

CONNECTIONS

A Provider's Link to AmeriHealth Caritas North Carolina

2024/ISSUE 3



AmeriHealth Caritas North Carolina (ACNC) leadership and associates joined volunteers from across the state in stepping up to help our neighbors in western North Carolina following the devastation of Hurricane Helene. Our Mobile Wellness & Opportunity Center made numerous trips to the region as soon as travel was allowed, transporting donated and purchased supplies and serving as a charging station for mobile devices.

Despite power, water and internet outages, ACNC associates living in the region demonstrated amazing resilience in continuing to serve our members and their communities. Within a few weeks, our Asheville Wellness & Opportunity Center resumed programming to support the community with education and resources. Read more about our response and support for impacted providers on page 7.

In This Issue

A year in review with Market President, Heidi Chan	2	Partnering with providers to improve perinatal care.....	12
Introducing new medical leadership	3	Ask the Experts: About Black Maternal Health webinar	13
Value-based programs available for providers.....	4	Regional baby showers celebrate moms and help achieve quality goals	14
Congratulations to highest earners in ACNC's incentive programs	4	Value-added benefits to support prenatal and postpartum care	15
Addressing health disparities: Tips to improve childhood immunization rates.....	5	Uniting with local health departments to improve perinatal care for minority moms	16
Supporting providers with resources to improve member care.....	6	Preventing fraud, waste and abuse	18
Provider support and stabilization following Hurricane Helene.....	7	ACNC hosts youth mental health first aid trainings.....	19
2025 ECHO Behavioral Health Boot Camp.....	8	Post-Appointment Member Satisfaction Survey	20
NEW Quarterly webinar series for behavioral health providers.....	8	Member voices matter	21
On the road with Provider Network Management.....	9	ACNC membership by region.....	22
Is your information in our Provider Directory complete?.....	10	Wellness & Opportunity Centers	23
Culturally and linguistically appropriate services	11		
Evidence-based clinical guidelines and utilization management criteria.....	11		


A year in review with Market President, Heidi Chan

It has been an exciting year of growth for Medicaid in North Carolina, with a tremendous response to Medicaid expansion and a new population of members gaining access to essential health coverage. These new members, most of whom are adults between 19 and 40 years old, bring new opportunities for us to understand their medical, behavioral health and social needs; identify care gaps; and determine how we can partner with providers and community agencies to best serve the members.

One of our primary aims continues to be building on and improving provider relationships, which we know are the foundation for improving health outcomes for our members. I am excited about new medical leadership for our plan this year with the arrival of **Dr. Steve Spalding** as our Market Chief Medical Officer, and **Dr. Nerissa Price** as our Behavioral Health Medical Director. As you will read on page 3, they both are accomplished practicing clinicians with significant Medicaid managed care experience. They also bring a strong desire to connect with our network providers and have already been traveling the state for in-person meetings and conferences. Dr. Price hosted a successful session for providers on caregiver burnout in May and moderated a great panel of experts for our virtual member program on Black Maternal Health in September.

In this issue of *Connections*, we are highlighting our commitment to maternal health through a variety of programs, partnerships, and member and provider incentives to support pregnant and postpartum moms in having healthy pregnancies and healthy babies. Our regional baby showers are joyful events that continue to grow in size and scope, with fantastic resources for moms and families. We know that giving our youngest members a Bright Start® in life is one of the most important things we can do to accomplish our mission to build healthy communities.

Sincerely,


Heidi Chan



On January 12, 2024, ACNC was proud to support the Triangle Martin Luther King Jr. Holiday of Service kicked off with a welcome from Heidi.

Heidi Chan, Market President

As Market President for AmeriHealth Caritas North Carolina, Heidi Chan is responsible for strategic direction and general oversight of all the plan's day-to-day operations, including provider network management, marketing and community outreach, growth and leadership. Chan has been with AmeriHealth Caritas since 2006 in a variety of leadership roles, including serving as Market President of Blue Cross Complete of Michigan and Director of Regulatory Affairs, Member Communications and Compliance for AmeriHealth Caritas in Pennsylvania. Chan holds a bachelor's degree in public policy from The Pennsylvania State University and a Master of Business Administration degree in Health Care Management from Regis University.

Introducing new medical leadership



Steven Spalding, MD, Market Chief Medical Officer

Dr. Steve Spalding joined the AmeriHealth Caritas North Carolina (ACNC) team in June 2024. He is responsible for development and implementation of the market population health, quality, care management, disease management, transition of

care, utilization management, provider and community engagement, network efficiency and value-based contracting strategies.

Prior to joining ACNC, Dr. Spalding served as the Market Chief Medical Officer for AmeriHealth Caritas Ohio, where he was responsible for launching clinical operations for the health plan in the state. He is a board-certified pediatrician, a pediatric rheumatologist and an experienced physician executive who has held clinical leadership roles at major hospitals and health systems.

Before joining the AmeriHealth Caritas Family of Companies, he served as Vice President of Population Health and Director for the Center of Pediatric Rheumatology at Akron Children's Hospital, where he led the development of the hospital's accountable care organization, aligning its quality metric portfolio with payer incentive programs, and creating a care coordination program for children on Medicaid. He also has served as Chief Clinical Integration and Medical Officer at Phoenix Children's Hospital and as staff physician and Medical Director for Enterprise Analytics & Business Intelligence at Cleveland Clinic.

Dr. Spalding earned his medical degree from Wright State University's Boonshoft School of Medicine and completed his categorical pediatric residency and fellowship in pediatric rheumatology at Children's Hospital of Pittsburgh. He continues to practice pediatric rheumatology through Cincinnati Children's Hospital & Medical Center. Dr. Spalding, his wife and his four children live in Chapel Hill. His 18-year old son is a freshman at North Carolina State University.



Nerissa Price, MD, Behavioral Health Medical Director

Dr. Nerissa Price joined the AmeriHealth Caritas North Carolina (ACNC) team in January 2024. She is a child, adolescent and adult psychiatrist.

Dr. Price is responsible for developing the market

behavioral health strategy, overseeing implementation, and ensuring effective execution and scaling to improve population health and wellness outcomes. She serves as a behavioral health subject matter expert to other departments and in the community.

Prior to joining ACNC, Dr. Price earned more than 20 years of experience from her work with University of North Carolina School of Medicine, ValueOptions, Cardinal Innovations, the North Carolina Department of Public Safety, and WakeMed Health and Hospitals. At WakeMed, Dr. Price was the medical director for Behavioral Health Community Case Management and the homeless outreach team (H.E.A.R.T). She was also the medical director of WakeMed Physician Practices Well-Being Initiatives, where her mission was to improve provider well-being by promoting the culture of wellness, work-life integration and joy in work. Dr. Price has devoted her career to improving the health of those experiencing mental illness and those who are marginalized in our society.

