

**Tailored Care Management Capacity Building  
Guidance for Providers in Round 1 and 2 of AMH+/CMA Certification  
Nov. 5, 2021**

**To help ensure the successful implementation of Tailored Care Management, the Department is launching the Tailored Care Management Capacity Building program, under which approximately \$90 million in funding will be distributed across the state starting in early 2022 and lasting through at least June 2023. The Department hopes to make additional funding available in future years.**

*Note: Funding for the program and a final timeline for initial distribution of funds is dependent on the passing of the state budget by the North Carolina General Assembly.*

#### **Who is eligible for funding and for what purposes?**

Providers certified as Advanced Medical Home (AMH)+ practices and Care Management Agencies CMAs will be eligible to receive funding for investments in:

- Care management related health information technology (HIT) infrastructure
- Hiring and training care managers
- Activities related to operational readiness (e.g., developing policies/procedures/workflows)

AMH+ practices and CMAs may choose to use their capacity building funds to contract with CINS/Other Partners for the purpose of capacity building (e.g. to make HIT investments). Clinically Integrated Networks (CINs) or other partners will not be eligible to receive capacity building funds directly from the Department or Behavioral Health Intellectual/Developmental Disabilities (I/DD) Tailored Plans.

#### **How can AMH+ practices and CMAs access funds?**

Funds will flow through LME/MCOs awarded a Tailored Plan contract.<sup>1</sup> LME/MCOs (future Tailored Plans) will complete a capacity building needs assessment with each AMH+ practice and CMA to understand and document each provider's specific capacity building needs.

To access funds, providers must participate in these assessments and, on an ongoing basis, meet targets, mutually agreed upon by the AMH+/CMA and LME/MCO, that demonstrate progress towards achieving specific capacity building milestones. *See Table 1 below for a complete list of milestones.*

Providers will receive their first distribution of capacity building funds only once they are certified as an AMH+ practice or CMA. AMH+ practices and CMAs serving in multiple Tailored Plan regions will not be eligible for duplicative investments (i.e., no funding for the same thing from two different LME/MCOs).

#### **How will the Department ensure that the program is deployed consistently across the state and in line with its goals?**

The Department designed the program with various mechanisms to ensure consistency and that funds go towards the areas of greatest need:

- The Department will review and approve "Distribution Plans," submitted by each LME/MCO, which will detail the specific capacity building needs assessed among AMH+ practices and CMAs in their region. LME/MCOs will submit their Distribution Plans to the Department for review and approval, and the Department will determine funding allocations for each LME/MCO based on

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<sup>1</sup> LME/MCOs awarded a Tailored Plan contract: Alliance Health, Eastpointe, Partners Health Management, Sandhills Center, Trillium Health Resources, and Vaya Health. While Cardinal Innovation Healthcare was awarded a contract, it is anticipated they will not operate a Tailored Plan at launch due to the consolidation with Vaya Health

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these Plans. Distribution Plans are due to the Department by Nov. 30, 2021. An initial round of funding will be awarded after Distribution Plans are approved.

- Following approval of Distribution Plans and the first round of funding, additional funds will be distributed on a quarterly basis, only as progress on the capacity building milestones merits. LME/MCOs (and upon launch, Tailored Plans) will report on milestone progress through both monthly and quarterly reports. Although Milestones are listed in order from 1 through 6, LME/MCOs and Tailored CM Providers are able to work towards achieving the targets and earn capacity building funds for the associated milestones in any order.
  - For example, milestone 4 is “hiring new care managers and supervisors at AMH+s and CMAs.” As such, each LME/MCO’s Distribution plan will include quarterly targets for the number of care managers and supervisors hired at the provider level. As initial quarterly hiring targets are met at provider sites, additional funding will be released to support the hiring envisioned in the future quarterly targets. If staff are not hired at provider sites in line with the initial targets, no additional funds associated with future hiring targets will be released.

For more details on the capacity building program see: <https://files.nc.gov/ncdma/Updated-Guidance-on-Tailored-Care-Management-vF.pdf>

**Table 1. Capacity Building Milestones**

<b>Milestone 1</b>	Submission of a detailed distribution plan that specifies the Tailored Plan’s approach (including quarterly targets) and proposed budget for meeting the remaining capacity building milestones, for DHHS approval.
<b>Milestone 2</b>	Submission of a Tailored Care Management training curriculum and conducting trainings for care managers employed by Tailored Plan awardee and contracted AMH+s and CMAs
<b>Milestone 3</b>	Purchase or upgrades of care management related HIT infrastructure and systems for AMH+s/CMAs
<b>Milestone 4</b>	Hiring new care managers and supervisors at AMH+s and CMAs
<b>Milestone 5</b>	Completing Tailored Care Management training for AMH+ and CMA care managers and supervisors
<b>Milestone 6</b>	AMH+s/CMAs meeting other competencies linked to operationalizing Tailored Care Management (e.g., development of policies and procedures and education and outreach to members on the Tailored Care Management outreach)