



Benchmarks Meet & Greet

August 2022

Your Presenters:



Chris Paterson
CEO - CCH



Dr. Rachel Keever
President and CEO - CCHN



Dr. Charles Dunham
BH Medical Director - CCH



Donetta Godwin
VP, Provider-Led
Engagement - CCHN

Why we're in business

OUR PURPOSE

Transforming the health of the
community, one person at a time

What we do

OUR MISSION

Better health outcomes at lower costs

What we represent

OUR PILLARS



Focus on the
Individual



Whole
Health



Active Local
Involvement

What drives our activity

OUR BELIEFS

We believe healthier
individuals create
more vibrant families
and communities.

We believe treating
people with kindness,
respect and dignity
empowers healthy
decisions.

We believe we have a
responsibility to remove
barriers and make it
simple to get well, stay
well, and be well

We believe in
treating the whole
person, not just
the physical body.

We believe local
partnerships
enable meaningful,
accessible
healthcare.

Carolina Complete Health Partners

North Carolina Medical Society

- Over **8,000** members
- Leading health policy in North Carolina
- Engaged in practice transformation and provider recruitment strategies
- Advocating for medically underserved and rural populations

North Carolina Community Health Center Association

- **42** health center grantees and look-alike organizations
- Serving over **500,000** underinsured and uninsured
- **270** clinical sites across 100 North Carolina counties

Centene Corporation

- **Fortune 50** company with over 30 years' Medicaid experience
- Operates health plans in **50** states
- Over **24 million** members with Medicaid, Medicare, and ACA Marketplace
- Building new East Coast Headquarters in Charlotte



North Carolina's Only Provider-Led Medicaid Plan

CCH is the result of a joint venture between Centene Corporation, the North Carolina Medical Society and the North Carolina Community Health Center Association. The majority of CCH's governing body is composed of physicians, physician assistants, nurse practitioners and psychologists who have experience treating Medicaid beneficiaries. Providers are central to governance and the clinical policies that will be executed by CCH, and recommendations are shared with DHHS.



A first-of-its-kind partnership

Carolina Complete Health is the result of a collaboration between the North Carolina Medical Society, the North Carolina Community Health Center Association, and Centene Corporation.



Provider-led

We give doctors and Federally Qualified Health Centers a voice in key policymaking. We believe providers are essential to Medicaid Transformation and we are committed to helping providers remain strong and viable.



Patient-centered

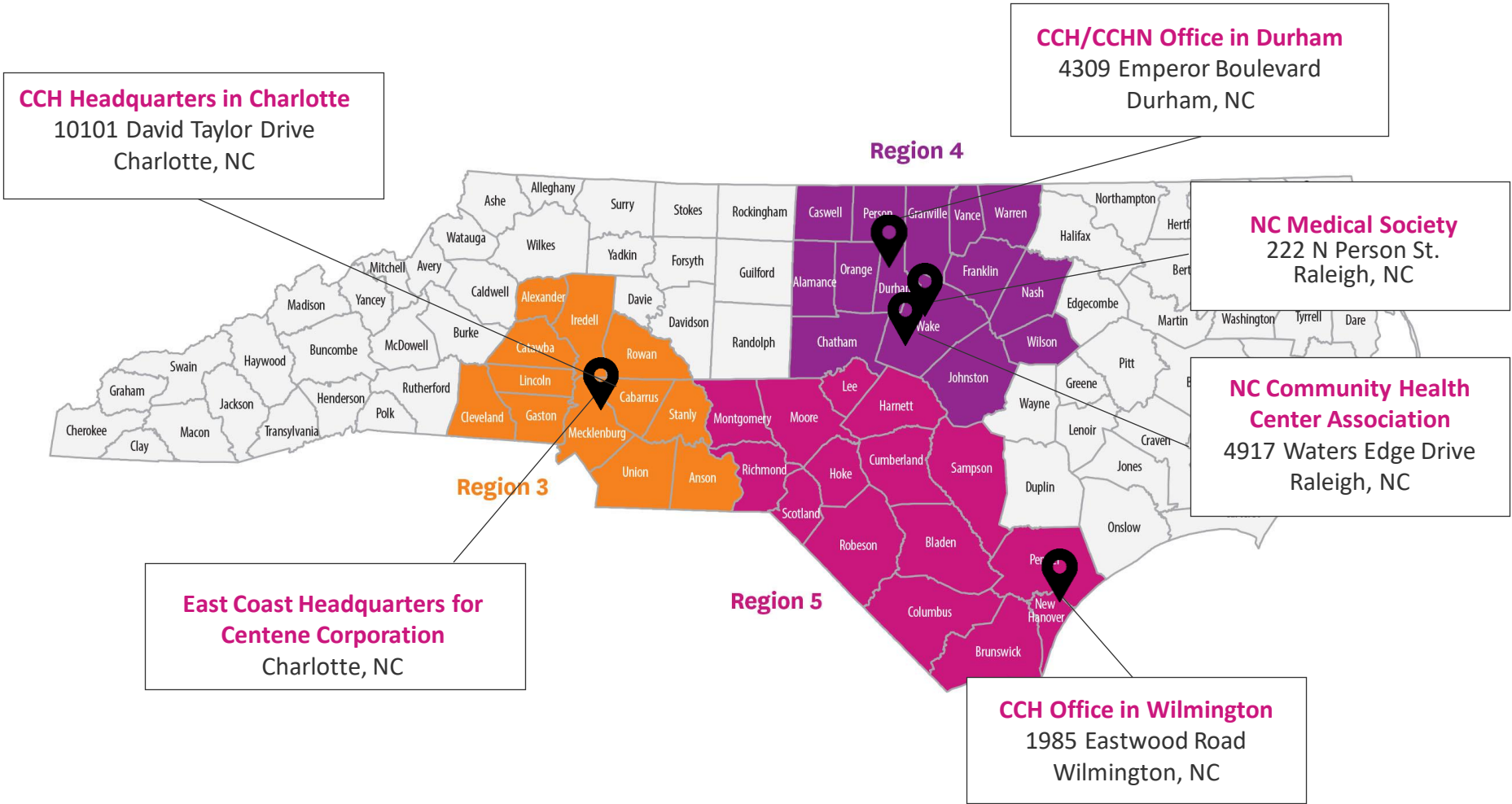
Carolina Complete Health helps patients get the care they need, when they need it, through local, regional and community-based resources.

