

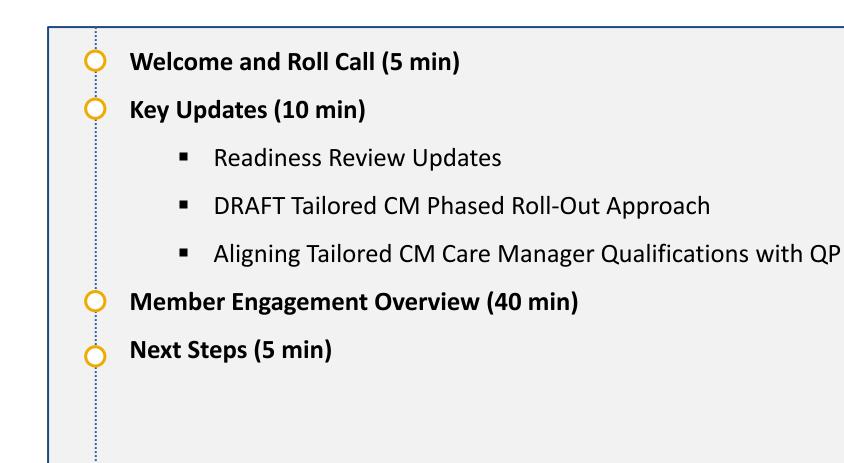
Tailored Care Management Technical Advisory Group (TAG)

Meeting #9:

Tailored Plan Member Engagement Overview and Key Updates on Tailored Care Management

July 22, 2022

Agenda



Welcome and Roll Call

Department of Health and Human Services

Kelly Crosbie, MSW, LCSW	Gwendolyn Sherrod, MBA, MHA	Eumeka Dudley, BS	Regina Manly, MSA	Keith McCoy, MD	Loul Alvarez, MPA
Chief Quality Officer	Senior Program Manager, TCM	TCM Program Manager	TCM Program Manager	Deputy CMO for Behavioral Health and IDD Community Systems	Associate Director, Population Health
Contact: Medicaid.TailoredCareMgmt@dhhs.nc.gov					



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

Tailored Care Management TAG Membership

Organization	Stakeholder
B&D Integrated Health Services	Provider Representative
Coastal Horizons Center	Provider Representative
Dixon Social Interactive Services	Provider Representative
ECU Physicians	Provider Representative
Integrated Family Services, PLLC	Provider Representative
Pinnacle Family Services	Provider Representative
The Arc of NC	Provider Representative
UNC Center for Excellence in Community Mental Health	Provider Representative
Alliance Health	Tailored Plan Awardee
Eastpointe	Tailored Plan Awardee
Partners Health Management	Tailored Plan Awardee
Sandhills Center	Tailored Plan Awardee
Trillium Health Resources	Tailored Plan Awardee
Vaya Health	Tailored Plan Awardee
Cherokee Indian Hospital Authority	Tribal Option Representative
N/A	Consumer Representative
N/A	Consumer Representative
N/A	Consumer Representative
N/A	Consumer Representative
	B&D Integrated Health ServicesCoastal Horizons CenterDixon Social Interactive ServicesECU PhysiciansIntegrated Family Services, PLLCPinnacle Family ServicesThe Arc of NCUNC Center for Excellence in Community Mental HealthAlliance HealthEastpointePartners Health ManagementSandhills CenterTrillium Health ResourcesVaya HealthCherokee Indian Hospital AuthorityN/AN/A

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.



Key Updates

Readiness Review Updates

- Tailored Plans are currently undergoing Readiness Reviews for all of their operations, including Tailored Care Management operations.
- As part of the Readiness Reviews, DHHS is reviewing their care management platforms, staff training modules, and on-boarding and training modules/plans for providers who will use their TCM platforms.

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- DHHS, in partnership with NCQA and TPs, has released the TCM provider Readiness Review protocol.
- Providers are signing up for Readiness Reviews now.

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 AHEC will host a special session with certified TCM providers, TPs, and DHHS to cover questions about the Readiness Review protocol and other TCM topics next Wednesday.

DRAFT: 2-Phase Readiness Review/Launch

To ensure the successful launch of the Tailored Care Management program, the Department is considering ways to meet the below objectives for Tailored Plans, providers, and members:

Providers certified as AMH+ practices and CMAs are ready to serve members at Tailored Plan launch.

Providers that are **certified but not yet ready to complete readiness and contract by launch since have a KNOWN**, predictable path to Tailored **Care Management Implementation**.



Members **transition to Tailored Care Management** with minimal disruption.

DRAFT: 2-Phase Readiness Review/Launch

DHHS is working with TPs on a 2-Phase Readiness Review/Launch Approach*.

*This approach has a lot of technical moving parts; DHHS and TPs need time to align on final design and operations.

- CURRENT: Providers that pass readiness and contract with Tailored Plans by 9/30 will be included in auto assignment for launch on 12/1. THIS WON'T CHANGE.
- DRAFT PHASE 2: DHB/TPs align on an ADDITIONAL second date to finish readiness/ contract with an associated launch date.

(DRAFT EXAMPLE: TCM Provider Passes Readiness and Contracts by 12/31 for 2/1 Launch)

REMINDERS:

- Certified providers always have the ability to go-live with TCM AFTER 12/1. This approach just standardizes a second roll-out across TPs.
- DHHS will be opening another application for TCM providers so new providers will be added over time; we will have additional roll-outs over the next several years.

