

# Tailored Care Management Technical Advisory Group (TAG)

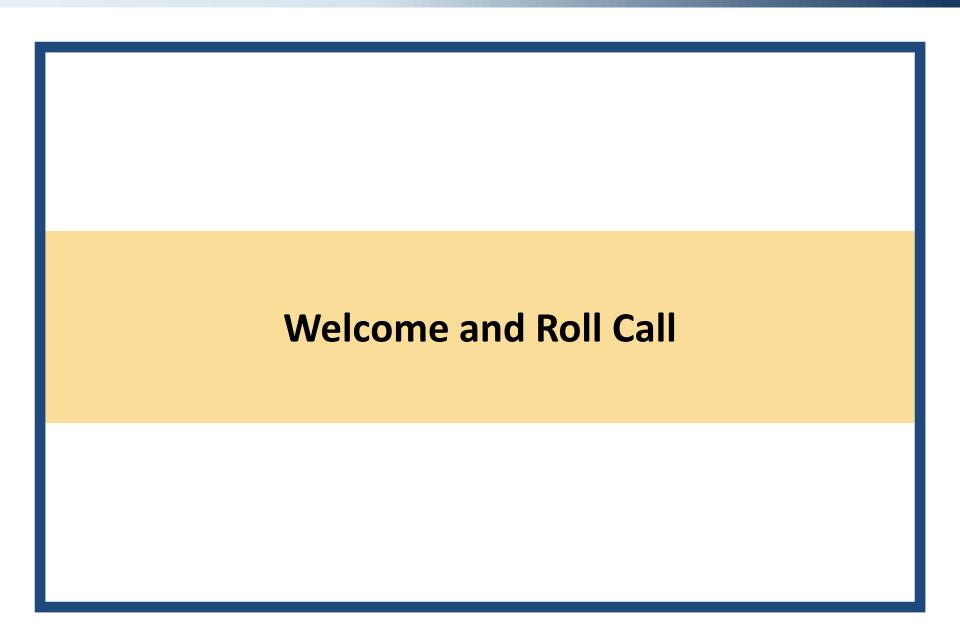
Meeting #15

Update on Tailored Care Management Implementation

February 24, 2023

# Agenda

Welcome and Roll Call (5 min)
 Update on Tailored Care Management Implementation (35 min)
 Public Comments (5 min)
 Next Steps (5 min)



# **Department of Health and Human Services**

Lauryn Walker, PhD, RN	Loul Alvarez, MPA	Gwendolyn Sherrod, MBA, MHA	Eumeka Dudley, MHS	Regina Manly, MSA
Chief Population Health Officer (Interim)	Associate Director, Population Health	Program Lead, Tailored Care Management	Program Lead, Tailored Care Management	Senior Program Manager, Tailored Care Management

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# **Tailored Care Management TAG Membership**

Name	Organization	Stakeholder
Erin Lewis	B&D Integrated Health Services	Provider Representative
Lauren Clark	Coastal Horizons Center	Provider Representative
Denita Lassiter	Dixon Social Interactive Services	Provider Representative
Jason Foltz, D.O.	ECU Physicians	Provider Representative

Integrated Family Services, PLLC

Partners Health Management

Cherokee Indian Hospital Authority

Trillium Health Resources

UNC Center for Excellence in Community Mental Health

Pinnacle Family Services

The Arc of NC

Alliance Health

Sandhills Center

Eastpointe

Vaya Health

N/A

N/A

N/A

N/A

Natasha Holley

Lisa Poteat

DeVault Clevenger

John Gilmore, M.D.

Sean Schreiber

Sabrina Russell

**Beverly Gray** 

Lynne Grey

**Cindy Ehlers** 

Rhonda Cox

Cindy Lambert

Jessica Aguilar

Pamela Corbett

Alicia Jones

Cheryl Powell

**Provider Representative** 

**Provider Representative** 

**Provider Representative** 

**Provider Representative** 

Tailored Plan Awardee

**Tribal Option Representative** 

**Consumer Representative** 

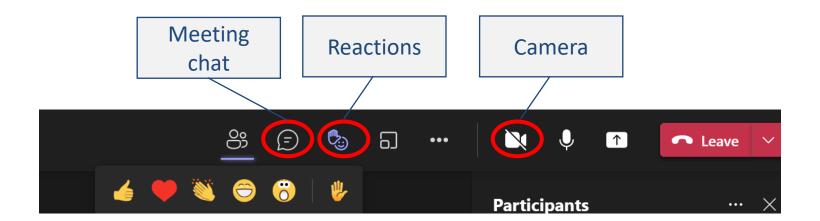
**Consumer Representative** 

**Consumer Representative** 

**Consumer Representative** 

# **Increasing Engagement**

We encourage those who are able to turn on cameras, use reactions in Teams to share opinions on topics discussed, and share questions in the chat.