Carolina Complete Health - Who We Serve

- Medicaid Managed Care
- Standard Plan
- 1 of 5 PHPs in NC
- Launched plan 7/1/21
 - Serving 41 of 100 NC counties
 - Only Provider-Led Entity
- Over 223,000 members
- 155,000 babies and children
- Over 3 million claims paid
- 5,200 expectant or new moms



A Commitment to North Carolina



CCH Value-Added Services (VAS)

- **Educational support** for members enrolled in grades Pre-K – 12 including backpacks with school supplies OR online tutoring (\$75 value)
- **GED** Voucher
- **Start Smart for Your Baby®** educational program and new mom's support including car seat, diaper bag OR breast pump (\$100 value)
- **Afterschool/youth programs** for members aged 6 -18 (\$75 value)
- YMCA **online support programs** for members with diabetes or high blood pressure
- **My Healthy Pays® Rewards** card where members can get up to \$75 for healthy activities
- Room to Breathe **Asthma Program**
- **Up to 10 weeks of WW®** (formerly Weight Watchers®) digital and web-based classes and workshops, and up to 14 weeks of access to online tools for eligible members age 13+ based on BMI
- **myStrength** mobile app for mental health
- **\$120 in healthy foods** from Walmart for eligible members
- **Cell phone with 250 free minutes** to help keep in contact with providers/doctors
- An additional routine eye exam and up to a **\$125 allowance for adult vision eyeglasses** every 730 days for members ages 21 and older.
- **\$120 per year credit per household for over-the-counter products** such as Tylenol, first-aid supplies, and cold medicine.

Value-Added Services - My Health Pays® Rewards



Earn My Health Pays® rewards when you complete healthy activities like a yearly wellness exam, annual screenings, tests and other ways to protect your health.

- Up to \$75 per year per member for completing healthy activities
 - \$20 for Care Needs Screening
 - \$20 for Child Well Care Visit
 - \$25 for Infant Well Care Visits
 - \$20 for Adult Well Care Visit
 - \$10 for Flu Vaccine during flu season
 - \$20 for Diabetes Care



Almost \$2 million* has been awarded through my Health Pays® for members to use for vital needs, which members would NOT have received without Medicaid Managed Care. (*from 7/1/2021 to 2/28/2022)

CCH Diversity, Equity and Inclusion (DEI)

In-house diversity and inclusion initiatives

- Strategic Plan
- Employee Engagement
- Stakeholder Engagement
- Vendor/Supplier Diversity

Embedding DEI in our operations

- Medical Advisory Committee is reviewing Medicaid Clinical Policies from DEI Perspective
- Measuring and evaluating health disparities in our members, and identifying areas for improvement



Partnering With Providers as the PLE

Provider-led Communications, Education & Support

Provider-led Communication Strategies

Engaging With Providers From All Angles

- 1:1 interactions between assigned PECs and Providers (Proactive & Reactive)
- Associations/societies
- Medical Policy Work
- Pilot and innovation work
- Clinically Integrated Networks (CINs) and Accountable Care Organizations (ACOs)
- Training, Education & Webinars
- Community and Provider Partnerships

