

Tailored Care Management Technical Advisory Group (TAG)

Meeting #28

*Tailored Plan and Tailored Care Management
Updates*

March 22, 2024

Announcement

Please note that we request that no one record this call or use an AI software/device to record or transcribe the call. DHHS is awaiting additional direction from our Privacy and Security Office on how we need to support these AI Tools. Thank you for your cooperation.

HIPAA-covered DHHS agencies which become aware of a suspected or known unauthorized acquisition, access, use, or disclosure of PHI shall **immediately** notify the DHHS Privacy and Security Office (PSO) by reporting the incident or complaint to the following link:
<https://security.ncdhhs.gov/>

Agenda

- **Behavioral Health and Intellectual/Developmental Disabilities Tailored Plan (Tailored Plan) Launch**
- **Tailored Care Management Promising Practices**
- **Tailored Care Management Updates**
 - **Clarification: Frequency of Qualifying Contacts**
 - **TCL Update**
 - **Tailored Care Management Toolkit**
 - **Tailored Care Management Monitoring Tool**
 - **Tailored Care Management Member Assignment**
- **Discussion**

Welcome and Roll Call

Department of Health and Human Services

Kristen Dubay, MPP	Loul Alvarez, MPA	Regina Manly, MSA	Eumeka Dudley, MHS	Gwendolyn Sherrod, MBA, MHA	Tierra Leach, MS, LCMHC-A, NCC
Chief Population Health Officer	Associate Director, Population Health	Senior Program Manager, Tailored Care Management	Program Lead, Tailored Care Management	Program Lead, Tailored Care Management	Program Specialist, Tailored Care Management

Contact: Medicaid.TailoredCareMgmt@dhhs.nc.gov



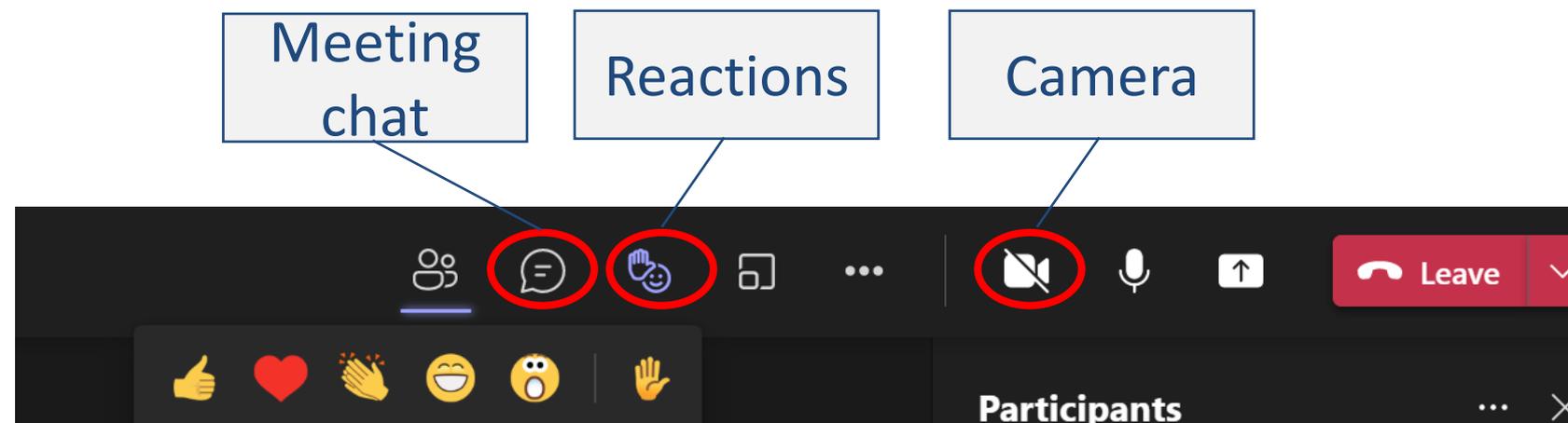
**NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES**

