NC Department of Health and Human Services



NC MEDICAID TRANSFORMATION RESTART

Jay Ludlam Assistant Secretary, NC Medicaid

Medical Care Advisory Committee (MCAC) Meeting September 18, 2020



North Carolina's Vision for Medicaid Transformation

"To improve the health of North Carolinians through an innovative, whole-person centered, and well-coordinated system of care that addresses both the medical and nonmedical drivers of health."

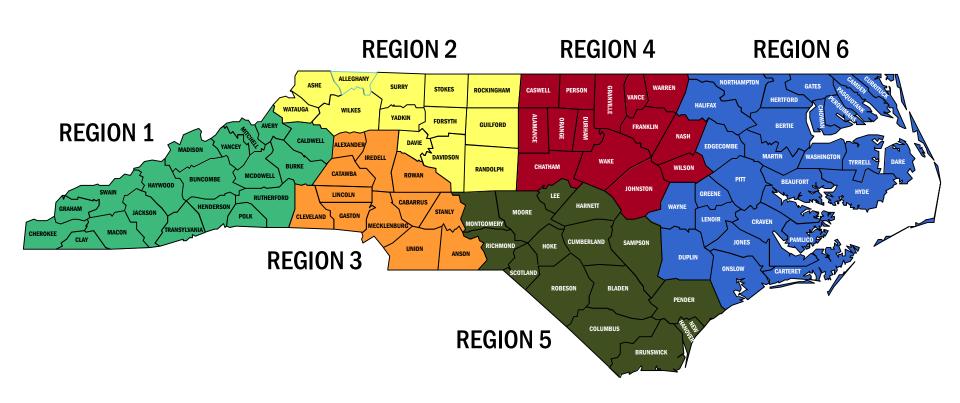
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Moving to Managed Care

- 1.6 1.8 million Medicaid beneficiaries will enroll in Standard Plans.
- Beneficiaries will be able to choose from 5 Prepaid Health Plans (PHPs)
 - AmeriHealth Caritas, Healthy Blue, United HealthCare,
 WellCare, Carolina Complete Health (Regions 3, 4, 5)
- All health plans, all regions will go live on July 1, 2021.

 Some beneficiaries will stay in fee-for-service because it provides services that meet specific needs or they have limited benefits. This will be called NC Medicaid Direct.

NC Medicaid Managed Care Regions

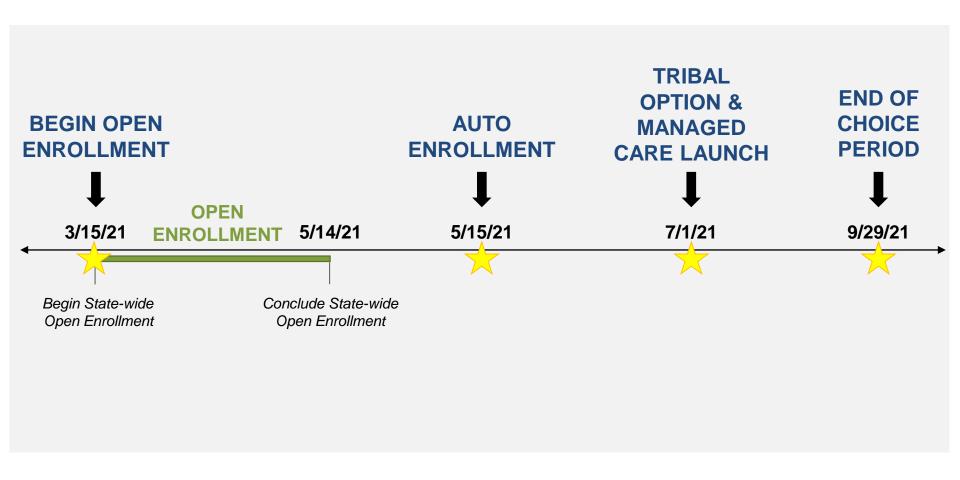


Challenges

- COVID-19
 - Uncertainty about provider's prioritizing contracting
 - Complexity in project planning rapid evolving conditions
- Other Program Changes
 - Tailored Plan Request for Application (RFA) and operational transition in preparation for July 2022 launch
 - DHHS is working with the Eastern Band of Cherokee Indians to develop a PCCM "Tribal Option" to go live in Region 1

Medicaid Transformation Timeline





Key Transformation Responsibilities by Program Area

In alignment with the DHB Organizational Design various groups and levels within the organization have different sets of responsibility. DHB / ACN Support Dep. Sec. IT & Ops **Executive** Leadership CMO Dowler Program Executive · Provide overall Farrington direction Business Tech. Program Director Determine the responsible business unit for a function or set of work (features & Analytics & Strategy Managed Care Capability Finance Quality Crosbie / Gupta tasks) **Teams** Prioritize across Provide **Business Units** Medicaid support for a (Formerly Projects): Business Lead J. Mercer Business Lead Horton Business Lead Bunch Business Lead Norris Business Lead Knick Business Lea Daniels Ensure the right capability Business Lead Mcclanahan Program Design and Actuarial skills and Ensure Lerche, Sandoe, Van Vleet Manatt, Mercer, AC capabilities exist consistency BTRM Lead Rutherford Technology Kotrannavara, Burbach, Fody within the org. and integration Procurement & Contracting Resolve key risks across and issues business units Legal Make decisions on Engage resources with Communications and Engagement highly impactful Leighs, Kamin DMH Lead items specialized Staff Training & Staff Readiness skill sets Compliance Analytics Standard Plan Tailored Plans Finance Provider Tribal Option Renefits Care & Quality Ongoing Integration and Interactions Across Projects (Matrixed Org. Program Management Office (PMO): Boyd, Slade **PMO Business Units** Draft · Track status, risks, Define work (features and tasks) that need to be completed issues, and *modifications decisions · Assign work to the appropriate resources Manage the change may occur Integrate people, process, and technology to deliver full solutions control process for Managed day-to-day progress of the work and progress towards milestones transformation Identify and mitigate to the extent possible risks and issues, escalate when needed · Support program Make decisions based on the guidance provided by Executive Leadership reporting and Work with other business units and capability areas as needed to deliver analysis products/outcomes

Restarting Managed Care Implementation – Highlight of Activities

- **Update all stakeholder materials**, websites, smart phone apps and technical systems across multiple platforms (Enrollment Broker, health plans, NCTRACKS)
- Formulate capitation rates beginning in Nov '20 and submit to CMS for approval
- Re-review and **resubmit to CMS for approval** several health plans' contractual policies and procedures deliverables (annual compliance plans, call scripts, member marketing, value added service materials, and clinical coverage policies)
- Update the Consolidated Provider Directory (NC DHHS, Enrollment Broker, health plans)
- Test Primary Care Provider Auto Assignment
- Complete key testing activities to finalize data, analytics, reporting functionality including Transition of Care (NC FAST, Enrollment Broker, NC TRACKS, health plans, LME-MCOs, UM Vendors & CCNC) and Data Warehouse
- Re-validate Enrollment Broker readiness including call center staff and scripting once rehired
- Re-evaluate internal Division of Health Benefit staff readiness
- For **network adequacy** monitor progress of **provider contracting** (health plans and providers)
- Moving forward with managed care related procurements including Member Ombudsman, EQRO, Health Opportunities Pilots