

# Tailored Plan Information for Providers

## 10 Things Providers Need to Know About North Carolina's Behavioral Health and Intellectual/Developmental Disability (I/DD) Tailored Plans

On Nov. 13, 2020, the North Carolina Department of Health and Human Services (DHHS) released a Request for Applications (RFA) for Behavioral Health and Intellectual/Developmental Disability (I/DD) Tailored Plans. Here is what you need to know:

### NORTH CAROLINA MEDICAID IS MOVING TO A MODEL CALLED "MANAGED CARE" BEGINNING IN JULY 2021

In Medicaid today, people enroll in NC Medicaid Direct, health insurance that is run by the state government. In managed care, people enroll in a health plan that is run by an insurance company. Once managed care is fully implemented, there will be several types of health plans:

- **Standard Plans** will provide integrated physical health, behavioral health, pharmacy, and long-term services and supports to most Medicaid beneficiaries, as well as programs and services that address other unmet health-related resource needs.
- **Behavioral Health I/DD Tailored Plans** will provide the same services as Standard Plans but will also provide additional specialized services that serve individuals with significant behavioral health conditions, I/DDs, and traumatic brain injury (TBI).
- **Eastern Band of Cherokee Indians (EBCI) Tribal Option** will be available to tribal members and their families and will be managed by the Cherokee Indian Hospital Authority.

### BEHAVIORAL HEALTH I/DD TAILORED PLANS ARE LAUNCHING IN 2022

Most people who receive behavioral health, I/DD and TBI services through their local management

entities/managed care organizations (LME/MCOs) will transition to Behavioral Health I/DD Tailored Plans. These people will continue to get their health insurance through NC Medicaid Direct and an LME/MCO until Behavioral Health I/DD Tailored Plans launch. Others may be eligible for Standard Plans or continue to receive services through NC Medicaid Direct.

### BEHAVIORAL HEALTH, I/DD, AND TBI SERVICES PROVIDED TODAY BY LME/MCOS WILL BE PROVIDED BY BEHAVIORAL HEALTH I/DD TAILORED PLANS UNDER MANAGED CARE

As directed by the North Carolina General Assembly, only LME/MCOs are eligible to respond to this RFA to serve as Behavioral Health I/DD Tailored Plans for the first four years of operation. Behavioral Health I/DD Tailored Plans will be integrated and provide physical health, behavioral health, long-term care, pharmacy services, and address unmet health-related resource needs under one plan. They also will offer certain high-intensity behavioral health, I/DD, and TBI services to meet the needs of the populations served by these plans, including administering North Carolina's Innovations waiver for individuals with I/DD and TBI waiver for individuals with a TBI. In addition to providing health care services for Medicaid-eligible individuals, they also will be responsible for managing the state's non-Medicaid (i.e., State-funded) behavioral health, I/DD, and TBI services, which are

targeted to uninsured and underinsured North Carolinians.

### **PROVIDERS WILL PROVIDE, AND BE PAID FOR PROVIDING, HEALTH CARE SERVICES TO BEHAVIORAL HEALTH I/DD TAILORED PLAN MEMBERS**

Providers will contract with Behavioral Health I/DD Tailored Plan(s), which will pay providers for covered Medicaid and State-funded services and work to resolve payment issues, instead of the State. Participating in a Behavioral Health I/DD Tailored Plan's network means you agree to contract terms on policies and procedures for managed care delivery.

### **BEHAVIORAL HEALTH I/DD TAILORED PLANS WILL HAVE OPEN NETWORKS FOR PHYSICAL HEALTH AND CLOSED NETWORKS FOR BEHAVIORAL HEALTH, I/DD, AND TBI**

Behavioral Health I/DD Tailored Plans will be required to include any willing provider in their physical health networks, with exceptions for providers who do not meet Behavioral Health I/DD Tailored Plan quality standards or agree to network rates. As directed by the General Assembly, Behavioral Health I/DD Tailored Plans will be able to maintain closed networks<sup>1</sup> for behavioral health, I/DD, and TBI providers like LME/MCOs do today. Behavioral Health I/DD Tailored Plans will be required to adhere to specific standards around network adequacy, including time and distance and appointment wait time standards, consistent with Standard Plan requirements. For Behavioral Health I/DD Tailored Plans, these network adequacy standards apply for both Medicaid members and State-funded Services recipients. In addition, Medicaid members will receive adequate and timely coverage of out-of-network services if the Behavioral Health I/DD Tailored Plan is unable to provide coverage within their network on a timely basis.

