

# Medicaid Transformation Update

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JOINT LEGISLATIVE OVERSIGHT COMMITTEE ON MEDICAID AND NC HEALTH CHOICE  
APRIL 12, 2022

# Prepaid Health Plan Panelists

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- Anita Bachmann, CEO – UnitedHealthcare Community Plan
- Heidi Chan, Market President – AmeriHealth Caritas North Carolina
- Jesse Thomas, CEO – Healthy Blue North Carolina
- Mardy Peal, VP of Public Affairs – WellCare of North Carolina
- Chris Paterson, CEO – Carolina Complete Health

# Legislative Milestones – 2015 to 2020

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## **Session Law 2015-245 (H372)**

- Established Medicaid transformation

## **Session Law 2018-49 (H156)**

- Codified framework for licensing Prepaid Health Plans (PHPs)

## **Session Law 2018-48 (H403)**

- Established BH/IDD Tailored Plans criteria and clarified that for the Standard Plans there would be four statewide contracts and up to 12 regional contracts

## **Session Law 2020-88 (S808)**

- Provided Medicaid operational funding and established Medicaid Transformation launch date of July 1, 2021

# NC Model: Five Prepaid Health Plans

HealthyBlue

- 446,344 Members
- Statewide

UnitedHealthcare  
Community Plan

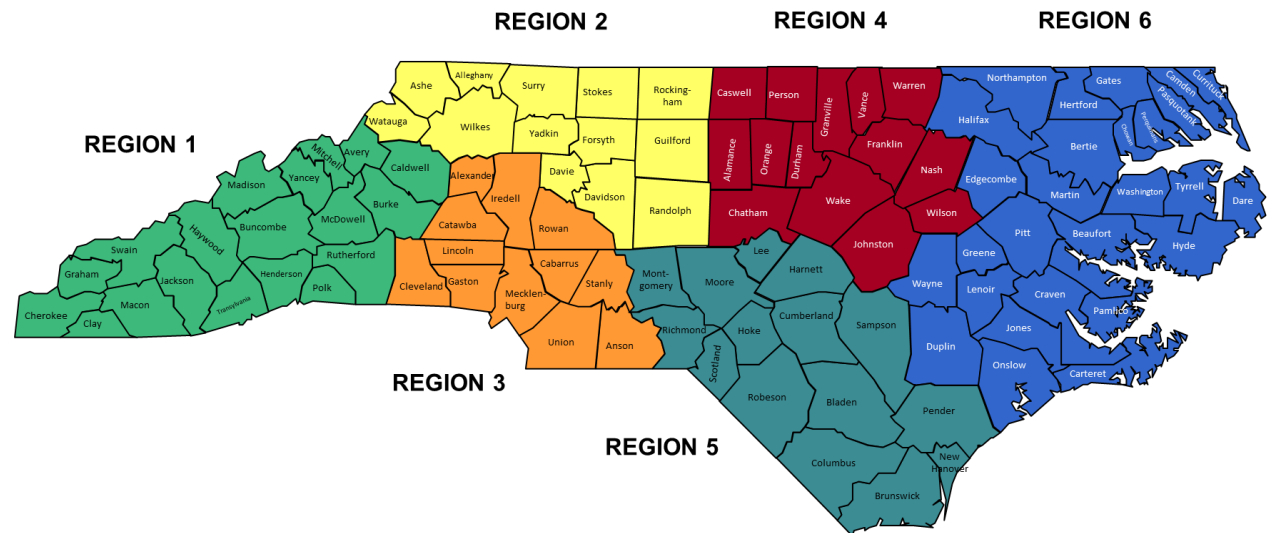
- 370,591 Members
- Statewide

WellCare

- 361,259 Members
- Statewide

AmeriHealth Caritas  
North Carolina

- 307,319 Members
- Statewide



carolina  
complete health

- 220,149 Members
- Serves 41 counties in regions 3, 4, and 5
- Only provider-led health plan

# NC Model: Implementation

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## **Implementation, Testing and Launch**

- NC Medicaid Managed Care launched mid-pandemic on July 1, 2021
- Original implementation was delayed by 20 months
- Rigorous PHP testing

## **Robust Network Development**

- Successful launch predicated on strong network adequacy
- Established a strong foundation for Expansion

# NC Model: Implementation

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## **Unique complexities in North Carolina's program**