Dr. Price was born in Wake County. She received her medical degree and completed a Child and Adolescent Psychiatry Fellowship at the University of North Carolina at Chapel Hill School of Medicine. She is board-certified in general psychiatry.

Value-based programs available for providers

ACNC offers several value-based programs to financially reward cost-effective, high-quality providers. These include our Gaps In Care Closure programs which reward providers for important preventive services. More details can be found at our Value-Based Programs webpage at amerihealthcaritasnc.com or by scanning the QR code below.



ACNC is happy to speak with your practice about opportunities to develop customized value-based programs or assist your practice to improve performance in current value-based programs. To find out more, contact your assigned Provider Network Account Executive.

Congratulations to highest earners in ACNC's incentive programs

AmeriHealth Caritas North Carolina is dedicated to actively partnering with our network providers to improve member outcomes. We are excited to recognize our top-performing providers in Combo-10 vaccinations, prenatal and postpartum care rates. These are key maternal-child preventive services that substantially impact health outcomes. While the providers listed represent our top providers in each metric category, we want to recognize our entire provider network for their work to improve member outcomes every day.

Childhood Immunization Status (CIS)

Wake County Human Services

Goldsboro Pediatrics

Regional Pediatric Associates

Mt. Olive Pediatrics

Duke Primary Care

Our Children's Clinic

Kids First Pediatrics of Raleigh

Washington Pediatrics

Lincoln Community Health Center, Inc.

Coastal Pediatric Associates

Prenatal Care (PPC)

Mountain Area Health Education Center

Atrium Health Primary Care Cabarrus Family Medicine

Lincoln Community Health Center, Inc.

Novant Medical Group, Inc.

Carolinas Physicians Network, Inc.

Carolinas Medical Center

Forsyth Memorial Hospital, Inc.

The Charlotte-Mecklenburg Hospital

Wake Forest University Department of Health and Exercise Science

Duke Primary Care

Postpartum Care (PPC)

The Moses H. Cone Memorial Hospital

Wake County Human Services

Cornerstone Health Care, LLC

Jacksonville Children's and Multispecialty Clinics

Forsyth Memorial Hospital, Inc.

Atrium Health NorthPark OB/GYN

Med First Immediate Care and Family

Carolinas Medical Center

Carolinas Physicians Network, Inc.

Wake Forest Health Network, LLC

Addressing health disparities: Tips to improve childhood immunization rates



By Erica Daniels
Health Equity and
Quality Analyst

In 2017, "just 66.5% of Black/African American children in the United States aged 19 to 35 months were fully immunized, compared to 71.5% of white children."¹

The most significant challenges in maintaining high immunization rates among Black/African American children are combating misinformation and vaccine hesitancy.

Many parents have questions about their children's vaccines, and answering their questions can help parents feel confident in choosing to immunize their child. The CDC suggests these tips to help start or continue conversations with parents regarding immunizations.²

- "Seek to understand parents' concerns and provide requested information."
- Make strong recommendations. Providing "a brief supporting statement of science and anecdote" is sometimes necessary to motivate the parent.
- If parents decline, "continue the conversation about vaccines during the next visit and restate your strong recommendation," and remind parents about the vaccine-preventable diseases and the effectiveness of vaccines.

"About a third of parents who initially refuse a vaccine will change their minds following educational intervention methods."³

Black/African American families may also experience distrust of the health care system stemming from historical unethical use of immunizations in marginalized communities.⁴ Patient and parent education leads to empowerment; when parents are properly informed of the importance of immunizations, they will have the information needed to vaccinate their children. Providers should use positive messaging to increase vaccine acceptance as well as decrease hesitancy provoked by misinformation. Consider the needs and beliefs of your patient population, and tailor your messages to be culturally appropriate. You can also establish trust by acknowledging and incorporating the questions and concerns they have shared.⁵

Vaccine hesitancy also stems from misinformation from online boards and rumors spread throughout the community. Examples range from vaccines causing autism to vaccines causing people to become ill after receiving them. As covered above, providers can continue to discuss with their patients the importance, safety, and effectiveness of vaccines; remind their patients that there is an endless amount of vaccine misinformation online; and provide them with sources containing information that is factual.⁶

¹ Niesha Foster, "Addressing Disproportionate Childhood Vaccination," Pfizer, https://www.pfizer.com/news/articles/addressing_disproportionate_childhood_vaccination

² "Talking With Parents About Vaccines for Infants," Centers for Disease Control and Prevention, April 11, 2018, <https://www.cdc.gov/vaccines/hcp/conversations/talking-with-parents.html>

³ Serese Marotta and Veronica McNally, "Increasing Vaccine Confidence Through Parent Education and Empowerment Using Clear and Comprehensible Communication," *Academic Pediatrics*, Vol. 21, No. 4, S30 – S31, 2021, <https://doi.org/10.1016/j.acap.2021.01.016>

⁴ Jennifer Allen et al., "Medical Mistrust, Discrimination, and COVID-19 Vaccine Behaviors Among a National Sample U.S. Adults," *SSM - Population Health*, Vol. 20, December 2022, <https://doi.org/10.1016/j.ssmph.2022.101278>.

⁵ "Vaccine Messaging Guide," Yale Institute of Global Health and UNICEF Demand for Immunization Team, December 2020, <https://www.unicef.org/media/93661/file/Vaccinemessagingguide.pdf>

⁶ Renee Garrett and Sean Young, "Online Misinformation and Vaccine Hesitancy," *Translational Behavioral Medicine*, Vol. 11, No. 12, December 2021, <https://doi.org/10.1093/tbm/ibab128>




Supporting providers with resources to improve member care

ACNC wants to support your practice in closing important gaps in care for your patients and our members. From prenatal and postpartum care, to infant and child well visits and adult health screenings, we provide tools, resources and data to help identify gaps and meet quality goals.

As a practicing physician in large health systems, I have personally experienced the significant improvement in patient outcomes that can occur when providers and managed care plans partner. My hope is that providers see ACNC as the plan they can turn to when they are looking to improve patient outcomes.

– ACNC Market Chief Medical Officer Steve Spalding, MD

Helpful resources

1	Clinical Leadership Forums — These focus on a specific topic each quarter and feature a provider spotlight to highlight best practices, as well as a question-and-answer session with participants. Topics include Behavioral Health, Women’s Health and Wellness, Physical Health and Chronic Conditions, and Childhood Health and Wellness. Continuing education credits may be available.
2	Early and Periodic Screening, Diagnostic and Treatment (EPSDT) webpage — This webpage offers helpful tips on prior authorization and claims for EPSDT services, as well as an 18-minute EPSDT training video and attestation survey that is recommended for providers that care for children up to age 21. 
3	Pharmacy Prior Authorizations webpage — This webpage offers easy-to-follow tips for prescribers, including the new electronic submission process. 
4	Quality Corner — In each month’s Provider Digest email, you will find a new article highlighting best practices for achieving quality goals.
5	Value-Based Programs webpage — This webpage is where you will find information and measures for primary care, maternity care and behavioral health care providers to enhance revenue while providing quality and cost-effective care. 