And most importantly – Taking a proactive approach with engagement & outreach



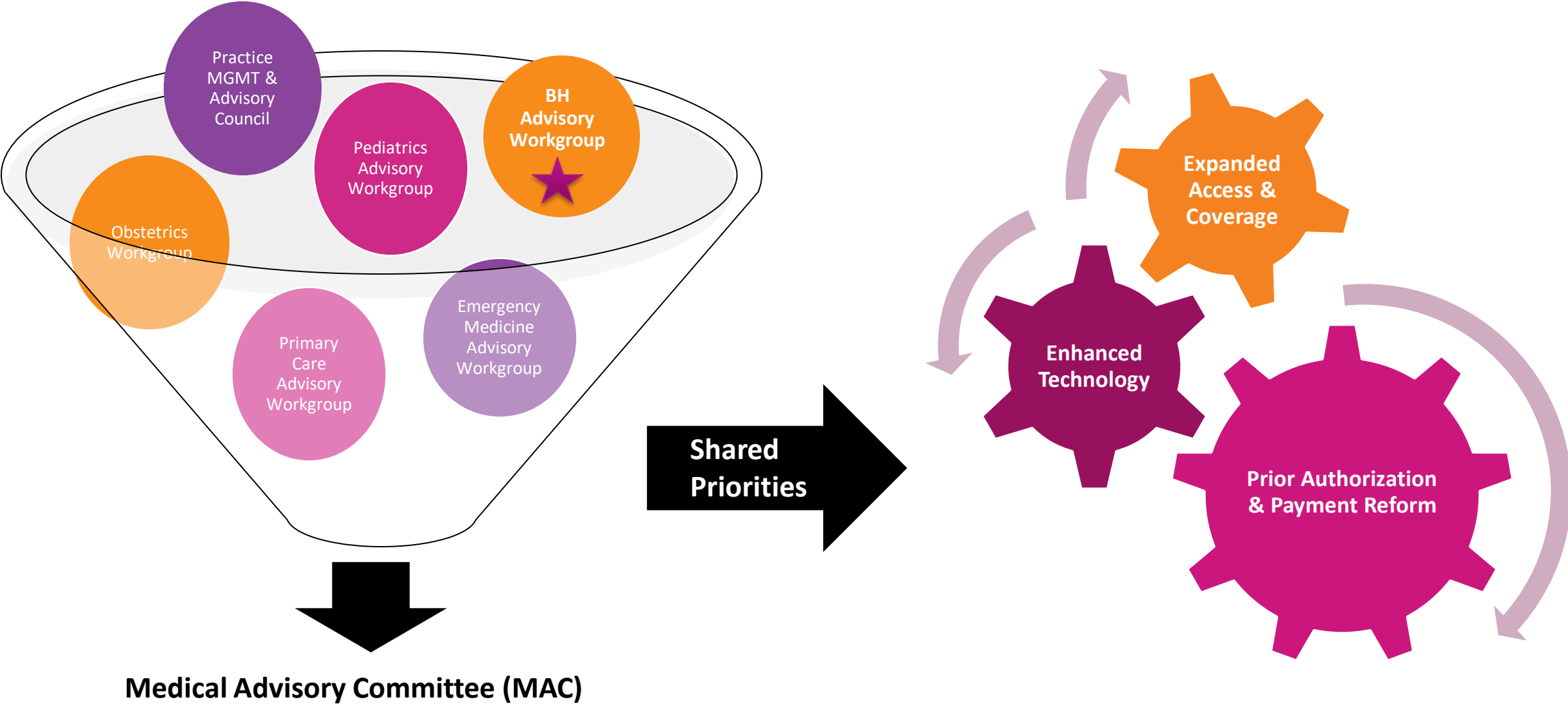
Provider-led Communication Strategies

Staying Front & Center With Providers Through Timely & Relevant Communication Strategies

- Collecting and maintaining accurate email addresses
- Provider Pulse Monthly Newsletter
- PRN Email Blasts
- Customized provider communications
 - quality
 - risk adjustment
 - upcoming education/training
 - new tools & tipsheets
 - and other initiatives