The Department thanks the TAG and stakeholders for their continued partnership as we implement the Tailored Care Management program.

Over the past three months, the Department has been working to address implementation challenges and improve stakeholder communications.

Today, our objective is to update you on how we are addressing feedback and provide other program updates.

# For Discussion Today:

### **Implementation Challenges/Next Steps**

- Tailored Care Management Assignment/Reassignment
- Data Sharing Update
- Capacity Building Funds Access/Distribution

## **Other Updates**

- Stakeholder Communication Channels
- Tailored Care Management TAG Data Subcommittee



# **Member Assignment/Reassignment**

The LME-MCOs and the Department have heard concerns regarding assignments and have been working with providers to resolve the following issues:

### **Feedback**

**Unexpected Assignments.** Providers have reported receiving assignments for members they do not believe to be appropriate.

# Members with Dual Diagnoses. I/DD providers have expressed concerns around ensuring members with dual diagnoses are assigned to providers that can best meet their needs.

- Unexpected assignments may be related to data discrepancies, members having more than one provider, members with no relationship to any providers, expectations around populations, or other provider-specific issues.
- Providers should contact their LME-MCO or the Provider Ombudsman with specific questions.
- Providers certified for "co-occurring" members will receive members with both an SMI/severe SUD and I/DD.
- Providers who have questions or concerns about their ability to serve members on their panel should contact their LME-MCO to change their certification or close panels.
- The Department is reviewing certification requirements for providers serving members with dual BH and I/DD or TBI diagnoses to ensure that expectations for these populations are sufficiently clear.

# Member Assignment/Reassignment, continued

### **Feedback**

Low Member Volumes. Some providers have expressed concerns with having a low volume of assigned members.

# **Member Choice.** Member choice has not been honored as expected.

- Last week, the Department ran a special assignment cycle to focus on assigning additional members to providers with low volumes.
   Assignments will be effective March 1.
- Members currently assigned to an AMH+/CMA will not be reassigned to a different provider as part of this process unless requested by a member or the assigned provider.
- The Department is reviewing additional populations that may be assigned to providers in future runs and reviewing the process for adding new providers.
- The Department has identified this is an input file (data submission) issue.
- The Department worked with the LME-MCOs to submit these choices through the correct process. As of the last run, the Department believes these issues have been resolved.
- Members may select a new provider at any time, with the effective date being the 1st of the following month.

# Member Request to Change Tailored Care Management Organization

### **Changing Tailored Care Management Organization**

- Until April 1, 2023, members can change Tailored Care
   Management organization <u>without cause</u> at any time with no
   limit on the number of changes
- After April 1, 2023, members will be able to change the organization where they obtain Tailored Care Management twice a year <u>without cause</u> and any time <u>with cause</u>
- Once submitted, member assignment will be effective as of the 1st of the following month
- The Department continues to work with LME-MCOs to ensure choice is submitted correctly for future assignment cycles

# **Data Sharing Update**

The Department has been working with LME-MCOs to ensure contact information, claims data, and medical history data is sent to providers consistent with requirements.

### **Feedback**

Claims Data. There have been challenges and delays with providers receiving claims data from LME-MCOs and some questions related to working with this data.

**Contact Information.** Providers have reported missing or inaccurate contact information.

- The Department has been working with the LME-MCOs to ensure that critical medical information, such as claims data, is prioritized and issues are resolved expediently.
- If you are still not receiving claims data, please reach out to your LME-MCO or the Provider Ombudsman to report these issues.
- The Department continues to work with LME-MCOs to test and complete additional data files to support care management.
- The Department and LME-MCOs have corrected a systematic issue to ensure the most reliable contact information is sent to providers.
- Medicaid contact information is based on information provided to the Division of Social Services and may not be up-to-date or accurate. The Department is providing training sessions through AHEC to support providers using HIE to identify additional contact information.

# **Capacity Building Funds for AMH+/CMAs**

The Department encourages providers to continue to request capacity building funds and is committed to supporting providers in these requests. To date, the Department has distributed \$62.7M in capacity building funds and is working to address the below concerns:

### **Feedback**

# Accessing Capacity Building Funds. Providers have faced challenges in accessing funds, including confusion on how to request funds, whether capacity building funds are still

available, what they can be used for, and for how long.