Tailored Care Management TAG Membership

Name	Organization	Stakeholder
Erin Lewis	B&D Integrated Health Services	Provider Representative
Julie Quisenberry	Coastal Horizons Center	Provider Representative
Billy West	Daymark	Provider Representative
Denita Lassiter	Dixon Social Interactive Services	Provider Representative
Luevelyn Tillman	Greater Vision Counseling and Consultants	Provider Representative
Keischa Pruden	Integrated Family Services, PLLC	Provider Representative
Haley Huff	Pinnacle Family Services	Provider Representative
Sandy Feutz	RHA	Provider Representative
Lisa Poteat	The Arc of NC	Provider Representative
Eleana McMurry, LCSW	UNC Center for Excellence in Community Mental Health	Provider Representative
Donna Stevenson	Alliance Health	Tailored Plan Awardee
Lynne Grey	Partners Health Management	Tailored Plan Awardee
Cindy Ehlers	Trillium Health Resources	Tailored Plan Awardee
Chris Bishop	Vaya Health	Tailored Plan Awardee
Cindy Lambert	Cherokee Indian Hospital Authority	Tribal Option Representative
Jessica Aguilar	N/A	Consumer Representative
Pamela Corbett	N/A	Consumer Representative
Jonathan Ellis	N/A	Consumer Representative
Alicia Jones	N/A	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.



Tailored Plan Launch

Upcoming Launch of Tailored Plans

Tailored Plans are set to launch on July 1, 2024.

The following slides include key information to prepare for launch.

A list of additional resources can be found in the appendix.

What are Tailored Plans?

Tailored Plans are an integrated health plan for individuals with behavioral health needs and I/DD. They will also serve other special populations including Innovations and Traumatic Brain Injury (TBI) waiver enrollees (and waitlist members) and will be responsible for managing the state's non-Medicaid behavioral health, developmental disabilities and TBI services for uninsured and underinsured North Carolinians.

- Approximately 180,000 individuals will be enrolled into a Tailored Plan.**
- All services offered by Standard Plans will be offered by Tailored Plans.**
- Tailored Plans will also offer a more extensive set of behavioral health and I/DD benefits than Standard Plans and will be the only NC Medicaid Managed Care Plans to offer 1915(c) Innovations, TBI waiver services, and State-funded services. ^{1,2}**

¹ The [Tailored Plan services webpage](#) includes additional information about covered services.

² The one exception is that Eastern Band of Cherokee Indian Tribal members will be able to access the Innovations and TBI waivers through LME/MCOs.

How Will Individuals Be Enrolled into a Tailored Plan?

- Individuals eligible for a Tailored Plan will be **auto-enrolled in the Tailored Plan serving their administrative county** (i.e., the county that manages the individual's Medicaid case). LME/MCOs will operate the Tailored Plans, and individuals will be auto-enrolled in the Tailored Plan operated by the same LME/MCO that they receive services from today.
- **Some populations are excluded from Tailored Plans and will remain enrolled in NC Medicaid Direct** (e.g., individuals who are dually eligible for Medicaid/Medicare, children/youth in foster care).¹
- **Some individuals who are not auto-enrolled in the Tailored Plan may be able to choose to opt-in.**
 - These individuals must contact the NC Medicaid Enrollment Broker to see if they can move to a Tailored Plan.²

Tailored Plan eligibility criteria is available [here](#)

¹ Populations delayed or excluded from managed care upon Tailored Plan launch can be found on the [NC Medicaid Direct webpage](#) or in the [Contracting with Tailored Plans Fact Sheet](#).

² [Enrollment Broker](#) can be contacted at 1-833-870-5500 (TTY: 711 or [RelayNC.com](#)) for assistance.

Implications for Tailored Care Management

- **The Department does not expect this transition will create any disruption for members engaged in Tailored Care Management services.**
- **Since LME/MCOs will operate the Tailored Plans, individuals will keep their same care managers at the LME/MCO, CMA, or AMH+ as they enroll in Tailored Plans.**
- Individuals who remain in NC Medicaid Direct will also continue receiving Tailored Care Management from their current assigned care manager.

Choice Period and Auto-Assignment – Tailored Care Management

Individuals not currently engaged in Tailored Care Management will have the opportunity to choose or be auto-assigned a CMA, AMH+, or Tailored Plan / LME/MCO.

- Individuals' current Tailored Care Management assignments will be preserved when they enroll in a Tailored Plan.
- Individuals who **do not currently** have a Tailored Care Management provider (AMH+, CMA, or plan-based care manager) can **choose a Tailored Care Management provider in their region** during the choice period (April 15, 2024 – May 15, 2024) by contacting their Tailored Plan.¹ (*contact information in the appendix*)
- If the individual does not choose a provider during the choice period, the individual will be auto-assigned a Tailored Care Management provider.

