






**Tailored Care Management (TCM)
Technical Advisory Group (TAG)
Data Subcommittee**

October 19, 2023 Meeting

Agenda

	Welcome & Roll Call	5 min
	Data Topics for Discussion <ul style="list-style-type: none">• Tailored Care Management Auto-Assignment• Tailored Care Management Data Interfaces	30 min
	Data Topic Prioritization	10 min
	Public Comments	5 min
	Next Steps	2 min

Tailored Care Management TAG Data Subcommittee Roll Call

Entity	Organization Name
LME/MCOs	Alliance Health
	Eastpointe
	Partners Health Management
	Sandhills Center
	Trillium Health Resources
	Vaya Health
CINs	Access East
	Alera Health (fka Blaze Advisors)
	CCPN
	CHN
	Duke
	Entiro
	NCCHA/CMHN
	MediSked

Entity	Organization Name
AMH+/CMAs	B&D Integrated Health Services
	Coastal Horizons Center
	Daymark Recovery Services
	Dixon Social Interactive Services
	ECU Physicians
	Integrated Family Services
	Monarch
	Pinnacle Family Services
	The Arc of NC
UNC Center for Excellence	
Others	Tribal Option

DHHS and Advisors

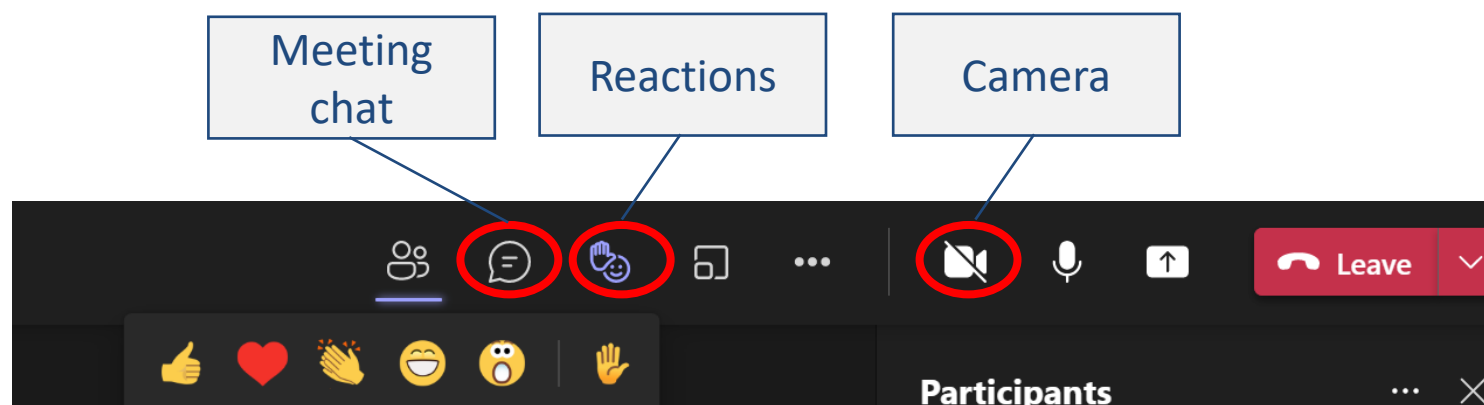
Kristen Dubay, MPP	Loul Alvarez, MPA	Regina Manly, MSA	Gwen Sherrod, MBA, MHA	Eumeka Dudley, MHS	Anh Gibbs
Chief of Population Health	Associate Director, Population Health	Senior Program Manager, Tailored Care Management	Program Manager, Tailored Care Management	Program Manager, Tailored Care Management	Technical Lead for Quality, Population Health, and Evaluation

Contact: Medicaid.TailoredCareMgmt@dhhs.nc.gov

Vik Gupta	Sachin Chintawar	Lammot du Pont
Medicaid Transformation, Quality & Population Health, Accenture	Medicaid Transformation, Quality & Population Health, Accenture	Senior Advisor, Manatt Health Strategies

Meeting Engagement

We encourage subcommittee members to turn on cameras, use reactions in Teams to share opinions on topics discussed, and share questions in the chat.



