

**North Carolina Department of Health and Human Services (DHHS)
Tailored Care Management Technical Advisory Group (TAG) Meeting #27 (Conducted Virtually)
February 23, 2024**

Tailored Care Management TAG Members	Organization
Erin Lewis	B&D Integrated Health Services
Julie Quisenberry	Coastal Horizons Center
Billy West	Daymark
Denita Lassiter	Dixon Social Interactive Services
Luevelyn Tillman (absent)	Greater Vision Counseling and Consultants
Keischa Pruden	Integrated Family Services, PLLC
Haley Huff	Pinnacle Family Services
Sandy Feutz	RHA
Lisa Poteat	The Arc of NC
Eleana McMurry, LCSW	UNC Center for Excellence in Community Mental Health
Donna Stevenson	Alliance Health
Lynne Grey (absent; represented by Wyatt Bell)	Partners Health Management
Cindy Ehlers	Trillium Health Resources
Chris Bishop (absent)	Vaya Health
Cindy Lambert	Cherokee Indian Hospital Authority
Jessica Aguilar	N/A
Pamela Corbett	N/A
Jonathan Ellis (absent)	N/A
Alicia Jones (absent)	N/A
NC DHHS Staff Members	Title
Kristen Dubay	Chief Population Health Officer, NC Medicaid
Loul Alvarez	Associate Director, Population Health, NC Medicaid
Gwendolyn Sherrod	Program Lead, Tailored Care Management, NC Medicaid, Quality and Population Health
Eumeka Dudley	Program Lead, Tailored Care Management, NC Medicaid, Quality and Population Health
Regina Manly	Senior Program Manager, Tailored Care Management, NC Medicaid, Quality and Population Health
Tierra Leach	Program Specialist, Tailored Care Management, NC Medicaid, Quality and Population Health

Agenda

- Welcome and Roll Call
- Tailored Care Management Promising Practices
- Highlighting Tailored Care Management Success Stories
- Tailored Care Management Updates
 - Updated Tailored Care Management Provider Manual
 - Launch of Provider-Based Tailored Care Management for TCL Participants
- Upcoming Launch of Tailored Plans
- Underlying Assumptions of the Tailored Care Management Payment Rates
- Discussion

Tailored Care Management Promising Practices (slides 8-15) – Monarch (Leigh Daughtridge and Anna Marshall)

The Department invited Monarch to present on strategies implemented by the CMA to help ensure successful deployment of Tailored Care Management, including engagement and retention of care managers. Monarch’s presentation, “Employee Engagement and Retention in TCM,” can be reviewed on slides 8-15 of the [February TAG](#).

Highlighting Tailored Care Management Success Stories (slides 16-19) – Gwendolyn Sherrod

The Department believes it is important to capture the critical and impactful work that providers are doing to consistently support members and enhance their quality of life and access to needed resources. The Department shared two Tailored Care Management success stories from Daymark Recovery Services and Primary Care Solutions. These success stories, along with additional success stories, have been published to the [Tailored Care Management webpage](#).

The Department asked the TAG if there were additional success stories providers would like to share. Providers shared the following stories:

- A member was in the hospital for months, and with the help of their care manager, was able to transition out of the hospital.
- A member’s mother was initially distrusting towards the care manager, but through successful relationship-building and strong support, the care manager gained the mother’s trust and was able to advocate on behalf of the member and their mother in meetings with the member’s school.
- A care manager successfully assisted a member move out of unsafe living conditions. Through the care managers’ support, the city intervened, the member secured new Independent Living funding, and the member is much happier now.

Tailored Care Management Updates (slides 19-22) – Tierra Leach

Updated Tailored Care Management Provider Manual

The Department released an updated Tailored Care Management Provider Manual on February 9, 2024. The [updated Provider Manual](#) and a [memo summarizing the updates](#) are posted on the Tailored Care Management webpage. Many of the updates are related to Tailored Care Management for Transitions to Community Living (TCL) participants—e.g., an overview of the intersection, details on the roles and

responsibilities of Tailored Care Management and TCL staff, information on designating AMH+/CMAs to provide Tailored Care Management to TCL participants).

Launch of Provider-Based Tailored Care Management for Transitions to Community Living (TCL) Participants

As the Department discussed in previous TAG meetings (see [July 2023 TAG](#) and [January 2024 TAG](#)), the Department is seeking to have at least one TCL-designated AMH+/CMA in each LME/MCO region to begin serving TCL participants on April 1, 2024. The Department shared the upcoming key dates on the launching process:

- **February 13 – 28:** LME/MCO respond to requests for Letter of Support (AMH+s/CMAs requested Letters of Support from February 12-18)
- **February 19 – March 4:** TCL Distinction Applications Open
- **March 4 – March 28:** NCQA Application Review Period
- **April 1:** Launch of first cohort of Tailored Care Management providers designated for TCL

Upcoming Launch of Tailored Plans (slides 23-24) – Tierra Leach

With Tailored Plans set to launch on July 1, 2024, the Department asked the TAG members what resources they would find helpful in supporting members and what challenges do they foresee facing during this transition. TAG members had the following requests:

- If the Department or LME/MCOs plan to send a letter regarding the transition that providers review it first, so they can be prepared to interpret the letters for their members.
 - The Department responded by noting the LME/MCO workgroup is in the process of determining the communication strategy for the transition to Tailored Plans. This will be shared with the TAG once it is finalized.
- The Department will share additional details on the network adequacy, so providers can share this information with their members.
- A meeting focused on what will change in AMH+s'/CMAs' work flow when Tailored Plans are launched.

Underlying Assumptions of the Tailored Care Management Payment Rates (slides 25-34) – Mercer (Bob Karsten)

The Department invited their actuaries at Mercer to present on the underlying assumptions of the updated Tailored Care Management payment rates. The Department released an [updated memo](#) detailing these underlying assumptions.

Mercer noted that the memo should be used to understand how the Department determined the Tailored Care Management payment rates and how the Department utilized the 2023 Tailored Care Management provider survey and perspectives to inform rate development. Mercer also emphasized that the assumptions in the memo should not be viewed as new requirements and that providers should not use the assumptions to determine the intensity of care management or the number of contacts a member needs. To bill for Tailored Care Management in any given month, the requirement remains that one qualifying contact must be delivered through a real-time telephone call, two-way real-time video, or an in-person visit.

Additional details on the underlying assumptions that were relied upon to build the Tailored Care Management monthly payment rates can be found in the [February TAG](#) slide deck and [the underlying assumptions memo](#).

TAG members and other participants made the following comments about the underlying assumptions of the Tailored Care Management payment rates:

- One TAG member asked if caseloads should be greater than that noted in the assumptions to account for the fact that not all members will be engaged in a given month.
 - Mercer noted that is correct. The caseload assumption is the ratio of one FTE care manager to the number of consented and engaged members in a given month.
- Multiple TAG members noted that for some members they spend more time, including collateral contacts, than what's described the assumptions for the rate build-up.
 - Mercer noted that these assumptions represent averages across an organization's panel and account for collateral contacts.
- Multiple providers believe the overhead costs assumptions are too low and do not accurately represent their own overhead costs.

Tailored Care Management TAG members are encouraged to send any feedback or suggestions to Medicaid.TailoredCareMgmt@dhhs.nc.gov.