MCAC MEDICAID MANAGED CARE UPDATE

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December 13, 2019
Managed Care Suspension

• Terminology
  • This is not a delay, it’s a suspension
• Managed Care will happen
  • Not “if” but “when”
  • Vision for integration remains unchanged
  • Will use suspension period to explore other opportunities for integration
• Beneficiary Education continues to be important
• Period of suspension offers opportunities
Notices for Managed Care Suspension

- Distribution Initiated 12-6-19
- Planned Completion 12-13-19
- All households who had beneficiaries who are:
  - Mandatory
  - Exempt

Questions? Go to ncmichiganplans.gov or call us at 1-833-870-5500 (TTY: 1-833-870-5588). The call is free. We can speak with you in other languages.

December 14, 2019

Dear JANE SMITH:

Important Update: For now, your Medicaid will not change to new health plans.

You do not need to take any action. Your Medicaid benefits stay the same.

Keep using your NC Medicaid benefits as you have been. You can go to the same primary care provider (printed on your Medicaid card) and specialists you have now. You do not need to choose a health plan at this time.

Why did this happen? Due to ongoing state budget issues, the new Medicaid health plans cannot start at this time.

When will Medicaid move to new health plans? For now, the move to new health plans is on hold. We will tell you when it restarts and when you will be able to choose a health plan.

What if I already chose a health plan? We will save your health plan choice. When Medicaid health plans restart, you will have an opportunity to change your health plan if you choose.

More questions? We can help. For information, visit medicaid.ncdhhs.gov or call 1-833-870-5500 (TTY: 1-833-870-5588).

We understand that this may be confusing. Remember, for now, keep using your Medicaid benefits as you do today. You are our top priority. We will keep you updated if anything changes for your Medicaid benefit.

Thank you,

NC Medicaid Team
DHHS’ Priorities during suspension

- **Beneficiaries:** Ensure beneficiaries have a clear message on what to do know and what to do when managed care restarts

- **Providers:** Continue provider engagement and training and encourage provider contracting with the PHPs; address directory modifications

- **PHP Readiness:** Request PHPs to engage in testing and readiness assessments to a place of logical pause or conclusion; testing opportunities with providers

- **Procurement:** Move forward with managed care related procurements (Ombudsman, EQRO, and Healthy Opportunities Pilots)
## Proposed Transformation Suspension Summary

Identification of transformation areas being suspended, slowed down, or continued.

<table>
<thead>
<tr>
<th>Suspend (13 areas)</th>
<th>“Slow Down” (18 areas)</th>
<th>Continue (31 areas)</th>
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</thead>
<tbody>
<tr>
<td>• Open Enrollment</td>
<td>• Auto Enrollment testing</td>
<td>• NEMT</td>
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<tr>
<td>• EB Onsite County Support</td>
<td>• Provider Outreach / AHEC</td>
<td>• Procurements / Contracts: Ombudsman, CVO, EQRO, External Evaluator, CCNC, Tribal PCCM, TP RFA, Healthy Opportunities Pilot, Support Vendor Contracts</td>
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<tr>
<td>• Transition of Care development</td>
<td>• Reporting and KPI Definition</td>
<td>• EB Provider Directory</td>
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<tr>
<td>• PHP Readiness</td>
<td>• AMH Program Implementation</td>
<td>• Flexible Analytics Implementation</td>
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<td>• Go-Live Deployment Planning</td>
<td>• PHP Inbound Deliverables</td>
<td>• Technology Operations</td>
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<tr>
<td>• Selected End to End Testing- RX lock ins, PAs, Utilization based payments</td>
<td>• Network Adequacy Analysis</td>
<td>• Managed File Transfer Solution / Data</td>
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<td></td>
<td>• Status Monitoring and Reporting</td>
<td>• E2E Testing: PHP Auto Assignment, Enrollment Changes, PCP Auto Assignment, Encounters, Claims, Drug Rebate, Capitation Paid, Capitation Paid and Adjusted, Transition of Care, Rx Retro DUR,</td>
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<td></td>
<td>• Divisional Readiness</td>
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<td>• Command Center</td>
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<td>• SDOH Resource Platform Implementation and overall implementation planning</td>
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Note: Not all areas listed
Suspension Impact & Tailored Plan

• Tailored Plan Request For Applications (RFA) Release Pending

• Care Management Manual and Application Process Released 12-12-19

• Tailored Plan Eligible Beneficiaries
  • Exempt Individuals will receive a notice
  • Raise Your Hand Requests In Process – Approximately 500+ people requested form before suspension
  • Tailored Plan Eligible Individuals Who Selected a Standard Plan – more than 2,000

• Crisis System – PHPs Plans Submitted 11-30-19, Under Review

• Behavioral Health Contracting (Standard Plans)
Questions/Discussion