

**Comments on Proposed Program Design for Medicaid Managed Care
September 8, 2017**

As President of the NC Coalition on Aging, I am pleased to offer these comments on the proposed program design for Medicaid Managed Care. I congratulate the Department for developing a comprehensive and well thought out program design plan. We appreciate the Department seeking input from consumers, providers, and health advocates in the developing of the plan and in providing an opportunity for additional comments on the draft proposal.

Comments:

- We support the Department's plan to amend the Section 1115 waiver request currently pending at CMS.
- We support the need to increase access to Medicaid and to close the coverage gap for low income adults. As advocates for older adults, we are particularly concerned about adults 55 to 65, many of whom have extensive health challenges.
- We support the plan to integrate physical and behavioral health as quickly as possible once the waiver is implemented.
- We support having single stop eligibility, enrollment, and primary care provider selection. County Departments of Social Services and other community based organizations are ideally located to assist with this; however, they will need additional resources in order to do so.
- We support the right of enrollees to change primary care providers as well as the 90 day grace period to change plans and the 90 day period to keep a current provider upon enrollment.
- We support the need for an ombudsman. The long term care ombudsman program in the NC Division of Aging and Adult Services can serve as a model. We believe the ombudsman should be an independent non-profit entity.
- We support the Department's substance use disorder plan. Increasing access to Medicaid is key to this being successful. We are particularly concerned that there are many grandparents raising grandchildren whose parents have a substance use disorder and they are in need of support.
- We support efforts to build on the state's very successful primary care case management program. There needs to be a clear separation between care coordination and utilization review.
- We believe the aging and adult services network across the state offers a cadre of seasoned staff who are willing and capable of assuming an important role in service delivery, case management, information and referral, and care coordination. There is no need to invent the wheel when there are already good resources available which are accessible in every county.
- We support the need to address unmet social needs such as food, housing, and transportation. Better supporting services such as home delivered

meals for home bound individuals and adult day services for older and disabled adults with significant physical and cognitive impairment will help to improve the health and reduce the health care costs of enrollees.

- We support having a standardized definition of "medical necessity," and we encourage the Department to require all PHP's to following standardized clinical coverage policies and authorization periods.
- We support having stronger consumer protections built into the plan.
- We support having strong network adequacy requirements that ensure timely and easy access to care.
- We support the right of beneficiaries to continue services pending appeal, and we oppose the elimination of the Office of Administrative Hearing appeals for providers.
- We support establishing a floor for provider rates.
- We support the recommendations of the Dual Eligibles Advisory Committee relative to developing a strategy for inclusion of full dual eligibles in Medicaid managed care.

Thank you again for the opportunity to offer these comments. Should you have questions or need additional information from the Coalition, please feel free to contact me.

Mary Bethel
President, NC Coalition on Aging
mmbethel72@gmail.com