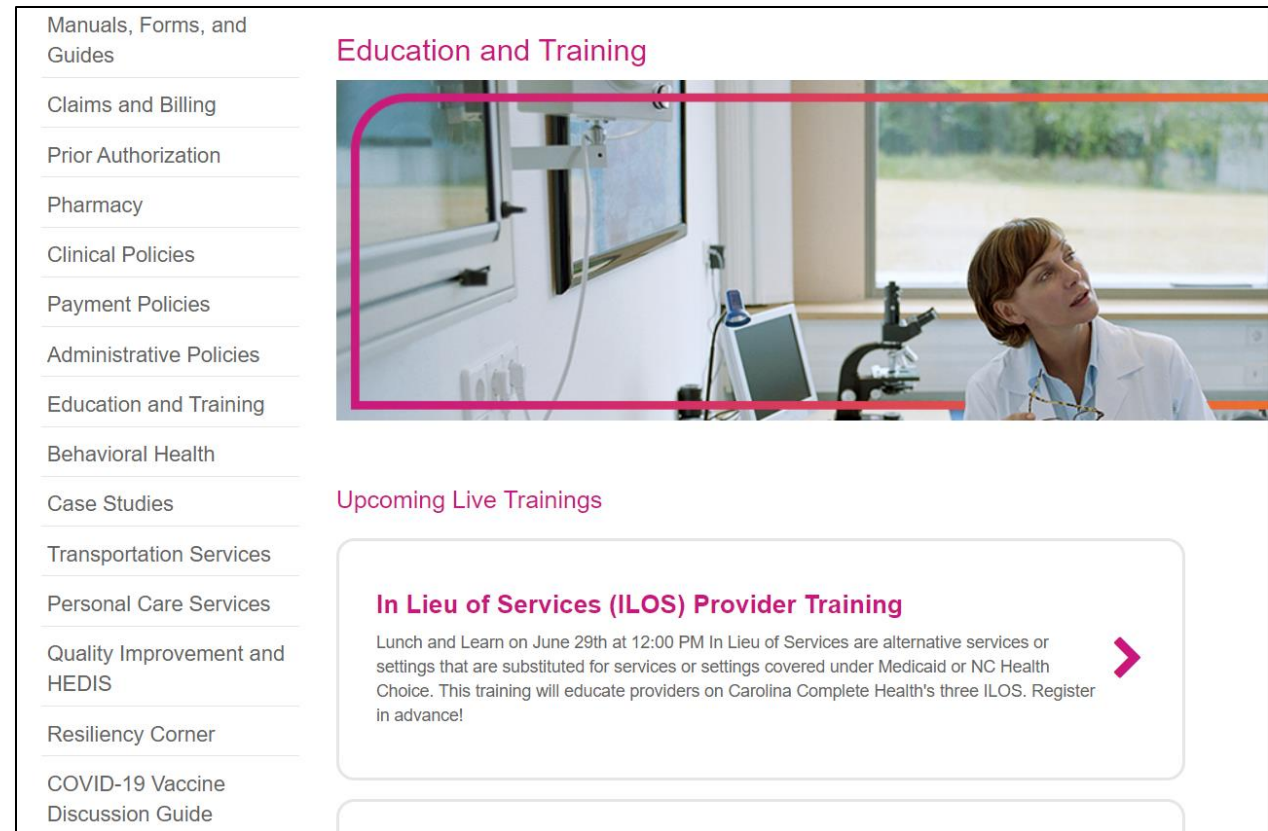
Provider Engagement Through Medical Policy



Provider-led Education & Support Strategies

Using Provider Feedback to Develop Training & Tools

- Using real-time survey data to drive improvement and enhance provider experience
- Creating education and training based on provider feedback and needs
- Adding content to the website and creating tipsheets to address common questions, pain points, and denial issues



The screenshot displays the 'Education and Training' section of the Carolina Complete Health Network website. On the left is a vertical navigation menu with the following items: Manuals, Forms, and Guides; Claims and Billing; Prior Authorization; Pharmacy; Clinical Policies; Payment Policies; Administrative Policies; Education and Training (highlighted in pink); Behavioral Health; Case Studies; Transportation Services; Personal Care Services; Quality Improvement and HEDIS; Resiliency Corner; COVID-19 Vaccine Discussion Guide. The main content area features a header image of a healthcare professional in a lab coat looking up, with a pink border. Below this is the 'Upcoming Live Trainings' section, which includes a card for 'In Lieu of Services (ILOS) Provider Training'. The card text states: 'Lunch and Learn on June 29th at 12:00 PM In Lieu of Services are alternative services or settings that are substituted for services or settings covered under Medicaid or NC Health Choice. This training will educate providers on Carolina Complete Health's three ILOS. Register in advance!' followed by a pink right-pointing arrow.

Manuals, Forms, and Guides

Claims and Billing

Prior Authorization

Pharmacy

Clinical Policies

Payment Policies

Administrative Policies

Education and Training

Behavioral Health

Case Studies

Transportation Services


Personal Care Services

Quality Improvement and HEDIS

Resiliency Corner

COVID-19 Vaccine Discussion Guide

Education and Training



Upcoming Live Trainings

In Lieu of Services (ILOS) Provider Training

Lunch and Learn on June 29th at 12:00 PM In Lieu of Services are alternative services or settings that are substituted for services or settings covered under Medicaid or NC Health Choice. This training will educate providers on Carolina Complete Health's three ILOS. Register in advance!