Data Topics for Discussion

Tailored Care Management Data Topics

Overview

Today, the Department will discuss and seek feedback on two topics:

1. Tailored Care Management Auto-Assignment
2. Tailored Care Management Data Interfaces

Tailored Care Management Auto Assignment

Issue Description and Resolution Approaches

Issue Description

TCM providers are observing frequent changes to their assigned members, resulting in disruptions in care as well as member confusion and frustration.

Resolution Approach

To improve members' continuity of care and stabilize providers' panels, the Department is taking the following steps:

1. Regular monitoring of LME-MCOs' initial member assignments and refinement of auto-assignment processes to address data inaccuracies or inconsistencies
2. Review of current Tailored Care Management reassignments and reassignment processes to identify major drivers of member churn and develop mitigation approaches



For Discussion: Have Data Subcommittee Members observed any additional issues with Tailored Care Management assignments?

Tailored Care Management Auto Assignment

Progress to Date: Regular Monitoring of Member Assignment

Resolution Approach

To improve members' continuity of care and stabilize providers' panels, the Department is taking the following steps:

- 1. Regular monitoring of LME-MCOs' initial member assignments and refinement of auto-assignment processes to address data inaccuracies or inconsistencies**
2. Review of current Tailored Care Management reassignments and reassignment processes to identify major drivers of member churn and develop mitigation approaches

Key Progress to Date

- As of 10/1, **41% of TCM-eligible Medicaid Direct members have been assigned to TCM providers** based on their historical provider relationships.
- The Department **actively monitors initial member assignments** for potential errors or discrepancies.
- Additionally, the Department has held working sessions with all six LME-MCOs to **review and refine their auto-assignment processes.**

Tailored Care Management Auto Assignment

Progress to Date: Review of Reassignment Processes

Resolution Approach

To improve members' continuity of care and stabilize providers' panels, the Department is taking the following steps:

1. Regular monitoring of LME-MCOs' initial member assignments and refinement of auto-assignment processes to address data inaccuracies or inconsistencies
2. **Review of current Tailored Care Management reassignments and reassignment processes to identify major drivers of member churn and develop mitigation approaches**

Key Progress to Date

- 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, TCM providers and CINs, to:
 1. Review drivers of member churn, and
 2. 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
- The Department will continue to hold working sessions to **review additional reassignment scenarios and opportunities** to reduce member churn.

*Reassignments due to a change in a member's population segment have been paused to review this requirement.

Tailored Care Management Data Interfaces

Issue Description and Resolution Approaches

Issue Description

TCM partners have reported data quality issues with beneficiary assignment and claims data interfaces.

Inaccurate interface generation leads to incomplete data being shared with TCM providers.

Resolution Approach

To improve the data quality among required Tailored Care Management data interfaces, the Department is taking the following steps:

1. Monitoring of incident reports as they are observed in production via the Department's Help Center ticketing system
2. Assessment, research, and triage of data issues through LME-MCO-led TCM Interfaces Deep Dive sessions
3. Planning for future monitoring of data completeness across all TCM data interfaces



For Discussion: Do Data Subcommittee Members have any additional feedback on potential issues with Tailored Care Management data interfaces?

Tailored Care Management Data Interfaces

Progress to Date: TCM Interfaces Deep Dive Session

Resolution Approach

To improve the data quality among required Tailored Care Management data interfaces, the Department is taking the following steps:

- 1. Monitoring of incident reports as they are observed in production via the Department's Help Center ticketing system**
- 2. Assessment, research, and triage of data issues through LME-MCO-led TCM Interfaces Deep Dive sessions**
3. Planning for future monitoring of data completeness across all TCM data interfaces

Key Progress to Date

- Since the start of the weekly TCM Interfaces Deep Dive sessions, **issue resolution time has declined from 24 days to 15 days.**
- Based on stakeholder feedback, the Department has implemented three TCM Interfaces enhancements:
 - ✓ Removal of the daily incremental Beneficiary Assignment file
 - ✓ Addition of an End of Month full Beneficiary Assignment file
 - ✓ Standardization of TCM Provider/CIN/Data Partner short names
- DHB is considering additional enhancements to continue to improve data quality of TCM Interfaces.

