



Tailored Care Management Technical Advisory Group (TAG)

Meeting #8: Workforce

June 24, 2022

Agenda

- **Welcome and Roll Call (5 min)**
- **Key Updates (5 min)**
- **Workforce (35 min)**
- **Public Comments (10 min)**
- **Next Steps (5 min)**

Welcome and Roll Call

Department of Health and Human Services

Kelly Crosbie, MSW, LCSW	Gwendolyn Sherrod, MBA, MHA	Eumeka Dudley, BS	Regina Manly, MSA	Keith McCoy, MD	Loul Alvarez, MPA
Chief Quality Officer	Senior Program Manager, TCM	TCM Program Manager	TCM Program Manager	Deputy CMO for Behavioral Health and IDD Community Systems	Associate Director, Population Health
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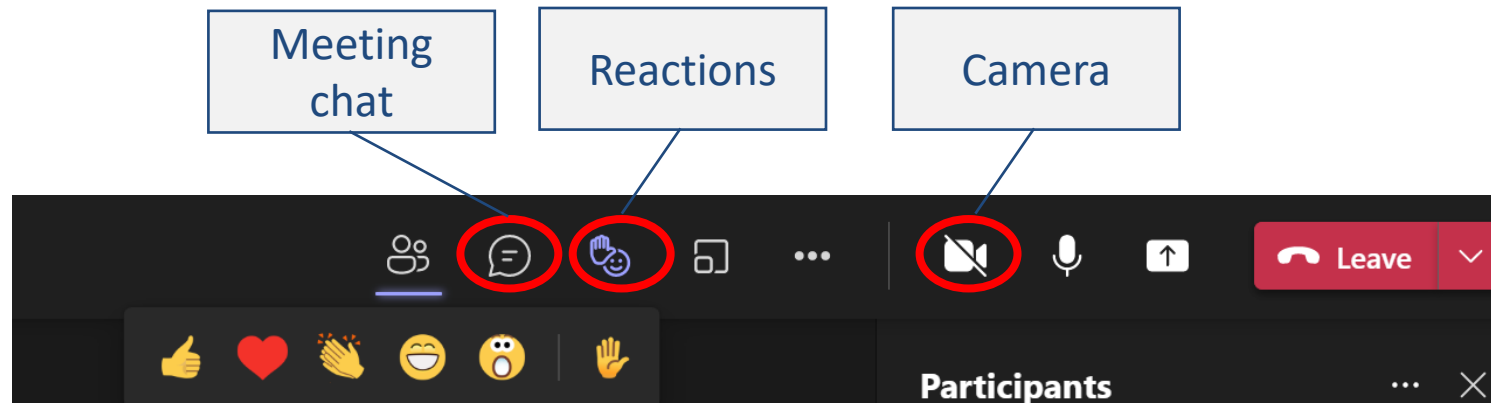
**NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES**

Tailored Care Management TAG Membership

Name	Organization	Stakeholder
Erin Lewis	B&D Integrated Health Services	Provider Representative
Lauren Clark	Coastal Horizons Center	Provider Representative
Denita Lassiter	Dixon Social Interactive Services	Provider Representative
Jason Foltz, D.O.	ECU Physicians	Provider Representative
Natasha Holley	Integrated Family Services, PLLC	Provider Representative
DeVault Clevenger	Pinnacle Family Services	Provider Representative
Lisa Poteat	The Arc of NC	Provider Representative
John Gilmore, M.D.	UNC Center for Excellence in Community Mental Health	Provider Representative
Sean Schreiber	Alliance Health	Tailored Plan Awardee
Beverly Gray	Eastpointe	Tailored Plan Awardee
Lynne Grey	Partners Health Management	Tailored Plan Awardee
Sabrina Russell	Sandhills Center	Tailored Plan Awardee
Cindy Ehlers	Trillium Health Resources	Tailored Plan Awardee
Rhonda Cox	Vaya Health	Tailored Plan Awardee
Cindy Lambert	Cherokee Indian Hospital Authority	Tribal Option Representative
Jessica Aguilar	N/A	Consumer Representative
Pamela Corbett	N/A	Consumer Representative
Alicia Jones	N/A	Consumer Representative
Cheryl Powell	N/A	Consumer Representative

Increasing Engagement

We encourage those who are able to turn on cameras, use reactions in Teams to share opinions on topics discussed, and share questions in the chat.



