Managed Care PCP/AMH Provider Payment Matrix

Payment type	Description	Time limited
Health equity	To support goals to achieve health equity, NC Medicaid is introducing an enhanced payment to Carolina Access (CA) primary care practices serving beneficiaries from areas of the state with high poverty rates. To be eligible, the practice must be CA I or II and meet a minimum beneficiary poverty score, determined by the average poverty rate for the census tracts of the beneficiaries assigned to each practice's location. Depending on the poverty score, an additional \$9 or \$18 will be added to the per member per month (PMPM) payment. See the <u>Health Equity Initiative Payment</u> bulletin for more information.	April May June 2021
Glidepath	From April-June of 2021, NC Medicaid offered a time-limited payment opportunity to Advanced Medical Home (AMH) Tier 3 practices. This payment opportunity was intended to provide an incentive for managed care launch readiness as well as provide funding to offset some of practices' Tier 3 implementation costs. An additional amount of \$8.51 PMPM was added to the current medical home PMPM for qualifying providers. See the following bulletin article for more details. <u>https://medicaid.ncdhhs.gov/blog/2021/05/07/advanced- medical-home-tier-3-glidepath-payment-reconsideration-process-and</u>	April May June 2021
AMH (applies to NC Medicaid Managed Care only)	If contracted with a health plan as:	
	Tier 1: Provider receives a medical home fee of \$1 PMPM (see caveat below)	
	Tier 2 : Provider receives a Medical Home Fee of \$2.50 or \$5 (see Community Care of North Carolina (CCNC) CAII below) for agreeing to a set of medical home services and access standards.	
	Tier 3: Provider receives a medical home fee of \$2.50 or \$5 (see CCNC (CAII) below), plus a care management fee negotiated between the practice (or clinically integrated network (CIN)/other partners on behalf of practice) and health plan. Providers can use their care management payments to contract with CINs or other partners who may perform care management on behalf of the practice.	No
	Performance Incentive Payments: Health plans can offer incentive payments for quality performance to Tier 1 & 2 providers. Health plans are required to offer incentive payments to AMH Tier 3 for quality performance on a standardized AMH quality measure set.	
Carolina Access/CCNC (applies to Medicaid Direct only)	CAI: Providers approved for CAI participation prior to 7/1/2019 receive \$1 PMPM medical home fees. CAI providers enrolled after July 1, 2019 do not receive a medical home fee but are eligible for care management fees once they enroll in the C/CCNC network and become a CAII medical home.	Base fee not time limited;
	CAll Medical Home Fees: Providers receive \$2.50 for Non- Aged/Blind/Disabled beneficiaries (ABD), and \$5 for ABD beneficiaries PMPM for agreeing to a set of medical home service and access standards. NOTE: These payments have been doubled during the COVID-19 state of emergency. (<u>https://medicaid.ncdhhs.gov/blog/2020/05/01/special-</u> <u>bulletin-covid-19-80-nc-medicaid-temporarily-increasing-flexibility-and</u>)	Double fee is time limited to period of state of emergency

