Amendment Number 32 (33)
#30-190029-DHB-# Standard Plan – PHP

This Amendment to Contract #30-190029-DHB-# Standard Plan – PHP (Contract) awarded February 4, 2019, and subsequently amended, is between the North Carolina Department of Health and Human Services, Division of Health Benefits (Division), and PHP Name (Contractor), each, a Party and collectively, the Parties.

Background:
The purpose of this Amendment is to incorporate requirements related to Public Law No. 119-21 (H.R. 1) in the following Sections of the Revised and Restated Request for Proposal #30-190029-DHB:

I. Section V. Scope of Services; and
II. Section VII. Attachments.

The Parties agree as follows:

I. <u>Modifications to Section V. Scope of Services</u>

Specific subsections are modified as stated herein.

a. *Section V.B. Members, 3. Member Engagement* is revised to add the following*:*

t. Engagement with Terminated or Reduced Benefits Beneficiaries

i. Effective January 1, 2027, prior to the effective date of a Member's reduced or terminated Medicaid eligibility, the PHP shall utilize existing Member engagement, education, and outreach channels to contact Members appearing on the daily *8110 Pending Termination Reduction Report* provided by the Department.

a) The daily *8110 Pending Termination Reduction Report*, provided by the Department to the PHP, will identify Members to whom DSS has sent the *DSS-8110 Notice of Modification, Termination, or Continuation of Public Assistance.*

b) Within five (5) Business Days of the Member appearing on the *8110 Pending Termination Reduction Report*, the PHP shall conduct at least one (1) outreach required under this Section to the Member prior to the effective date of the Member's reduced or terminated Medicaid eligibility. The PHP may conduct the outreach to the Member appearing on the daily *8110 Pending Termination Reduction Report* through regular mail, telephone, text message, or email.

ii. The PHP is encouraged to conduct outreach to Members enrolled with the PHP after the effective date of the Member's reduced or terminated eligibility as documented on the monthly *Detailed Termination Reduction Report*.

a) The PHP may conduct outreach following the effective date of the Member's reduced or terminated Medicaid eligibility through regular mail, telephone, text message, or email.

b) The PHP may conduct outreach to an individual enrolled with the PHP as of the effective date of terminated Medicaid eligibility for transition of care purposes and/or if the termination reason on the *Detailed Termination Reduction Report* is categorical, in which case the PHP may contact the individual within a reasonable time following the termination effective date for Federally Facilitated Marketplace (FFM) marketing purposes.

iii. The PHP shall develop outreach materials to be submitted to the Department for review and approval and shall provide approved outreach materials to Members to remind Members to update their contact information, provide new information to their county DSS and to respond

to inquiries from their local DSS regarding recertification. The Department shall review materials and provide approval or request edits within fifteen (15) Business Days of receipt.

II. Modifications to Section VII. Attachments

***Section VII. Attachments* is revised to incorporate *Attachment M.17. Member Engagement During Implementation of Pub. L. 119-21 ("H.R. 1.")* and is attached to this Amendment.**

I. Effective Date

This Amendment is effective August 14, 2026, unless otherwise explicitly stated herein, subject to approval by CMS.

II. Other Requirements

Unless expressly amended herein, all other terms and conditions of the Contract, as previously amended, shall remain in full force and effect.

Execution:

By signing below, the Parties execute this Amendment in their official capacities and agree to the amended terms and conditions outlined herein as of the Effective Date.

Department of Health and Human Services, Division of Health Benefits

_____ Date: _____

Melanie Bush, Deputy Secretary
NC Medicaid

Plan Name

_____ Date: _____

Plan Signature Authority

Attachment M.17. Member Engagement During Implementation of Pub. L. 119-21 ("H.R. 1.")

Background: On July 4, 2025, Public Law No. 119-21 (H.R. 1), was enacted and introduced new federal requirements affecting Medicaid eligibility, enrollment, and renewal processes. This *Attachment M.17. Member Engagement During Implementation Pub. L. 119-21 ("H.R. 1.") ("Attachment M.17.")* sets out PHP functions related to the State's implementation of HR.1 requirements, such as targeted outreach and education, integration into care management processes and reporting.

1. Member Services

a. Member Communications Regarding H.R. 1

i. Within thirty (30) Calendar Days of the publication of the *H.R.1 DHB Communications and Engagement Toolkit* by the Department, the PHP shall develop and submit to the Department for review a *Member Communication Plan Regarding H.R. 1.* for communicating with Members before and during the launch of H.R.1 community engagement requirements regarding the increased frequency of recertifications [six (6) month certification periods] for Medicaid expansion Members.

ii. The *Member Communication Plan Regarding H.R. 1.* shall address how the PHP intends to communicate information related to community engagement requirements and the increased frequency of recertifications to its enrolled Medicaid expansion population based on Department-developed Member communication materials provided in the *H.R.1 DHB Communications and Engagement Toolkit*, to include:

1) What the H.R. 1. requirements are, to whom they apply, and when they are effective;
2) Where to access additional information;
3) How to provide documentation to the local DSS; and
4) Other areas, at the direction of the Department.

iii. Within the *Member Communication Plan Regarding H.R. 1.*, the PHP shall describe:

1) The modalities, such as mailings, text messages, apps and emails, that will be used to communicate with Members before and during the launch of H.R.1 community engagement requirements about the increased frequency of recertifications for Medicaid expansion Members.
2) Its proposed messaging to Members, as well as its process for regularly reviewing and updating this information to ensure it aligns with the latest guidance from the Federal government and the Department–developed communication materials appearing in the *H.R. 1 DHB Communications and Engagement Toolkit*.

iv. The *Member Communication Plan Regarding H.R. 1.* shall include the PHP's proposed timeline for implementation of communication activities. The PHP shall begin conducting outreach to Members, using the Department-developed Member communication materials provided in the *H.R.1 DHB Communications and Engagement Toolkit wi*thin thirty (30) Calendar Days of its publication by the Department.

v. The PHP shall update its Member Communication Plan annually and within thirty (30) Calendar Days of the PHP's receipt of the Department's written request.

b. Member Materials

i. The Department shall provide the PHP a Department-developed template for community engagement inserts to be included in Member Welcome Packets. No later than September 15, 2026, the PHP shall begin including the insert in the Member Welcome Packet mailed to enrollees who are part of the Medicaid expansion population.

