

Specialized Foster Care Plan (FC Plan) Workgroup

Session #1: FC Plan Introduction and Statewide Approach

April 19, 2021 3:00 pm – 4:30 pm

Specialized Foster Care Plan (FC Plan) Workgroup

Session #1: FC Plan Introduction and Statewide Approach

Before we begin, please:

Note today's Workgroup session will be recorded

Display your name and organization in your Zoom display

- **Welcome/Introductions & Workgroup Overview.....3:00 – 3:20 pm**
- **Overview of Medicaid Managed Care Transformation.....3:20 – 3:30 pm**
- **Overview of Current Proposed Design for the FC Plan.....3:30 – 4:05 pm**
- **Session Topic: Statewide Approach.....4:05 – 4:25 pm**
- **Wrap-Up & Next Steps4:25 – 4:30 pm**

Welcome/Introductions & Workgroup Overview

FC Plan Workgroup Participants

Name	Organization	Stakeholder
Teka Dempsey	Child Welfare Advisory Council	Advocacy Group
Melissa Love	Guardian ad Litem	Advocacy Group
Kaylan Szafranski	NC Child	Advocacy Group
Fredrick Douglas	NC Families United	Advocacy Group
Nicole Dozier	NC Justice Center	Advocacy Group
Carmelita Coleman	SaySo	Advocacy Group
Tara Larson	EBCI Public Health and Human Services	EBCI
Christy Street	NC Pediatric Society/Fostering Health	Provider
Jenny Cooper	Benchmarks	Provider
Peter Kuhns	Department of Juvenile Justice (DJJ)	State/Local Agency
Lisa Cauley	Division of Social Services (DSS)	State/Local Agency
John Eller (Mecklenburg County DSS) Brenda Jackson (Cumberland County DSS) Lizzi Shimer (Buncombe County DSS)	NC Association of County Directors of Social Services	Local Agency

FC Plan Workgroup Participants, cont.

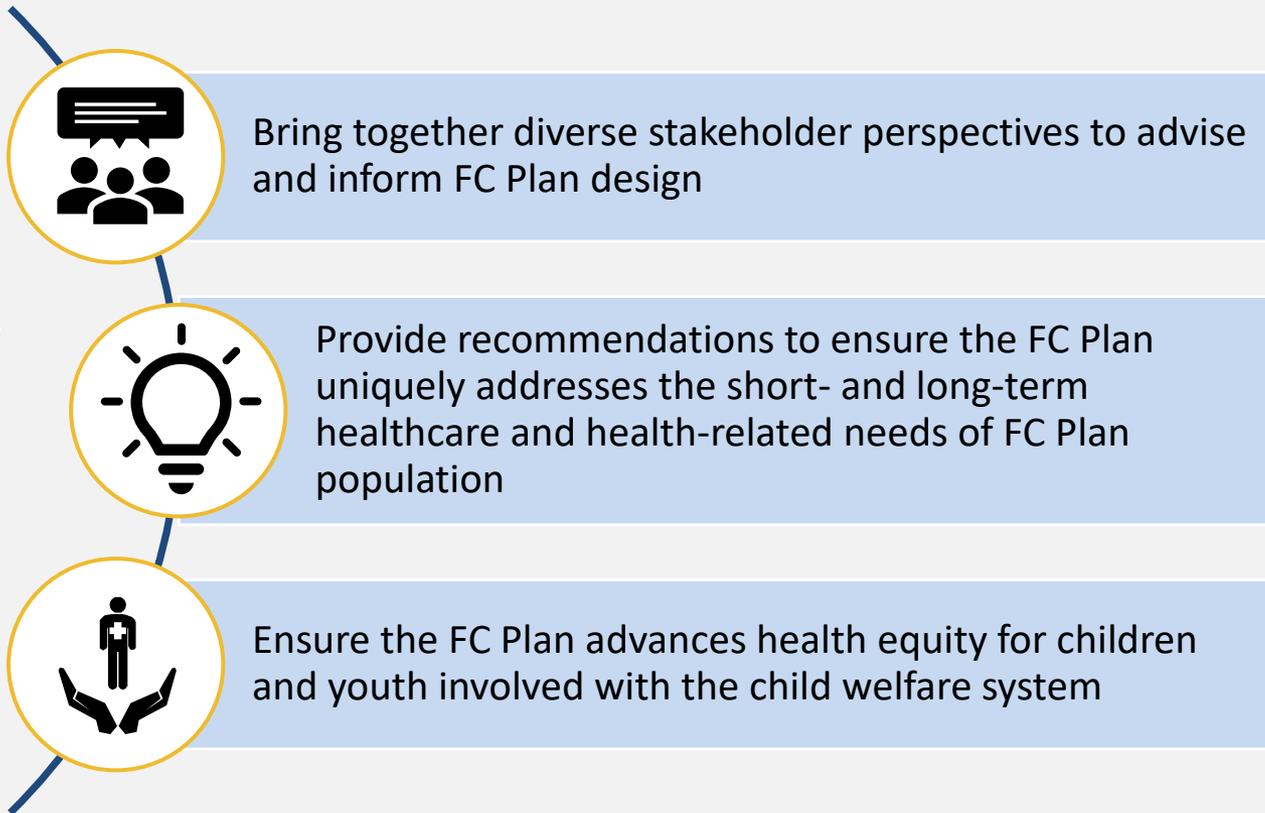
Name	Organization	Stakeholder
Sara Wilson (Alliance) Nicole Six (Cardinal) Barbara Hallisey (Eastpointe)	Representatives from*: <ul style="list-style-type: none"> • Alliance Health • Cardinal • Eastpointe • Partners Health • Sandhills • Trillium • Vaya Health 	LME/MCOs
Heidi Strickler (UHC)	Representatives from*: <ul style="list-style-type: none"> • AmeriHealth • Healthy Blue • Carolina Complete Health • UnitedHealthcare • WellCare 	Standard Plans
Kimberly Deberry	CCNC	Other Stakeholder(s)

