



NC Get Covered Coalition Meeting – Notes
Accountable Care Communities and Carolina Complete Health
Friday, June 21, 2019, 10:00 - 11:30 a.m.
NC Community Health Center Association
4917 Waters Edge Drive, Ste. 165, Raleigh, NC 27606

Desired Outcomes

- Shared understanding of Accountable Care Communities.
- Introduction to the only provider-led entity under Medicaid managed care, Carolina Complete Health.

MEETING NOTES

Getting to Know Carolina Complete Health + Q&A

Julie Ghurtskaia, Vice President of Population Health, Carolina Complete Health

- **Please see attached PowerPoint slides.**
- The NC Medical Society and NC Community Health Center Association run Carolina Complete Health in partnership with Centene.
- Carolina Complete Health is a provider-led entity and Prepaid Health Plan.
- Will be a part of Phase II of Medicaid managed care; operations will start in February 2020
- Have trained team members on “Person-Centered Thinking,” developed by Michael Small
- Hiring locally/ There is no centralized location outside of the communities being served
- Will support Tier II and Tier III Advanced Medical Homes/care management sites
 - Tiers are based on provider capability and systems to support it
 - Will look for ways to share data with entities that are able to provide care management on their own. Can also provide wrap-around services to those groups that can handle their own care management.
- Carolina Complete Health’s call centers opened in early May but demand has been low.
- Carolina Complete Health’s website (CarolinaCompleteHealth.com) is currently under review by NCDHHS.
- Will send Welcome packets to members, make calls, etc. Also have a process in place for finding patients with advanced needs, including working with Community Health Workers to engage those individuals.
- Prepaid Health Plans will help facilitate referrals in regions where Healthy Opportunities Pilots are awarded, but the RFP hasn’t been awarded yet.

Q&A

- Q: Regarding the programs in Florida and Georgia, are they statewide or broken into regions?
A: Yes, they are statewide. Even if working regionally, however, the programs would be run by the same company. Pennsylvania, for example, is broken up by zones, and it requires a lot of coordination.
- Q: Can you say more about your provider networks?
A: Carolina Complete Health is awaiting provider contracts from the state. However, any willing provider can contract with the Prepaid Health Plans.

- Q: Do you have someone on your board who truly represents the community?
A: Yes, 2-3 seats on Carolina Complete Health's board are community seats/ Always looking for volunteers to serve on Advisory Committees, too.
- Q: Your contract requires you to have a Member Advisory Committee. How is Carolina Complete Health approaching this?
A: We are very driven locally; will even help members get to meetings if they are experiencing transportation issues. Members also help to identify resources in the community.
- Q: What is your strategy for building out/expanding your service area since you're a regional Prepaid Health Plan?
A: Carolina Complete Health has border networks already in place. Able to pull data/view trends through our Department on Medical Economics and Population Health.
- Q: Are there opportunities for local agencies to collaborate with you?
A: Yes.
- Q: In-person assistance is critical. Do you have any concerns about the Enrollment Broker contract/strategy?
A: Carolina Complete Health participates in Department of Social Services (DSS) cross-functionals with the Enrollment Broker. DSS will offer that personal touch/support to beneficiaries. A lot remains to be seen regarding how much people will have to rely on additional services to successfully enroll in a plan. Carolina Complete Health will share any information they receive with NCDHHS. Transitions are difficult.

Accountable Care Communities + Q&A

Brieanne Lyda-McDonald, Project Director, NC Institute of Medicine

- **Please see attached PowerPoint slides.**
- Financing for Accountable Care Communities (ACCs) might be different – Could start with philanthropy and then move to other payers.
- NCDHHS' screening questions can be used by anyone, not just organizations involved in Medicaid managed care.
- NCHHealthConnex will be used to track outcomes.
- Medicaid managed care's Healthy Opportunities Pilots are ACC-style models. Would like to encourage partners to look beyond Medicaid, however. Partners are also encouraged to work within coalitions that already exist when forming an ACC instead of starting something new.
- Visit the following link to view a guide on getting started with ACCs: <http://nciom.org/nc-health-data/guide-to-accountable-care-communities/>
- The NC Institute of Medicine's 36th Annual Meeting will be held on September 5, 2019. The topic of discussion will be Medicaid transformation in North Carolina. Visit the following link to register: <http://nciom.org/ourwork/annual-health-policy-meeting/>

Q&A

- Q: Are you working with the Dogwood Foundation in the western part of the state?
A: We don't have any specific ties, but Dr. Ron Paulus served as one of the co-chairs on the NC Institute of Medicine's Task Force on Accountable Care Communities.

Partner Announcements

- *Mark Van Arnem, NC Navigator Consortium* – CMS released a Notice of Funding Opportunity for Navigator organizations. There is \$50,000 more available to North Carolina this time

around, for a total of \$550,000 each year for two years. Completing the grant application is a team effort; plan to submit it early.

- *Jan Plummer, Mountain Projects, Inc.* – Awarded two more years of funding from the Kate B. Reynolds Charitable Trust.

Wrap-up and Next Steps

- **The next NC Get Covered Coalition Meeting will be held on Friday, July 19, 2019 from 10:00 to 11:30 a.m. Location TBA.**

This meeting was made possible by the generous support of the Kate B. Reynolds Charitable Trust.