- **Healthy Opportunities Pilot**
  - Phase 1 launched on March 15, 2022, for food services support
  - Phase 2 will launch in June 2022 for housing, transportation, interpersonal violence and toxic stress support and services
  - Central PHP involvement in screening, care management, IT, and reporting
- **NC Integrated Care for Kids (NC InCK)**
  - New program for all children in Medicaid in Alamance, Durham, Granville, Orange and Vance counties
  - Will integrate care for at-risk children across multiple sectors
- **Delegated care management and Advanced Medical Homes (AMH)**
  - Care management conducted at the provider level, with tiering levels and NCDHHS certification
  - PHPs engaged with AMH providers and Technical Advisory Group

# NC Model: What's Changed?

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## Members

- Can now choose their own health plan and primary care provider (PCP) in accordance with their needs
- Benefit from a “whole person” approach, with the integration of physical and behavioral health services
- Receive care management, and all are screened for unmet social determinants of health (SDOH) needs
- Benefit from their health plan’s value-added benefits, above and beyond Medicaid services

## Health Plans

- Partner with providers, health departments, county DSS and other community-based stakeholders to meet member needs
- Are accountable for improving access and quality
- Participate in initiatives to advance innovation, health equity and reduce health disparities
- Are subject to DHHS oversight to ensure compliance and measure performance

# Value-Added Benefits

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Wellness Programs and Incentives



Education Support



Pregnancy Assistance



Youth Programs



Additional Transportation Assistance



Non-Prescription Medication



Cell Phones



Counseling/Peer Support



Condition-Specific Care



Healthy Food Programs



# Building on Early Successes

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- Day one priorities met
- 97% of all Medicaid enrollees kept their PCP through transition
- Auto-adjudication rate of 91.7 percent
- All health plans meet network adequacy requirements in all regions
- Early technical challenges were addressed quickly at DHHS and across all health plans
- Health plans continue to work collaboratively with DHHS, providers and their associations to share information and resolve issues
- PHPs have worked with DHHS, providers and associations to implement provider administrative flexibilities and extend deadlines for several measures
- Integrated, whole-person care for the first time
- Meeting SDOH for the first time

# Building on Early Successes

All PHPs have implemented member vaccine incentives.

Each PHP has taken responsibility for planning vaccination events with all PHPs attending and participating:

- **Region 1** – Healthy Blue
- **Region 2** – UnitedHealthcare
- **Region 3** – WellCare
- **Region 4** – Carolina Complete Health
- **Region 5** – AmeriHealth
- **Region 6** – Healthy Blue



# Provider Administrative Simplification Workgroup Results to Date

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- **Orientation** – Streamlined orientation for Medicaid providers, saving an estimated 1.75 hours per provider
- **Training** – Implemented unified provider training for Culturally and Linguistically Appropriate Services
- **Quick Reference Guide** – Developed a shared template for critical information regularly referenced by providers
- **PCP Change Form** – Implemented a single form to easily facilitate PCP changes when desired by beneficiaries
- **Prior Authorization (PA)** - Changed the PA form, eliminating several time-consuming fields with limited value
- **Claims Turnaround** – Average payment time is 6.9 days
- **Regional Quality Forums** – Convened joint quality forums in each of the six regions
- **COVID-19 Vaccination Incentive Guide** – Created a quick reference guide for providers to easily access member incentives available from each PHP

# Provider Administrative Simplification Workgroup – Initiatives in Progress

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- Conducted a survey through key professional organizations to seek administrative simplification priorities
- Unified Training for Tribal Providers
- Continued collaboration on provider education
- Provider mitigation approaches for non-emergent concerns
- Revising PHP processes for the unique Child Medical Evaluation Program, with DHHS and association leaders
- Unified Provider Training Attestation Process
- Working with DHHS to modify requirements for the Timely Access Survey
- 44,018 provider outreach and education contacts

# What's New and Next

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- 12-month postpartum coverage took effect April 1, 2022
- Winding down of the federal public health emergency and Medicaid redetermination
  - Working with counties and NCDHHS to communicate with Medicaid members
  - Preventing vulnerable North Carolinians from losing coverage
- Medicaid Transformation's early success sets a strong foundation for enhancing coverage:
  - Supporting statewide Children and Families Specialty Plan that provides integrated, coordinated, and total family care for vulnerable North Carolinians for the first time
  - Serving the Medicaid Expansion population with integrated, whole-person care
  - Serving individuals dually eligible for Medicaid and Medicare