*Representatives may rotate per session

Objective & Goals of the FC Plan Workgroup

Provide feedback to the NC Department of Health and Human Services on key aspects of Specialized Foster Care Plan (FC Plan) design to ensure it effectively meets the unique needs of the State's children and youth currently and formerly involved in the child welfare system

Workgroup Goals



For Discussion: Are there other goals for the FC Plan Workgroup?

Overview of FC Plan Working Sessions

The FC Plan Workgroup will meet bi-weekly from April to July 2021 for six sessions to provide input and feedback on key areas of the FC Plan design, identify areas of agreement and concern among stakeholders, and inform decision-making to further refine the FC Plan design.

Session #	Dates	Proposed Topic(s)
1	April 19, 2021 3 - 4:30pm	<input type="checkbox"/> Introduction to FC Plan Workgroup and Approach <input type="checkbox"/> FC Plan Overview <input type="checkbox"/> Statewide Design
2	May 3, 2021 3 - 4:30pm	<input type="checkbox"/> Eligibility & Enrollment <input type="checkbox"/> Benefits/Services
3	May 17, 2021 3 - 4:30pm	<input type="checkbox"/> Care Management
4	June 7, 2021 3 - 4:30pm	<input type="checkbox"/> Care Management, cont. <input type="checkbox"/> Provider Network
5	June 21, 2021 3 - 4:30pm	<input type="checkbox"/> Quality <input type="checkbox"/> Other Items*
6	July 12, 2021 3 - 4:30pm	<input type="checkbox"/> Interim Plan for Children in Foster Care 2021- 2023

* 'Spillover' topics or additional topics to be determined based on discussion

Overview of Medicaid Transformation in North Carolina

Medicaid Managed Care Transformation in NC

North Carolina will launch Medicaid Managed Care on July 1, 2021. Many Medicaid-eligible individuals will begin to receive services through health plans rather than through NC Direct (fee-for-service).