¹ LME/MCOs must still comply with federal requirements for conflict-free case management for 1915(c) and 1915(i) programs.

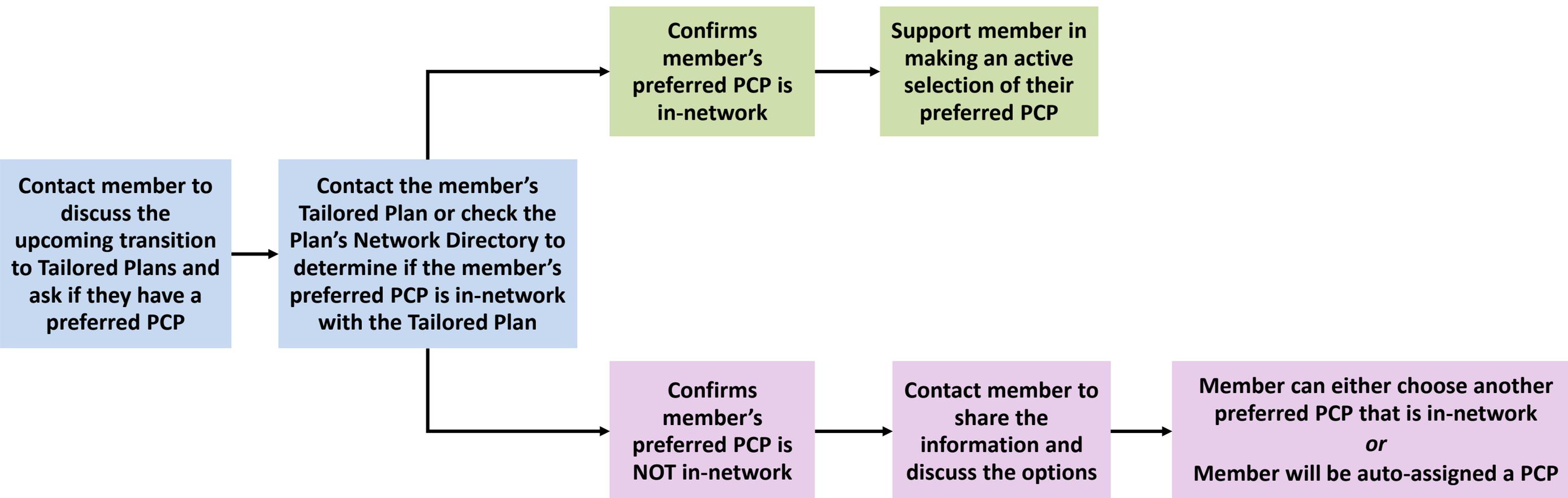
Choice Period and Auto-Assignment – Primary Care Provider (PCP)

The Department aims for members transitioning to Tailored Plans to have continuity in their primary care provider (PCP assignments) but recognizes that some PCPs will not be in-network for Tailored Plans.

- Members' current PCP assignments will be preserved unless the PCP is not contracted with the Tailored Plan.
- During the choice period from April 15, 2024, through May 15, 2024, individuals can **choose an in-network PCP** by contacting their plan. (*contact information in the appendix*)
- If a member's current PCP is out-of-network and the member does not choose a PCP, the **member will be auto-assigned a new PCP** after the choice period ends.
- **PCP auto-assignments will use the following criteria:**
 - Member historical treatment relationship with another PCP
 - Member family relationship with in-network PCPs when the member does not have a history directly with any PCPs based on claims history
 - Member's geographic location

Supporting Members During Choice Period

Care managers play an important role in supporting members in retaining their PCP where possible/desired and in selecting a new PCP where needed.



While supporting members in their confirming their assigned PCP under Tailored Plans, the Department recommends the care manager check if the member has obtained their annual well visit.

Tailored Care Management Promising Practices

Building and Supporting Great Teams



Founded As Tammy Lynn Center

Presented by:

CORIE E. PASSMORE, MS

Director of Community Based Services

Tammy Lynn Center

We are humans serving humans. Our basic needs, including emotional, must be met before we can serve or help anyone else. I have worked to ensure our staff are informed, properly trained, included, feel safe/supported and that we know each other's idiosyncrasies and can be open and honest about issues or needs.