Provider support and stabilization following Hurricane Helene

ACNC leadership, working collaboratively with other prepaid health plans and the North Carolina Department of Health and Human Services (NCDHHS), worked quickly to respond to the wide-ranging impact of the storm on our provider community in the 28 disaster-declared counties, including the Eastern Band of Cherokee Indian territory. ACNC's initial efforts were concentrated on member outreach, especially to those with high-risk medical conditions, pregnant women and newborns.

Data reported by the NC Medical Society indicated that as many as 17% of practices in the region were unable to reopen due to damage and that nearly a quarter of all providers had significant concerns about meeting financial obligations. In response, we quickly took numerous steps to ease financial and administrative pressures on providers, including stopping payment recoveries, medical records requests, prepayment edits and high dollar claim inquiries to support provider cash flow. Our Utilization Management team enlisted additional support to ensure timely authorizations and supported Care Management in finding alternative providers for members as needed. Within a month, ACNC also developed a new protocol offering provider stabilization payments to providers in the disaster region that had treated and billed claims for ACNC members' in the last 12 months.

CARE IS THE HEART OF OUR WORK.®



Desiree Durning, Community Educator in Region 1, unpacks a truck full of supplies for families.



Our Mobile Wellness & Opportunity Center made numerous trips to the region as soon as travel was allowed, transporting donated and purchased supplies and serving as a charging station for mobile devices.

Provider stabilization payments

October — November 2024



\$5.06
Million



1,163
providers
located in western
North Carolina

2025 ECHO Behavioral Health Boot Camp

Our FREE ECHO Behavioral Health Boot Camp live online training series is open to all network providers — behavioral health care providers, pediatricians, primary care family practices, OB/GYNs, and local health departments, along with all clinical staff providing care for our members. Scan the QR code to enroll in one or more session via email.

During each session, we will share best practices and practical strategies for supporting members with their behavioral health needs around the topics as listed in the schedule on this page.

Participants who complete all components of this series can earn **continuing medical education (CME) credits for physicians, Approved Continuing Education (ACE) credits for social workers, and continuing education units (CEU) for nurses through the University of New Mexico (UNM).**

By the end of the ECHO clinic series, participants will be able to:

- Provide education to increase screening and treatment of the behavioral health disorders among members in physical health settings.
- Recognize symptoms, adaptations or somatic complaints in response to a traumatic experience.
- Build skills to successfully engage members in treatment through motivational interviewing and harm-reduction interventions.

For more information, please scan the QR code to visit our [Provider Training webpage](#) or email projectecho@amerihealthcaritas.com for additional information.

2025 topic schedule

February 5, 2025
Understanding Pediatric Behavioral Health

February 19, 2025
Pediatric Mental Health in Primary Care: Common Conditions and Referral

March 5, 2025
Zero Suicide Using the Trauma Informed Care Model

March 19, 2025
Managing Behavioral Health Conditions during the Perinatal Period

April 2, 2025
Reframing Addiction: A Chronic Disease Approach

April 16, 2025
Integrated Health: Collaborative Care Mode



NEW Quarterly webinar series for behavioral health providers

The ACNC Behavioral Health team invites you to join a virtual forum to engage with plan leadership to discuss clinical and administrative activities. The goal of our time is to work together to improve behavioral health outcomes for our members. Each session will include important information related to care management, HEDIS priorities, and billing functions. We will also offer a Provider Spotlight to highlight best practices and encourage patient collaboration. Scan the QR code for more information about training opportunities.

[Register for a 2025 webinar](#)

Each session is from **noon to 1 p.m. ET.**

Thursday, January 9, 2025

Thursday, April 10, 2025

Thursday, July 10, 2025

Thursday, October 9, 2025



ACNC has three account executives dedicated to our behavioral health providers: Clarence Lawing (Regions 1 and 3), BJ Callicutt (Regions 4 and 5) and Lori Osborne (Regions 2 and 6).

On the road with Provider Network Management

This year, our account executives and managers have traveled from the mountains to the coast, attending conferences and engaging providers in one-on-one office visits.



Provider Network Account Executive Desiree Bobbitt and Manager Aja Berry congratulated Dr. Wendi Carlton (center) of Agape Health Services on winning our door prize during the Community Health Center Association Conference in Greensboro.



Sia Vang (center right) and Brittany Campbell (right) attended the NC Pediatrics Society Annual Meeting in Durham. They shared our HEDIS Quick Reference Guides with providers, including colleagues from Concord Children's Pediatrics and High Point Pediatrics.



Provider Network Account Executive Tonji Stang (left) is pictured with Gayzel Sevilla, Office Manager for Wakefield Pediatric & Adolescent Medicine in Raleigh, during their one-on-one provider visit in July.