NEW

NC Medicaid Managed Care

- New Medicaid managed care program
- Offered by “**health plans**”
- One health plan for most health services, including physical health, behavioral health, pharmacy and addressing unmet health related resource needs

There will be four types of health plans

NC Medicaid Direct

- Current Medicaid fee-for-service program
- Provides many of the same health services as health plans
- People who do not get their Medicaid services through a health plan will continue to receive health care through NC Medicaid Direct and LME/MCOs

Every person who is eligible to get Medicaid will still get Medicaid benefits

NC Will Offer Four Types of Health Plans

Once Medicaid Managed Care is fully implemented, NC will offer four types of health plans with different eligibility criteria for Medicaid members. All health plans will offer integrated behavioral health, physical health, and pharmacy services.

Standard Plan

Standard Plans will provide integrated physical health, behavioral health, pharmacy, long-term services and supports, and services that address unmet health related resource needs to the majority of Medicaid beneficiaries.

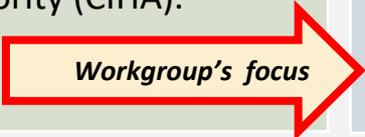
Behavioral Health I/DD Tailored Plan

Behavioral Health Intellectual/ Developmental Disability (I/DD) Tailored Plans will provide the same services as Standard Plans, as well as additional specialized services for individuals with significant behavioral health conditions, I/DDs, and traumatic brain injury, as well as people utilizing state-funded and waiver services.

EBCI Tribal Option

The Eastern Band of Cherokee Indians (EBCI) Tribal Option will be available to tribal members and their families and will be managed by the Cherokee Indian Hospital Authority (CIHA).

Workgroup's focus



Specialized Foster Care Plan

The Specialized Foster Care Plan will be available to children and youth currently and formerly involved in the child welfare system and will cover a full range of physical health, behavioral health, and pharmacy services.

Timeline for Medicaid Managed Care Transformation in NC

NC's Medicaid Managed Care products will launch on different dates, beginning in 2021. NC is developing an "interim plan" to help address the needs of FC Plan eligible individuals prior to FC Plan launch.





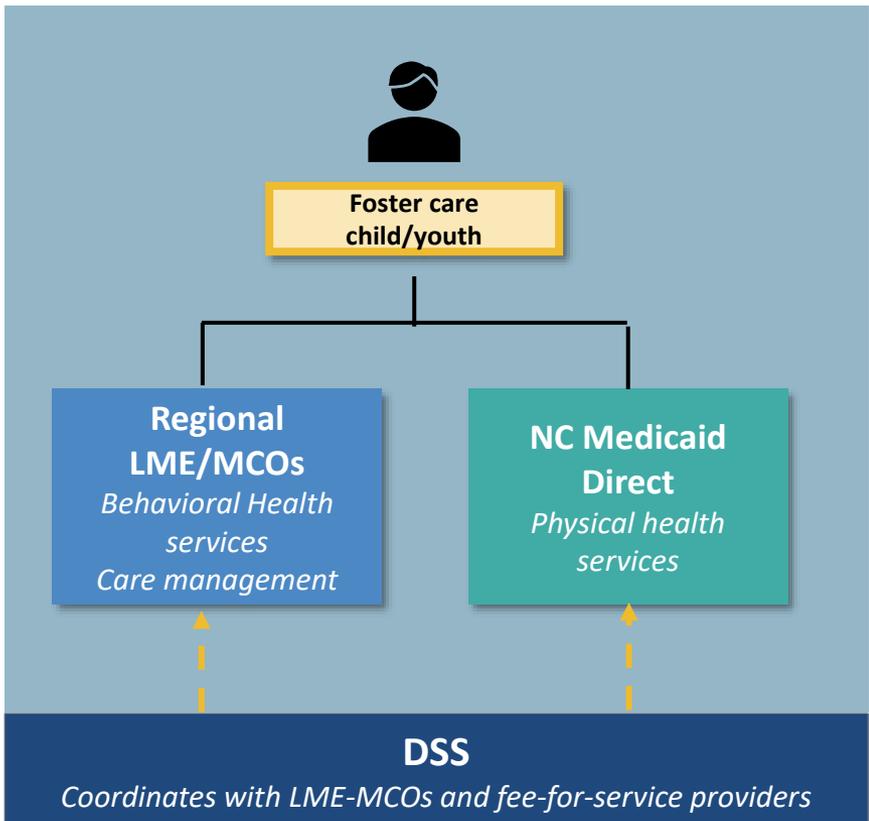
Questions/Feedback?