Corie Passmore



Strategy 1: Know What You are Looking for in Staffing

- Personality
- Successful candidates possess the following characteristics:
 - Flexible
 - Able to trouble shoot and problem solve
 - Resourceful
 - Eager to learn
 - Caring/Caregiving
- Know the right questions to ask when interviewing
 - Incorporate CMs in the interview process, as they will be the ones working closest with the new candidate
- Look for a candidate who is invested in care management and the growth opportunities in this budding field
 - Hiring candidates who plan to be with you a short while costs the company and team, and staff changes can lead to members not getting served, decreased team morale, burn out and instability
- Get to know your staff
 - Get to know staff's heart
 - What positive reinforcements do staff respond to best?
 - What are each staff's boundaries and what do they need to show up as their best selves?
 - What do each staff need from leadership, realizing each staff has unique needs?
 - Get to know staff's strengths, limitations and blind spots so you can support them holistically and assist them in building skills for their future



Strategy 2: Seek Opportunities to Support Staff

- Encourage staff to attend all stakeholder meetings and trainings
 - Staff can ask questions directly and be able to apply the knowledge
 - Helps staff gain more responsibility for the information presented
 - The more informed we are, the better decisions we are able to make
- Encourage Autonomy and Independence:
 - Freedom to design their own schedule and tracking tools to help staff be more efficient and meet deadlines
 - Teach them how to troubleshoot and think “outside the box”
 - Feedback loop to create new tools to either track data or new tools for operational needs
- Invest in staff:
 - Will pay for certifications and specialized training up to a certain amount, based on staff’s interests, i.e. ASL
 - Birthday celebrations/activities
 - Monthly lunches; staff take turns deciding location
- Expectations: High vs. Unrealistic
 - Keep expectations high but ensure they are not unrealistic
 - Find your own way of meeting the requirements while maintaining work/life balance



Strategy 3: Combatting Burn-Out



- Incentivize with production bonuses per member engaged (paid quarterly), or other method
- Encourage midday breaks as the evidence for the benefits of that is undeniable
- Monthly lunches not talking about work:
 - Just to chat and learn about each other which breeds understanding and supports the team to be cohesive and work together more fluidly
 - Teams that play together, stay together
 - Research has found evidence that play at work is linked with less stress, fatigue, boredom and burnout. Play is also positively associated with job satisfaction, sense of competence and creativity
- Team building exercises using person centered tools (Good day vs Bad day; Important to vs Important for, etc.)
- To bond staff, using a combination of these tools in staff meetings will create a non-judgmental space for them to share and connect
 - Aids staff in understanding themselves better, encourages vulnerability which paves the way for real growth, builds trust, and helps staff better connect to these tools' purpose.
 - Helps staff connect the dots on the purpose and value of Person Centered Planning tools and how they can extrapolate key information about a person's needs, hopes and dreams

Person-Centered Planning Resources:

- <https://www.sdaus.com/tool-kit-templates-examples>
- <https://helensandersonassociates.com/person-centered-thinking-tools/>

Questions?

TLC

www.nctlc.org

Upcoming tour information

**(RSVP to Alyson Stoffer, Director, Strategic Impact & Outreach, astoffer@nctlc.org),
Sign up for e-news, etc. i.e. "To learn more".**

Upcoming monthly tours, first Friday of the month

(with some exceptions on holidays and holiday weekends)

from 9-10:00 AM at TLC's main campus:

- **April 5th**
- **May 3rd**
- **June 7th**



Clarification: Frequency of Qualifying Contacts

Clarifying the Contact Requirements

Providers must have one successful qualifying contact to bill for the monthly payment rate. However, care managers/care teams should use their clinical judgement and the results of the care management comprehensive assessment to determine the number of contacts a member needs in a particular month.

The actual number of contacts will vary across members.

