

North Carolina Department of Health and Human Services (DHHS)

Tailored Care Management Technical Advisory Group (TAG) Meeting #4 (Conducted Virtually)

January 28, 2022

Tailored Care Management TAG Members	Organization
Erin Lewis	B&D Integrated Health Services
Lauren Clark	Coastal Horizons Center
Denita Lassiter	Dixon Social Interactive Services
Jason Foltz, D.O.	ECU Physicians
Natasha Holley	Integrated Family Services, PLLC
DeVault Clevenger	Pinnacle Family Services
Lisa Poteat	The Arc of NC
John Gilmore, M.D. (absent)	UNC Center for Excellence in Community Mental Health
Sean Schreiber	Alliance Health
Josh Walker	Eastpointe
Lynne Grey (absent)	Partners Health Management
Sabrina Russell	Sandhills Center
Cindy Ehlers	Trillium Health Resources
Rhonda Cox (absent)	Vaya Health
Cindy Lambert	Cherokee Indian Hospital Authority
Jessica Aguilar	Consumer Representative
Pamela Corbett	Consumer Representative
Alicia Jones	Consumer Representative
Cheryl Powell	Consumer Representative
NC DHHS Staff Members	Title
Kelly Crosbie	Chief Quality Officer NC Medicaid, Quality and Population Health
Krystal Hilton	Associate Director of Population Health, NC Medicaid, Quality and Population Health
Gwendolyn Sherrod	Senior Program Manager for Special Programs, NC Medicaid, Quality and Population Health
Keith McCoy	Deputy CMO for Behavioral Health and IDD Community Systems, Chief Medical Office for Behavioral Health and IDD
Eumeka Dudley	Tailored Care Management Program Manager, NC Medicaid, Quality and Population Health

Agenda

- Welcome and Roll Call
- Key Updates
- Quality Measures
- Public Comments
- Next Steps

Welcome, Roll Call, and Key Updates (slides 1-9) – Krystal Hilton and Eumeka Dudley

The Department highlighted the following recently released resources, which are available on the Tailored Care Management webpage¹: updated [Tailored Care Management Provider Manual](#), new [guidance on care manager extenders](#), updated [guidance on Tailored Care Management payments](#), and a new [Frequently Asked Questions \(FAQ\)](#) resource from the recent Tailored Care Management webinar series. The Department also noted that the [2022 Quality Measurement Technical Specifications Manual](#), released in early January 2022, is available on the Department’s Quality Management and Improvement webpage.²

Additionally, the Department plans to launch a new provider forum offering technical assistance on Tailored Care Management data and system requirements. As such, the Department noted that they will pause the launch of the Tailored Care Management TAG Data Subcommittee while focusing attention on this new technical assistance forum; however, the Department expects to kick off the Tailored Care Management TAG Data Subcommittee later this spring. The Department clarified that the current monthly Tailored Care Management TAG meetings will continue separately from the new data technical assistance forum (or the Tailored Care Management TAG Data Subcommittee when it begins). The Department also noted that the technical assistance forum will not address individual implementation details for different electronic health record (EHRs) or clinical systems of record, but will instead focus on bigger picture data flows for Tailored Care Management. A TAG member suggested that the technical assistance consider leveraging use cases or model scenarios to demonstrate how data would flow.

Quality Measures Level Setting and Deep Dive (slides 10-22) – Kelly Crosbie

The Department presented an overview of the Medicaid quality strategy, which drives the overall vision for advancing the quality of care provided to Medicaid members in North Carolina, including those who will be enrolled in Tailored Care Management. A number of measures will be implemented at the Tailored Plan level to ensure accountability for the quality of members’ care. Tailored Plans will report some measures to the Department, while Department will calculate others directly and share results with the Tailored Plans.

The Department described that they had identified a limited subset of standardized quality measures for AMH+ practices and CMAs to inform Tailored Care Management practice improvement. The Department requested feedback from the Tailored Care Management TAG members on the following three proposed AMH+/CMA practice improvement quality measures: Child and Adolescent Well-Care Visits, Follow-up After Hospitalization for Mental Illness (7-Day/30-Day Rates), and Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are Using Antipsychotic Medications.

Tailored Care Management TAG members provided the following feedback:

¹ Tailored Care Management webpage: <https://medicaid.ncdhhs.gov/transformation/tailored-care-management>

² Quality Management and Improvement webpage: <https://medicaid.ncdhhs.gov/transformation/quality-management-and-improvement>

- **Increase Focus on I/DD Population in Quality Measures.** A few TAG members expressed concern that the three quality measures discussed did not focus enough on members with Intellectual and Developmental Disabilities (I/DD).
 - A TAG member noted that adults with I/DD often do not receive basic screening/preventive care such as colonoscopies and obstetrics/gynecology (OBGYN) visits. The Department responded that they measure metrics like cervical and breast cancer screening at the plan level and that these measures are included in the measure sets within the appendix slides of the presentation.
 - Another TAG member noted the focus on behavioral health in the second proposed measure (Follow-up After Hospitalization for Mental Illness [7-Day/30-Day]), and commented that it would be useful to apply that measure for the I/DD population as well. The Department acknowledged that this is a limitation of this measure as currently tested and specified.
 - The Department also noted that, for some measures, it may be more difficult to determine the extent to which Tailored Care Management compares to other factors influencing the measure's outcomes. A TAG member provided an example to elaborate on this point, noting that access to a physician is often a barrier to receiving follow-up care, and this factor is often something outside of a care manager's control.
 - The Department noted that the appendix section of this meeting's slide deck contains additional measures in the Tailored Plan quality measure set, beyond the three proposed measures that were the focus of this discussion. The AMH+/CMA measures are intended to measure quality measure performance at the practice level. The Tailored Plan quality measure set and Department-measured set together represent the broader framework of processes and outcomes the Department will use to assess quality of care delivered to Tailored Plan members at the plan level.
- **Include Measures to Evaluate Members' Experiences.** A TAG member noted that, currently, members often do not see their care coordinators even when visits are recommended in the care plan (e.g., if the care coordinator fails to attend a scheduled meeting). The TAG member asked whether the proposed quality measures would capture such patterns in which a care plan may not be implemented reliably. The Department explained that, while the proposed AMH+/CMA measure set would not capture these types of metrics, there are other methods the Department will use to collect important qualitative information in addition to quantitative. These include member experience surveys and member focus groups.

Public Comments and Next Steps (slides 23-25) – Gwendolyn Sherrod

- A participant asked whether the Department has considered the potential barriers to coordinating information sharing regarding hospital discharges, given the volume of AMH+ practices and CMAs that may participate in Tailored Care Management. A TAG member agreed with the potential challenges for coordinating with hospitals on this issue, and noted that the Department could more clearly communicate the requirement for hospitals and AMH+ practices/CMAs to coordinate, in order to support contracting arrangements.

- A participant questioned whether the Department is measuring non-medical drivers of population health. The Department explained that in year one, they will measure how much of the population is receiving screening for unmet health-related resource needs. In subsequent years, the Department intends to implement additional measures related to unmet health-related resource needs.

Tailored Care Management TAG members are encouraged to send any additional feedback or suggestions to Medicaid.TailoredCareMgmt@dhhs.nc.gov.