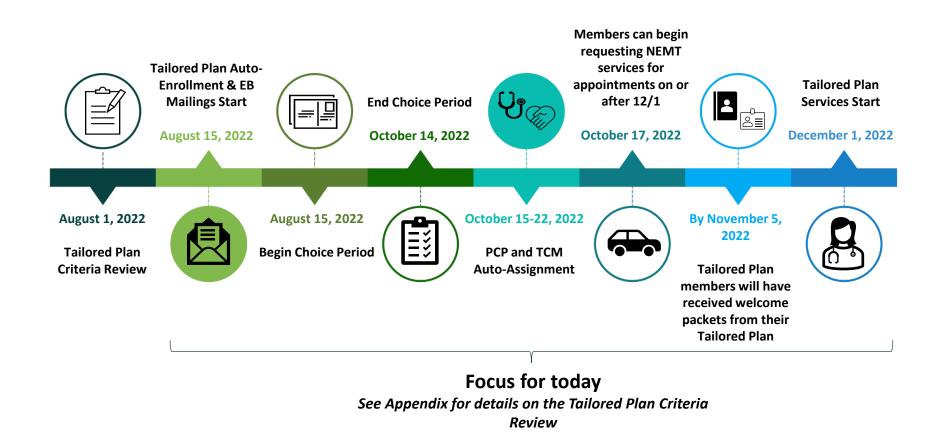
Aligning Tailored Care Management Care Manager and Qualified Professional Requirements

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- Based on feedback from a broad range of stakeholders, including providers and Tailored Plans, the Department has decided to <u>align</u>
 <u>Tailored Care Management care manager qualifications with those of a</u>
 <u>Qualified Professional (QP)</u>, meaning anyone who is a QP can become a care manager in Tailored Care Management (assuming they meet training requirements).

- This alignment will allow individuals with non-human services degrees to become Tailored Care Management care managers, provided these individuals have completed four years of post-degree experience serving populations eligible for Tailored Care Management.

Member Engagement Overview

Tailored Plan Timeline and Major Milestones



Tailored Plan Auto-Enrollment

Beneficiaries who qualify for Tailored Plan will be auto-enrolled in Tailored Plans based on the auto-enrollment algorithm. Beneficiaries will be enrolled in the Tailored Plan that serves their administrative county.

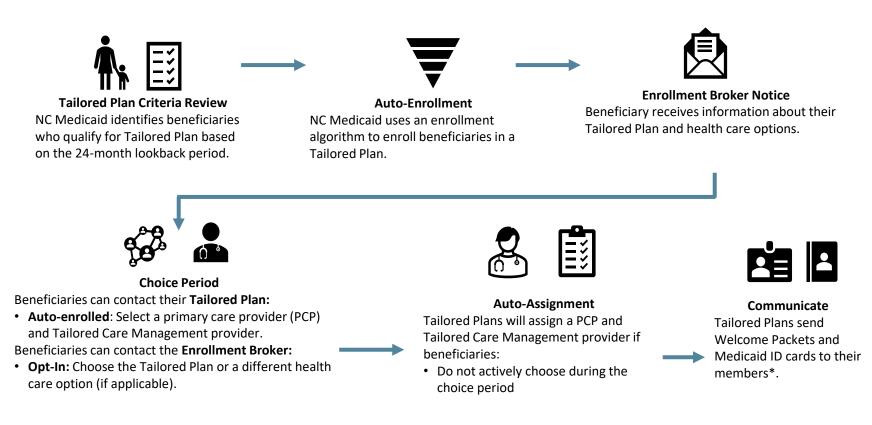


- Auto-Enrollment
 - Beneficiaries will receive an Enrollment Packet from the NC Medicaid Enrollment Broker:
 - Explains the Tailored Plan and other health care options available to the beneficiary
 - Includes information about how to choose a primary care provider (PCP) and Tailored Care Management provider





Tailored Plan Member Enrollment Diagram



*Members who do not enroll in a Tailored Plan will receive Welcome Packets and ID cards from the health care option they selected.

Newborns

- Children who are born to mothers enrolled in a Tailored Plan are not auto-enrolled in a Tailored Plan.
- If the mother is enrolled in a Tailored Plan, the child will be enrolled in a Standard Plan at birth, until such time the child meets Tailored Plan enrollment criteria.
- If the mother is enrolled in a Standard Plan, the child will be enrolled in a Standard Plan at birth. If the child is eligible for the Tailored Plan, the child will be picked up during the Tailored Plan criteria process through claims and other enrollment criteria.

Auto-Enrollment Algorithm

Auto-enrollment for Tailored Plan members is based on the following criteria:

Beneficiary meets Tailored Plan enrollment criteria

• Determines if the beneficiary needs certain services only offered by Tailored Plans (e.g., TBI/Innovations Waiver services).



The county that manages the beneficiary's Medicaid case

• Determines which Tailored Plan the beneficiary will be auto-enrolled in. There is only one Tailored Plan per county. Beneficiaries cannot choose a different Tailored Plan.



Special population considerations

• Determines if the beneficiary is part of a special population and should not be autoenrolled in the Tailored Plan (e.g., duals, federally recognized tribal members, children in foster care).

Tailored Plan Auto-Enrolled vs. Opt-In Populations

- Certain beneficiaries who meet Tailored Plan enrollment criteria will be enrolled in Tailored Plans on August 15, 2022.
- Other beneficiaries who meet Tailored Plan enrollment criteria will not be autoenrolled but can choose to enroll during the choice period (August 15, 2022 – October 14, 2022).

Auto-enrolled Population Examples	Opt-in Population Examples
 Innovations Waiver participants (including duals) TBI Waiver participants (including duals) 	 Federally recognized tribal members Individuals who qualify for services through Indian Health Service (IHS)
 People who need certain services for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI) 	

Tailored Plan Choice Period

During this time, beneficiaries may choose a primary care provider (PCP) and a Tailored Care Management (TCM) provider or different health care option (if applicable).

August 15, 2022

• October 14, 2022

Choice Period

- Beneficiaries may contact their Tailored Plan to choose a PCP and TCM provider.
 - If a Tailored Plan member does not select a TCM provider, one will be assigned to them.
 - Tailored Plan members may change their TCM provider or opt-out of TCM.

If beneficiaries have questions about TCM, they should contact their health plan at the phone number on the NC Medicaid ID card and Member Handbook or visit the Tailored Plan's website.

- Beneficiaries may contact the NC Medicaid Enrollment Broker to choose a different health care option (if applicable).
 - Some Tailored Plan members will have the option to enroll in a Standard Plan. They cannot enroll in a Standard Plan by website or mobile app – they must enroll via phone or enrollment form.