Key Updates

Beneficiary Choice Period for Tailored Care Management

Beneficiary choice period is August 15, 2022 – October 14, 2022.

- Tailored Care Management contracting deadline for providers is July 16, 2022, for inclusion in the **initial** beneficiary choice period.
- Tailored Plans update their network files daily; therefore, if contracting does not occur by July 16, 2022, **providers still have the ability to appear in future directories for member choice.**
- Tailored Care Management providers will be assigned members as long as they meet contracting deadlines for Tailored Care Management auto-assignment (next slide).
- After beneficiary choice period closes, beneficiaries who have not chosen a Tailored Care Management provider will be automatically assigned one around October 15.
 - Why? Tailored Care Management auto-assignment must be completed before the health plans mail Medicaid ID cards, which must be mailed to members by November 5, 2022.

Beneficiary Auto Assignment for Tailored Care Management

Tailored Care Management contracting deadline for providers is September 30, 2022, for inclusion in Tailored Care Management auto-assignment.

- What if a Tailored Care Management provider is not contracted by September 30, 2022?
 - Then the provider will not be included in initial auto-assignment.
 - Once the provider completes readiness reviews and finalizes contracting with a Tailored Plan, the provider will become an in-network provider with the Tailored Plan and can receive Tailored Care Management assignments.

- **Member choice:** Once contracted, Tailored Care Management providers in the Tailored Plan network can be available for members' choice.
 - Beneficiaries can change their Tailored Care Management provider twice a year without cause and anytime with cause.
 - Beneficiaries will be able to call their health plan and select a Tailored Care Management different from the one they received during auto-assignment.

- **Member auto assignment:** Once contracted, Tailored Care Management providers in the Tailored Plan network can be assigned members according to their panel limit agreements with Tailored Plans.

Workforce

North Carolina Workforce Challenges in Context

Providers, Tailored Plans, and consumer representatives have expressed concerns about workforce shortages impacting hiring for Tailored Care Management. The Department is looking for input on strategies to mitigate these challenges in light of broader workforce shortages.

In recent years, there has been a nationwide behavioral health and home-and community-based services (HCBS) workforce shortage spurred by factors including:

- COVID-19 pandemic and “Great Resignation”
- Increased prevalence/recognition of mental health conditions and substance use disorders
 - Self-reported symptoms of anxiety and/or depressive disorder increased from 11% pre-pandemic to 30% in 2021¹
 - 13% of adults reported new or increased substance abuse due to coronavirus-related stress in June 2020,² and drug overdose deaths increased by nearly 30% from 2019 to 2020¹
- Low compensation, coupled with intense job responsibilities and burnout

Nationally

- Shortages in mental health workforce impact an estimated 149 million Americans, and over 7,400 mental health practitioners are needed to fill vacancies³
- In 2021, the HCBS workforce experienced a 40-60% turnover rate⁴

North Carolina

- In a 2022 survey of North Carolina’s behavioral health frontline workforce, 85% of participants reported experiencing at least one symptom of burnout⁵
- There is a projected need for 20,000 more HCBS direct care workers in North Carolina by 2028⁶

The behavioral health and HCBS workforce includes many individuals who will meet care manager qualifications for Tailored Care Management

Sources: ¹Mental Health and Substance Use State Fact Sheets, ²The Implications of COVID-19 for Mental Health and Substance Use, ³HRSA Shortage Areas, ⁴MACPAC State Efforts to Address HCBS Workforce Shortages, ⁵APNC State of North Carolina’s Behavioral Health Workforce, ⁶NC April 2022 Quarterly Report for the Implementation of ARP Act

Tailored Care Management Workforce Challenges

Within the Tailored Care Management context, stakeholders continue to express questions and concerns about the ability to establish a sufficient care manager workforce to launch the program.

