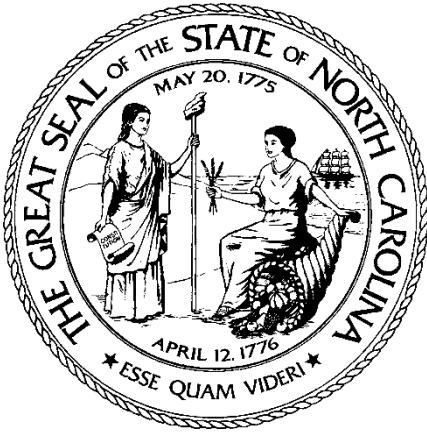


**JOINT LEGISLATIVE COMMITTEE  
ON MEDICAID AND NC HEALTH CHOICE**



# **Medicaid Transformation**

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# Proposed Managed Care Program Design

- **Based on best practices from other states and building on the existing infrastructure in NC**
- **Vision: Advance high value care; Improve health; Support providers; Build a sustainable program**
- **Key themes:**
  - Focus on health of the whole person
  - Improve health and well-being of North Carolinians
  - Support providers in delivering high-quality care at good value
- **Elements of the proposal need additional statutory authority from the GA**

# Promoting Quality, Value and Population Health

- **Statewide Quality Strategy**
  - Single set of statewide quality measures to assess performance and drive progress
  - NC Institute of Medicine taskforce on measure development
- **Value-Based Payment**
  - Population health metrics, appropriateness of care
  - Incentivize prepaid health plans to use alternative payment models
  - Supplemental Payments
- **Care Management**
  - Build on what's working well today
  - Advanced medical homes
  - Data analytics capabilities

# Supporting Providers

- Education and training through regional support centers
- Cut down administrative burden
  - Centralized credentialing process; uniform policies; single electronic application
  - Streamlined contract negotiations with standardized language for select sections
- Ensure transparent and fair payments to providers
- Support workforce initiatives
- New tools to combat the Opioid Crisis
- Support telehealth initiatives

# Whole Person Care

- Built on best practices from across country & what is already working well in NC's behavioral health system
- Every person has one insurance card for both their physical and behavioral health needs
- Timing is important
- Standard Plans
  - “Primary care” behavioral health spend included in PHP capitation rate
  - Beneficiaries benefit from integrated physical & behavioral health services
- Tailored Plans
  - Specialized managed care plans targeted toward populations with significant BH and I/DD needs
  - Access to expanded service array
  - Delayed start

# Oversight of Plans

- **Plans are responsible for delivering to beneficiaries high quality care**
- **Plans are expected to act as good stewards of State resources**
- **Strong contract language is required**
- **Monitor health plan clinical, financial and operational activities**

**Transparency, accountability and outcome measurement are core components of a contracting strategy**

# Legislative Changes Needed to Run a Successful Medicaid Program

- Behavioral health integration and tailored plans
- Phased implementation plan
- Efficient benefit administration for family planning and inmates
- Supplemental payments
- Insurance regulation