Tailored Plan PCP & TCM Auto-Assignment

Tailored Plan members will be auto-assigned to a PCP and TCM provider if they do not choose a PCP or TCM during the choice period.

October 15, 2022

PCP and TCM Auto-Assignment

- Beneficiaries who do not choose a PCP or TCM provider with their Tailored Plan will be auto-assigned to one.
 - NC Medicaid will conduct auto-assignment for the Tailored Plans prior to launch. Starting December 1, 2022, Tailored Plans will complete auto-assignment functionality.
- Following auto-assignment, Tailored Plans will begin mailing Welcome Packets (Welcome Letter, Medicaid ID Cards, Member Handbook) to their members.
 - Tailored Plan member must use the NC Medicaid ID card from their Tailored Plan to receive services.



Tailored Plan Welcome Packet Mailings

Tailored Plan members will receive welcome packets in the mail from their Tailored Plan by November 5, 2022.

By November 5, 2022

• Tailored Plan Welcome Packet

- <u>After PCP and TCM provider assignment in October 2022</u>, Tailored Plans will begin mailing welcome packets to members.
- Tailored Plan member must use the NC Medicaid ID card from their Tailored Plan to receive services.
- Tailored Plan members will receive in the welcome packet:
 - Medicaid ID card
 - Welcome letter
 - Member Handbook
 - Member Handbook
 - Innovations Waiver Handbook
 - TBI Handbook
 - Recipient Handbook

Tailored Plan Services Start

Tailored Plans begin providing services to members.

December 1, 2022

- Tailored Plan Launch
 - Tailored Plan members will begin receiving health care services from their Tailored Plan. Members must use their NC Medicaid ID card sent to them by the Tailored Plan to receive services.
 - Tailored Plan members must have a PCP and TCM provider in the Tailored Plan's network.
 - Members can opt-out of TCM if the choose
 - Tailored Plan members will continue to receive the same health care services Medicaid covers today. Medicaid eligibility rules and processes are not changing due to Tailored Plan launch.



NC Medicaid Enrollment Broker

- The NC Medicaid Enrollment Broker provides enrollment assistance, choice counseling, mails notices and enrollment packets, and provides outreach and education to NC Medicaid beneficiaries. NC Medicaid completes eligibility services and the Enrollment Broker assists with enrollment and choice counseling.
- The Enrollment Broker is an unbiased program to help beneficiaries select the best health care option for them and their families.

NC Medicaid Enrollment Broker Contact

Website: <u>ncmedicaidplans.gov</u>

Phone: 1-833-870-5500 (TTY: 711 or RelayNC.com)

Hours of operation: 7 a.m. to 5 p.m., Monday through Saturday

NC Medicaid Enrollment Broker

- The NC Medicaid Enrollment Broker website provides an integrated experience for members to manage their health plan choice needs. This is a great resource to direct members for questions about the health plans.
- The website includes the following tools and information:
 - Questions and answers
 - Health Care Option Guide
 - Medicaid and NC Health Choice Provider and Health Plan Lookup Tool
 - Meetings and Events
 - Enrollment Specialists are available via a chat tool to answer questions.



ncmedicaidplans.gov



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CHANGE TEXT SIZE ► ENGLISH ESPAÑOL

Contacts and links Get answers Words to know Member resources Submit forms online Online account

NCDHHS NC Medicaid Division of Health Benefits

There is a new way to get Medicaid health care: Most people are now getting the same Medicaid services in a new way – through health plans. Learn more >

Learn ~ Learn about NC Medicaid Managed Care Find ~

Find and view primary care providers (PCPs) Ch and health plans primary

Enroll Choose a health plan and primary care provider (PCP)

Tailored Plans will start December 1, 2022

On December 1, 2022, NC Medicaid will have a new type of health plan. It is called the Behavioral Health and Intellectual/Developmental Disabilities

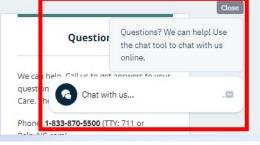
Transportation services

You can schedule rides to medical appointments. Learn more about transportation services.

Get the free mobile app

Find and view providers and health plans

This website has tools to help you find and view primary care providers (PCPs) and health plans.



NC Medicaid Enrollment Broker Materials – Enrollment Packet

The NC Medicaid Enrollment Broker will begin sending Enrollment Packets to potential Tailored Plan members on August 15, 2022.

Transition Notice

- Explains the Tailored Plan and other health care options available to the member
- Includes information about how to choose a primary care provider (PCP) and Tailored Care Management provider

Disenrollment Rights Notice

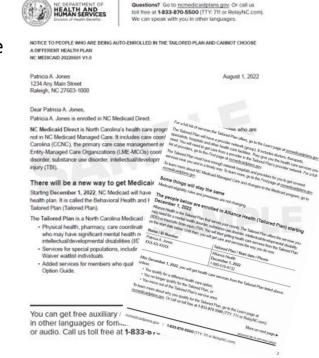
 Explains how the member can leave the Tailored Plan, if applicable

• Health Care Option Guide

- Highlights the top 10 added services for each health care option
- Includes phone numbers, websites, and sample ID cards

Enrollment Form

 Allows members to choose or change a health care option and PCP, if applicable





Health Care Option Guide

- All NC Medicaid beneficiaries will receive a Health Care Option Guide insert in their **Enrollment Packet**.
- The Health Care Option Guide will include the default enrollment page and health care options based on the beneficiary's status.
- The Standard Plan insert will have four or five Standard Plans available depending on where the beneficiary lives.



Health Care Option Guide

SAMPLE

All health care options are required to have the same basic Medicaid services you get now. These include: Doctor visits
 Hospital visits Behavioral health care
 Prescriptions
 Eye care Medical supplies
 Lab tests and X-rays
 Therapies Hospice Care management To see the full list of NC Medicaid covered services provided by the health care options, DVICES go to ncmedicaidplans.gov. Some health care options also have added services.