Stakeholder Questions/Concerns

- **Pool Interested/Qualified in Becoming Care Managers for Tailored Plan Population:** Concerns that there may not be a sufficient pool of individuals across the state qualified and/or interested in being care managers, leading to challenges in engaging members and achieving member **contact requirements** for the Tailored Plan population
- **Qualifications:** Questions about whether Qualified Professionals (QPs) can serve as care managers due to differences in the required qualifications, as well as a desire to make exceptions to the care manager education/degree requirements if the individual has appropriate experience serving the population
- **Competition with Staffing for Clinical Services:** Concerns that qualifications are similar for care managers and non-licensed clinical staff in the State, presenting potential competition between staffing for clinical services and staffing for care management
- **Part-Time Care Managers:** Questions about whether care managers can serve as partial full-time equivalents (FTEs) (e.g., the same person serves as 0.5 FTE in clinical role and 0.5 FTE in care manager role at the same organization; or a care manager serves as a part-time employee at an organization)
- **Balance Between Plan and Provider-Employed Care Managers:** Concerns that Tailored Plans have additional resources and incentives that AMH+ practices/CMAs do not have, making it easier for Tailored Plans to recruit and retain care managers
- **Population-Specific Concerns:** Concerns that there will be insufficient providers to serve the child behavioral health population

For Discussion: Tailored Care Management Workforce Challenges

The Department is seeking feedback on short- or longer-term changes* to mitigate workforce concerns.

1. What other concerns do you have regarding securing the appropriate workforce to launch Tailored Care Management?
2. Do you have quantitative data on the magnitude of these issues (i.e., number of care managers needed compared to number available to hire)?
3. To what extent do workforce challenges vary different by regions of the state? By population (e.g., behavioral health or I/DD)?
4. How would you recommend that the Department address these challenges (e.g., making changes to care manager qualifications)?
 - a. In the short-term (e.g., 1-2 years)?
 - b. In the longer-term (e.g., 3+ years)?

For Discussion: Feedback on Extender Guidance

To bolster the care management workforce, the Department will allow organizations delivering Tailored Care Management to use “care manager extenders” to support certain Tailored Care Management functions. The Department has received feedback on the care manager extender guidance* and seeks your input on the following issues.

Department’s Vision

- It is critical that members have a relationship with a **single care manager** who is responsible for their whole-person care needs
- **The extender will work day-to-day with the member’s care manager and supervising care manager**, who will ensure the extender is only performing functions within their training, scope, and abilities
 - The current policy is for a care manager to supervise no more than two FTE extenders
- **Extenders will be “generalists,”** similar to care managers

Stakeholder Feedback

- There is a **desire for more flexibility** in the approach to care manager extenders, including their supervision
- There are questions regarding how **existing LME-MCO models that use pools of specialists** to provide various supports to individuals can be leveraged in the extender model
 - Stakeholders seek **clarity on whether/how these specialist pool models fit into the Department’s vision** for Tailored Care Management, including the **supervision approach** for care manager extenders
- There are **questions about the supervision model for extenders**, specifically around whether they must be supervised by care managers

1. **How do specialized extender models work today?**
 - a. **Where are areas of alignment and tension between these models and the Department’s vision?**
2. **What are concerns about the Department’s supervision model for extenders?**
3. **Do you envision that extenders will play different roles depending on their background (e.g., community health worker, peer support specialist, community navigator, etc.)?**

*Care manager extender guidance available here: <https://medicaid.ncdhhs.gov/media/11305/download?attachment>

FTE = Full-Time Equivalent

Public Comments

Next Steps

Next Steps

Tailored Care Management TAG Members

- Share today's discussion key takeaways with your networks

Department

- Discuss feedback received during today's Tailored Care Management TAG meeting
- Prepare for July 22 Tailored Care Management TAG session

Tailored Care Management TAG Meeting Cadence

Tailored Care Management TAG meetings will generally take place the fourth Friday of every month from 3:30-4:30 pm ET.

Upcoming 2022 Meetings:

July 22, August 26, September 23, October 28

Previous Meetings:

- **Meeting #1:** Friday, October 29, 2021. 3:00 – 4:30 pm ET ([presentation](#), [minutes](#))
- **Meeting #2:** Friday, November 19, 2021, 3:30 – 4:30 pm ET ([presentation](#), [minutes](#))
- **Meeting #3:** Friday, December 17, 2021, 3:30 – 4:30 pm ET ([presentation](#), [minutes](#))
- **Meeting #4:** Friday, January 28, 2022, 3:30 – 4:30 pm ET ([presentation](#), [minutes](#))
- **Meeting #5:** Friday, February 25, 2022, 3:30 – 4:30 pm ET ([presentation](#), [minutes](#))
- **Meeting #6:** Friday, March 25, 2022, 3:30 – 4:30 pm ET ([presentation](#), [minutes](#))
- **Meeting #7:** Friday, June 3, 2022, 3:30 – 4:30 pm ET ([presentation](#), [minutes](#))