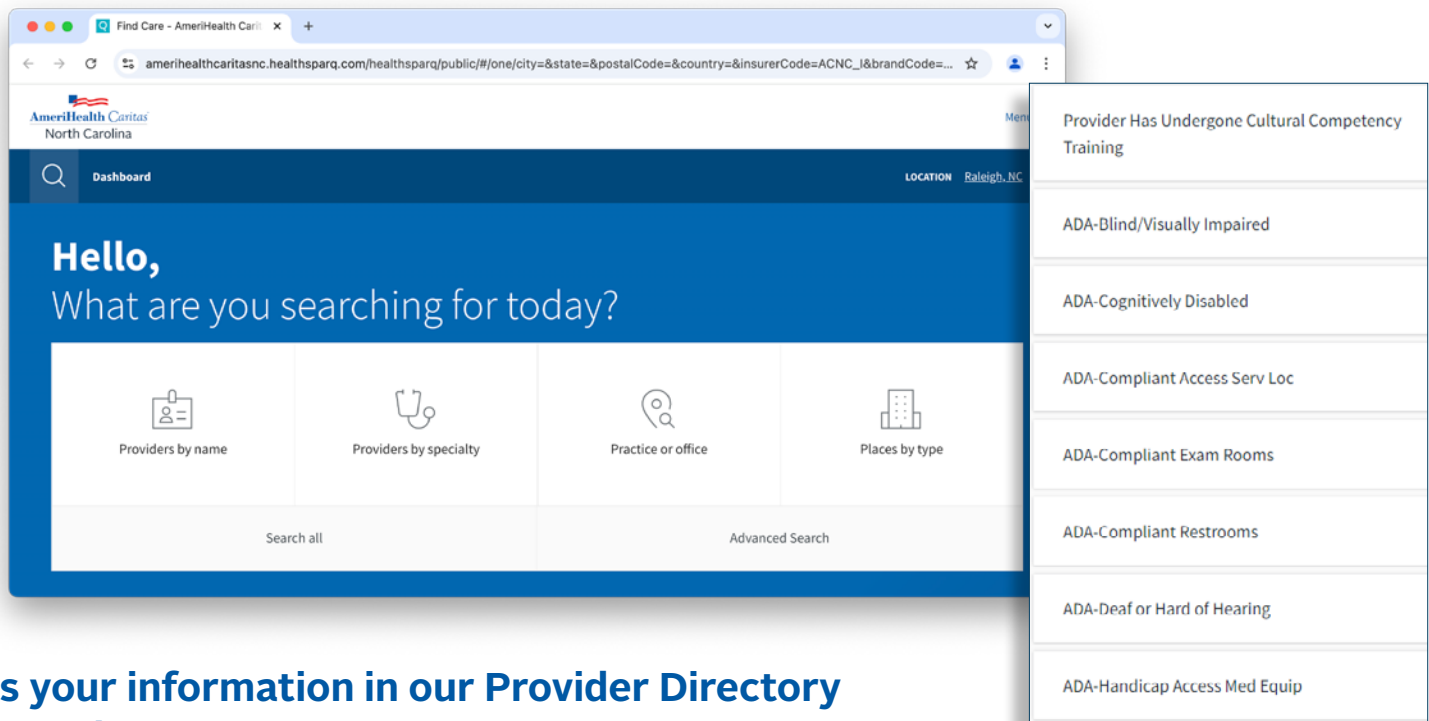


ACNC attended both the spring and fall NC Medical Group Managers conference events. Provider Network Manager Chelsea Arsenault (center) enjoyed meeting Betsy Parrish of Raleigh Nephrology Associates PLLC and Laura Dickerson with Northwest AHEC at the fall meeting in Winston Salem.

Do you know your Provider Network Account Executive?

Your Provider Network Management Account Executive is your liaison with AmeriHealth Caritas North Carolina. They are responsible for orientation, continuing education and problem resolution for our network providers. This year, a new team to support Federally Qualified Health Centers was formed. If you do not know who your Account Executive is, scan the qr code to connect. When you send an email to the [appropriate region mailbox](#) and follow the instructions, you will receive an email back within two business days.





Is your information in our Provider Directory complete?

Information about your practice comes to ACNC daily via the Provider Enrollment File (PEF), generated from NC Tracks. Updates are made to ACNC's database via an automated process that identifies any provider changes.

We encourage providers and their staff to carefully complete the enrollment/recredentialing application in NC Tracks to ensure you are fully represented in our [online or printable provider directories](#), which are searchable by members and providers. This includes languages spoken, services available through your practice, ADA access and more.

Updating your information

- If a provider reports to ACNC that a change is needed to our Provider Directory, the requested change is validated against the PEF.
- If the change matches the PEF, ACNC makes necessary changes as requested directly into ACNC's database.
- Changes in provider service location, demographic data or other information related to member access to services will be updated no later than 30 calendar days after receipt of new/updated information that has been validated using the PEF.
- If the provider reports that a change is needed to the Provider Directory, the information is validated using the PEF. Then a request is sent to Provider Data Management.
- Provider Data Management associates make necessary changes as described by the request directly into the FACETS provider database.
- Changes in provider service location or demographic data or other information related to member access to services shall be updated no later than 30 calendar days after receipt of new/updated information from the practitioner or provider that has been validated using the PEF.
- All updates made during the business day are uploaded nightly to the online directory at a specific time across the enterprise.

During touchpoints with your dedicated Account Executive, let them know if our provider directory includes your practice information about cultural competency training, as well as languages spoken and available to your patients. If your information is not complete, we can help you get up to date.

Culturally and linguistically appropriate services

Cultural Competency Training is an additional field published in our directories to identify providers who have taken specific training to support their practices in effectively delivering health care services that meet the social, cultural, and linguistic needs of their patients. If your practice has taken this training, you must attest to it with any one of the prepaid health plans.

If you would like to make training available to your staff, ACNC provides information about training opportunities on our website. You can also complete ACNC's Cultural Competency and Linguistically Appropriate Services (CLAS) on-demand training and attestation on our [Provider Training page](#). Updates are made to the online provider directory daily. ACNC has an automated process to identify any provider changes using the daily Provider Enrollment File (PEF) that is provided by NCDHHS. Any updates are uploaded into our provider database daily.

Language assistance expectations

- Providers are expected to offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to the individual, to facilitate timely access to all health care and services.
- Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
- Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
- Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

Evidence-based clinical guidelines and utilization management criteria

ACNC provides comprehensive, outcomes-driven health solutions for our members. Part of this approach means making it a priority to reduce unnecessary variations in care. We've used the latest scientific evidence and research to create clinical guidelines, which represent the most current professional standards. While these guidelines are intended to inform, they aren't intended to replace a physician's clinical judgment. The physician remains responsible for determining the applicable treatment for everyone. Clinical guidelines and Utilization Management criteria are made available to members, practitioners and providers on the ACNC website. Members and practitioners may request copies of guidelines used for a Medical Necessity Determination at any time using the following methods.

Utilization Management (UM) criteria is available upon request and is most easily located in the Provider Tools and Resources section of our website.

- A. [Manuals, Policies and Forms webpage](#)
- B. [ACNC Clinical Resources webpage](#)

If you are a practitioner without fax, email or internet access:

- A. Call **1-833-900-2262** to reach our Utilization Management department.
- B. In person: AmeriHealth Caritas North Carolina
5th Floor
8041 Arco Corporate Drive
Raleigh, NC 27617

Partnering with providers to improve perinatal care

Each quarter, ACNC provides opportunities for providers to engage with our team to discuss quality improvement activities and associated challenges related to quality and population health outcomes. Each live online session includes a provider spotlight to highlight best practices, as well as a question-and-answer session with participants.

In June 2024, our topic was Women's Health and Wellness, with a focus on prenatal and postpartum care; prenatal depression screening and follow-up; and breast cancer, cervical cancer and chlamydia screenings. All of these HEDIS measures are critical to improving women's health outcomes.¹



Dolly Pressley Byrd, MAHEC OB/GYN Specialists' Medical Director (3rd from right) and her team welcomed ACNC Provider Network Account Executive Bernadette Owens (far right) to their office in Asheville.