STANDARD PLAN	TAILORED PLAN	NC MEDICAID DIRECT	EBCI TRIBAL OPTION
A North Carolina Medicaid and NC Health Choice health plan. It offers physical health, pharmacy, care coordination and basic behavioral health services for members.	A North Carolina Medicaid and NC Health Choice health plan. It offers physical health, pharmacy, care coordination and behavioral health services. It is for members who may have significant mental health needs, severe substance use disorders, intellectual/ developmental disabilities (//DDs) or traumatic brain injuries (TBIs).	North Carolina's health care program for Medicaid beneficiaries who are not enrolled in North Carolina Medicaid Managed Care. It includes care coordination by Community Care of North Carolina (CCNC), the primary care case management entity (PCCMe), There are six Local Management Entity-Managed Care Organizations (LME-MCOs) that coordinate services for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI).	The primary care case management entity (PCCMe) created by the Cherokee Indian Hospital Authority (CIHA) It includes care coordination by Vaya Health for a mental health disorder, substance use disorder, intellectual/ developmental disability (//DD) or traumatic brain injury (TB)).
Who qualifies for this option? 4 Most families and children 5 Children who get NC Health Choice 9 Pregnant women 9 People who are blind or disabled and not receiving Medicare 9 Federally recognized tribal members or others eligible for Indian Health Service (IHS)	Who qualifies for this option? People who may have a mental health disorder, substance use disorder, intellectual/developmental disability (I/DI) or traumatic brain injury (TB) People who get Innovations Walver services People who get Traumatic Brain Injury (TB) Waiver services	Who qualifies for this option? Children in foster care Children who get adoption assistance Children who get adoption assistance Children who get adoption assistance Children who get community Alternatives Program for Children (CAPC) services Federally recognized tribal members or others eligible for Indian Health Service (HS) People in the Health Insurance Premium Payment (HIPP) program People who are medically needy People who get Community Alternatives Program for Disabled Adults (CAPDA) services People who get Family Planning Medicaid only People who aget Medicaid Medicare People who may have a mental health disorder, substance use disorder, intellectual/developmental disability (VDD) or traumatic training intry (HB)	Who qualifies for this option? = Federally recognized tribal members or others eligible for Indian Health Service (IHS who live in the following counties: Buncombe, Clay, Cherokee, Graham, Haywood, Henderson, Jackson, Macon, Madison, Swain, Transylvania

Questions? Go to ncmedicaidplans.gov. Or call us toll free at 1-833-870-5500 (TTY: 711 or RelayNC.com). We can speak with you in other languages. You can get free auxiliary aids and services, including information in other languages or formats such as large print or audio

Tailored Plan					Standard Plan		
	rvices. Some services may only be available for members who qualify. 333-870-5500 (TTY: 7tt or RelayNC.com).			s that each Standard Plan offe Il free at 1-833-870-5500 (TT)		be available for members wh	o qualify.
Alliance	Added Services Education		WellCare beyond healthcase A bertar You	UnitedHealthcare	⊕ ♥ HealthyBlue	AmeriHealth Cavitar North Carolina	Carolina complete health
1400 550 510 117:77 tot 640 725 5062 118:cohottitigian org 7 am. 16 6 pm. Monody through Statusty Very analytic in the pm. Very analytic in the pm. Only analytic in the countries Easted below		All of the second of the solution		1800-349-1855 TTY-711 alccornrutyperson conivc J arm to 6 p.m., Mordey through Suburdey Winney Through Suburdey Suburded jail Too counties;		1455-375-8811 TTV: 1406-2009-6421 ametheabtrace.com 24 hours a day, 24 hours a day, 24 hours a day, 24 hours a day, 25 hours 26 hours 27 hours 26 hours 27 hours 27 hours 28 h	

NC Medicaid Direct NC Medicaid Direc 1.000.245.071 ors (LMF-MCOs) serve the fe

8	Added Services
BCI TRIBAL OPTION	Education
1-800-260-9992 TTY: 711	Up to \$250 Graduate Equivalency Degree (GED) exam voter, materials and life skills training Up to \$150 voucher for Associate Degree aution and matchisits Up to \$250 voucher for a computer if accepted and enrolled full time in an institution of higher education
EBCITribalOption.com 8 a.m. to 4:30 p.m., Monday through Friday	Prenatal Up to \$75 in gift cards if go to prenatal appointments
	Wellness • Offers of nutrition, cooking, and exercise classes
And a second sec	Youth • Takin sport shoes per calendar year • Car safery seat with installation and use education
Only available in the	Car safety seat with installation and use education Other
counties listed below	Cherokee Language classes and supplemental learning materials Transportation for job training and other activities to implement person's care plan

EBCI Tribal Option is only available in these counties: Buncombe, Clay, Cherokee, Graham, Haywood, Henderson, Jackson, Macon, Madison, Swain,

Johnston, Mecklenburg, Orange, Wake



Sample Transition Notice – Tailored Plan Only

Health Care Option Guide: Only TP page for the Administrative County

Name

Patric

XXX-X



Questions? Go to <u>ncmedicaidplans.gov</u>. Or call us toll free at **1-833-870-5500** (TTY: 711 or RelayNC.com). We can speak with you in other languages.

NOTICE TO PEOPLE WHO ARE BEING AUTO-ENROLLED IN THE TAILORED PLAN AND CANNOT CHOOSE A DIFFERENT HEALTH PLAN IC: MEDICARD 20226601 VI.0

Patricia A. Jones 1234 Any Main Street Raleigh, NC 27603-1000

Dear Patricia A. Jones, Patricia A. Jones is enrolled in NC Medicaid Direct.

NC Medicaid Direct is North Carolina's health care program for Medicaid beneficiaries who are not in NC Medicaid Managed Care. It includes care coordination by Community Care of North Carolina (CCNC), the primary care case management entity (PCCN6). Six Cacal Management Ently-Managed Care Organizations (LME-MCCa) coordinate services for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain mjnyr (TBI).

There will be a new way to get Medicaid health care

Starting December 1, 2022, NC Medicaid will have a new type of NC Medicaid Managed Care health plan. It is called the Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plan (Tailored Plan).