Provider-led Education & Support Strategies

Claims & Billing Education, Support & Troubleshooting

[JOIN THE NETWORK](#) [RESOURCES](#) [ABOUT US](#) [PROVIDER UPDATES](#)

Claims and Billing



Resources

- [2021 Billing Manual \(PDF\)](#)
- [Claims Submission Reminder Guide \(PDF\)](#)
- [835 EDI Companion Guide \(PDF\)](#)
- [837 EDI Companion Guide \(PDF\)](#)
- [2022 AMA Coding Guidelines for Social Determinants of Health \(PDF\)](#)
- [Guidance for Submitting CLIA Claims \(PDF\)](#)
- [Coordination of Benefits Walkthrough \(PDF\)](#)

EFT and ERA

- Payspan is an innovative web-based solution for Electronic Funds Transfers (EFTs) and Electronic Remittance Advices (ERAs). By using Payspan, you can speed up the processing and payment of your claims.
- [Payspan: A Faster, Easier Way to Get Paid \(PDF\)](#)
- **To contact Payspan:** Call 1-877-331-7154, Option 1 – Monday thru Friday 8:00 am to 8:00 pm est.
- Payspan Provider Trainings:
 - [July 20, 2022 | 1:30PM - 3:00PM EST](#)
 - [August 17, 2022 | 1:30PM - 3:00PM EST](#)
 - [August 17, 2022 | 5:30PM - 7:00PM EST](#)
 - [Sept 21, 2022 | 1:30PM - 3:00PM EST](#)
 - [Oct 19, 2022 | 1:30PM - 3:00PM EST](#)

Troubleshooting Frequent Claims Questions/Issues

[Taxonomy Placement on Claims](#) +

[Rendering NPI Not on Medicaid File/Not Active on Service Dates](#) +

[Deny: Duplicate Claim Service](#) +

[Filing Coordination of Benefits Claims](#) +

Definitions

- **Paid in Full** - The claim has been adjudicated, processed and reimbursed in accordance and with the executed provider contract on file including the coordination of benefits, as applicable per claim.

Provider Claims Payment Schedule

CLAIM TYPE	FIRST CLAIMS PAYMENT	FIRST CLAIMS DOS	FUTURE FORWARD
Enroll Vision	July 8, 2021	July 1 – 7, 2021	Weekly, Wednesday
NIA	July 13, 2021	July 1 – 9, 2021	Weekly, Tuesday and Friday
Medical	July 13, 2021	July 1 – 9, 2021	Weekly, Monday and Thursday
Pharmacy	July 14, 2021	July 1 – 7, 2021	Weekly, Wednesday

How are we doing? We would appreciate your feedback with this quick survey

Administrative Simplification Efforts

Completed:

- Provider Orientation
- CLAS Training
- Quick Reference Guide
- QRG for Covid Vaccine Incentives
- PCP Change Fax Form
- Prior Auth Fax Form
- Regional Quality Forum
- Admin Simplification Survey
- Tribal-specific CLAS Training

In Progress/Under Review:

- Training/Education Attestation
- Timely Access Survey
- Sterilization/Hysterectomy Consent Forms
- Top 5 Clinical Denial Reasons
- Member Vaccine Incentive Grid
- Education approach for inappropriate ER visits
- Panel Management Process for Providers
- Coordination of Benefits Filing
- Healthy Opportunities Training
- Tailored Plan Training

Evaluated But Unable to Streamline:

- Child Medical Evaluation Program
- Public Ambulance Provider Concerns
- Coding/configuration QRGs
- Delivery Notification Form/Process
- Pregnancy Notification Form/Process



Behavioral Health Integration & Innovation

Provider-led Approach to BHI & Collaborative Care

Behavioral Health Integration Resources & Support

Meeting Providers Where They Are – Education & Support

- BHI Guides & Resources
- Collaborative Care Model Training Models
- Referral Process with Community Partners for additional support – AHEC
- Innovation pilots around BHI & CoCM

The screenshot displays the Carolina Complete Health Network website. The top navigation bar includes links for Home, For Members, Contact Us, Help STAT!, Pre-Auth Tool, and Provider Portal Login. The main header features the Carolina Complete Health Network logo, a Contrast toggle (On/Off), and a search bar. Below the header, a secondary navigation bar highlights the RESOURCES section. On the left, a sidebar lists various resources, with 'Behavioral Health' selected. The main content area, titled 'resources>behavioral health', lists 'Behavioral Health Integration' with links to 'BHI How-to Guides from American Medical Association' and 'The Collaborative Care Model'. A video player is embedded, showing a diagram titled 'Introduction to the Collaborative Care Model (CoCM)'. The diagram illustrates the relationships between a Medical Provider, a Patient, a BHI Care Manager, and a Psychiatric Consultant, with arrows indicating frequent and infrequent contacts. The video player includes a 'Watch on YouTube' button and a 'Share' button.