Mountain Area Health Education Center ([MAHEC OB/GYN Specialists](#)) in Asheville, North Carolina, is ACNC's highest performing OB/GYN practice on the timeliness to prenatal care component of the prenatal and postpartum HEDIS measure. During the best-practice portion of the forum, MAHEC OB/GYN Specialists' Medical Director, Dolly Pressley Byrd, CNM, PhD, presented their team's processes to improve access and outcomes. With permission, we are sharing highlights below.²

Scheduling

- MAHEC's Registered Nurse (RN) schedules all new Obstetrics (OB) appointments.
- During scheduling, an RN asks the patient a few key medical history questions regarding significant medical comorbidities and asks about prenatal care or ultrasounds received previously.
- At MAHEC, current Medicaid coverage is NOT required to schedule a visit. Support for enrollment is provided during the office visit.
- At least 4 hours are left open in each week's schedule to ensure access for new patients.

Engagement

- MAHEC offers Centering Pregnancy (group prenatal care), which provides enhanced education related to the postpartum period as well as newborn health.

Care coordination

- MAHEC care managers contact all postpartum patients to discuss well-baby and postpartum follow-up information. If any risks are identified (such as hypertension, diabetes or health-related social needs), a home visit is offered.
- MAHEC has seen improved outcomes by integrating with family medicine practices and confirming that postpartum well visits are scheduled.

Please visit our [Provider training page](#) to see offerings and register for upcoming trainings.

¹ "North Carolina's Medicaid Quality Measurement Technical Specifications Manual," <https://medicaid.ncdhhs.gov/medicaid-managed-care-quality-measurement-technical-specifications-manual/download?attachment>. Referenced with permission from HEDIS Measurement Year (MY) 2024, Volume 2: Technical Specifications for Health Plans by the National Committee for Quality Assurance (NCQA), Version 2024.0, January 30, 2024

² Printed with permission from MAHEC OB/GYN Specialists, Medical Director, Dolly Pressley Byrd



Ask the Experts: About Black Maternal Health webinar

On Tuesday, September 17, 2024, ACNC held its first virtual event for members called "Ask the Experts: About Black Maternal Health."

Our panel of experts held an honest discussion about the unique challenges facing Black women during pregnancy, delivery and the postpartum period. The photo above shows Moderator Nerissa Price, M.D., ACNC's Behavioral Health Medical Director, along with panelists (clockwise) Toni Curtis, Founder and Director of Birthwise Doula Services; Dolly Pressley Byrd, CNM, PhD, Department of OB/GYN Interim Chair, and Medical Director of MAHEC OB/GYN Specialists in Asheville, North Carolina; and Angela Brawley Gantt, MD-MPH, WakeMed Physician Practices OB/GYN Medical Director.

ACNC is planning additional virtual outreach for members and providers in 2025. Read our monthly Provider Digest email for details of upcoming events. If you are not receiving our monthly email and would like to, please contact your Account Executive.

About the Black maternal health crisis:

- The early (or preterm) birth rate among Black women is 50% higher than the rate among women of all other races combined.¹
- Black women are 27% more likely than white women to have serious pregnancy complications.¹
- Black women are three times more likely than white women to die from a cause related to pregnancy.²



At our regional baby showers, we invite partners in the community to provide perinatal resources and education for families to support them in advocating for moms and babies' health.

¹ "Birthing While Black: Examining America's Black Maternal Health Crisis," March of Dimes, <https://www.marchofdimes.org/about/news/birthing-while-black-examining-americas-black-maternal-health-crisis>

² "Working Together to Reduce Black Maternal Mortality," Centers for Disease Control and Prevention, <https://www.cdc.gov/healthequity/features/maternal-mortality/index.html>

Regional baby showers celebrate moms and help achieve quality goals

ACNC hosted baby showers in each of the six Medicaid regions this year. Community partners and providers participated in these events to bring important health information to our members and visitors.

- 1 Improving birth outcomes
- 2 Encouraging member engagement in the Bright Start Care Management program. Find out more about Bright Start on page 17.
- 3 Encouraging members to receive prenatal and postpartum care
- 4 Offering opportunities to learn about child vaccinations/well-child visits
- 5 Increasing member and family use of Wellness & Opportunity Centers for ongoing education and support

Please encourage your patients to register for a baby shower in 2025 via the event calendar links on the [Wellness & Opportunity Centers webpage](#). Providers also are welcome to participate in our baby showers as presenters or to host an information table. ACNC members can get no-cost transportation to any of our sponsored events through our transportation provider, Modivcare.



Members and families attending baby showers in Greensboro and Charlotte pose for photos in our Queen chair. Moms and babies are the stars at these special events.



Lisa Tucker, Clinical Quality Performance Specialist (left); Denise Rivera Coladonato, Wellness & Opportunity Center Administrator; and Bethany Boggs, ACNC Care Management Oversight Coordinator (right), flank Paula Leonard, a local chef in the community, as they make fresh fruit Mocktails for the moms and kids attending the Charlotte baby shower.

Value-added benefits to support prenatal and postpartum care

ACNC has added two new value-added benefits for pregnant and new moms to support prenatal and postpartum care (PPC) measures and ensure healthy pregnancies and healthy babies. These benefits are offered at no cost to our members.

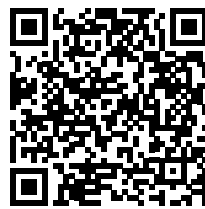
Prenatal visits: ACNC will send a free infant car seat to a member who has completed at least one prenatal visit in their first trimester. To earn this reward, providers will need to attest to the date of the visit and request a car seat using our [Let Us Know: Member Intervention Request form \(PDF\)](#), located on the ACNC website under [Provider Manuals, Policies and Forms](#). The fillable form must be completed and faxed to the Rapid Response and Outreach Team at **1-833-816-2262**. Once the form has been received, the car seat will be mailed to the member's address indicated on the form.

Postpartum visit: ACNC will send a box of diapers and a box of baby wipes to a member who has completed their postpartum visit within the recommended time frame (on or between 7 and 84 days after delivery). This reward will be generated once the claim is received for the postpartum visit. Items will be mailed to the member's address on record.

Please help us by encouraging your patients to be sure their address information is up to date with their local Department of Social Services, so that our records are as up to date as possible. Information can easily be updated electronically through E-PASS. Find out more [here](#). Please contact your [Account Executive](#) with questions.



Jazmin Bailey, a member of the ACNC health plan, won a car seat during the Greensboro baby shower.



Scan the QR code to visit our website for the most up-to-date information on benefits and services.