- The Tailored Plan is a North Carolina Medicaid and NC Health Choice health plan. It offers: • Physical health, pharmacy, care coordination and behavioral health services for members who may have significant mental health needs, severe substance use disorders,
- intellectual/developmental disabilities (VDDs) or traumatic brain injuries (TBIs). • Services for special populations, including Innovations and TBI Waiver participants and Waiver waitlist individuals.
- Added services for members who qualify. The added services are listed on the Health Care Option Guide.

More on back More on back

August 1, 2022

You can get free auxiliary aids and services, including information in other languages or formats such as large print or audio. Call us toll free at **1-833-870-5500**. For a full list of services the Tailored Plan offers, go to the Learn page at nemeticaidplans.gov.

The Tailored Plan will have a provider network (group). It includes doctors, therapists, specialists, hospitals and other health care facilities. They give you the health care services you need. You will need to get care from a provider in the Tailored Plan's provider network. For a full list of providers, go to the *Find* page at nemedical/plans.gov.

The Tailored Plan must have enough network hospitals and providers for you to get covered services near you and in a timely way. To learn more, go to the *Find* page at <u>normedicaidplans.gov</u>.

To learn more about NC Medicaid Managed Care and changes to the Medicaid program, go to nemedicaidplans.gov.

Some things will stay the same

Medicaid eligibility rules and processes are not changing.

The people below are enrolled in Alliance Health (Tailored Plan) starting December 1, 2022

Alfance Health is the Tailored Plan that serves your county. The Tailored Plan offers the services you may need for a mential health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI). You will start getting health care services from the Tailored Plan on the start date below. Until then, you will get care and services the way you do now.

e / ID Number	Tailored Plan / Start date / Phone
	Alliance Health December 1, 2022 1-800-510-9132

After December 1, 2022, you will get health care services from the Tailored Plan listed above unless:

- You qualify for a different health care option.
- You no longer qualify for the Tailored Plan, or
- · You move out of the Tailored Plan's service area.

To learn more about why you qualify for the Tailored Plan, go to the *Learn* page at <u>ncmedicaidplans.gov</u>. Or call us toll free at 1-833-870-5500 (TTY: 711 or RelayNC.com).

More on next page >

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ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

Choose your primary care provider (PCP) and Tailored Care Management provider by October 14, 2022

Your PCP is a doctor, nurse practitioner, physician assistant or other provider. They care for your health, coordinate your needs, and refer you to specialists when you need them. The Tailored Plan can tell you which PCPs are in their provider network. Even if you have a PCP, you need to choose a PCP in the Tailored Plan's provider network.

Your Tailored Care Management provider helps coordinate your services and support needs. The Tailored Plan can tell you which Tailored Care Management providers are in their provider network. Your PCP may be your Tailored Care Management provider. The Tailored Plan can tell you which PCPs are also Tailored Care Management provider.

To choose a PCP and Tailored Care Management provider, call the Tailored Plan listed in this letter. If you don't choose a PCP and Tailored Care Management provider by October 14, 2022, the Tailored Plan will choose one for you.

For a full a list of providers, including PCPs and Tailored Care Management providers in the Tailored Plan's provider network, go to the Find page at <u>ncmedicaidplans.gov</u>.

What happens next?

The Tailored Plan will send you information and a new ID card. You will use your ID card to get health care services. If you have questions, call the Tailored Plan at the number listed on your ID card.

If you want to leave the Tailored Plan (Disenrollment)

Enrollment in the Tailored Plan is mandatory (required). This means you cannot choose a different health care option.

You qualify for the Tailored Plan because it offers health care services you may need for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI) Your Tailored Plan is based on the county that manages your Medicaid case.

Only one Tailored Plan serves each county in North Carolina. You can't choose a different Tailored Plan. If the county that manages your Medicaid case changes, you will be moved to the Tailored Plan that serves that county.

- To learn more about your choices and the services offered:
- Go to nemedicaidplans.gov.
- Use the NC Medicaid Managed Care mobile app. To get the free app, search for NC Medicaid Managed Care on <u>Google Play</u> or the <u>App Store</u>.
 More on back ►

ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

Call us toll free at 1-833-870-5500 (TTY: 711 or RelayNC.com).
 Read the Health Care Option Guide that came with this letter.

You may ask to leave the Tailored Plan at any time and for any reason. To learn how to leave the Tailored Plan (disenrollment), read "Know Your NC Medicaid Health Care Ordinase 'that cane with this letter

If you leave the Tailored Plan, but then need a service only the Tailored Plan offers, you can ask to move back to the Tailored Plan at any time. If you still qualify for the Tailored Plan, you will be moved back. Hyo no topinger qualify, you can fill out the Request to Move to the Tailored Plan: Beneficiary Form. Or your provider can fill out the Request to Move to the Tailored Plan: Beneficiary Form. Or your provider can fill out the Request to Move to the Tailored Plan: Beneficiary Form. Or your provider can fill out the Request to Move to the Tailored Plan: Devoker Form. You can find both forms at <u>normedicaidplans gov</u>. Or call us toll free at 1433-870-5500 (TTP: 711 or RealAVC com).

Remember: You may need certain services for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI) that only the Tailored Plan offers.

Questions?

We can help. Go to <u>normedicaliplans gov</u> You can also use the "chat" tool on the website. Or call us at 1-833-870-5500 (TTY: 711 or RelayAC com). Our extended hours are from 7 a.m. to 7 p.m., Monday through Friday and 7 a.m. to 5 p.m. on Saturday. The call is foll free. You may need your Medicaid ID number when you call or go to the website.

You can get the information at <u>normedicaidplans gov</u> in print. To ask for a free copy, call us toll free at 1.433.470.4500 (TTY: 711 or RelayNC.com). Or use the "chat" tool on the website. We will send this information within 5 business days.

NC Medicaid Ombudsman

The NC Medicaid Ombudsman can offer help if you cannot get access to health care, connect you to other resources, and help you understand your rights and responsibilities.