1) The PHP may use the Department-developed template to distribute community engagement inserts to Members without prior approval from the Department. If the PHP makes any material changes to the inserts, the materials shall be submitted to the Department for review prior to distribution to Members.

ii. The PHP may include informational materials on community engagement requirements and increased frequency of recertifications for Medicaid expansion Members when sending other

Member communications, including but not limited to explanations of benefits and communications for appeals and grievances.

iii. The PHP may incorporate informational materials on qualified alien changes aligned with the *H.R. 1. DHB Communications and Engagement Toolkit* on the PHP's website, in call scripting, or through social media. The PHP may use the *H.R. 1 DHB Communications and Engagement Toolkit* in developing informational materials.

iv. Within thirty (30) Calendar Days of the publication of the *H.R.1 DHB Communications and Engagement Toolkit* by the Department, the PHP shall make available within two clicks of the homepage, excluding any click required for a cookie banner, on its Member website information regarding community engagement requirements and increased frequency of recertifications for Medicaid expansion beneficiaries

1) The PHP shall include link(s) on its Member website to the State website on the H.R.1 eligibility and enrollment changes at https://medicaid.ncdhhs.gov/hr1.

v. Within thirty (30) Calendar Days of the publication of the *H.R.1 DHB Communications and Engagement Toolkit* by the Department, the PHP shall update Member smartphone applications, as applicable, to include information regarding community engagement requirements and increased frequency of recertifications for Medicaid expansion Members, and links to the State website on the H.R.1 eligibility and enrollment changes at https://medicaid.ncdhhs.gov/hr1.

vi. All updates to Member materials shall comply with language and accessibility requirements in *Section V.B.3.h.* of the Contract.

c. Call Centers

i. Within thirty (30) Calendar Days of receiving call scripting from the Department, the PHP shall make all call center staff aware of, and prepare call center staff to answer Member questions about, community engagement requirements and increased frequency of recertifications for Medicaid expansion Members.

ii. The PHP shall update call center scripts to align with scripting provided by the Department to include the information required in this Section. If scripting provided by the Department is modified by the PHP, it must be submitted to the Department for review and approval.

2. **Care Management**

a. Care Management Policy Resubmission

i. By no later than September 15, 2026, the PHP shall submit updates to its *Care Management Policy* to the Department.

1) The *Care Management Policy* updates shall address how the PHP intends to use its care management processes and staff, either internal or contracted, to support advanced and targeted H.R. 1. outreach activities.

2) The *Care Management Policy* updates shall describe:

a) How targeted H.R. 1. Engagement activities will be incorporated into the care management model, including updates being made to care management processes for Member identification/ outreach, Care Needs Screenings/ Comprehensive Care Management Assessments, and/or Member contact requirements;

b) How the PHP will conduct outreach to its enrolled Medicaid expansion population;

c) How the PHP will educate and train care managers in alignment with Department-developed materials provided in the *H.R. 1. DHB Communications and Engagement Toolkit* and how the PHP will collaborate with contracted delegated care management entities, including Tier 3 Advanced Medical Homes (Tier 3 AMHs) and Local Health Departments (LHDs on the H. R. 1 community engagement requirements.

d) How the PHP will provide care managers with information on Members who are subject to H.R.1 community engagement requirements, including information about any applicable exceptions or exemptions from community engagement requirements; and

e) How the PHP will connect care managers with information that aligns with Federal and/or State guidance to share with Members.

b. Additional PHP Care Management Requirements Effective January 1, 2027
   i. The PHP shall incorporate questions into the Care Needs Screening tool and/or Comprehensive Management Assessment about individuals' medical needs related to H. R. 1.
   ii. The Member's assigned delegated care management entity, including but not limited to Tier 3 AMHs and LHDs, shall assess and address the Member's needs related to H.R. 1. and document identified needs in the care management tool. Delegated care management entities are encouraged, but not required, to use NCCARE360 to document and identify resources to address the Member's H.R. 1.-related needs.

c. Care Management Training
   i. The PHP shall develop and implement a plan to educate and inform delegated care management entities, including Tier 3 AMH practices and LHDs, on all requirements contained in *this Attachment M.17., 2. Care Management*.

d. PHP Care Management Oversight
   i. The PHP shall monitor the adherence to and implementation of the requirements in this section by its delegated care management entities and care managers.
   ii. The PHP shall participate in Department-sponsored trainings and collaborative efforts aimed at H. R. 1 care management practices.

3. Provider Communications

a. Within thirty (30) Calendar Days of publication of the *H.R.1 DHB Communications and Engagement Toolkit* by the Department, the PHP shall post and share provider-focused H.R. 1. guidance developed by the Department on the PHP's provider facing website, Provider Portal, Provider Manual, and/or Provider bulletins or newsletters.