CCHN 2022 Portfolio of Innovation Pilots



More than doubling our commitment to practice-led innovation in 2022-2023

New technologies and workflows to manage **uncontrolled diabetes (CGM and other innovations)**

Statewide clinical and operational performance improvement organization

Innovative mental health approaches supporting **Spanish-speaking immigrants**

Region 4 BH Provider

Embedded LCSW for Pediatric BHI Region 4 multi-specialty practice

Embedded LCSW for Care Management Addressing SDoH & Care MGMT at point of care Region 3 multi-specialty practice

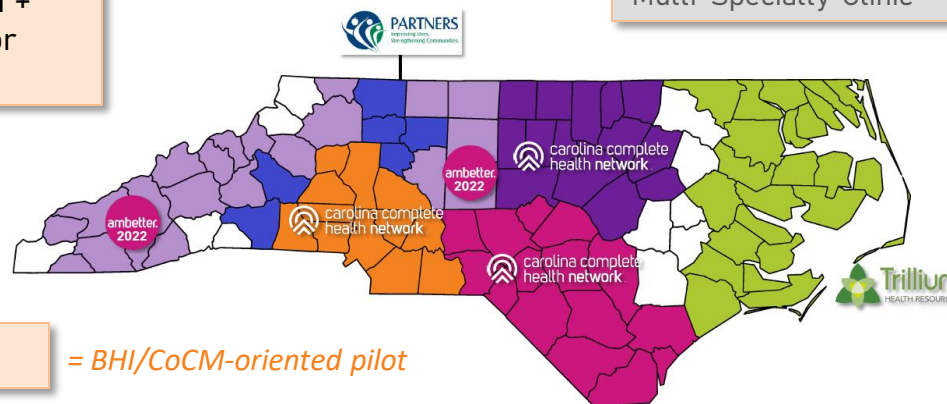
Breastfeeding support including pantry of donated supplies
Region 1 FQHC

FQ-based BHI + QI Coordinator
Region 4 FQHC

AMH Tier 3 Readiness Support Regions 5/6 Peds & Multi-Specialty Clinic

Multi-lingual services to address health inequities with NC refugees, immigrants, and migrant workers and families
Region 4 BH Provider

Certified Diabetic Educator to help patients with Diabetes, Hypertension and Obesity
Multi-Region FQHC



= BHI/CoCM-oriented pilot

Phased implementation of **Collaborative Care Model**, ramping to full-time BH Care Manager
Region 5 Small PCP Group

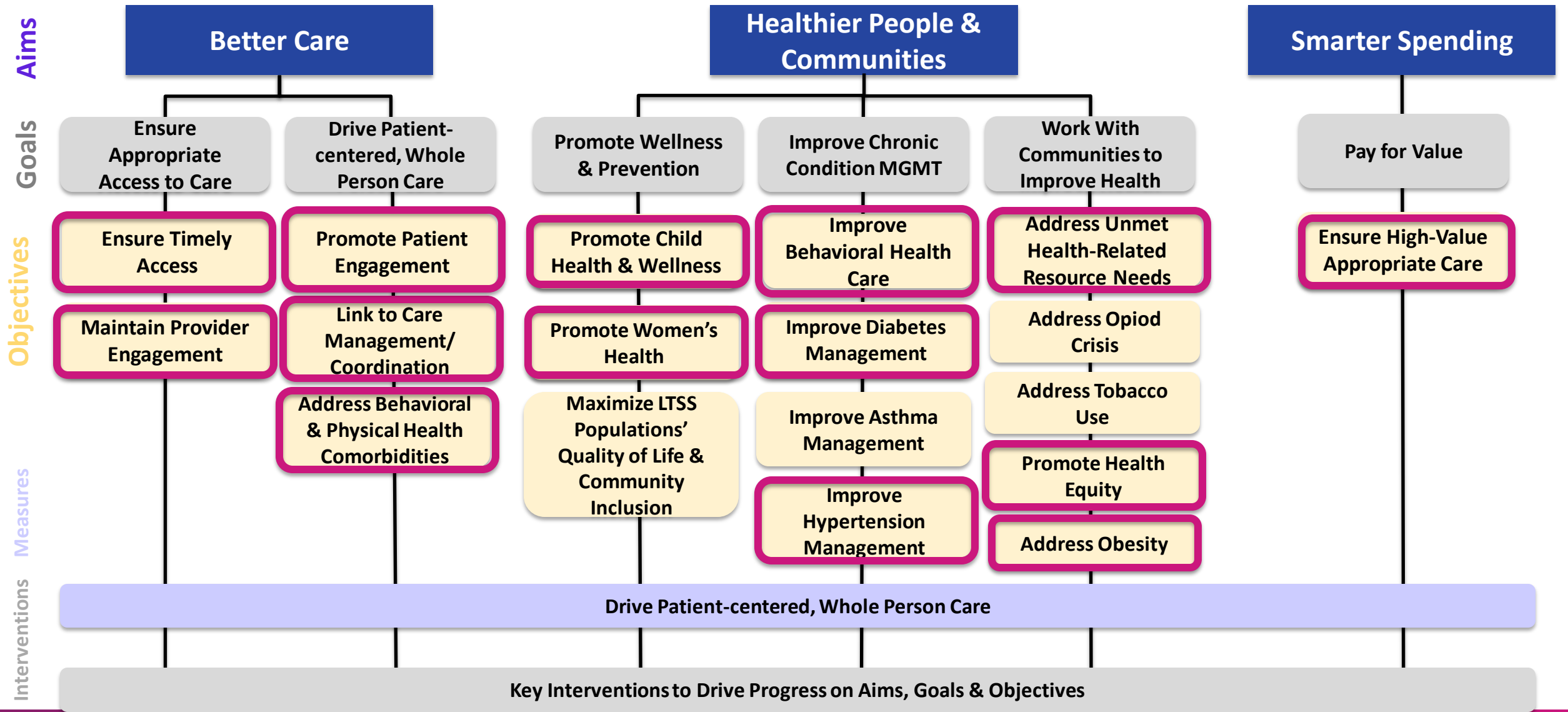
Outcomes-based DBT treatment and tech for patient with suicidality, self harm, PTSD, depression, bipolar etc.
Multi-Region BH Provider