- Providers can continue to request capacity building funds from LME-MCOs through June 30, 2023.
- Recognizing there have been continued challenges for providers to access funds, the Department is:
  - Holding webinars with providers and each LME-MCO to discuss specific processes and requirements for each LME-MCO
    - In preparation for these webinars, the Department released a <u>survey for providers</u> to submit feedback on barriers encountered
  - Released additional guidance on frequently asked questions

# **Capacity Building Fund Guidance for AMH+/CMAs**



## Advanced Medical Home Plus (AMH+) and Care Management Agency (CMA) Tailored Care Management Capacity Building Funds Guidance February 8, 2023

To help ensure the successful implementation of Tailored Care Management (TCM), the Department launched the Tailored Care Management Capacity Building program. The distribution of capacity building funds (CBF) started in early 2022, will be distributed to certified TCM providers across the state starting in early 2022 and lasting through at least June 2023. TCM providers certified as Advanced Medical Home Plus (AMH+) practices and Care Management Agencies (CMAs) are eligible to receive capacity building funding for investments in:

- . Care management-related health information technology (HIT) infrastructure,
- · Hiring and training care managers, and
- · Activities related to operational readiness (e.g., developing policies/procedures/workflows).

Under the Capacity Building Program, Tailored Plans will partner with AMH+ practices and CMAs to achieve milestones focused on the above three areas of investment. Capacity Building Funds flow through Tailored Plans to AMH+ practices and CMAs.

Tailored Plans developed a "Distribution Plan" for capacity building funds based on regional needs. The Department reviewed and approved Distribution Plans submitted by each Tailored Plan, which detailed the specific capacity building needs assessed among AMH+ practices and CMAs in their region. See Table 1 below for a complete list of milestones.

#### **Table 1: Capacity Building Milestones**

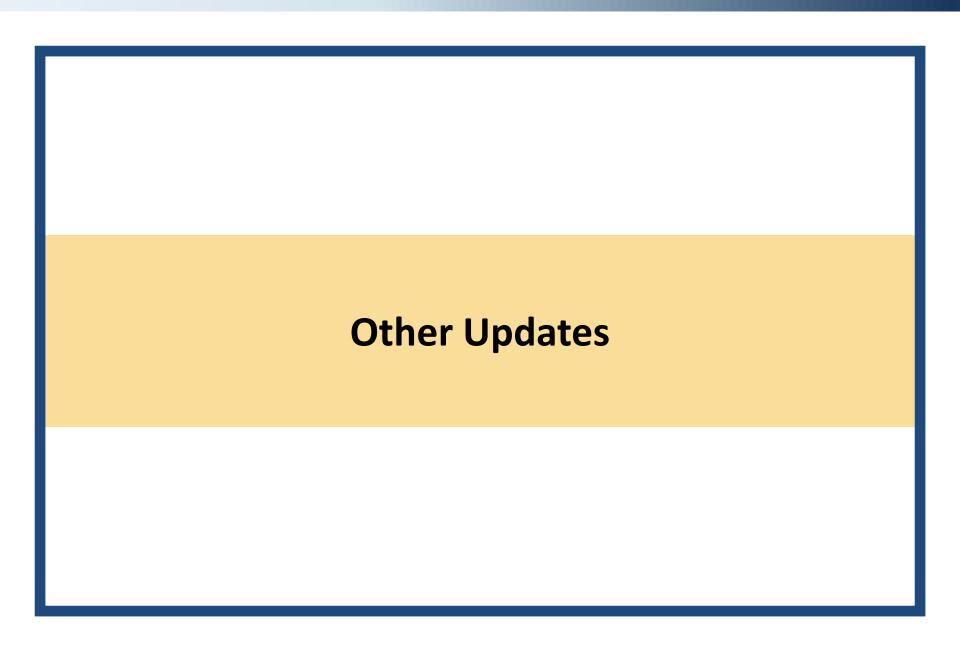
Milestone 1	Submission of a detailed Distribution Plan that specifies the Tailored Plan's approach (including quarterly targets) and proposed budget for meeting the remaining capacity building milestones, for DHHS approval Distribution plan will be based on assessment of regional needs
Milestone 2	Submission of a Tailored Care Management training curriculum and conducting trainings for care managers employed by Tailored Plan awardee and contracted AMH+s and CMAs
Milestone 3	Purchase or upgrades of care management related HIT infrastructure and systems for AMH+s/CMAs
Milestone 4	Hiring new care managers and supervisors at AMH+s and CMAs
Milestone 5	Completing Tailored Care Management training for AMH+ and CMA care managers and supervisors
Milestone 6	AMH+y/CMAs meeting other competencies linked to operationalizing Tailored Care Management (e.g., development of policies and procedures and education and outreach to members on the Tailored Care Management outreach)

The Department released additional guidance on Capacity Building Funds for AMH+/CMAs in early February.