Data Topics Prioritization

Data Topic Prioritization

Proposed Approach

To help guide the selection of data topics to focus on and prioritize follow-up efforts, DHHS proposes to collect the following information:

- The relative importance or impact of the data issues/concerns
- The urgency to resolve the data issues/concerns

In the next weeks, the Department will solicit written feedback from Data Subcommittee members on known data topics and issues.

Data Topic Prioritization

Sample Feedback Collection

The Department will ask Data Subcommittee members to:

1. Validate a list of identified data issues
2. Identify any additional issues
3. Comment on the nature, impact, urgency of the issue and/or potential solutions
4. Prioritize the issues across two dimensions:

1. Impact on Critical Operations

- **High** (*significant impact*)
- **Medium** (*moderate impact*)
- **Low** (*minimal impact*)

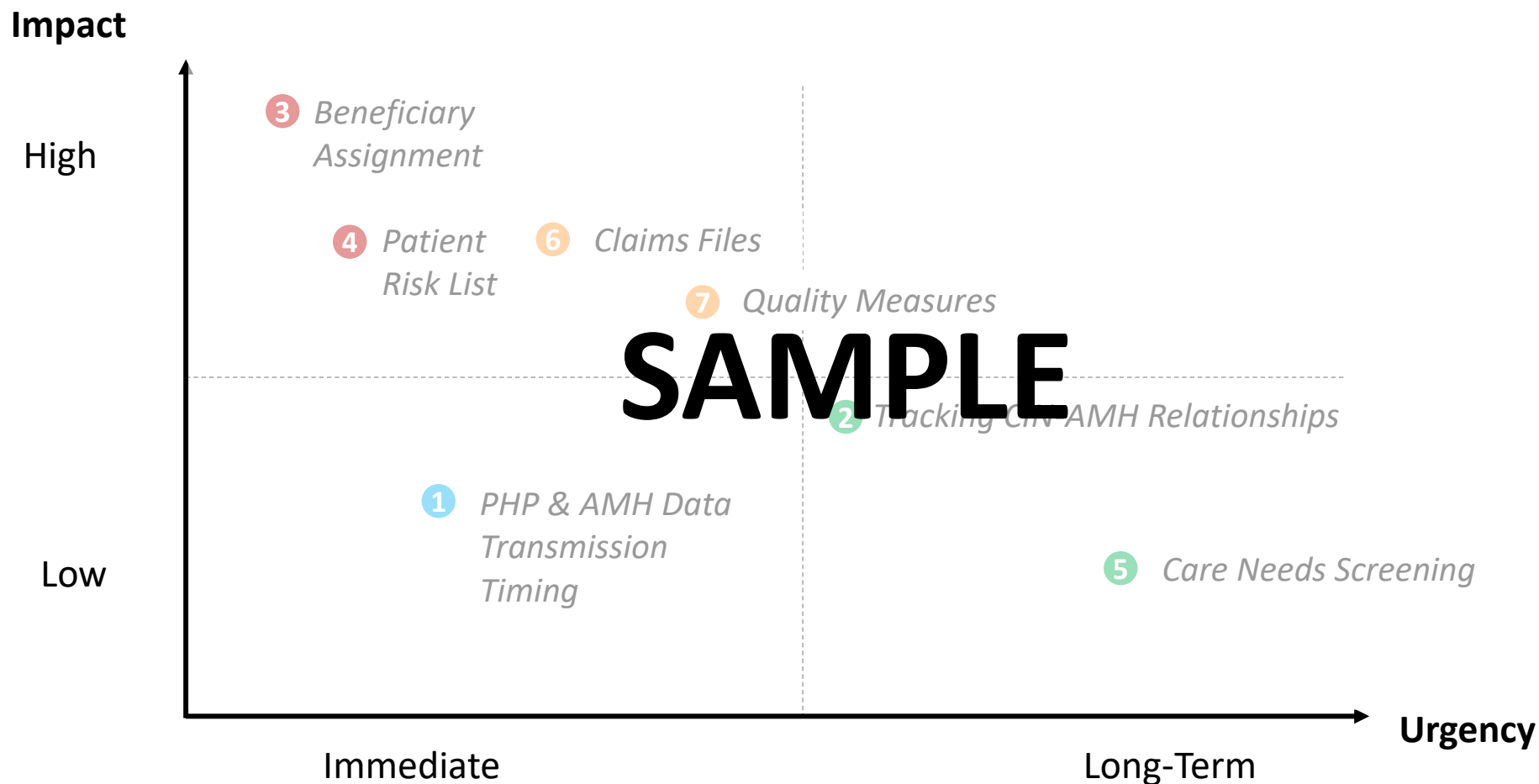
2. Urgency for Resolution

- **Immediate** (*within next 6 months*)
- **Near term** (*between 6-9 months*)
- **Long term** (*after 9 months*)

Data Topic Prioritization

Sample Prioritization Matrix

The Department will analyze and share a synthesis of the comments received.



Data Topic Prioritization

Sample Prioritization Rankings

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.

Issue	Prioritization	% High Impact	% High Urgency
Beneficiary Assignment	High Impact, Address Immediately	93%	80%
Patient Risk List	High Impact, Address Immediately	67%	67%
Claims Files	High Impact, Address Near Term	67%	53%
Quality Measures	High Impact, Address Near Term	61%	47%
PHP & AMH Data Transmission Timing	Medium Impact, Address Immediately	40%	60%
Tracking CIN-AMH Relationships	Medium Impact, Address Near Term	47%	40%
Care Needs Screening	Medium Impact, Address Long Term	20%	20%

SAMPLE

Data Topic Prioritization

Sample Responses

In their comments, Data Subcommittee Members should provide as much as detail as possible on each of the data topics.

Example Responses from AMH Data Topics Survey

Issue Description	Providers and PHPs contractual relationships vary and can be multi-faceted and complex. PHPs' information on the relationships between CINs and their associated AMHs may not reflect up-to-date contractual relationships, and as a result, the files that PHPs and CINs routinely share may have incomplete or inaccurate information.