### **THERE WILL BE A RATE FLOOR FOR CERTAIN SERVICES**

Behavioral Health I/DD Tailored Plans will be subject to requirements for provider payments consistent with Standard Plan practices. These requirements include rate floors, or minimum payment levels – at NC Medicaid Direct levels or levels defined by DHHS – for in-network physicians, physician extenders, pharmacies (dispensing

fees), hospitals and nursing facilities. For certain in-network providers (e.g., local health departments, public ambulance providers), Behavioral Health I/DD Tailored Plans may also be required to make additional payments based on utilization of specific services. To encourage innovation related to value-based payments, Behavioral Health I/DD Tailored Plans and providers may mutually agree to alternative reimbursement arrangements.

### **BEHAVIORAL HEALTH I/DD TAILORED PLANS WILL OFFER AN INNOVATIVE NEW TAILORED CARE MANAGEMENT MODEL**

Behavioral Health I/DD Tailored Plans will offer Tailored Care Management as the predominant care management model for its Medicaid members. Tailored Care Management is built on the principle that provider- and community-based care management is crucial to the success of fully integrated managed care. The Behavioral Health I/DD Tailored Plan must ensure care managers delivering Tailored Care Management coordinate across a member's whole-person needs, including physical health, behavioral health, I/DD, TBI, long-term services and supports, pharmacy and unmet health-related resource needs. Tailored Care Management will primarily be delivered by primary care practices certified by DHHS as Advanced Medical Home+ (AMH+) practices and behavioral health or I/DD providers certified by DHHS as care management agencies (CMAs).

### **PROVIDERS WILL HAVE A PROCESS TO RAISE AND RESOLVE DISPUTES WITH BEHAVIORAL HEALTH I/DD TAILORED PLANS**

Behavioral Health I/DD Tailored Plans must have a provider appeals and grievance policy including a process for providers to bring issues to the Behavioral Health I/DD Tailored Plan, an appeals process for providers to challenge specific Behavioral Health I/DD Tailored Plan decisions, and information regarding access to state level review. In most circumstances, Behavioral Health I/DD Tailored Plans will be required to provide written notice of a provider appeal decision within 30 calendar days of receiving the appeal request. There will be a provider ombudsman who will represent the interests of the provider community by receiving and responding to inquiries and complaints regarding PHPs.

<sup>1</sup> "Closed Network" is defined by N.C. Gen. Stat. [§ 108D-1\(6\)](#)

## BEHAVIORAL HEALTH I/DD TAILORED PLANS WILL HAVE ACCOUNTABILITY AND RIGOROUS OVERSIGHT

All Behavioral Health I/DD Tailored Plans will be subject to rigorous oversight by DHHS to ensure strong provider networks, a full range of benefits, accountability for quality and outcomes, a positive beneficiary experience and timely payments to providers.

## PROVIDERS WILL RECEIVE EDUCATION AND SUPPORT DURING AND AFTER THE LAUNCH OF BEHAVIORAL HEALTH I/DD TAILORED PLANS

To ensure providers are ready for the launch of Behavioral Health I/DD Tailored Plans on Dec. 1, 2022, DHHS will ensure providers have access to the education and training they need for this transition. You will receive more guidance and information from DHHS and the Tailored Plan Applicants (current LME-MCOs) on the launch of Behavioral Health I/DD Tailored Plans.

## ANTICIPATED TIMELINE

- **Now and ongoing.** Prospective Behavioral Health I/DD Tailored Plans (current LME/MCOs) may start to reach out to initiate network participation discussions with providers.
- **Early Summer 2021.** DHHS will award contracts to the LME/MCOs selected to serve as Behavioral Health I/DD Tailored Plans.
- **Dec. 1, 2022.** Behavioral Health I/DD Tailored Plans will launch.

