

Entity Represented	Representative	Company	Present (P)/Call in (C)
MCAC	Kim Schwartz	Roanoke Chowan Community Health Ctr	X
MCAC	Linda Burhans		P
MCAC	Chris DeRienzo	Mission Health	X
Board-Certified Physician (Internal medicine/family Practice)	Dr. Robert L. Rich Jr.	Bladen Family Medicine	X
Board-Certified Physician (Pediatrics)	Dr. Amy Russell	Mission Health Partners	C
Board-Certified Physician (Pediatrics)	Dr. Jason D. Higginson	Maynard Children's Hospital	C
Board-Certified Physician (Obstetrics & Gynecology)	Dr. Kate Menard	UNC Health Care	C
Behavioral Health Psychiatrist	Dr. Charles "Ken" Dunham	Novant Health	C
Beneficiary	Aaron Ari Anderson		C
Health Plan Association	Ken Lewis (Taylor Griffin)	NCHP	C
AHEC/Quality	Chris Weathington	NC AHEC	X
Hospital	Dr. Robert A. Eberle	Novant	C
Hospital	Dr. Samuel Cykert	UNC School of Medicine	X
Pharmacy	Dr. Andy Bowman	NC Board of Pharmacy	C
Provider Association			
Provider Association-Hospital	Dr. Karen Southard	NC Healthcare Association	X
Local Health Departments	Dr. Marianna TePaske Daly	Madison County Health Department	C
Hospital	Dr. Thomas Warcup	UNC Alliance Health	C
Academic/University	Dr. Darren A. DeWalt	UNC Population Health	X
Academic/University	Dr. Jason Foltz	ECU Physicians	C
Crisis/Emergency	Dr. David Kammer	Wake Emergency	X
Primary MD	Tamieka Howell	Novant Health- Ironwood Family Medicine	C
LME-MCO	Elizabeth "Bess" Stanton	Partners Behavioral Health	X

Others in Attendance: Dr. Nancy Henley (P), Jaimica Wilkins (P), Sam Thompson (P), Sharlene Mallette (P), Patricia Worthington (P), Beth McDermott (P), Andrea Long (P), Cam Coleman (P), Amanda Van Vleet (C).

Agenda Items discussed:

- Roll Call and Introductions of Cameron Coleman, Beth McDermott, Dr. Henley.
- Charter Updates- Meeting Cadence Change from quarterly to semiannually. New committee members introduced by Beth McDermott.
- New Committee members voted in: Chris Weathington, Andrea Long, Tamiaka Howell, Elizabeth “Bess” Stanton, Amy Russell.
- Continued Terms: Ari Anderson, Ken Lewis.
- Vacancies in Crisis/Emergency and Provider Association. Requested contacts to fill vacancies.
- Jaimica Wilkins talked about the Quality Management and Improvement webpage on the DHHS Medicaid web site. The Quality Strategy and Technical Specifications are housed there in addition to AMH information, care management and provider support and other resources.
- Sam Thompson presented on:
 - **Sheps Center Independent Evaluations:**
 - *1115 Waiver/Substance Use Disorders*
 - Mixed method evaluations (quantitative and qualitative data). Dashboards and reporting being created.
 - *Healthy Opportunities Pilots*
 - 5-year evaluation cycle with a 3-year rapid cycle to allow leaders to find out which programs are most successful. Intervention by intervention evaluations.
 - *Presentations*
 - Once contracts are finalized, presentations will be available.
 - **Quality Measures:**
 - 2016 and 2017 rate and benchmarks to PHPs
 - Rates going to plans Mid-late August. Original data set includes dual eligible population, data is being re-run and analyzed.
 - State of the State
 - Public facing report on quality measures.
 - PHP Reporting
 - Developed PHP Reporting templates, initial set finalized. Annual reporting will be source of truth, interim data will not include specs.
 - Plans will require providers to submit reporting.
 - **Use of Findings**
 - Convening leadership within DHB to find key drivers of outcomes, want to ensure data is used efficiently.
 - Working with Sellers Dorsey to set up governance process and to design oversight committees.
- Thomas Warcup asked about the number of metrics that PHPs would be holding providers to. PHPs must produce the entire set, PHPs will use an established list of measures taken from Priority Measure list to develop performance payments to AMH practices.

- **ACTION ITEM:** PHP discussion item- Reporting standardization. If a provider is contracted with all 5 PHPs, current state is that there would be 5 separate reports. Would future state have standardized reporting across all PHPs?
- Amanda Van Vleet presented VBP Strategy:
 - 2 policy papers written (to be released in next couple weeks)- one on 5 yr managed care plan and one on ACO Medicaid model
 - Amanda also went over the guiding principles of VBP Strategy, Manatt assisted with design
- **QUESTION:** Marianna Daly asked about Health Departments and how they fit into the VBP Strategy, especially with high risk patients and small populations. Amanda advised that LHDs are being considered and that is still be worked on.
- **QUESTION:** Question was asked about measure set for sub specialties. **ANSWER:** Measure set is outcomes based, associated with condition and not with specific specialty or sub-specialty.
- Amanda also presented on the ACO model.
 - Builds on care delivery requirements/population health structure of AMH program with AMH Tier 3 requirements serving as a minimum standard of care for ACOs. ACO model is a more advanced payment model, linking total cost of care and quality. DHHS anticipates launching in Contract Year 3. 2 tracks allow practices flexibility in how much risk they take on, will be made up of integrated networks of Tier 3 practices working closely with other types of providers. Patient attribution to ACOs will be based on AMH assignment. DHHS will outline requirements for ACO structure, governance and management, population size and financial solvency.
- **QUESTION:** Aaron Ari Anderson asked about AMHs meeting goal in the first year to save money, will the AMH have to continue to cut back each year? What about the Medicaid programs that are already financially sound? **ANSWERS:** Benchmarks released each year will help regulate standards to ensure that beneficiaries won't be affected. Existing programs will continue to be managed so that members already participated can continue to do so.
- Jaimica opened the floor for public comment, none.
- Beth McDermott went over action items from meeting and advised that calendar invites for the next MCAC meeting would be going out in the coming weeks.
- Linda Burhans asked if there were any final questions and closed the meeting.