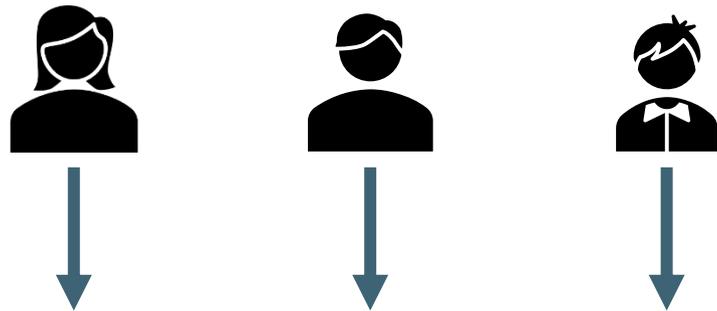
Contact Requirements

- **A qualifying contact is defined as a member-facing interaction** (telephone call, two-way real time video, or in-person) that includes the member and/or legally responsible person/guardian, as indicated, that fulfills one or more of the six core Health Home services.
 - Email, text, or voicemail do not count as a qualifying contact.
 - Contacts that are not member-facing are not billable (e.g., care manager to PCP contact).
- **The qualifying contact can be performed by the care manager, supervisor, or extender (where appropriate).**

Example of Varying Member Contacts

The number of contacts a member receives in a month is not one size fits all. Instead, the number should be based on the individual's needs, the care manager's/care team's clinical judgement, and the results of the comprehensive assessment.

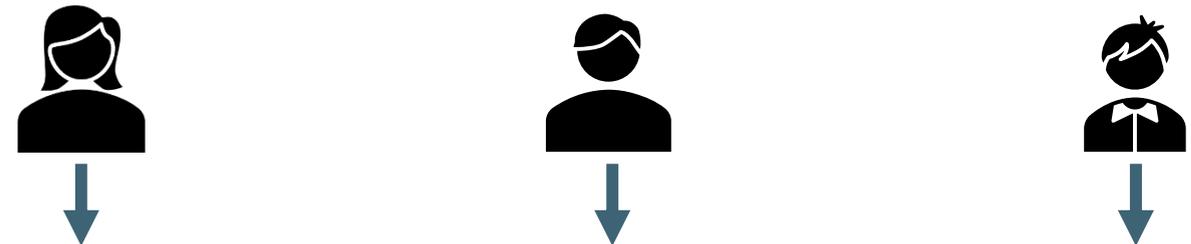
Example: All members receive the same number of contacts



All members on panel receive only one qualifying contact per month, regardless of the care manager believing that some members could benefit from more frequent contact based on their clinical judgement and the results of the comprehensive assessment.

 **DO NOT** assume all members require the same number of contacts per month

Example: Number of contacts vary across members



Ana is going through a major life transition, the care manager determined they should check-in with Ana multiple times for the next two weeks, including phone and in-person/virtual.

The care manager determined Darius is currently stable and only requires one phone contact per month for the time being.

Through the assessment, the care manager determined Alex requires frequent virtual/in-person support. The care manager contacts Alex or his guardian at least three times per month.



DO vary the number of contact across members based on the individual's needs

TCL Update

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

- **The first cohort of Tailored Care Management providers designated for TCL is set to launch April 1, 2024.**
- **TCL participants may start selecting AMH+s/CMAs with a TCL Distinction on April 1.**
- **The assignment to their new provider will be effective May 1, 2024.**

Additional Providers Interested in the TCL Distinction

- **Beginning April 1, 2024, additional AMH+s/CMAs who would like to seek the TCL Distinction** may begin the application process by obtaining a letter of support from the LME/MCO.
 - Please email nctailoredcaregmt@ncqa.org to declare your intent to apply for the TCL Distinction. NCQA will provide additional instructions via email.
- For additional information on TCL Distinction, two trainings are available on AHEC website:
 - **TCM Provider Training #1:** [Transitions to Community Living \(TCL\) Part 1: Overview](#)
 - **TCM Provider Training #2:** [Transitions to Community Living \(TCL\) Distinction for TCM Training](#)
- AHEC coaches are available to provide support to TCM Providers interested in the TCL Distinction.