Overview of Current Proposed Design for the FC Plan

Current State of Medicaid Delivery for Children/Youth involved with the Child Welfare System

All children in foster care, receiving adoption assistance, and former foster youth under age 26 are eligible for Medicaid. They currently receive Medicaid services through a bi-furcated system of care which has created challenges around coordination and meeting the population's unique needs.

Current Medicaid Delivery System and Coordination with DSS



Current Challenges

- 1 **Disruptions in care** and provider continuity due to population's frequent placement changes
- 2 **Lack of clarity in coordination responsibilities** and role delineation between entities related to locating and paying for certain services
- 3 **Information exchange challenges** between entities impedes timely access to care
- 4 **Challenges meeting the needs** of children/youth in foster care with complex physical and behavioral health or I/DD needs, resulting in restrictive residential or out-of-state placements
- 5 **Limited focus** on addressing the unique challenges of children in foster care as part of service delivery
- 6 **Limited array of available community-based services** across the state to support children remaining in family settings or the least restrictive setting possible

Guiding Principles for FC Plan Design

The FC Plan is intended to address the unique needs of the foster care population and alleviate many of the challenges children and youth involved in the child welfare system face today in receiving seamless, integrated, and coordinated health care.



FC Plan Guiding Principles

- 1 **Deliver seamless, person-centered care** focused on promoting long-term well-being
- 2 **Support members' unique needs**, including behavioral health needs and Adverse Childhood Experiences (ACEs), by supporting members' access to a diverse array of providers with specialized experience and training located throughout the State
- 3 Pair each member with a plan-based care manager charged with **facilitating coordination and collaboration among a member's care team** and promoting delivery of whole-person care
- 4 **Advance members' permanency planning goals** by ensuring the FC Plan, DSS and other entities involved in promoting the health of members closely coordinate with one another and directly with members
- 5 **Minimize members' disruptions in placement** and provide support during transitions (including between placements, when aging out, and during and after reunification) by promoting continuity of care through a trauma-informed lens
- 6 **Provide members with access to high-quality care** that promotes health equity and reduces disparities in outcomes based on race/ethnicity, gender, sexual identity, age, disability, and geographic location.
- 7 **Improve members' outcomes** by continuously monitoring care delivery against a robust set of quality standards and regular reporting

FC Plan Design Process to Date

The Department drafted a model FC Plan contract, leveraging Standard Plan and Tailored Plan contract requirements, where appropriate, and including new requirements unique to the FC Plan. The final FC Plan contract requirements will form the basis of the State's Request for Proposal (RFP) for FC Plan bidders.

Contract Drafting Process

To meet the unique needs of the FC population, the Department:

