefer institutional care.



The Department **encourages consumer participation** in the development of the Olmstead Plan. Consumers, families and advocacy groups are represented on the Olmstead Plan Stakeholder Advisory. The Advisory and all of its committee meetings are open to the public.

For information on getting involved, visit:
<https://www.ncdhhs.gov/about/department-initiatives/nc-olmstead>



The Department anticipates the Olmstead Plan will be released for public comment in the next 18 months. **The Plan will be a living document** that guides a changing system of services and supports, including services and supports provided by Behavioral Health I/DD Tailored Plans.

How will Behavioral Health I/DD Tailored Plans make sure the care I receive is high quality?

The Department works with health plans and providers to improve the health of North Carolinians by addressing both medical and non-medical drivers of health. There are several ways Behavioral Health I/DD Tailored Plans work to improve the quality of care:

Behavioral Health I/DD Tailored Plans must get **nationally-recognized certifications to show that they meet quality standards** in delivering care.

Health Plan Certification

Performance Improvement Projects

Behavioral Health I/DD Tailored Plans will complete a **set of activities that concentrates on specific topic areas** that are important to your health, like preventing diabetes or quitting smoking/tobacco.

Quality measures are tools that help to measure **how well the health care system is providing care** to you.

Quality Measures

What are State-funded Services?

There are *some* behavioral health, I/DD, and TBI services that are not paid for by Medicaid—these are called “State-funded Services” because they are paid for with State funds and grants from the Federal government.

- State-funded services are for ***uninsured and underinsured individuals*** (e.g., a Medicaid beneficiary or an individual with private coverage who needs a service that is not covered by their health plan).
- State-funded services are *not* Medicaid services and are not considered entitlements—this means that **funding is limited and services are not available for everyone who may qualify.**
- Currently, Local Management Entities/Managed Care Organizations (LME/MCOs) manage Medicaid’s behavioral health, I/DD, and TBI services and State-funded services.
- **In the future, Behavioral Health I/DD Tailored Plans will be responsible for managing both Medicaid and State-funded services.**

What's Next?

How did stakeholders inform the design of Behavioral Health I/DD Tailored Plans?

Design work for Behavioral Health I/DD Tailored Plans is complete. During the development process, stakeholders reviewed proposed policy designs and gave feedback that helped strengthen the Behavioral Health I/DD Tailored Plan features in several ways:

Design papers and requests for comments

Public webinars on design topics

Department presentations at stakeholder and advocate meetings

Town hall meetings with Department officials

Open feedback through the Department Medicaid Transformation email

Other stakeholder engagement activities

You can access these policy papers, webinar recordings, and other materials online at [medicaid.ncdhhs.gov/transformation](https://www.medicaid.ncdhhs.gov/transformation)



If you are a beneficiary or family member...

If you are a Medicaid beneficiary or family member, you might soon receive a letter about enrolling in a health plan, specifically a Standard Plan. If you do not get a letter, *that's okay*— you may be excluded from enrolling in a Standard Plan.

This letter will tell you if you should enroll in a health plan, or not.

People will get a ***different*** letters, depending on their situation.

If the letter tells you to enroll in a health plan...

- You will be enrolling in a Standard Plan.
- The letter will have instructions on how to pick a health plan and when you will start your new plan.



If the letter tells you that you can stay in NC Medicaid Direct...

- You can continue receiving your Medicaid health care through NC Medicaid Direct and your current LME/MCO; **OR**
- You can choose to enroll in a Standard Plan.

NOTE: If you choose to enroll in a Standard Plan, it will not cover all the same behavioral health, I/DD, and TBI services.

Every person who is eligible to get Medicaid will still get Medicaid

Can I request a plan eligibility review?

If you think you should be in a Behavioral Health I/DD Tailored Plan, there will be two ways to request to stay in NC Medicaid Direct and LME/MCOs (and be considered for a Behavioral Health I/DD Tailored Plan in 2022).

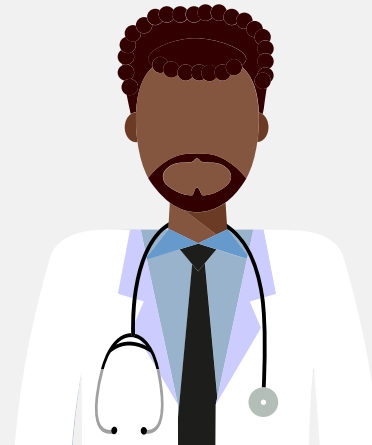
1. Beneficiary Form

You or your legal guardian fill out a form explaining why you think you will be eligible for a Behavioral Health I/DD Tailored Plan.



2. Provider Form

Your provider completes a form on your behalf explaining why they think you will be eligible for a Behavioral Health I/DD Tailored Plan.



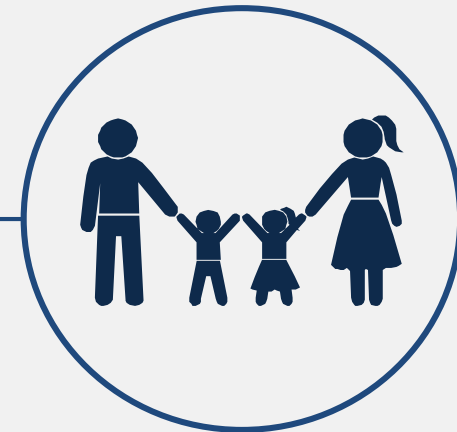
These forms will be available to you at a later time.

Reminder: Opportunities to Engage

The Department values feedback from stakeholders. You can reach out to the Department and find more information about Behavioral Health I/DD Tailored Plans online.

Feedback, comments, and questions are all very welcome by emailing:

Medicaid.Transformation@dhhs.nc.gov



You can access these policy papers, webinar recordings, and other materials online at:

medicaid.ncdhhs.gov/transformation



Questions



For more information visit our website:

<https://medicaid.ncdhhs.gov/providers/programs-and-services/behavioral-health-idd/behavioral-health-idd-tailored-plan>

Comments, questions and feedback are welcome at:

Medicaid.Transformation@dhhs.nc.gov

Awareness, Managing Crisis, Resiliency

- Hope4NC Helpline (1-855-587-3463)
- Hope4Healers Helpline (919-226-2002)