The guidance can be accessed through the

<u>Tailored Care</u> <u>Management webpage</u>.

Feb 2023: Capacity Building Funds Guidance



## **Stakeholder Communication Channels**

The Department is looking to ensure an ongoing dialogue with members and advocates, providers, LME-MCOs, and other stakeholders on the rollout of Tailored Care Management through the following communication channels:



Tailored Care
Management TAG



AHEC Trainings and Updates



Tailored Care
Management Newsletter

- Monthly meetings, generally on the 4<sup>th</sup> Friday of the month
- TAG members are encouraged to request agenda items ahead of the meeting
- Tailored Care Management Learning Collaborative Sessions (twice a month)
- Continuing professional development and course offerings
- 1:1 Practice Support to TCM Providers
- More information can be found on <u>AHEC's Tailored Care Management</u> webpage and TCM Provider Portal



### **New Communication Channel**

The Department will be releasing a new bi-weekly newsletter to provide routine Tailored Care Management updates.

# **Tailored Care Management TAG Data Subcommittee**

The Department is considering the creation of a TAG Data Subcommittee that would address data topics related to Tailored Care Management implementation.

### **Purpose of a TAG Data Subcommittee**

- Increase understanding of core Tailored Care Management data, system, and reporting requirements, needs, and concerns
- Provide a forum for Tailored Care Management entities to raise issues for discussion and resolution
- Identify, prioritize, and provide informed recommendations on data topic issues that arise with Tailored Care Management implementation

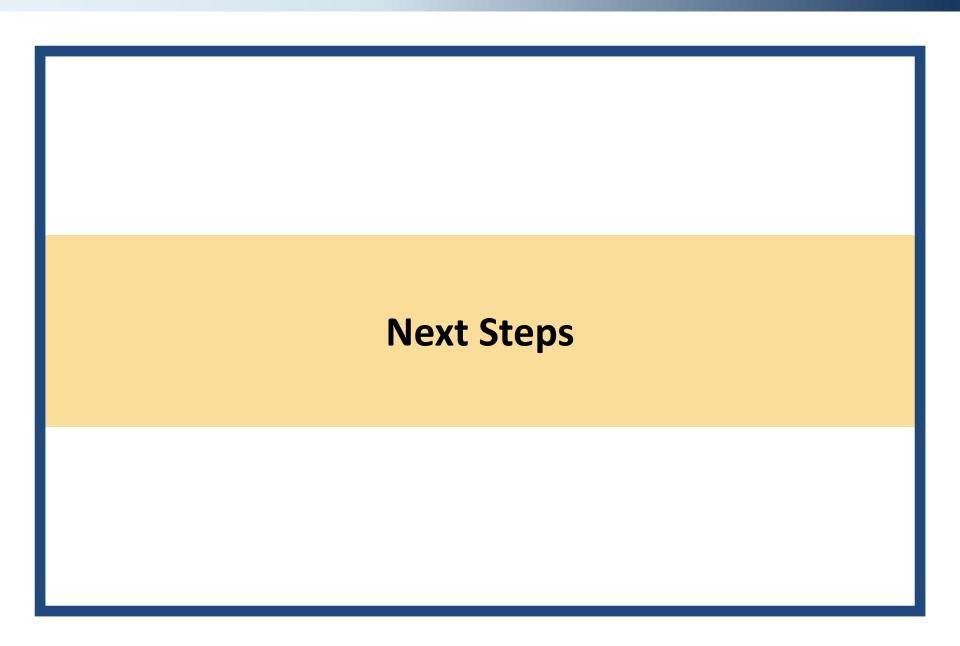


Would a data subcommittee serve as a helpful space to discuss and address Tailored Care Management data topics?

## **TAG Member Feedback**

- 1. Are there any additional aspects of the Tailored Care Management rollout that TAG members would like to discuss?
- 2. Are there additional/preferred communication channels through which the Department can provide updates on Tailored Care Management rollout?