Go to $\underline{ncmedicaidombudsman.org}.$ Or call 1-877-201-3750, 8 a.m. to 5 p.m., Monday through Friday. The call is toll free.

Thank you, NC Medicaid Team

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ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

Sample Transition Notice – Tailored Plan Opt-in

Health Care Option Guide: TP page – administrative county NC Medicaid Direct page

August 1, 2022



Questions? Go to <u>ncmedicaldplans.gov</u>. Or call us toll free at **1-833-870-5500** (TTY: 711 or RelayNC.com). We can speak with you in other languages.

NOTICE TO PEOPLE WHO ARE STAYING IN THEIR CURRENT HEALTH CARE OPTION BUT CAN CHOOSE THE TAILORED PLANS OTHER OPTIONS INCLUDE INC MEDICAID DIRECT INC MEDICAID 2026001 Y1.0

Patricia A. Jones 1234 Any Main Street Raleigh, NC 27603-1000

Dear Patricia A. Jones,

Patricia A. Jones is enrolled in NC Medicaid Direct.

NC Medicaid Direct is North Carolina's health care program for Medicaid beneficiaries who are not in NC Medicaid Managed Care. It includes care coordination by Community Care of North Carolina (CXNC), the primary care cases management entity (PCOM). Six Local Management Entity-Managed Care Organizations (LME-MCOs) coordinate services for a mental health disorder, substance use disorder, intellectual developmental disability (I/OC) or traumatic brain injury (TB).

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- Added services for members who qualify. The added services are listed on the Health Care Option Guide.

More on back <

MEDICAD ER TP WTPM-ENG 200622 You can get free auxiliary aids and services, including information

in other languages or formats such as large print or audio. Call us toll free at **1-833-870-5500**. For a full list of services the Tailored Plan offers, go to the *Learn* page at <u>normedicaidplans.gov</u>. The Tailored Plan will have a provider network (group). It includes doctors, therapists,

specialists, hospitals and other health care facilities. They give you the health care services you need. For a full list of providers, go to the *Find* page at <u>normedicaidplans gov</u>. The Tailored Plan must have enough network hospitals and providers for you to get covered

services near you and in a timely way. To learn more, go to the *Find* page at <u>nemedicaidplans gov</u>. To learn more about NC Medicaid Managed Care and changes to the Medicaid program, go to <u>nemedicaidplans.gov</u>.

Some things will stay the same

Medicaid eligibility rules and processes are not changing.

The people below will stay in their current health care option

lame / ID Number	Health care option		
atricia A. Jones XX-XX-XXXX	NC Medicaid Direct		

If you want to keep your current health care option, you do not have to do anything.

If you want to choose the Tailored Plan

You can choose the Tailored Plan at any time. Enrollment in the Tailored Plan is voluntary. This means you have other choices.

You qualify for the Talored Plan because it offers the health care services you may need for a mental health disorder, substance disorder, intellectual/developmental disability (I/DD) or traumatic train injury (TBI). To learn more about why ou qualify for the Talored Plan, go to the Learn page at <u>nonedicadplans gov</u>. Or call us toll free at 1.833.870-5500 (TTY: 711 or RelayNC.com).

More on next page >

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ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

To learn more about the Tailored Plan and the services offered:

Go to nemedicaidplans.gov.

Use the NC Medicaid Managed Care mobile app. To get the free app, search for NC Medicaid Managed Care on <u>Coogle Play</u> or the <u>App Store</u>.
 Call us toll free at 1.833-870-5500 (TTY: 711 or RelayNC com).
 Read the Health Care Ontion Guide that came with this letter

These are all your health care options

 Tailored Plan - The Tailored Plan is a North Carolina Medicaial and NC Health Choice health plan. It offers physical health, pharmacy, care coordination and behavioral health services. It is for members who may have significant mental health needs, severe substance use disorders, intellectual/developmental disolities (I/DD) or traumatic brain injuries (TBIs). The Tailored Plan provides Tailored Care Management to help coordinate services and support needs. It offers added services for members who usufik.

 NC Medicaid Direct - NC Medicaid Direct is North Carolina's health care program for Medicaid beneficiaries who are not in NC Medicaid Managed Care. It includes care coordination by Community Care of North Carolina (CNC), the primary care case management entity (PCCMe). Six Local Management Entity-Managed Care Organizations (LME-MCOs) coordinate services for a mental health disorder, substance use disorder, intellectual/devolmental disability (IDD) or traumatic train injury (TBI).

If you change to the Tailored Plan November 30, 2022, the new Tailored Plan will start on December 1, 2022

After you enroll, the Tailored Plan will send you information and a new ID card. You will use your ID card to get health care services. If you have questions, call the Tailored Plan at the number listed on your ID card.

Questions?

We can help. Go to <u>normedicaidplans gov</u>. You can also use the "chat" tool on the website. Or call us at 1-833-870-5500 (TTY: T1f or Relay/NC com). Our extended hours are from 7 a.m. to 7 p.m., Monday through Friday and 7 a.m. to 5 p.m. on Saturday. The call is toll free. You may need your Medicaid ID number when you call or go to the website.

ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

More on back >

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ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

You can get the information at <u>normedicaidplans gov</u> in print. To ask for a free copy, call us toll free at 1-833-870-5500 (TTY: 711 or RelayNC.com). Or use the "chat" tool on the website. We will send this information within 5 business days.

NC Medicaid Ombudsman

The NC Medicaid Ombudsman can offer help if you cannot get access to health care, connect you to other resources, and help you understand your rights and responsibilities.

Go to <u>nemedicaidombudsman.org</u>. Or call 1-877-201-3750, 8 a.m. to 5 p.m., Monday through Friday. The call is toll free.



