

Tailored Care Management (TCM) Provider Q&A

Date	Question	Answer
11/28/2022	Will a member have access to the Member Portal if they do not take Tailored Care Management (TCM) but keep care coordination (CC)? What is TCM vs. CC going to look like day to day?	Yes. The Member Portal allows for login creation if the member is identified in Vaya's database as having Medicaid or State-funded coverage. It is not limited by TCM engagement. TCM is a program that takes a comprehensive "whole-person" approach to
	Is TCM providing crisis support for those without Innovations?	achieve positive health outcomes. Vaya is creating a forthcoming fact sheet to help providers and members to understand the difference between TCM and CC.
11/28/2022	What is the TCM monitoring like? Can the word "monitoring" be changed (since this is not a very supportive word and may make families/providers feel like the monitor is only looking for things that families/providers are doing wrong)?	TCM includes all Innovations Waiver care coordination requirements. TCM for Innovations Waiver participants must adhere to whichever requirement is more stringent (contact requirements found in the NC Innovations Waiver or contact requirements found in the BH I/DD Tailored Plan). Vaya uses the term "monitoring" to be consistent with the term that is used in the NC Innovations Waiver.
11/28/2022	For an Employer of Record (EORs), what would choosing a different TCM agency look like? Could this include different EOR rules? For example, the current IFDS handbook is under review at Vaya, but would a different TCM provider have different rules?	Requirements around the EOR model of self-direction are outlined in the NC Innovations Waiver and do not change based upon who is rendering care management to the member.
11/28/2022	Who is the I/DD Clinical Director at Vaya? If this person is in the Utilization Management (UM) department, is that the way it is supposed to be?	Dr. Melissa Hamm serves as the I/DD Clinical Director and as the BH/IDD/TBI UM Clinical Director. The I/DD Clinical Director is referenced in the NC Innovations Waiver, and these requirements are met.
12/01/2022	How does a person who is on the Registry of Unmet Needs get TCM? For example, parents have been unable to access the full-service array or any service array due to their child's status on the Registry of Unmet Needs.	Individuals who are eligible for TCM will receive letters from Vaya Health informing them of this program and what it offers. These letters will include information about their assigned TCM entity, information about what TCM is and how it can support the individual, and how to "opt out" or change their assigned TCM entity/care manager.

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12/01/2022	If a member wants TCM, to whom is this request provided? If it is the current assigned care manager, what if the member or parent/guardian is uncomfortable communicating to the current	The member or their legal guardian may call Vaya's Member and Recipient Services line at 1-800-962-9003 (Monday –Saturday, 7 a.m. to 6 p.m.) to request a change in TCM.
	care manager that they want TCM from a different provider, other than Vaya?	There is also a <u>TCM Opt-out/ Change Request Form</u> on Vaya's website (and members received a copy in the TCM Mailing). The form provides instructions on form submission.
12/01/2022	How will records be managed? Providers are required to have certain documentation in their Electronic Health Records that are currently provided by the care managers to the provider agencies. How will this process change?	TCM providers will be responsible for managing and housing the member's health information. Tailored Care Managers will be responsible for sharing that information with all members of the care team as permitted by the member.
11/28/2022	How will members that need services across systems be supported? For example, I/DD dually diagnosed members and connection to mental health supports.	Individuals living with I/DD have the option to receive TCM from a care manager who specializes in I/DD services. The Tailored Care Manager will be responsible for connecting the member to all areas of care.
11/28/2022	Is the Member Portal ready for members to set up an account?	Yes, the Member Portal is now actively in use.
11/28/2022	What documents and information can I expect to find in the Member Portal?	 Members may locate the following forms: How to request to change their TCM or Primary Care Provider Health Risk Assessment Medication List Crisis Plan Care Plan or Individual Support Plan for NC Innovations members Service Plan (NC Innovations only) Budget (NC Innovations only) Diagnosis
11/28/2022	If families opt out of TCM, will that financially hurt Vaya?	No. TCM organizations, whether it is Vaya-based or Provider-based, are only paid based on the members who they serve.
12/01/2022	Who assigned members to providers?	The NC Department of Health and Human Services (NCDHHS) assigned members to providers using an algorithm. Providers should have received member assignments according to matching specific members' needs with the population needs that providers stated that they would serve.

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12/01/2022	Why is the number of members assigned to providers lower than the panel-size numbers submitted?	The NCDHHS stated that many providers did not have all available care management slots filled; however, a sizable number of members were assigned to providers which do not serve that population. As a result, it is anticipated that members will shift to and from providers based on populations served.
12/01/2022	Should all members assigned to a provider have a treatment history with the provider?	The NCDHHS algorithm looks at prior service delivery as a factor in the assignment process. Some members who received services from a non-TCM provider may be assigned to other providers that do not have members' treatment histories.
12/01/2022	At what point should TCM providers begin outreach?	 It may be helpful for TCM providers to utilize a tiered approach to outreach as follows: Members who fit the profile matching a provider's panel size request, and providers who have a prior treatment history with the member. Members who fit the profile matching the provider's panel size request, but the provider does not have a prior treatment history with the member. Members who do not fit the requested criteria should be outreached last, as there is a chance these members may be reassigned.
12/01/2022	What should providers report on the panel-size reports?	Providers will only need to report changes if there is a change in their maximum panel size number or population(s) served.
12/01/2022	Will providers be able to receive phone numbers and diagnosis information?	Providers are encouraged to utilize the Provider Portal (Alpha) to see member contact information where the most current information that Vaya has for the member is provided. However, there is a chance a member has changed their contact information and not notified Vaya yet. Providers may also access the Provider Portal for diagnosis information.
12/01/2022	When will the next round of capacity-building funds be distributed?	Vaya anticipates receiving the third round of capacity-building funds the week of Nov. 28, 2022, to Dec. 2, 2022. Vaya will work expeditiously to move these funds to providers.
12/01/2022	Who should providers contact if they have additional care management questions?	Providers are encouraged to ask questions and email them to: provider.training@vayahealth.com .
12/01/2022	How quickly can new staff gain access to the Provider Portal (Alpha)?	Vaya understands access is necessary for follow up with members. If any requests for logins need to be expedited, providers should make the request through their Provider Network Contract Manager, who will assist in expediting the request. Our goal is for new Alpha users to have access to

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		Alpha within 48 hours. Office closures may impact this, since the process for gaining access to Alpha is not entirely automated. Providers are encouraged to request staff access accordingly.
12/01/2022	Can you explain the process for returning members who we serve in another program?	Providers do not need to "return" members. Providers should conduct initial outreach only to those members on their panel who have been appropriately assigned based on the population(s) to which the provider is certified to render TCM. NCDHHS will re-run auto-assignment on Dec. 12, 2022, to address members who were incorrectly assigned.
12/16/2022	We currently provide services to members who were not assigned to our organization. Is this a factor in TCM assignment?	The algorithm used by the North Carolina Department of Health and Human Services (NCDHHS) considers prior service delivery as a factor in the assignment process. Some members who received services from a non-TCM provider may be assigned to another provider who does not have information about the member's treatment history. NCDHHS has indicated it will reassign some individuals to better align with their provider relationship history. After the reassignment, if the member is not assigned to your agency, the member can request to be reassigned by calling Vaya's Member and Recipient Services Line at 1-800-962-9003.

Revised December 20, 2022.