Entity Represented	Representative	Company	Present (P)/Call in (C)
MCAC	Kim Schwartz	Roanoke Chowan Community Health Ctr	С
MCAC	Joyce Winstead	NC BON	С
Board-Certified Physician (Internal medicine/family Practice)	Dr. Robert L. Rich Jr.	Bladen Family Medicine	Х
Board-Certified Physician (Pediatrics)	Dr. Amy Russell	Mission Health Partners	х
Board-Certified Physician (Pediatrics)	Dr. Jason D. Higginson	Maynard Children's Hospital	Х
Board-Certified Physician (Obstetrics & Gynecology)	Dr. Kate Menard	UNC Health Care	х
Behavioral Health Psychiatrist	Dr. Charles "Ken" Dunham	Novant Health	х
Beneficiary	Aaron Ari Anderson		Х
Health Plan Association		NCHP	С
AHEC/Quality	Carol Stanley	NC AHEC	Х
Hospital	Dr. Robert A. Eberle	Novant	Х
Pharmacy	Dr. Andy Bowman	NC Board of Pharmacy	Х
Provider Association			
Provider Association- Hospital	Dr. Karen Southard	NC Healthcare Association	х
Local Health Department	Lisa Macon Harrison		С
Academic/University	Dr. Darren A. DeWalt	UNC Population Health	Х
Academic/University	Dr. Jason Foltz	ECU Physicians	С
Crisis/Emergency	Dr. Charles McCormick	Wake Emergency	Х
Primary MD	Dr. Benjamin Simmons		С

Others in Attendance: Beth McDermott, Taylor Zublena, Jaimica Wilkins, Kelly Crosbie, Sam Thompson, Becky Slifkin, Matt Gawthrop, Shawn Latta, Dr. Janelle White.

We did not have a quorum, none of the presented items required a vote

Meeting called to order by Kim Schwartz. Role call done by Beth McDermott as people joined the meeting.

Agenda Items discussed:

- Charter Updates- Membership will be changing, new members will be brought to the committee for a vote at the January 20th meeting. The Charter will also be updated and presented at the January 20, 2022 meeting.
- Dr. Samuel Cykert announced his retirement/resignation from the committee prior to the meeting on October 21, 2021.

Managed Care Updates:

- Kelly Crosbie provided updates on Standard Plan/Tribal Option launch, which went live on July 1, 2021.
- Tailored Plans and Foster Care will be launching in 2022 and 2023 respectively.

Introduction of Taylor Zublena as Associate Director of Quality Management. Taylor gave an update on the AMH attribution methodology and PHP feedback.

- AMH Attribution goals:
 - Provides incentives for the AMH to proactively conduct outreach to their prospectively assigned members to engage them in care and improve quality of care
 - Ensures AMH performance payments reflect all care provided or are expected to provide
 - Aligns with Department's goal of AMHs being accountable for all assigned members
- Discussed measure set (AMH measures), SPs required to monitor performance of AMHs in all tiers
- Only required to offer payments to T3, encouraged to offer to T1 and T2 practices
- Beneficiaries select their PCP or are auto assigned one once enrolled
- PHPs reconcile AMHs prospective panel at end of measure year
 - Been attributed to provider for at least 6 months?
 - Continuously enrolled?
- Taylor also went through process flow and common scenarios and resolutions.
- Kim Schwartz asked about panel management and how to resolve that issue. Kelly Crosbie stated that there are no penalties for year 1, practices can use year 1 to resolve any issues without financial risk.
- Jason Foltz asked about standards applied to PHPs and when AMHs are notified on results, incentives.

2020 Quality Measure Results

- CIS combo 10, PPC 1, AMM, AMR, AAB improved
- PPC 2, FUH for MH (30 day), BCS, ADV, and Diabetes Screening: Schizophrenia/Bi-Polar, and Antipsychotics declined
- Comparison of 2019 and 2020 measurement rates
 - Adult rates- 2 new measures (Cardiac Rehabilitation and Kidney Health Evaluation for Patients with Diabetes)
 - Maternal and Women's Health
 - Behavioral Health and Substance Use
- Standard Plan Measures- Pediatric

