## **North Carolina Department of Health and Human Services (DHHS)** Tailored Care Management Technical Advisory Group (TAG) Data Subcommittee Meeting

October 19, 2023, 3:30-5:00 PM ET

| Data Subcommittee Members |                                   |         |  |
|---------------------------|-----------------------------------|---------|--|
| Organization Type         | Organization                      | Present |  |
| LME-MCO                   | Alliance Health                   | Yes     |  |
|                           | Eastpointe                        | Yes     |  |
|                           | Partners Health Management        | Yes     |  |
|                           | Sandhills Center                  | No      |  |
|                           | Trillium Health Resources         | Yes     |  |
|                           | Vaya Health                       | Yes     |  |
| CINs/Data Partner         | Access East                       | No      |  |
|                           | Alera Health (fka Blaze Advisors) | Yes     |  |
|                           | CCPN                              | Yes     |  |
|                           | CHN                               | No      |  |
|                           | Duke                              | Yes     |  |
|                           | Emtiro                            | No      |  |
|                           | NCCHCA/CMHN                       | Yes     |  |
|                           | MediSked                          | Yes     |  |
| AMH+/CMA                  | B&D Integrated Health Services    | Yes     |  |
|                           | Coastal Horizons Center           | No      |  |
|                           | Daymark Recovery Services         | Yes     |  |
|                           | Dixon Social Interactive Services | Yes     |  |
|                           | ECU Physicians                    | No      |  |
|                           | Integrated Family Services        | No      |  |
|                           | Monarch                           | Yes     |  |
|                           | Pinnacle Family Services          | Yes     |  |
|                           | The Arc of NC                     | Yes     |  |
|                           | UNC Center for Excellence         | No      |  |
| Other                     | Tribal Option                     | Yes     |  |

# Data Subcommittee Staff and Presenters

**Meeting Attendance** 

| NC DHHS Staff     | Title   |
|-------------------|---|
| Kristen Dubay     | Chief of Population Health                                      |
| Loul Alvarez      | Associate Director, Population Health                           |
| Regina Manly      | Senior Program Manager, Tailored Care Management                |
| Gwendolyn Sherrod | Program Manager, Tailored Care Management                       |
| Eumeka Dudley     | Program Manager, Tailored Care Management                       |
| Anh Gibbs         | Technical Lead for Quality, Population Health, and Evaluation   |
| Advisors          | Title   |
| Vik Gupta         | Medicaid Transformation, Quality & Population Health, Accenture |
| Sachin Chintawar  | Medicaid Transformation, Quality & Population Health, Accenture |
| Lammot du Pont    | Senior Advisor, Manatt Health Strategies                        |

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#### Agenda

- Welcome & Roll Call
- Data Topics for Discussion
  - Tailored Care Management Auto-Assignment
  - Tailored Care Management Data Interfaces
- Data Topic Prioritization
- Public Comments
- Next Steps

## Data Topics for Discussion: Tailored Care Management Auto-Assignment (Regina Manly) Key Takeaways

- Tailored Care Management providers are observing frequent changes to their assigned members, resulting in disruptions in care as well as member confusion and frustration. To improve members' continuity of care and stabilize providers' panels, the Department is taking the following steps:
  - Regular monitoring of LME-MCOs' initial member assignments and refinement of autoassignment processes to address data inaccuracies or inconsistencies
  - Review of current Tailored Care Management reassignments and reassignment processes to identify major drivers of member churn and develop mitigation approaches
- As of October 1<sup>st</sup>, 41 percent of Tailored Care Management-eligible Medicaid Direct members have been assigned to Tailored Care Management providers based on their historical provider relationships.
- The Department has held working sessions with all six LME-MCOs to review and refine their auto-assignment processes.
- The Department has worked with LME-MCOs to review and validate reassignment processes. Four LME-MCOs have received approval to submit reassignments directly to NC FAST. For the other two LME-MCOs, the Department continues to review their reassignments prior to NC FAST submission.
- In August, the Department formed a "TCM Auto-Assignment Collaborative", consisting of LME-MCOs, Tailored Care Management providers and CINs, to review drivers of member churn and assess potential changes to current reassignment guidance to minimize member churn. To date, the Collaborative has discussed potential changes to reassignment processes for the following scenarios identified as top drivers of member churn:
  - Population Segment Changes
  - HCBS Conflict Identification

#### Discussion/Feedback from Data Subcommittee Members

• **Comment:** Multiple Tailored Care Management TAG Data Subcommittee members noted that members will unexplainably drop from their panel. Some of these members will reappear, others will reappear with a new enrollment date and some never reappear. A Data Subcommittee member requested the Department review why this is occurring and ensure that

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disenrollments are communicated to the organizations that were previously assigned the member.