# **Next Steps**

## **Tailored Care Management TAG Members**

Review updates on Tailored Care Management <u>webpage</u>

### **Department**

 Discuss feedback received during today's Tailored Care Management TAG meeting

# **Tailored Care Management TAG Meeting Cadence**

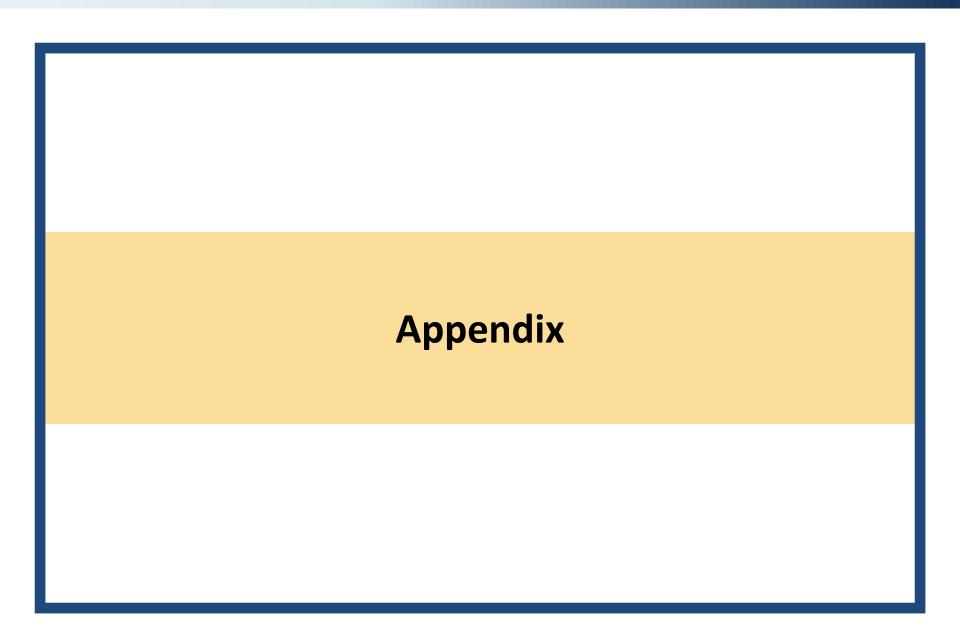
Tailored Care Management TAG meetings will generally take place the fourth Friday of every month from 3:30-4:30 pm ET.

### **Upcoming 2023 Meetings:**

#### March 24

### **Previous Meetings:**

- Meeting #1: Friday, October 29, 2021, 3:00 4:30 pm ET (presentation, minutes)
- Meeting #2: Friday, November 19, 2021, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #3: Friday, December 17, 2021, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #4: Friday, January 28, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #5: Friday, February 25, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #6: Friday, March 25, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #7: Friday, June 3, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #8: Friday, June 24, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #9: Friday, July 22, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #10: Friday, August 26, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #11: Friday, September 23, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #12: Thursday, October 27, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #13: Friday, November 18, 2022, 3:30 4:30 pm ET (presentation, minutes)
- Meeting #14: Friday, December 16, 2022, 3:30 4:30 pm ET (<u>presentation</u>, <u>minutes</u>)



# "With Cause" Reasons for Changing Tailored Care Management Organization

A member may request a change "with cause" in the event the assigned organization providing Tailored Care Management:

Has failed to furnish accessible and appropriate services to which the member is entitled, Is not able to reasonably accommodate the member's needs, Has a change in the accessibility for the member, including but not limited to the following: The organization or care manager moves to a location that is not convenient for the member There is a significant change in the hours the AMH+/CMA is open and the member cannot reasonably meet during the new hours There is a significant change in the hours the care manager is available and the member cannot reasonably meet during the new hours Agrees with the member that a change would be in the best interest of the member, Leaves the LME-MCO's network or is no longer certified by the Department, Becomes excluded from participation in federal health care programs\*, or The care manager is no longer employed by the AMH+, CMA, or LME-MCO.

# **Provider Resources**

Resource	Information
NC Medicaid Website	<ul> <li>Website: medicaid.ncdhhs.gov (includes County and Provider Playbooks)</li> </ul>
NC Medicaid Behavioral Health I/DD Tailored Plan Website	<ul> <li>Website: medicaid.ncdhhs.gov/Behavioral-Health-IDD-Tailored- Plans</li> </ul>
NC Medicaid Tailored Care Management Website	<ul> <li>Website: <u>medicaid.ncdhhs.gov/tailored-care-management</u></li> </ul>
NC Medicaid Help Center	<ul> <li>Website: medicaid.ncdhhs.gov/helpcenter</li> </ul>
Practice Support	<ul> <li>Website: <a href="ncahec.net/medicaid-managed-care">ncahec.net/medicaid-managed-care</a></li> <li>NC Medicaid Managed Care "Hot Topics" Webinar Series hosted by Dr. Dowler on the first and third Thursday of the month</li> </ul>
Medicaid Bulletins	<ul> <li>Website: <a href="https://medicaid.ncdhhs.gov/providers/medicaid-bulletin">https://medicaid.ncdhhs.gov/providers/medicaid-bulletin</a></li> </ul>