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Sample Transition Notice – Tailored Plan & Standard Plan

Health Care Option Guide: TP page – administrative county SP page – Four or five plans depending on residential county



NOTICE TO PEOPLE WHO ARE BEING AUTO-ENROLLED IN THE TAILORED PLAN BUT CAN CHOOSE A STANDARD PLAN NC MEDICAID 20220091 V1.0

Patricia A. Jones 1234 Any Main Street Raleigh, NC 27603-100

Dear Patricia A. Jones,

Patricia A. Jones is enrolled in WellCare (Standard Plan) A Standard Plan is a North Carolina Medicaid and NC Health Choice health plan. It offers physical health, phamapa, care occurications and basic behavioral health services for members. Standard Plans offer added services for members who quality.

There will be a new way to get Medicaid health care

Starting December 1, 2022, NC Medicaid will have a new type of NC Medicaid Managed Care health plan. It is called the Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plan (Tailored Plan).

- The Tailored Plan is a North Carolina Medicaid and NC Health Choice health plan. It offers: • Physical health, pharmacy, care coordination and behavioral health services for members who may have significant mental health needs, server substance use disorders, intellectual/developmental disabilities (I/ODs) or traumatic brain injuries (TBIs).
- Services for special populations, including Innovations and TBI Waiver participants and Waiver waitist individuals.
 Added services for members who qualify. The added services are listed on the Health Care Option Guide.
- Option Guide. For a full list of services the Tailored Plan offers, on to the (earn page at nomedicaidhans on)

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You can get free auxiliary aids and services, including information in other languages or formats such as large print or audio. Call us toll free at **1-833-870-5500**.

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August 1, 2022

The Tailored Plan must have enough network hospitals and providers for you to get covered services near you and in a limely way. To learn more, go to the find page at <u>correctications gov</u> To learn more about NC Medicaid Managed Care and changes to the Medicaid program, go to <u>nomedicaidplans gov</u>.

Some things will stay the same Medicaid eligibility rules and processes are not changing

The people below are enrolled in Vaya Health (Tailored Plan) starting

December 1, 2022 Vog Hohatin inte Balored Plan that serves your county. The Tailcord Plan offers the services you may need for a mental health disorder, satisfance use disorder, intellectual/developmental adabitity (IDO) or taimandic brain injury (TBI) You all data ingeling balatit are assistered from the Tailord Plan on the start date below. Until then, you will get care and services the way you drow.

Name / ID Number	Tailored Plan / Start date / Phone
Patricia A. Jones XXX-XXX-XXXX	Vaya Health December 1, 2022 1-800-962-9003

After December 1, 2022, you will get health care services from the Tailored Plan listed above unless:

- You choose to get health care services from a different health care option,
 You no longer qualify for the Tailored Plan, or
- You move out of the Tailored Plan's service area.
 To learn more about why you qualify for the Tailored Plan, go to the Learn page at
 <u>nomedicaidplans gov</u>. Or call us toll free at 1.833-870-5500 (TTY: 711 or RelayNC.com).
- cmedicaidplans.gov. Or call us toll free at 1-833-870-5500 (TTY: 711 or RelayNC.com).

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ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

Choose your primary care provider (PCP) and Tailored Care Management provider by October 14, 2022

Your PCP is a doctor, nurse practitioner, physician assistant or other provider. They care for your health, coordinate your needs, and refer you to specialists when you need them. The Tailored Plan can tell you which PCPs are in their provider network. Even if you have a PCP, you need to choose a PCP in the Tailored Plan's provider network.

Your Tailored Care Management provider helps coordinate your services and support needs. The Tailored Plan can tell you which Tailored Care Management providers are in their provider network. Your PCP may be your Tailored Care Management provider. The Tailored Plan can tell you which PCPs are also Tailored Care Management providers.

To choose a PCP and Tailored Care Management provider, call the Tailored Plan listed in this letter. If you don't choose a PCP and Tailored Care Management provider by October 14, 2022, the Tailored Plan will choose one for you.

For a full a list of providers, including PCPs and Tailored Care Management providers in the Tailored Plan's provider network, go to the Find page at <u>nomedicaidplans.gov</u>.

What happens next?

The Tailored Plan will send you information and a new ID card. You will use your ID card to get health care services. If you have questions, call the Tailored Plan at the number listed on your ID card.

If you want to leave the Tailored Plan (Disenrollment)

Errollment in the Tailored Plan is voluntary. This means you have other choices. You qualify for the Tailored Plan because it offers health care services you may need for a mental heath discoders, substance use dordored, instituctual/evelopmental disability (UCD) or traumatic train injury (TBI). Your Tailored Plan is based on the county that manages your Medicaid case.

Only one Tailored Plan serves each county in North Carolina. You can't choose a different Tailored Plan. If the county that manages your Medicaid case changes, you will be moved to the Tailored Plan that serves that county.

More on back

ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelavNC.com)

You can get health care services from the health care option listed below • Standard Plan

- To learn more about your choices and the services offered:
- Go to mendicaldplans.gov/ before the to the test state series.
 Go to mendicaldplans.gov/ before the test state series app. To get the free app, search for NC Medicaid Managed Care on <u>Socole Play</u> or the <u>App Store</u>.
 Call us fill free at 1.833.8740.5500 (TTY 711 or RelavIVC com)
- Read the Health Care Option Guide that came with this letter.
 You may ask to change your health care option at any time and for any

reason.

To learn how to change your health care option (disenrollment), read "Know Your NC Medicaid Health Care Options" that came with this letter.

If you change your health care option, but them needs a service only the Talander Tana offers; you can also nove backs to the Talander Bhar and yme. If you and it guardly for the Talander Plan, you will be moved black. If you no longer quality, you can fill out the Request 16 Move to the Talander Plan: Revolution your more than the provider can fill out the Request 16 Move to the Talander Plan: Revolute Form You can fill out the Talander Plan: Revolute Form You can fill out the talander Plan: Revolute Form You can fill out the talander plan: Revolute Form You can fill out the talander plan: Revolute Form You can fill out the talander plan. Revolute Form You Can fill be the Talander Plan: Revolute Form You Can fill be talander to the talander plan. Revolute Form You Can fill be talander to the talander talander to the talander talander

Remember: You may need certain services for a mental health disorder, substance use disorder, intellectual/developmental disability (I/DD) or traumatic brain injury (TBI) that only the Tailored Plan offers.