Uniting with local health departments to improve perinatal care for minority moms



By Amanda Lanning, Care Management Oversight Coordinator

ACNC Local Health Department Care Management Oversight Coordinators (CMOC) collaborate closely with our delegates at local health departments (LHDs) to reduce health disparities, especially among minority populations. The LHD is

delegated to provide care management services for ACNC's high-risk pregnant members and high-risk children through the Care Management for At Risk Children and the Care Management for High-Risk Pregnancy (CMARC/CMHRP) Programs. ACNC has a dedicated Care Management Oversight Coordinator in each Medicaid region in the state that is the liaison between the health plan and the care management programs within the health department.

This team helps ensure that our members are delegated appropriately to the health department, and that those members are receiving excellent services by monitoring the quality of care through biannual chart audits with each health department.

When any high-risk pregnancy is identified by ACNC, our Care Management Oversight team reaches out to the LHD with a direct referral to the CMHRP program. ACNC alerts the LHD specifically that a member has high-risk conditions, social determinants of health (SDOH) concerns and any language barriers.

CMHRP Care Managers at the health departments help link members with a local OB provider; meet members at their OB appointments; and provide education on local resources, ACNC value-added benefits, and the Healthy Opportunities Pilot (HOP) program.

The HOP program and other services are available to members to combat SDOH needs. CMHRP Care Managers can also help explain and reiterate education from the OB provider while in the member's home during a home visit, which is especially important members whose first language is not English. This cohesive relationship between ACNC and the LHD supports our goal of positive outcomes for pregnant people of color or people whose first language isn't English by ensuring that these members receive adequate and routine prenatal care. Receiving prenatal care during the pregnancy can help with early identification of pregnancy complications, which can help reduce adverse birth events and provide better health outcomes for the mom and baby.



While attending the NC Public Health Association (NCPHA) conference, Provider Network Account Executive Clarence Lawing got to meet many of our health department colleagues, including Melissa Hammonds, from Robeson County Health Department.

AmeriHealth Caritas North Carolina helps moms-to-be make healthy choices for themselves and their babies through our Bright Start program, which is available to all ACNC members.



The Bright Start program is based on prenatal care guidelines from the American College of Obstetricians and Gynecologists.

Follow these steps to get a patient connected to Bright Start:

1. The OB/GYN completes the Pregnancy Medical Home Risk Screening form. All high-risk conditions should be reported via the form to an ACNC Bright Start Care Manager **AND LHD.** (See page 98 of the Provider Manual.)

The Bright Start program helps support our members during their pregnancies. Each member enrolled in Bright Start will receive educational materials. Members can call our registered nurses at 1-833-475-2262 with any questions or concerns and to get access to the care they need during their pregnancies.

2. If the patient is high risk, AmeriHealth Caritas North Carolina contracts with each local health department in the region(s) in which we operate to provide care management services to high-risk pregnant members. This care management program offered by the LHD is known as CMHRP. If an individual lives in a county where the LHD does not provide these services, the member can still be enrolled in Bright Start.
3. Members cannot have CMHRP and Bright Start care management simultaneously. However, participants of both programs receive the same benefits from ACNC including any extra benefits offered for which the member may qualify.



During a recent baby shower at the Charlotte Wellness & Opportunity Center, pregnant members and their families enjoyed lunch and had an opportunity to meet with a Care Navigator to learn more about Medicaid Member Benefits.



Oh baby! One of the highlights of each shower is the chance for special portraits of moms and families.

Preventing fraud, waste and abuse

Health care fraud affects everybody by raising taxes; decreasing the quality of health care; and taking funds away from members, hospitals and practitioners who are attempting to provide legitimate and necessary services.

It is everyone's responsibility to be aware of and report fraud, waste and abuse. Providers can monitor the activities of their employees through compliance audits; record reviews; and ongoing fraud, waste and abuse training. Additionally, providers should be aware of and able to recognize member fraud and abuse, such as Medicaid ID card sharing. Medicaid ID card sharing can be stopped by checking the identification of the member who comes to the appointment versus the Medicaid ID card the member is provided with by the plan. If the information on a member's Medicaid ID does not match the name, birth date and other information on the state-issued member identification card, please report this to at least one of the necessary sources listed below. It is important to remember, members may also be the victim of identity theft.

According to the Centers for Medicare & Medicaid Services, "the Medicaid improper payment rate (comprised of reviews in 2021, 2022, and 2023) was 8.58%, or \$50.3 billion, a significant decrease from the 2022 reported rate of 15.62%.

"Of the 2023 Medicaid improper payments, 82% were the result of insufficient documentation. These payments typically involve situations where a state or provider missed an administrative step and do not necessarily indicate fraud or abuse."¹

Providers are encouraged to review both the **ACNC Claims and Billing Manual** and **Provider Manual** for proper administrative steps.

You can report suspected fraud and abuse in any of the following ways:

- Call the AmeriHealth Caritas toll-free Fraud, Waste and Abuse Hotline at **1-866-833-9718**, or send an email to: **FraudTip@amerihealthcaritas.com**
- Call the Medicaid Fraud, Waste and Program Abuse Tip Line at **1-877-DMA-TIP1 (1-877-362-8471)**.
- Call the State Auditor's Waste Line at **1-800-730-TIPS (1-800-730-8477)**.
- Call the U.S. Office of Inspector General's Fraud Line at **1-800-HHS-TIPS (1-800-447-8477)**.

¹ "Fiscal Year 2023 Improper Payments Fact Sheet," Centers for Medicare & Medicaid Services, November 2023, <https://www.cms.gov/newsroom/fact-sheets/fiscal-year-2023-improper-payments-fact-sheet>

ACNC hosts youth mental health first aid trainings

ACNC is proud to work with mental health professionals in our communities to offer not only member support programs, but also education for community members.

Both our Asheville and Greenville Wellness & Opportunity Centers hosted Youth Mental Health First Aid training sessions this year. Created by the National Council for Mental Wellbeing, the program is an early intervention public education program for adults who work with or raise adolescents (ages 12 – 18). It teaches participants strategies for supporting youth in crisis and non-crisis situations.

Youth Mental Health First Aid teaches participants how to identify, understand and respond to signs of mental health and substance use challenges among children and adolescents ages 12 – 18.

“Just as CPR helps you assist an individual having a heart attack, Mental Health First Aid (MHFA) teaches you how to assist and support others who may be experiencing a mental health or substance use challenge.”¹

In Asheville, we partnered with the YMCA of Western North Carolina. “What’s cool is the wide range of people this version of the program is designed to help. All the participants seem to come away more confident about the type of support they could offer someone in the future experiencing a mental health crisis,” said Courtney Wilson, Asheville Wellness & Opportunity Center Administrator.



Classes are being offered into 2025. For more information and to register visit the ACNC Wellness & Opportunity Centers webpage: <https://www.amerhealthcaritasnc.com/community/wellness-and-opportunity-centers.aspx>.