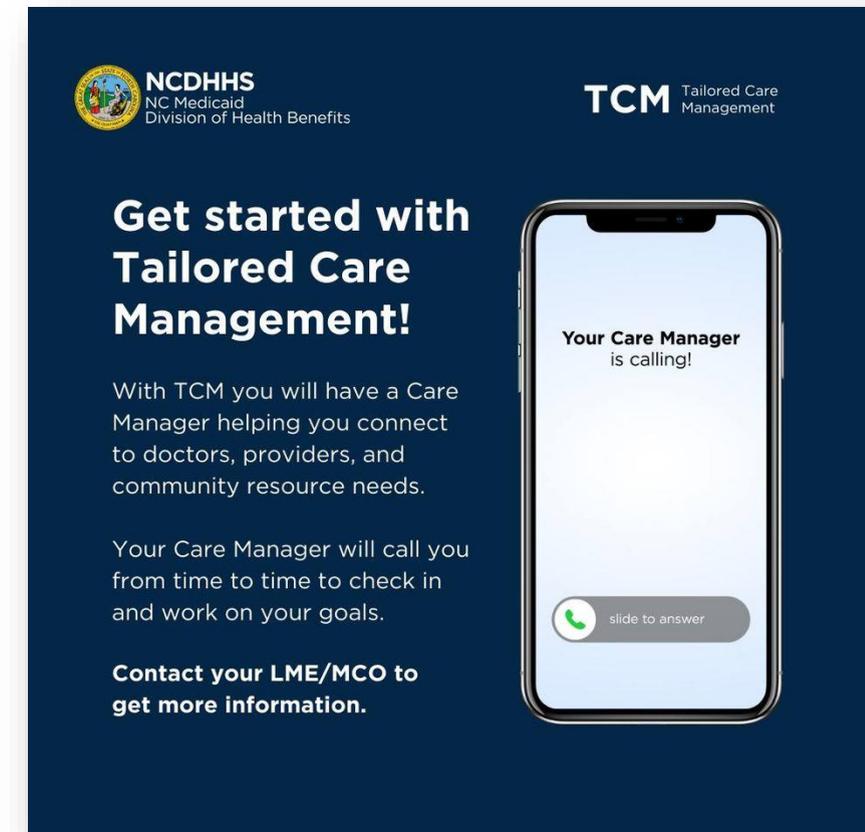
For additional questions, please reach out to Tierra Leach (tierra.leach@dhhs.nc.gov) and Elissa Perez (elissa.perez_acn@dhhs.nc.gov).

Tailored Care Management Toolkit

Tailored Care Management Toolkit Forthcoming

The TCM Member Education and Community Awareness Workgroup developed a toolkit of resources that can be used to educate members, other care team providers, and the broader community about Tailored Care Management. The toolkit will include:

- **Presentation** that covers the Tailored Care Management essentials, such as who is eligible and how to enroll
- **Flyer** that includes an overview of Tailored Care Management and who is eligible*
- **Set of social media graphics and posts** that can be used to post about Tailored Care Management on relevant channels* (*see social media post to the right*)
- **Fact sheet** of key information members should know about Tailored Care Management*
- **Infographics** of Tailored Care Management services*
- **FAQ** answering common questions*
- **Video** that present an overview of Tailored Care Management and also testimonial impact stories from beneficiaries (*planned for future development*)



Tailored Care Management Monitoring Tool

Update on the Tailored Care Management Monitoring Tool

The LME/MCOs are in the process of developing a statewide Tailored Care Management monitoring tool. This tool will allow the Department and LME/MCOs to perform routine required monitoring of LME/MCOs and AMH+s/CMAs, respectively, and ensure members are receiving high quality care management. The Department will monitor Tailored Plans / LME/MCOs.

- The monitoring tool will be piloted with a few volunteer providers prior to being utilized statewide.
- The monitoring tool will **not be implemented until after Tailored Plan launch**. The exact date is still being determined.
- For the initial monitoring period after the tool is launched, Tailored Plans / LME/MCOs will use the results of the monitoring to provide technical assistance to AMH+s and CMAs. No corrective actions will be issued during this period.
- The Department will share additional details as they become available.

Tailored Care Management Member Assignment

Progress to Date on Changes to the Tailored Care Management Auto-Assignment

The Department and the TCM Auto Assignment Collaborative aligned on the following solutions for minimizing reassignments and disruption in care management caused by members' population segment changes (e.g., I/DD member receives a behavioral health diagnosis):

- **Reassignment due to member's population segment changes stopped** (introduced on 8/1/23)
 - Members will only be reassigned who are newly enrolled in the Innovations or TBI waiver, if the current provider is not certified to serve Innovations or TBI waiver members
- For all other changes to member population segments, AMH+s/CMAAs are expected to use their clinical judgement to identify when they can no longer adequately serve a member and notify the LME/MCO that the member should be reassigned

Progress to Date on Changes to the Tailored Care Management Auto-Assignment, *continued*

The Department continues to work with LME/MCOs to identify opportunities to assign members to AMH+ and CMAs for Tailored Care Management.

