



## North Carolina Pediatric Society

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December 7, 2017

The Honorable Mandy Cohen, MD  
Secretary, NC Department of Health and Human Services  
2001 Mail Service Center  
Raleigh, NC 27699-2001

RE: Medicaid Managed Care Proposed Concept Paper: Behavioral Health and I/DD Tailored Plan

Dear Secretary Cohen:

On behalf of the NC Pediatric Society (NCPeds) and our 2000 members across the state, we would like to offer brief comments relevant to your Medicaid Managed Care Concept Paper for Behavioral Health and Intellectual/Developmental Disability Tailored Plans.

NCPeds is supportive of whole-patient care that focuses on the patient and minimizes transitions in providers, treatment plans and health care plans. We appreciate the concept of treatment in one setting and/or through one plan, including physical and behavioral health care needs. This type of care can be especially important for children with developmental delays, facing trauma, with ADHD or special health care needs or other factors. The current credentialing process for LME/MCOs can be cumbersome and administratively burdensome. We applaud the efforts of the NC Department of Health and Human Services (NCDHHS) to simplify caring for children in the foster care system or who have mild to moderate behavioral health and substance abuse issues in the Standard Plans.

While we are supportive of the concept of using Tailored Plans to wrap treatment needs around patients with significant behavioral health disorders, intellectual and developmental disabilities, and traumatic brain injuries, we remain concerned about how these plans would be implemented. Concerns include the following:

**Foster Children:** Children in the foster care system are a very challenging group to serve. We appreciate that they are not locked into a single type of plan for one-year increments, but remain concerned on specifics. Foster children have, by definition, encountered trauma. They tend to be mobile, often moving among counties and catchment areas. We appreciate the provision in the Demonstration Waiver Application that foster children will be able to get all their services through one Standard Plan (page 22) without needing to move into a Tailored Plan for services such as those delivered in a PRTF. We encourage provisions that allow a child to stay in their current medical home when practical, balanced against other foster family needs. We urge that the PHP focused on providing care for foster children give priority to practices already providing trauma-informed care through the Fostering Health NC initiative.

**Administrative Ease:** In addition to contracting with multiple PHPs on the Standard Plan side, practices would also now need to contract with, and manage the deliverables for Tailored Plans adding to potential administrative burden. As we have noted previously, uniformity, adequate payment rates and other factors are essential to providing the administrative ease needed for pediatricians, especially those in independent practice, to participate. This is especially true given the current challenges in contracting with MCOs/LMEs, especially for foster children or other children out of catchment area. Any system going forward must be far easier to navigate and assure adequate and timely payment if children in Tailored Plans are to have strong access to physical health providers. We urge the Department to provide the incentives and supports to make Advanced Medical Homes financially and operationally viable.

**Complexity for families:** We appreciate the extra supports provided, but remain concerned about the complexity added to the enrollment process for a population already facing multiple challenges. Will a transition from a Standard Plan to a Tailored Plan (and potentially back) mean loss of the Primary Care Provider with whom the patient already has a strong relationship? We encourage stakeholder input, including from families.

We stand committed to continuing to work with the Department to provide care for our most vulnerable children.

Sincerely,

A handwritten signature in black ink, appearing to read "S. St. Clair". The signature is fluid and cursive, with a prominent initial "S" and a trailing flourish.

Scott St. Clair, MD, FAAP, Chapter President  
North Carolina Pediatric Society (NCPeds)

cc: The Honorable Mandy Cohen, MD, Secretary, NC DHHS  
Dave Richard, Deputy Secretary for Medical Assistance, NC DHHS  
Jay Ludlum, Assistant Secretary for Medicaid Transformation, NC DHHS  
Elizabeth Hudgins, Executive Director for the NC Pediatric Society