Best Practices in Health Equity Region 5 Family Medicine Practice

Improve diabetic care for patients by implementing **MAP framework**
Region 5 Small PCP Group

Home visits by an RN and certified **lactation counselor** to increase successful breastfeeding
Region 5 FQHC

Aligning Innovation With the DHHS Quality Strategy

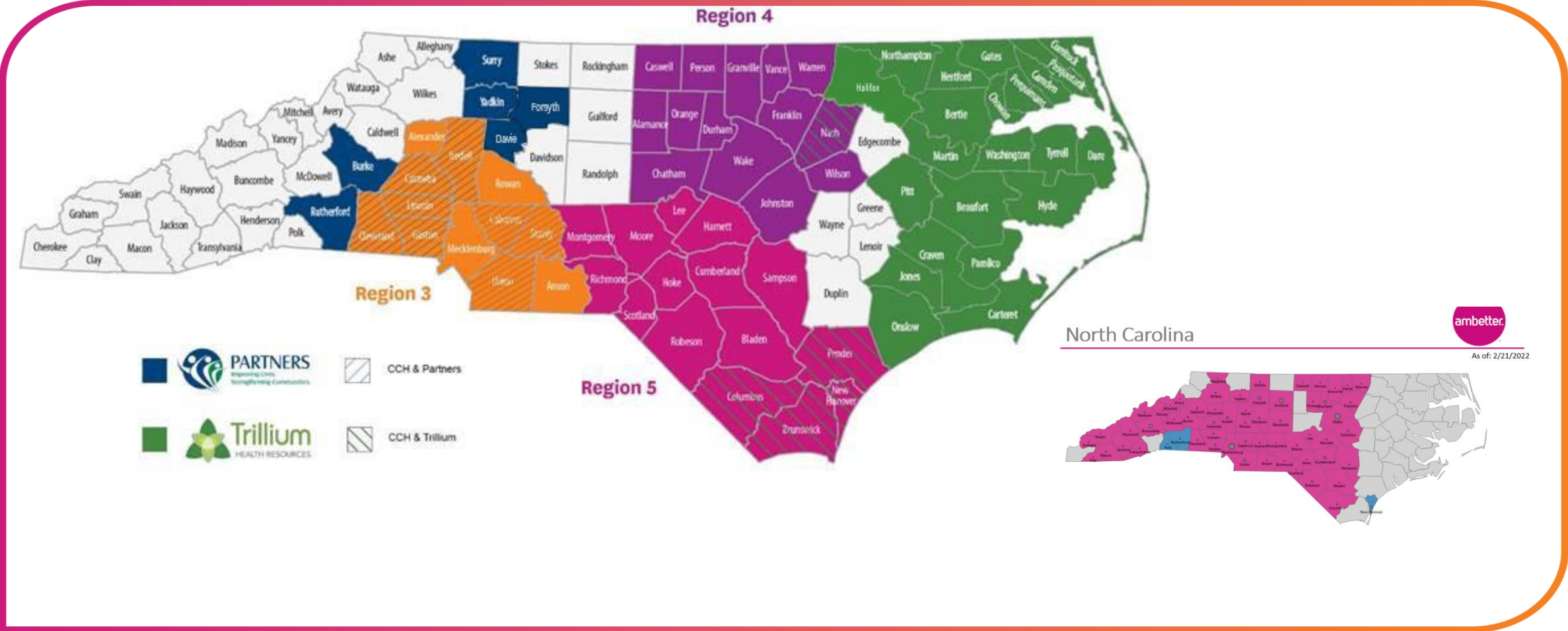


Tailored Plan Implementation

Comparing BH Plan Benefits (Standard Plan vs. Tailored Plan)