Questions?

We can help. Go to <u>normedicaidplans gov</u> You can also use the "chal" tool on the website. Or call us at 1433-870-5500 (TTY: 711 or RelayNC com). Our extended hours are from 7 a.m. to 7 p.m., Monday through Friday and 7 a.m. to 5 p.m. on Saturday. The call is toll free. You may need your Medicaid ID number when you call or go to the website.

You can get the information at <u>nonedicaidplans gov</u> in print. To ask for a free copy, call us toll free at 1.833-870-5500 (TTY: 711 or RelayNC.com). Or use the "chat" tool on the website. We will send this information within 5 business days.

More on next page >

ncmedicaidplans.gov | 1-833-870-5500 (TTY: 711 or RelayNC.com)

NC Medicaid Ombudsman

The NC Medicaid Ombudsman can offer help if you cannot get access to health care, connect you to other resources, and help you understand your rights and responsibilities. Go to <u>mcmedicaidombudsman.org</u>, Or call 1.877-201-3750, 8 a.m. to 5 p.m., Monday through Fnday. The call is to filtere.

Thank you, NC Medicaid Team



nemedicaldolans.gov | 1-823-870-5500 (TTY: 711 or PelavN/C com)

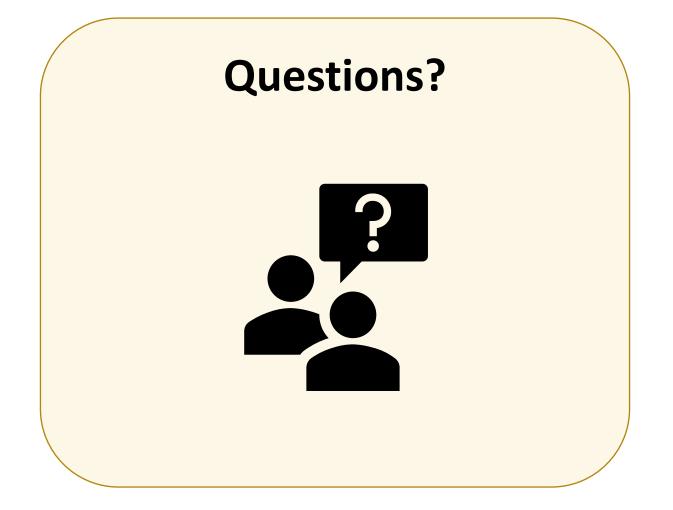
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Resources

To learn more, please visit:

- NC Medicaid Managed Care County Playbook
 - Link to access: County Playbook: Medicaid Managed Care | NC Medicaid (ncdhhs.gov)
- NC Medicaid Enrollment Broker
 - Link to access: <u>Home | NC Medicaid Managed Care (ncmedicaidplans.gov)</u>
- NC Medicaid Website
 - Link to access: <u>https://medicaid.ncdhhs.gov/reports/dashboards</u>



Next Steps

Tailored Care Management TAG Members

We welcome feedback on everything

Department

- Discuss feedback received during today's Tailored Care Management TAG meeting
- Prepare for August 26 Tailored Care Management TAG session

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 2022 Meetings:

August 26, September 23, October 28

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)

Appendix

Qualified Professional Definition

10A North Carolina Administrative Code 27G.0104 STAFF DEFINITIONS

"Qualified professional" means, within the mh/dd/sas system of care:

(a) an individual who holds a license, provisional license, certificate, registration or permit issued by the governing board regulating a human service profession, except a registered nurse who is licensed to practice in the State of North Carolina by the North Carolina Board of Nursing who also has four years of full-time accumulated experience in mh/dd/sa with the population served; or

(b) a graduate of a college or university with a Masters degree in a human service field and has one year of full-time, post-graduate degree accumulated mh/dd/sa experience with the population served, or a substance abuse professional who has one year of full-time, post-graduate degree accumulated supervised experience in alcoholism and drug abuse counseling; or

(c) a graduate of a college or university with a bachelor's degree in a human service field and has two years of full-time, post-bachelor's degree accumulated mh/dd/sa experience with the population served, or a substance abuse professional who has two years of full-time, post-bachelor's degree accumulated supervised experience in alcoholism and drug abuse counseling; or

(d) a graduate of a college or university with a bachelor's degree in a field other than human services and has four years of full-time, post-bachelor's degree accumulated mh/dd/sa experience with the population served, or a substance abuse professional who has four years of full-time, post-bachelor's degree accumulated supervised experience in alcoholism and drug abuse counseling.



Tailored Plan Criteria Review

NC Medicaid is responsible for managing and maintaining Tailored Plan enrollment criteria. Identification for Tailored Plan enrollment will continue to be an ongoing process. Approximately 175,000 beneficiaries will be eligible for the Tailored Plan, and more accurate numbers will be made available after Tailored Plan Criteria Review.

August 1, 2022

Programs:

- Innovations Waiver (or waiting list)
- TBI Waiver (or waiting list)
- Transition to Community Living (TCL)

Tailored Plan-only services:

- Have used a Medicaid service that will be available only through the Tailored Plan
- Have used a mental health, substance use, I/DD or TBI service funded with state, local, or federal or non-Medicaid funds

Diagnoses:

- Children with complex needs
- Have a qualifying I/DD diagnosis code
- Qualifying mental illness or substance use disorder diagnosis code, and used a Medicaid-covered enhanced behavioral health service during the lookback period*
- Psychotic disorder (primary or secondary to a mood disorder), use of clozapine or a long-acting injectable antipsychotic medication, or receive electroconvulsive therapy (ECT) during the lookback period*

Admissions/visits:

- Admission to a state psychiatric hospital or Alcohol and Drug Abuse Treatment Center (ADATC), including but not limited to, individuals who have had one or more involuntary treatment episodes in a State-owned facility
- Two or more visits to the emergency department for a psychiatric problem; two or more psychiatric hospitalizations; or two or more episodes using behavioral health crisis services during the lookback period*

*The lookback period is 24 months