MCAC Medicaid Managed Care Update

Jay Ludlam, Deputy Secretary
NC Medicaid

August 16, 2019
1. Managed Care Timeline
2. Day 1 Priorities
3. Managed Care Status
4. Enrollment Metrics
5. Contact Center Metrics
6. Issues and Solutions Examples
7. DHHS Support to Providers
8. Actions You Can Take
9. Questions
Important Questions

Is 11/1/19 still the “Go live” date?

Yes

- Managed Care is still slated to go live Nov. 1st 2019
- Judge denied request for stay
- No legislation exists which delays implementation
- An approved budget is necessary to support managed care
Day 1 Priorities Remain Unchanged

- We are committed to making sure that when we go live with managed care:
  - A person with a scheduled appointment is seen by provider
  - A person’s prescription is filled by the pharmacist
  - A provider enrolled in Medicaid prior to Nov 1, is still enrolled
  - A provider is paid for care delivered to members
Important Questions

How is the transition going?

Success Measures

- Quantitative Measures
  - Member contacts
  - Provider engagement
  - Network Adequacy

- Qualitative Measures
  - Complaints
  - Adherence to scripting
  - Issues
Important Questions

How is the transition going?

- Enrollment Broker Call Center, Website, Chat Feature and App launched
- Mailed 300K+ letters
- Call abandonment rates low
- At least 1 EB staff onsite in each of Phase 1 DSS offices
- Health Plan Member Service Lines are open and accepting calls
- Members are enrolling
Quantitative Measures - Open Enrollment

NC Medicaid Managed Enrollments

~11,000

As of August 7, 2019
Quantitative Measures- Open Enrollment

Enrollment Broker Call Center
16,000+ Calls Handled

NCmedicaidplans.gov
20,552 Website Visits

NC Medicaid Managed Care Mobile App
6,808 Sessions

All information for the period of August 7, 2019
Longer Term Success Measures

• Member Health Measures
• Member Satisfaction
• Call Center Responses
• Notices and Correspondence
• Voluntary Plan Selection Rates
• Provider Enrollment/Network Adequacy
• Provider Satisfaction
Important Questions

Are providers contracting?

- All current providers are not yet contracted
- Provider contracting was on pace initially but has slowed
- Provider contracts are important for auto assignment
Provider Contracting Considerations

• **IMPORTANT** - PHP cannot list a provider in the directory until the provider can be paid

• PHP contract processing time (< 2 weeks)

• Auto Assignment algorithm considers patient/provider historical relationships

• Auto Assignment occurs 9-16-19

• Providers must contract to be listed in the directory

• DHHS will hold PHPs accountable to network adequacy standards
Have there been issues with managed care implementation?

- Yes
- Transitioning to managed care is most significant change that NC Medicaid has ever undertaken.
- With any rollout of this magnitude, there have been issues and questions.
- We are committed to doing everything possible to resolve problems quickly and have identified some
Benigniciary Related Issues/Solutions Examples

**Issue**

- A few individuals have received letters who should not have
- Beneficiaries initially not able to complete enrollment forms at DSS offices with EB Outreach Specialists (OS).
- Beneficiaries may not be able to find their Primary Care Provider of choice in the directory.

**Solution**

- Corrections have been made. New letters will go out to some individuals i.e. Dual Eligible
- Copies of forms distributed to OS, will now fax on behalf of beneficiary
- Beneficiaries do not have to choose now. A reminder card will be mailed in August. May be auto assigned and can change later.
<table>
<thead>
<tr>
<th>Issues</th>
<th>Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficult to navigate</td>
<td>Some items have been resolved</td>
</tr>
<tr>
<td>Does not have current health plan enrollments</td>
<td>DHHS is working internally and with the EB to</td>
</tr>
<tr>
<td>Contains outdated provider data</td>
<td>address remaining items</td>
</tr>
<tr>
<td>Mismatch on addresses</td>
<td>Tracking Corrections through Use Cases</td>
</tr>
<tr>
<td>Provider/PHP Affiliations</td>
<td></td>
</tr>
</tbody>
</table>
Important Questions

Additional Supports for Providers

- NC Medicaid Transformation Web based resources
  https://www.ncdhhs.gov/assistance/medicaid-transformation

- PHP contact information
  https://medicaid.ncdhhs.gov/health-plan-contact-information

- Provider Ombudsman in progress
DHHS support to providers

Regular Status Calls/Webinars

Provider Playbook
https://medicaid.ncdhhs.gov/providers/provider-playbook-medicaid-managed-care

Provider Training, Webinars, TA
https://medicaid.ncdhhs.gov/provider-playbook-training-courses

Provider Issues Communication
Questions
Resources
The NC Medicaid Managed Care Introductory Video addresses:

- What is a primary care provider (PCP)
- What is a Health Plan
- The Health Plans available
- What beneficiaries need to do
- What happens after beneficiaries enroll
- The phases for enrollment and key dates
- How to get answers to additional questions

https://www.youtube.com/watch?v=9xJyeXkypl8&t
Link To Beneficiary Outreach Materials

Download at medicaid.ncdhhs.gov/county-playbook-Medicaid-managed-care

POSTER
FACT SHEETS
Q&A
PALM CARD
FLYER

MANAGED CARE STATUS REPORT AUGUST 15, 2019
Resources for Beneficiaries

ABOUT ELIGIBILITY
Continue to come to local DSS
Find contact information at ncdhhs.gov/localdss

ABOUT NC MEDICAID DIRECT BENEFITS AND CLAIMS
Call the Medicaid Contact Center toll free:
1-888-245-0179

ABOUT CHOOSING A PLAN OR PCP AND ENROLLING
Go to ncmедicaidplans.gov (chat available)
Use the NC Medicaid Managed Care mobile app
Call 1-833-870-5500 (the call is free)
TTY: 1-833-870-5588

ABOUT NC MEDICAID MANAGED CARE PLAN OR BENEFITS
Call their Health Plan
Questions