ACNC was pleased to provide the space for 10 community members who were teachers, parents and coaches.



Instructor Maria Suarez (pictured right) is also the Community Teen Director from the YMCA of Western North Carolina. She led a discussion with attendees about the non-verbal communication cues teens might exhibit if they are struggling with a mental health or substance use challenge.

¹ "Mental Health First Aid," National Council for Mental Wellbeing, <https://www.thenationalcouncil.org/our-work/mental-health-first-aid/>

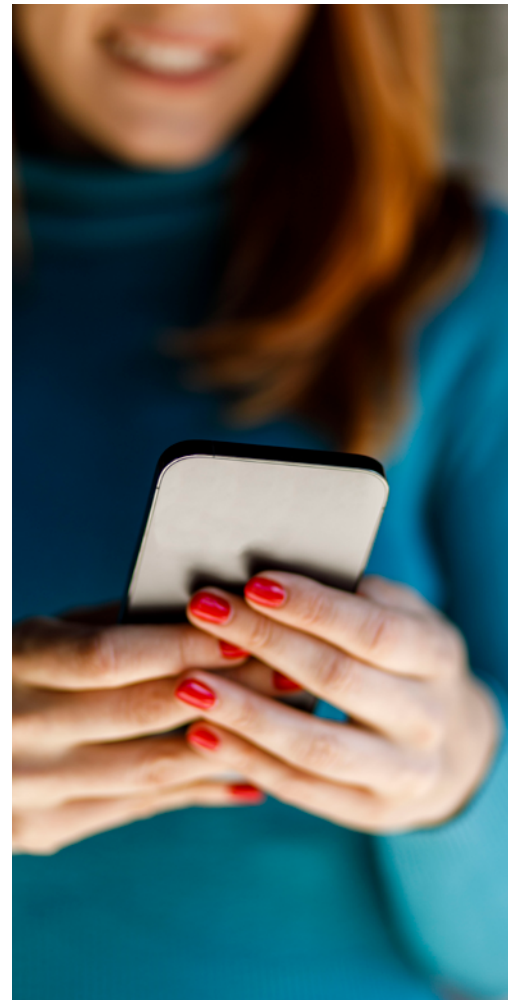
Post-Appointment Member Satisfaction Survey

ACNC works in collaboration with our providers to help ensure that our members receive comprehensive, quality, and culturally responsive care. One of the tools we use to evaluate the member care experience is our Post-Appointment Member Satisfaction Survey.

The five-question survey is sent randomly via text message to members following a provider visit. The questions are listed below, and responses are on a scale of “Very Dissatisfied to Very Satisfied” for questions 1 – 3, and “Less than 45 minutes” or “More than 45 minutes” for question four. Members can also respond with an emoji to questions 1 – 3, and the emoticon is then translated to a word response. Question 5 allows the member to provide ACNC with any additional comments they would like to share.

Post-Appointment Member Satisfaction Survey questions

1. How satisfied were you with how carefully the doctor/care provider listened to you?
2. How satisfied were you with how much respect the doctor/care provider showed for what you had to say?
3. Overall, how satisfied were you with the doctor/care provider?
4. How long did you have to wait from the time of your appointment until you were seen by the provider?
5. Did your doctor/care provider make eye contact with you?



Provider Scorecard available

Providers can view their member satisfaction ratings through a Post-Appointment Survey Provider Scorecard, available in the NaviNet provider portal. To access this feature, log into [NaviNet](#), and navigate to Clinical Reports Inquiry > Report Selection > Post Appointment Survey Provider Scorecard.

Member voices matter

Member advisory councils

Member Advisory Committee (MAC) quarterly meetings are a place for members to learn and give feedback about ACNC services and programs. We encourage honest, open dialogue about the member experience, including barriers to care, quality of care and other factors that might prevent members from getting and staying healthy. Participants can receive a \$50 gift card for attending in person or via Zoom. The in-person meetings include dinner and transportation support is also available.

ACNC has two different advisory committees:

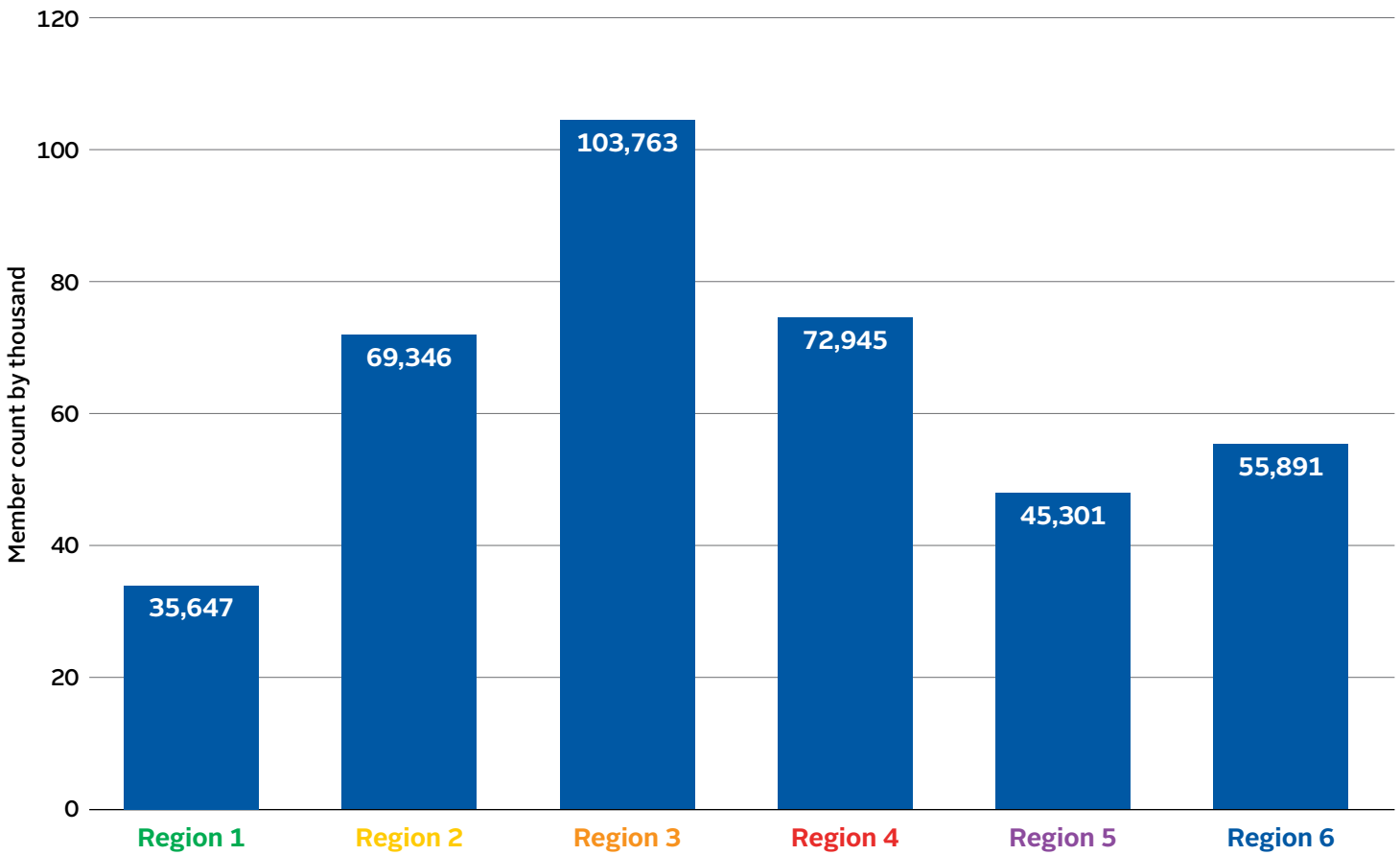
What	Member Advisory Committee	Long-Term Services and Supports Member Advisory Committee
Who	Led by our Director of Member Engagement. Medicaid beneficiaries or parents of Medicaid beneficiaries under 18 are invited to participate.	Led by our Manager of Integrated Care Management, Medicaid beneficiaries and parents of beneficiaries who are receiving LTSS services, including personal care services, home health (not short term), home infusion therapy, private duty nursing, hospice, and skilled nursing facility care.
When	Quarterly	Quarterly
Where	Virtually via Zoom and in-person at each of our five Wellness & Opportunity Center locations: Asheville, Charlotte, Greensboro, Fayetteville, and Greenville. Location information	Virtually via Zoom
Questions or to RSVP	Brenda Radford bradford@amerihealthcaritasnc.com	Shawna Sumerlin ssumerlin@amerihealthcaritasnc.com



