NC Department of Health and Human Services Division of Health Benefits



NC Medicaid Transformation Update

Jay Ludlam Assistant Secretary, NC Medicaid

Medical Care Advisory Committee (MCAC)Meeting March 19, 2021

Agenda

Official Launch of Managed Care Open Enrollment

- Key Milestones and Statistics
- Project Status
- Beneficiary Support, Education & Outreach
- Current Activities
- Provider Resources
- PHP Readiness

Major Milestones

March 1	Soft Launch Call Center, website, mobile app live
March 15	 Managed Care Open Enrollment began Beneficiaries can use the website, mobile app and NC Medicaid Managed Care Call Center to find their doctor and select a health plan
April 12	Deadline for providers to submit contracts to PHPs for their information to be used in auto-enrollment
April 15	 Reminder postcards to be mailed to beneficiaries Ombudsman Go Live
May 14	Open Enrollment Ends
May 15	 Beneficiaries who have not chosen a health plan will be "auto-enrolled" in a plan and notified by mail Transition of care activities implemented
July 1	 Medicaid beneficiaries start receiving care through Managed Care Providers Beneficiaries have 90 days to change their plan selection

OPEN ENROLLMENT STATISTICS

- Enrollments : 13,805 (as of 3.17.21)
- As of March 12:
 - 8,577 calls handled
 - 18,472 website visits
 - 2,235 chat sessions
 - 3,850 mobile app visits
- More than 775,000 Enrollment Packets have been mailed to beneficiaries

Standard Plan Project Status



Notes:

- Hill Climber chart shows the relative level of effort earned to date compared to the relative level of
 effort planned (cumulative).
- The data reported in this week's status report is reflective of the information in Jira at the time the report was created.
- While overall Program Completion is ahead of target, there are still areas and items that are behind or trending behind.



Focus on Beneficiary

Resources

- Medicaid Contact Center
 - o 888-245-0179
- Website updates and social media
 - https://medicaid.ncdhhs.gov/transformation
- Paid advertising
 - Radio, TV, web, social media (English and Spanish)





Online Help Centers

NC Medicaid Help Center

A resource for providers to research questions and submit inquiries, the Help Center is an online source of information about Managed Care, COVID-19, Medicaid and behavioral health services. You can also search to find answers to questions from the Help Center mailbox, webinars and other sources.

Medicaid Help Center:

ncgov.servicenowservices.com/sp_ncmedicaid?id=kb_view_helpcenter

NC Medicaid Beneficiary Portal

An online portal for North Carolinians receiving or wanting to apply for Medicaid. The portal provides Medicaid resources in an easy-to-use web platform. The Help Center Assistant search feature guides users to topics of interest to them.

Medicaid Beneficiary Portal: medicaid.ncdhhs.gov/beneficiaryportal

Current Activities to Support Managed Care & Tribal Option Launch

- Beneficiary Focused Activities
 - Beneficiary notices and enrollment, advertising, engagement & outreach
 - Updated Member Handbooks
 - End-to-end testing beneficiary information flows, transition of care processes, auto assignment and PCP assignment algorithm.
 - County DSS support approach, training sessions, and enrollment supports
- Provider Related Activities
 - PHP and provider contracting
 - Update call center scripting and conduct agent training for the NC Tracks Provider Call Center
 - Engagement & training to support providers through the transition
 - End-to-end test provider information data flows
- Health Plan Focused Activities
 - End-to-end test the capitation payment process.
 - PHP readiness reviews
 - PHP and Tribal Option hiring/rehiring of staff, including key personnel
 - PHPs contracting with sufficient providers and systems

Provider Contracting & Payments

Importance of contracting in advance of open enrollment

- Beneficiaries may only select in-network (contracted) PCPs during open enrollment and health plans will assign beneficiaries to in-network providers only.
- Ability to earn per member per month (PMPM) payments through the Advanced Medicaid Home (AMH) program.
- Risk of being reimbursed at 90% of the current Medicaid fee for service rate and subject to additional prior authorizations.

Contracting after July 1, 2021

• Providers encouraged to continue contract negotiations with health plans and finalize the contract as soon as possible.

Payments

- DHHS-established rate floors for certain in-network providers
- PHPS must comply with Prompt Pay Standards

Technical Assistance and Practice Support: PHPs & Area Health Education Centers (AHEC)

AHEC and PHPs will both support the State's TA and Practice Support goals.

- Prior to Launch: AHEC will provide targeted training assistance to ensure providers are prepared to participate in Medicaid transformation initiatives.
- Prior to Launch: AHEC hosts Fireside Chats.
- Prior to Launch: AHEC leads the AMH Coaching Program.
- After Launch: AHEC will provider webinars that highlight Statewide PIPs.
- After Launch: AHEC will continue AMH Coaching Support
- After Launch: AHEC will host and support PHP Regional Quality Forums.
- After Launch: PHPs will supply quality data to practices (AMH & OBs)
- After Launch: PHPs will provider practice support.

Provider Resources

• Webinar Trainings - DHHS and AHEC series to increase engagement with providers, practice managers, and quality managers.

Webinar Series	Schedule
<u>Medicaid Managed Care Fireside</u> <u>Chat</u>	First Thursday of each month
Advanced Medical Home	Second Thursday of each month
Clinical Quality	Third Thursday of each month

- Access full schedule of webinars, recordings, slides and transcripts at <u>Medicaid Managed Care Webinar Series for Providers web page</u>.
- Provider Ombudsman resource to assist providers with issue resolution

Contact Information		
Phone	919-527-6666	
Email	Medicaid.ProviderOmbudsman @dhhs.nc.gov	

PHP Readiness Overview

PHP READINESS

KEY METRICS

<u>Policy and Process</u> <u>Readiness</u> : Measures PHP's ability to meet contractual	I. <u>Contractual Deliverables</u> : Assessment of completion of contractual deliverables that DHHS will review and/or approve as part of Managed Care oversight activities. Examples of these deliverables include PHP operating
deliverables and to operationalize	plan, marketing materials, clinical coverage policies, and annual compliance
the Managed Care Program	plans.
including CMS-defined Readiness	II. <u>Readiness Review</u> : Completion of DHB administered desktop and onsite
Review Areas.	readiness review, which assesses the PHP's ability and capacity to
	operationalize the Managed Care design in the CMS-defined Business Areas

	III. <u>Provider Network Coverage</u> : Assessment of the adequacy of the PHP's
Provider Network	provider networks in key specialty areas, including Hospital, Advanced
Readiness: Measures each PHP's	Medical Homes, OB/GYN, NEMT, and Behavioral Health.
provider network coverage in the	
contracted regions.	

Technology Readiness: Measures each PHP's progress with technology testing activities and supporting technical operations as we approach Managed Care Golive. IV. <u>Testing</u>: Success execution of DHB-defined test scenarios, including assessment of % complete versus planned, defects, and speed of resolution V. <u>Technology Operations & Command Center</u>: Assessment of PHP ongoing technology and operational issues, including late file submissions, issues affecting operations, and/or technology related incidents and problems that have not been resolved by the expected timeframe driven by priority classification.

Health Plan Contacts & Materials

- Access Health Plan contacts and resources by visiting:
 - <u>https://medicaid.ncdhhs.gov/transformation/health-</u> plans/health-plan-contacts-and-resources
- Available resources include:
 - Provider manuals
 - Provider contract templates
 - Member handbooks

Challenges to Consider

- COVID-19
- Provider Contracting
- Legislative Changes
- State Budget