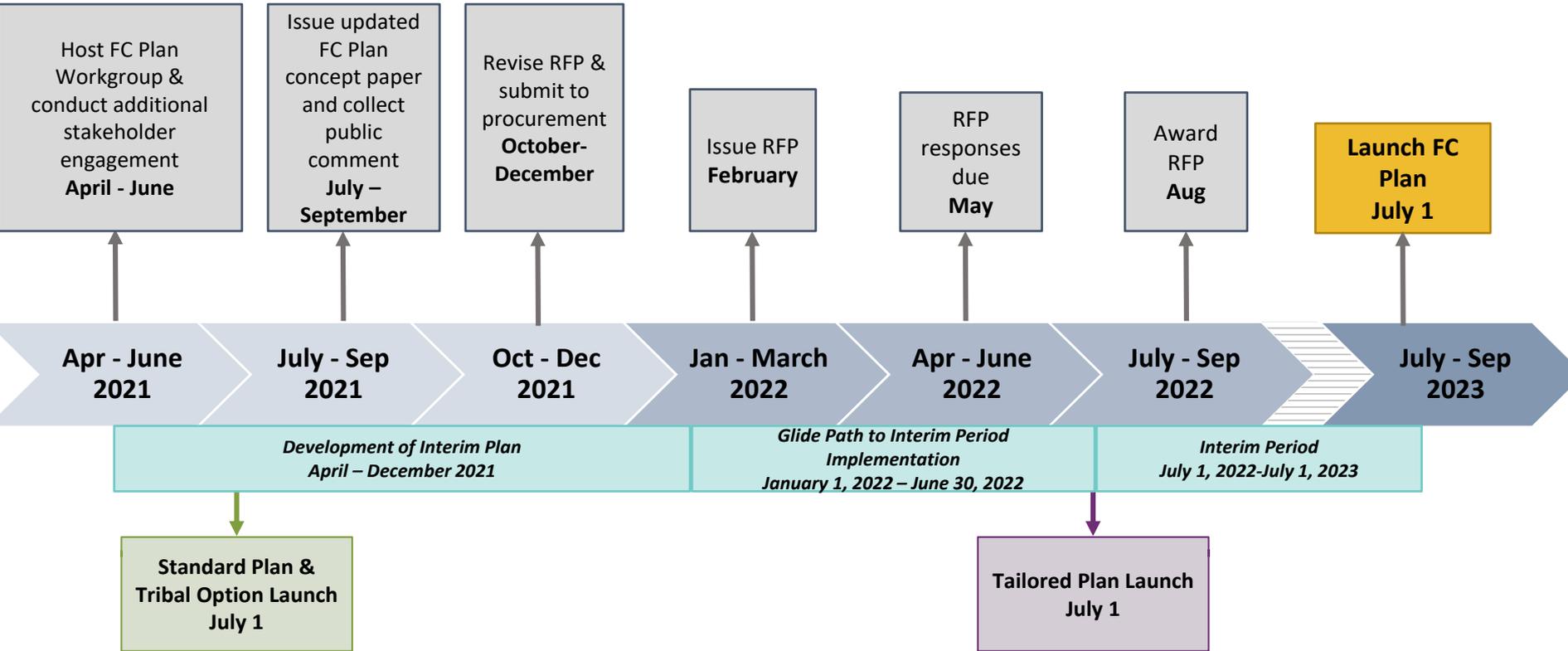
- ✓ Reviewed other states' specialty pediatric managed care contracts
- ✓ Researched best practices for delivering care management services for children in foster care
- ✓ Documented challenges with the existing system
- ✓ Engaged with subject matter experts from across NC DHHS to discuss policy issues and plan design
- ✓ Gathered an initial round of public comments on draft FC Plan requirements from external stakeholders

Where Are We Today?

- ❑ Conducting stakeholder engagement to refine FC Plan design and RFP requirements through (*See Appendix for Schedule; April-August 2021*):
 - ❑ FC Plan Workgroup
 - ❑ Ad hoc stakeholder meetings
- ❑ Coordinating with Continuum of Care Team to help ensure recommendations addressing current issues inform both interim period planning and FC Plan design Plan (ongoing)
- ❑ Developing and implementing interim plan for FC population until FC Plan launch in July 2023 (*April 2021-July 2023*)
- ❑ Engaging with state agencies (e.g., DSS, DMH, DJJ) to prepare to operationalize the FC Plan requirements (*September 2021-July 2023*)

Current FC Plan Timeline*

The Department postponed launch of the FC Plan from July 1, 2022 to July 1, 2023 to allow additional time for stakeholder input on the FC Plan. The Department will conduct ongoing stakeholder engagement in 2021 through the FC Plan Workgroup, public webinars and an additional public comment period.



*Dates are subject to change

Interim Plan Prior to FC Plan Launch

Delay of the FC Plan launch requires the State to create an “interim plan” for the period between BH I/DD Tailored Plan (TP) launch on July 1, 2022 and FC Plan launch on July 1, 2023 to provide Medicaid coverage for FC Plan eligible individuals.

Approach to Interim Plan

- Under current legislation, FC Plan eligible populations are temporarily excluded from managed care enrollment.
 - FC Plan eligible populations will remain enrolled in NC Medicaid Direct upon Managed Care launch on 7/1/21.
 - Effective 7/1/22, FC Plan eligible populations will be allowed to opt-in to SP or TP, as applicable based on their eligibility.
- A cross-divisional Continuum of Care group will lead discussions to develop a short-term interim plan that addresses current system challenges prior to launch of the FC Plan.
- The Department will update the FC Plan Workgroup on interim period planning to inform FC Plan design.