- **Response:** The Department appreciates the feedback and is reviewing reassignment processes to identify reasons for member churn.
- **Comment:** Multiple Tailored Care Management TAG Data Subcommittee members noted delays with adding members onto their provider panels. Data Subcommittee members estimate that it takes LME-MCOs, on average, two or three months to add a member onto their requested provider's panel.
  - **Response:** The Department appreciates the feedback and will continue to review the causes of the delay and options to improve the process.
- **Comment:** A Tailored Care Management TAG Data Subcommittee member asked how Medicaid expansion enrollees without any Medicaid claims history would be assigned to providers.
  - Response: The Department is reviewing whether additional, non-Medicaid data sources can be used to identify members' population segments for Tailored Care Management assignment.
- **Comment:** A Tailored Care Management TAG Data Subcommittee member noted that, for population segment changes, providers do not receive information on diagnoses, which can lead to confusion on why the member was assigned to the provider. The Data Subcommittee member suggested that additional data be shared to help providers understand reasons for the assignment (e.g., current mental health needs).
  - **Response:** The Department appreciates the feedback and plans to collect additional feedback on the issue and potential resolution strategies.
- **Comment:** A Tailored Care Management TAG Data Subcommittee member noted that certain members are being removed from provider panels due to the historical lookback period for HCBS conflict identification, even when there is no active HCBS conflict and the member would like to continue to receive Tailored Care Management with their current provider.
  - **Response:** The Department appreciates the feedback. Current changes being proposed for HCBS conflict identification should address this issue and only reassign members if the Tailored Care Management organization is an active provider.

# Data Topics for Discussion: Tailored Care Management Data Interfaces (Anh Gibbs)

# Key Takeaways

- Tailored Care Management partners have reported data quality issues with beneficiary assignment and claims data interfaces. Inaccurate interface generation leads to incomplete data being shared with Tailored Care Management providers.
- To improve the data quality among required Tailored Care Management data interfaces, the Department is taking the following steps:
  - Monitoring of incident reports as they are observed in production via the Department's Help Center ticketing system
  - Assessment, research, and triage of data issues through LME-MCO-led Tailored Care Management Interfaces Deep Dive sessions

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- Planning for future monitoring of data completeness across all Tailored Care Management data interfaces
- To date, the Department has worked with Tailored Care Management partners to reduce the average resolution time of Help Center tickets from 24 days to 15 days. The Department also has implemented three enhancements to Tailored Care Management data interfaces:
  - Removal of the daily incremental Beneficiary Assignment file
  - $\circ$   $\;$  Addition of an End of Month full Beneficiary Assignment file
  - Standardization of Tailored Care Management Provider/CIN/Data Partner short names

# Discussion/Feedback from Data Subcommittee Members

- **Comment:** A Tailored Care Management Data Subcommittee member noted the inaccurate use of maintenance type codes for new members within the beneficiary assignment files providers receive from LME-MCOs.
  - **Response:** The Department plans to audit beneficiary assignment datafiles sent from plans to identify and address the root cause of these data issues.
- **Comment:** A Tailored Care Management Data Subcommittee member noted that they have observed certain beneficiaries attributed to both the 021 and 024 maintenance type codes for a single eligibility segment.
  - **Response:** Members should only have one maintenance type code for any particular eligibility segment. Data Subcommittee members should open a Help Center ticket to allow the Department and LME-MCO to follow up on this issue.

#### Data Topic Prioritization (Sachin Chintawar)

# Key Takeaways

- In the next weeks, the Department will solicit written feedback from Data Subcommittee members on known data topics and issues. The Department will ask Data Subcommittee members to:
  - Validate a list of identified data issues
  - o Identify any additional issues
  - Comment on the nature, impact, urgency of the issue and/or potential solutions
  - Prioritize the issues across two dimensions: (1) impact on critical operations and (2) urgency for resolution.
- The Department will use SurveyMonkey to collect feedback and Data Subcommittee Members should expect to receive a link to the survey by early November. In their comments, Data Subcommittee Members should work within their organization to collect, consolidate, and share as much detail as possible on each of the data topics.
- The Department will analyze and share a synthesis of the comments received. The feedback will inform prioritization of efforts to address known data topics and reveal potential differences in prioritization among LME-MCOs, AMH+ practices, CMAs, and Data Partners.

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## Discussion/Feedback from Data Subcommittee Members

- **Comment:** A Tailored Care Management Data Subcommittee member expressed appreciation for the updates provided during Data Subcommittee meetings and agreed that the proposed Data Topics Survey would be helpful to understand how other Tailored Care Management entities experience and resolve the identified data issues.
  - **Response:** The Department appreciates the feedback and looks forward to sharing the survey results with the Data Subcommittee, once available

#### Public Comment (Eumeka Dudley)

Public participants offered no comments or questions during the public comment period.

#### Wrap-Up and Next Steps (Eumeka Dudley)

- The next Tailored Care Management TAG Data Subcommittee meeting is scheduled for January 18, 2024.
- Tailored Care Management Data Subcommittee members are invited to share any feedback on the meeting topics to Eumeka Dudley (<u>eumeka.dudley@dhhs.nc.gov</u>).

The meeting adjourned at 4:11 PM ET.