- The Tailored Care Management Auto-Assignment (TCM AA) Flexibility Request Process was created in December 2023.
- LME/MCOs may request a **flexibility to the TCM AA policy assignment guidance to allow more members to be assigned to AMH+s/CMAs.**
- *For example:* A TCM AA Flexibility Request was approved to allow the assignment of a members without an indicated population segment to AMH+/CMA. Previously, this group was assigned to LME/MCOs.
- The Department continues to work with LME/MCOs to evaluate instances where members are assigned to the LME/MCOs but could be served by AMH+/CMAs.

Questions?



Public Comments

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 2024 Meetings:

April 26, May 24

Previous Meetings:

- **Meeting #1:** Friday, October 29, 2021 ([presentation](#), [minutes](#))
- **Meeting #2:** Friday, November 19, 2021 ([presentation](#), [minutes](#))
- **Meeting #3:** Friday, December 17, 2021 ([presentation](#), [minutes](#))
- **Meeting #4:** Friday, January 28, 2022 ([presentation](#), [minutes](#))
- **Meeting #5:** Friday, February 25, 2022 ([presentation](#), [minutes](#))
- **Meeting #6:** Friday, March 25, 2022 ([presentation](#), [minutes](#))
- **Meeting #7:** Friday, June 3, 2022 ([presentation](#), [minutes](#))
- **Meeting #8:** Friday, June 24, 2022 ([presentation](#), [minutes](#))
- **Meeting #9:** Friday, July 22, 2022 ([presentation](#), [minutes](#))
- **Meeting #10:** Friday, August 26, 2022 ([presentation](#), [minutes](#))
- **Meeting #11:** Friday, September 23, 2022 ([presentation](#), [minutes](#))
- **Meeting #12:** Thursday, October 27, 2022 ([presentation](#), [minutes](#))
- **Meeting #13:** Friday, November 18, 2022 ([presentation](#), [minutes](#))
- **Meeting #14:** Friday, December 16, 2022 ([presentation](#), [minutes](#))
- **Meeting #15:** Friday, February 24, 2023 ([presentation](#), [minutes](#))
- **Meeting #16:** Friday, March 24, 2023 ([presentation](#), [minutes](#))
- **Meeting #17:** Friday, April 28, 2023 ([presentation](#), [minutes](#))
- **Meeting #18:** Friday, May 26, 2023 ([presentation](#), [minutes](#))
- **Meeting #19:** Friday, June 23, 2023 ([presentation](#), [minutes](#))
- **Meeting #20:** Friday, July 28, 2023 ([presentation](#), [minutes](#))
- **Meeting #21:** Friday, August 25, 2023 ([presentation](#), [minutes](#))
- **Meeting #22:** Friday, September 22, 2023 ([presentation](#), [minutes](#))
- **Meeting #23:** Friday, October 27, 2023 ([presentation](#), [minutes](#))
- **Meeting #24:** Friday, November 17, 2023 ([presentation](#), [minutes](#))
- **Meeting #25:** Friday, December 15, 2023 ([presentation](#), [minutes](#))
- **Meeting #26:** Friday, January 26, 2024 ([presentation](#), [minutes](#))
- **Meeting #27:** Friday, February 23, 2024 ([presentation](#), [minutes](#))

Tailored Plan Launch Appendix

Additional Resources for Tailored Plan Launch

- [Fact Sheet - What Providers Need to Know: Part 1 – Before Tailored Plan Launch](#)
- [Fact Sheet – What Providers Need to Know: Part 2– After Tailored Plan Launch](#)
- [Tailored Plan Member Enrollment: PCP/TCM Auto-Assignment](#)
- [Fact Sheet - NC Medicaid Managed Care: Contracting with Tailored Plans](#)
- [Day One Provider Quick Reference Guide for Tailored Plans](#)
- [NC Medicaid Plans webpage](#)
- [Provider Playbook: NC Medicaid Managed Care webpage](#)

Tailored Plan and Enrollment Broker Contacts for Choice Period

Tailored Plan	Member Services Phone Number
Alliance Health	1-800-510-9132
Partners Health Management	1-888-235-4673
Trillium Health Resources	1-877-685-2415
Vaya Health	1-800-962-9003

NC Medicaid Enrollment Broker

- Phone: 1-833-870-5500
- Texting: 711
- Online: [RelayNC.com](https://www.RelayNC.com)