The interim plan seeks to:

- Ensure that the FC Plan population continues to have access to a full range of physical and behavioral health services, as they do today.
- Leverage existing system where possible.
- Enhance coordination of care and address other challenges faced by children and youth in the child welfare system today with receiving needed healthcare and health-related services.

Key Features of the FC Plan: Draft Design

Design Area	Key Draft Features	For Discussion
Statewide Design	<ul style="list-style-type: none"> One statewide plan operated by either an SP or a TP 	Today's Focus
Eligibility & Enrollment	<ul style="list-style-type: none"> Eligible members will be children in foster care under age 21, children receiving adoption assistance, and former foster youth under age 26 The Department will automatically enroll eligible members into the FC Plan at launch with some exceptions: Innovations or TBI waiver enrollees; beneficiaries residing in ICFs; those eligible for TCLI; and Tribal members (who may opt in) 	Session 2
Benefits	<ul style="list-style-type: none"> The FC Plan will include nearly all Standard Plan and BH I/DD TP services, except for the following which will only be covered by BH I/DD TPs: ICF-IID, Innovations/TBI waiver services, State-funded Services 	Session 2
Care Management	<ul style="list-style-type: none"> Plan-based care management for each member delivering whole-person, integrated care Unique requirements include coordination/co-location with DSS, medication management services and requirements for transition of care (including for members aging out of the child welfare system) 	Sessions 3 & 4
Provider Network	<ul style="list-style-type: none"> FC Plan network will include physical health, BH, I/DD, and LTSS providers across the State and must meet network adequacy requirements which generally align with SP and TP time/distance requirements FC Plan network will accept "any willing provider" for all provider types and robust provider quality standards The FC Plan must ensure network providers receive training on trauma-informed care and ACEs to understand the needs of the population served by the Plan 	Session 4
Quality	<ul style="list-style-type: none"> TP quality measure used as starting point for FC Plan measure given the high rate of behavioral health needs in the foster care population with select additional measures focused on health needs that are particularly prevalent among children/young adults currently or formerly in foster care (e.g., 'Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics') 	Session 5



Questions/Feedback?

Design Topic for Today: Statewide Approach

Goals of Today's Discussion

- Review statewide design of FC Plan*
- Discuss feedback received to date*
- Identify open questions, concerns and recommendations related to statewide design*

Statewide Design

One of the most significant challenges facing the current system is disruptions in providers and care due to the population's frequent movement across different areas of the state; the Department seeks to address this challenge by creating a single, statewide FC Plan.

Proposed Approach

- Operate a single plan that delivers services statewide, across all regions of the state, allowing members to access a continuous, full range of health services and maintain treatment plans when their placements change
- Creates a central accountability entity for providing integrated physical and behavioral health services under a System of Care framework to FC Plan members
- Charged with improving the level of coordination between providers, the local County Departments of Social Services, and other stakeholders involved in serving the Plan's members to address their healthcare and health-related needs



Discussion on Statewide Approach for FC Plan

In February 2021, the Department released a policy paper on the Specialized Foster Care Plan and received public comment.



The overwhelming majority of comments received by the Department supported the design of a single, statewide plan for the FC population.

- Some commenters who disagreed with the statewide approach expressed:
 - Concern that a single plan limited member choice
 - Concerns about a single plan managing relationships with local DSS and counties with different needs and resources
 - Desire for a regional plan option

Wrap-Up & Next Steps

Looking Ahead

The Department values input and feedback from stakeholders and welcomes stakeholder to join the upcoming FC Plan Workgroup sessions and/or submit additional comments and questions to the Department.

Upcoming FC Plan Workgroup Sessions

- Session #2: Eligibility & Enrollment and Benefits in the FC Plan
- May 3, 2021 (3 - 4:30pm)
- Pre-read materials will be shared in advance



Additional Comments & Question

- Comments, questions, and feedback are all welcome at Medicaid.NCEngagement@dhhs.nc.gov

The Department will also continue to provide regular updates at:
<https://medicaid.ncdhhs.gov/transformation/specialized-foster-care-plan>