Behavioral Health, I/DD, and TBI Services Covered by <u>Both</u> Standard Plans and BH I/DD Tailored Plans	Behavioral Health, I/DD and TBI Services Covered <u>Exclusively</u> by BH I/DD Tailored Plans (or LME-MCOs Prior To Launch)
<i>Enhanced behavioral health services are italicized</i>	
State Plan Behavioral Health and I/DD Services <ul style="list-style-type: none"> • Inpatient behavioral health services • Outpatient behavioral health emergency room services • Outpatient behavioral health services provided by direct-enrolled providers • Psychological services in health departments and school-based health centers sponsored by health departments • Peer supports • <i>Partial hospitalization</i> • <i>Mobile crisis management</i> • <i>Facility-based crisis services for children and adolescents</i> • <i>Professional treatment services in facility-based crisis program</i> • <i>Outpatient opioid treatment</i> • <i>Ambulatory detoxification</i> • Research-based intensive BH treatment for Autism Spectrum Disorder • Diagnostic assessment • <i>Non-hospital medical detoxification</i> • <i>Medically supervised or ADATC detoxification crisis stabilization</i> EPSDT	State Plan Behavioral Health and I/DD Services <ul style="list-style-type: none"> • Residential treatment facility services • <i>Child and adolescent day treatment services</i> • <i>Intensive in-home services</i> • <i>Multi-systemic therapy services</i> • <i>Psychiatric residential treatment facilities (PRTFs)</i> • <i>Assertive community treatment (ACT)</i> • <i>Community support team (CST)</i> • <i>Psychosocial rehabilitation</i> • <i>Substance abuse non-medical community residential treatment</i> • <i>Substance abuse medically monitored residential treatment</i> • <i>Substance abuse intensive outpatient program (SAIOP)</i> • <i>Substance abuse comprehensive outpatient treatment program (SACOT)</i> • Intermediate care facilities for individuals with intellectual disabilities (ICF/IID) Waiver Services <ul style="list-style-type: none"> • Innovations waiver services • TBI waiver services • 1915(b)(3) services State-Funded Behavioral Health and I/DD Services State-Funded TBI Services

CCH NC Presence including Tailored Plan Partners



Proprietary and Confidential

9

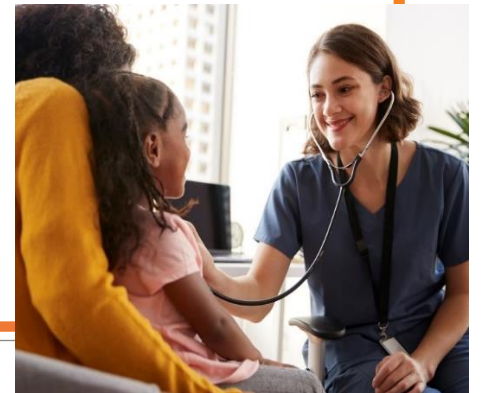
Children and Families Specialty Plan

NC Children and Families Specialty Plan CFSP

Statewide plan for Medicaid and NC Health Choice children, youth, and families in the child welfare system; extended to family members who must opt in to participate in CFSP

Objectives include:

- Improve near- and long-term physical and behavioral health outcomes
- Increase access to physical health, BH, pharmacy, LTSS, I/DD services, and health-related resource needs
- Strengthen and stabilize families, prevent entry into foster care and support reunification and permanency
- Coordinate care and facilitate seamless transitions for members who experience changes in treatment settings, child welfare placements and/or loss of Medicaid eligibility upon turning 26
- Improve coordination and collaboration with County DSS offices, EBCI Family Safety Program, and System of Care for families who are involved with multiple child service agencies
- Advance health equity to address racial and ethnic disparities



Some Challenges CSFP will Address

- Care coordination for foster care families, including co-location at DSS
- Coordination of child safety and welfare systems
- Lack of coordinating services and supports across settings and payment sources for services such as speech-language therapy, occupational therapy, and physical therapy
- Inadequate assistance for job placement, medical leave for parents, childcare, healthcare, and substance abuse treatment
- Mental health treatment for kids in foster care is often not consistent or treatment is slow to start due to long waiting lists; the approval process for enhanced services and/or higher levels of care is complicated and time consuming; there are limited providers who accept Medicaid
- Continuous policy changes at the federal, state, and local level impact the workload for social workers, which creates burnout and worker shortage



Foster Care Plan Essentials



1. Single statewide plan to reduce fragmentation
2. Significant experience in delivering Foster Care programs, including plan leaders and board directors
3. Physician leadership and key stakeholder input on clinical policy
4. Strong BH and PH network, with frequent input from key stakeholders
5. Demonstrated ability to advance an integrated care model
6. History of working well with DHHS and key stakeholders

Centene's Child Welfare National Footprint