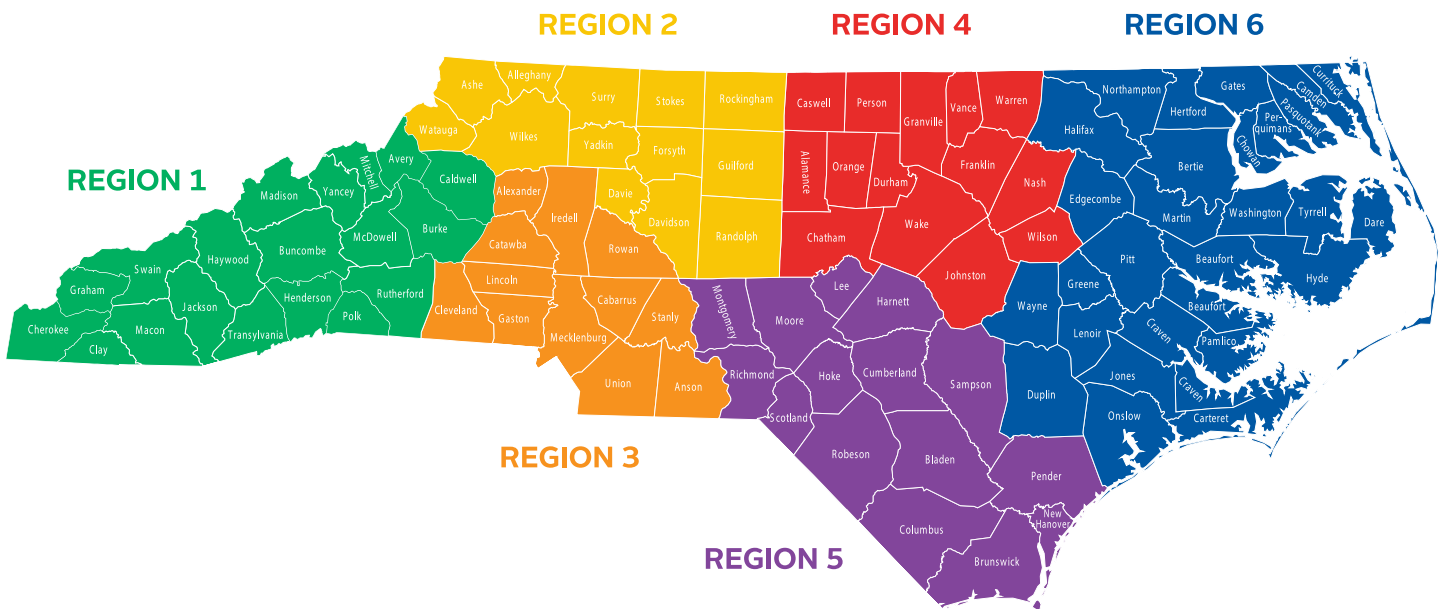
Member rights, responsibilities and privacy

As a reminder, ACNC, our network providers and other service providers may not discriminate against members based on race, color, national origin, age, disability, creed, religious affiliation, ancestry, sex, gender identity or expression, or sexual orientation or any other basis prohibited by law. Please review the Member Rights, Responsibilities and Privacy section on our website or found on page 50 of the AmeriHealth Caritas North Carolina Member Handbook.

ACNC membership by region



As of November 2024, ACNC has nearly 385,000 members across the state. Our largest member population is in Medicaid Region 3, the Charlotte metro area. ACNC has gained more than 90,000 adult members statewide through Medicaid expansion.



Wellness & Opportunity Centers

Region 1

Asheville Wellness & Opportunity Center
216 Asheland Avenue
Asheville, NC 28801

828-707-9057



Region 2

Greensboro Wellness & Opportunity Center
3018 West Gate City Blvd
Greensboro, NC 27403

336-510-3850



Region 3

Charlotte Wellness & Opportunity Center
3120 Wilkinson Blvd., D-1
Charlotte, NC 28208

704-315-3275



Region 4 and statewide

Mobile Wellness & Opportunity Center

919-980-2461



Region 5

Fayetteville Wellness & Opportunity Center
4101 Raeford Road, Suite 100
Fayetteville, NC 28304

910-500-1885



Region 6

Greenville Wellness & Opportunity Center
1876 West Arlington Blvd
Greenville, NC 27834

910-500-1885



**AmeriHealth Caritas North Carolina
Connections Editorial Board**

Heidi Chan

Market President

Julie Henry

Director Marketing and
Communications

Melissa Marshburn

Senior Provider Communications Specialist

Janelle Rettig

Copy Editor Senior
Creative Services and Brand

Sara Dalton

Senior Graphic Designer
Creative Services and Brand

Contact us:

ACNCProviderCommunications@amerihealthcaritasnc.com

Follow us  



www.amerihealthcaritasnc.com