Sample Response from Payer	<p><i>Comments on Issue Description:</i> "The frequency of changes within the AMH3/CIN space as providers move from CIN to CIN, or from CIN to standalone AMH3, or are merging with other health systems, makes the tracking of the PHP-AMH3/CIN relationship difficult. The frequency with which this information is required (BCM029 for instance), which is outside the original cadence, creates additional challenges and ties up critical resources for the PHPs. With the ebb and flow of AMH3/CIN relationships, quarterly status seems more appropriate."</p> <p><i>Comments on Potential Solutions:</i> "The only real way to address this issue is for the PEF file to include the AMH3/CIN relationship that is maintained by the provider. This would greatly automate the process for PHPs and allow a single change for a provider to permeate to all of the PHPs. ..."</p>
Sample Response from Provider	<p><i>Comments on Issue Description:</i> "This issue is one of the biggest drivers of errors on the BA files."</p> <p><i>Comments on Potential Solutions:</i> "Tracking of CIN-AMH relationships requires at least monthly roster management and reconciliation between PHPs and CINs which should be managed within the context of the PHP-CIN agreement and relationship."</p>

Data Topic Prioritization

Survey Logistics

- The Department plans to use **SurveyMonkey** to collect feedback from Data Subcommittee Members.
- Data Subcommittee Members should expect to receive a link to the survey by **early November**.
- Data Subcommittee Members should each submit **one single response**. Data Subcommittee Members should work within their organization to collect and consolidate feedback on each of the data topics, as applicable.

Public Comments

Next Steps

Next Steps

Subcommittee Members will:

- 1 Provide additional feedback on today's discussion topics to Eumeka Dudley (eumeka.dudley@dhhs.nc.gov).

DHHS will:

- 1 Post today's presentation and a summary of today's meeting on the DHHS website.

Future Tailored Care Management TAG Data Subcommittee meetings will occur on a quarterly cadence. The next meeting is scheduled for January 18, 2024.