



MCAC Medicaid Update

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Medicaid Status Report

1. Managed Care Standard Plan Update
 - A. CCH – Adding Region 4
 - B. Statewide Open Enrollment
 - C. Key Transformation Milestones
 - D. Additional Managed Care Updates
 - E. Enrollment Statistics
 - F. DSS Onsite Support
 - G. Provider Resources
2. Medicaid Service Definition Update
3. Questions/Discussion

Managed Care Update

CCH Regional Expansion

- In addition to Regions 3 & 5, CCH coverage area to include Region 4 (Feb 1, 2020)
- Call Center
 - Scripts updated to educate beneficiaries about CCH availability in Region 4
 - Members will be able to make selection next week
- Comparison Chart updated
- Week of 10/21 - EB website update
- Week of 10/28 – Mail postcards to Region 4 beneficiaries about addition

Open Enrollment for Regions 1,3,5,6

- Open Enrollment officially began 10/14/19
- Managed Care notices – mandatory and exempt
 - mailed 9/30/19-10/11/19
 - ~479,000 notices
- Notice will be mailed at redetermination for those with eligibility period 11/1/19-1/31/20
- Returned Mailings Tracking (Phase 1)
 - 5% failed national database
 - 8.5% returned

Key Transformation Milestones

Timing	Key Milestones
10/14/19	Day 1 Open Enrollment Final Regions
Mid-November	Approved Budget by General Assembly
Mid-November	Enrollment Reminder Cards
November 15th	Provider Contracts Must be Signed for Inclusion in Auto-Assignment
12/13/19	Open Enrollment Ends
Starting 12/16/19	Auto-Enrollment to PHPs and PCPs
2/1/2020	Standard Plan Effective Date

Additional Managed Care Information

- Children without “case head”
- PHP Readiness
 - Inbound deliverables
 - Network Adequacy
 - End to End Testing
 - Phase 2 Onsite Review
- Tailored Plan
 - Final Design Recommendations
 - RFA Drafting Initiated
 - Validation of Eligible Populations

A hand holding a black marker is writing the words "OPEN ENROLLMENT" in a bold, black, sans-serif font on a white surface. A thick red line is drawn horizontally across the text, starting from the left edge of the frame and ending at the tip of the marker held by the hand on the right side of the text.

OPEN ENROLLMENT

NC Medicaid Managed Care
Standard Plan Enrollments

~73,000

As of October 15, 2019

DSS On Site Support (All Counties)

- Enrollment Broker Outreach Specialists in Phase 1 counties plan will remain on-site until April 30, 2020
- Phase 2 Outreach Specialists support rolled out in phases for week of:
 - Oct 14, at least 1 staff person in 32 counties
 - Oct 21, number will increase to 50 counties covered
 - Oct 28, all 73 counties will have coverage
- Readiness Activities ongoing to support DSS transition to managed care

NC DHB » Providers » Provider Playbook: Medicaid Managed Care

Provider Playbook: Medicaid Managed Care



Medicaid Managed Care Webcast Scheduled for Oct. 16

Join Secretary Mandy Cohen, M.D. for an update on the Medicaid Managed Care transition and a closer look at Medicaid Managed Care statewide open enrollment activities.

Register →

Well-informed providers are essential to the success of managed care. This webpage is your "Provider Playbook," a place where you can access the latest information, tools and other resources to help you and your patients smoothly transition to Medicaid Managed Care. Visit the Provider Playbook page for more information. Content will be added as they become available.

Waiting for syndication.twitter.com...

<https://medicaid.ncdhhs.gov/providers/provider-playbook-medicaid-managed-care>

Donate to Hurricane Recovery

Advanced Medical Home

- DHHS
 - Supporting communication between providers and PHPs
 - Developed Provider Facing Guidance on
 - Why contracting is important
 - Rates
 - Timelines
 - PHP Oversight of AMHs
- Ongoing contract negotiations between PHPs and AMHs
- Recently released guidance on changing AMH Tiers

Provider Training and Outreach

Most Recent Managed Care Webinar

Sept. 19th

MCT 114: NC's Transition to Medicaid Managed Care: The Crossover Education Series— Provided an overview of key clinical policies with which providers need to be familiar during the transition to managed care.

- ***Virtual Office Hours*** – Next Scheduled
- **Provider Reviews, Audits and Investigations in NC Medicaid Managed Care**
Tuesday, Nov. 12, 2019; 12-1 p.m.
[Register](#)
This session will cover the role of Prepaid Health Plans and the state in NC Medicaid Managed Care. Providers will be able to identify proactive steps to be successful in Medicaid Managed Care.

Service Definition Updates

Community Support Team

- CST service definition approved by CMS on 10-3-19
- Policy will be reposted for 15 days due to changes
- Final policy will then be posted with 11/1/19 effective date

Essential Elements of Revised Service Definition

- Staffing increase from three (3) to four (4) positions.
- 12:1 Ratio of individuals/staff with a team maximum of 48
- Functional assessment and housing assessment now required
- 36 unmanaged units for initial 30 calendar days to engage the individual early in treatment
- Added components of Permanent Supportive Housing (PSH), such as:
 - Assist with beneficiary housing search
 - Assist with connecting beneficiaries to financial and in-kind resources to set up and maintain household;
 - Prevent and mitigate housing crises;
 - Assist with rehousing beneficiaries if they are no longer able to stay in their unit due to eviction or risk of eviction;
 - Assist in developing daily living skills to stabilize and maintain housing
 - Requires 15 hours of training in PSH.

Peer Support

- SPA submitted September 16, 2019
- Initial Call resulted in informal questions
- Anticipate shorter than normal approval time

Proposed Changes to Service Definition

- 24 unmanaged units in the first 30 calendar days per episode of care for fiscal year.
- Peer Support Specialists must be NC Certified.
- QP supervisor required – one QP to eight Peer Support Specialists.
- Service can be provided to individuals or groups
- Service can be provided in the ED

Questions/Discussion