- o Adolescent Well-Care Visit (AWC)- Retired
- Well-child Visits in the first 15 months of life- 6 or more visits (W15)- Retired
- Well-Child visits in the third, fourth, fifth, and Sixth years of life (W34)- Retired
- Well-Child Visits in the First 30 Months of Life- New
- Child and Adolescent Well-Care Visits- New
- Standard Plan Measures- Adult
 - Measure, Measure Steward, Measure group, CY2019 Rate, CY2019 Median, CY2020 Rate, CY 2022 Target
 - Utilization measures
- Standard Plan Measures- Maternity
 - Timeliness of Prenatal Care and Postpartum Care- Rates suggest that NC Medicaid performed below the national median.
 - Pregnant Medicaid members identified using one or more claims with pregnancy diagnosis code
 - HEDIS-Like measure rates used
 - Contraceptive care will be brought to future meeting
 - Dr. Ben Simmons mentioned that Residents are allowed to practice prenatal services when they join a practice, a potential attribution barrier.
- Behavioral Health and I/DD Tailored Plan Measures
 - Measure cycle
 - o 2022 Tailored Plan Quality Measures
 - Pediatric, Maternal Health, Survey and General Measures, and Adult Measures
- QAPIs/PIPs
 - o Components-
 - Performance measures
 - Mechanisms to assess
 - Additional Plans (PIPs and Provider Support)
 - o Priorities
 - Achieve significant improvement
 - Address disparities and promote health equity
 - Include evaluation of the effectiveness of the interventions
 - PIP Focus Areas
 - Year 1 Focus Areas-
 - Diabetes prevention and control
 - Childhood Immunizations
 - Maternal Health- Timeliness of Prenatal Care
- Health Equity
 - Data will be used to develop a plan of action for measuring and evaluating efforts to close gaps in Medicaid
 - Data will be part of an annual health equity report
 - Interventions will include:
 - Development of disparity-specific quality measure improvement targets
 - Program wide interventions and/or policies to address disparities in identified populations

- Keeping Kids Well
 - Recognition:
 - Medicaid Quality Network NCQA
 - Center for Evidence Based Policy "Increasing Childhood Immunizations in Response to COVID-19 Pandemic Report"
 - CDC Immunization Community of Practice Presentation
 - Highlights:
 - 3-pronged approach
 - Launched August 3, 2020
 - Partnerships:
 - Reach out and Read
 - Pfizer (pharmaceutical company)
 - Health Systems
 - 9 Interventions
 - EHR
 - Internet/Social Media
 - Staff Engagement
 - School systems
 - News Outlets
 - Promotion Months
 - Acute Care Visits
 - Clinical/Operational Workflow
 - Group Visits
 - Challenges
 - Practices overwhelmed
 - Time intensive
 - Not a "one size fits all" effort
 - o Wins
 - Flattened curve
 - Established effective outreach and performance metrics
 - 57,000+ reminder postcards sent to 198 offices
 - Practices and coaches learned from each other
 - Helped lead into AMH tier support work
- Provider Experience Survey Results
 - Sheps Center worked with DHB to develop a provider experience survey for practice managers, medical directors, or other leaders of systems and practices that deliver primary care to Medicaid beneficiaries
 - Sent to Primary Care Providers (PCPs) and OB-GYNs
 - Responses are collected at the organizational level
 - Large group practices/health systems- data sharing, contracting with PHPs, other interactions occur at system level.
 - Independent practices- responses collected at practice level
 - Conducted between May 10 and September 3 2021. 668 total responses
 - Most important questions:

- Timeliness of claims processed
- Accuracy of claims processed
- Adequacy of reimbursement to provide the care needed for Medicaid patients
- Access to medical specialists for Medicaid patients
- Access to behavioral health prescribers for Medicaid patients
- Access to needed drugs for Medicaid patients
- o Take-Aways
 - General satisfaction with NC's pre-existing Medicaid Program
 - Providers prioritized claims and reimbursement, access to specialists and BH when contracting with PHPs
 - Hesitant to hopeful feelings from respondents about Managed Care
- Kim Schwartz asked about any benchmarking done, did DHB anticipate results? Sam Thompson answered that benchmarking is tough to align on experience surveys.
- Carol Stanley asked if the survey was inclusive of AHEC, yes.

Beth McDermott informed the committee that placeholders would be going out for the 2022 meetings. Kim Schwartz and Joyce Winstead opened the meeting for public comment, hearing none they adjourned the meeting.