



Thursday, June 02, 2022

AREA BOARD REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-6:00 p.m.

MEMBERS PRESENT: Glenn Adams, Cumberland County Commissioner, JD (via Zoom); Leigh Altman, Mecklenburg County Commissioner, JD; Heidi Carter, Durham County Commissioner, MPH, MS (via Zoom); Maria Cervania, Wake County Commissioner, MPH; Carol Council, MSPH (via Zoom); David Curro, BS (via Zoom); Dena Diorio, MPA; Vicki Evans (via Zoom); Amy Fowler, Orange County Commissioner, MD (via Zoom); Lodies Gloston, Vice-Chair, MA; Ted Godwin, Johnston County Commissioner (via Zoom); David Hancock, MBA, MPAff; D. Lee Jackson, BA (via Zoom); Lynne Nelson, Chair, BS; Pam Silberman, JD, DrPH (via Zoom); Samruddhi Thaker, PhD (via Zoom); and Anthony Trotman, MS

APPOINTED MEMBERS ABSENT: John Lesica, MD

GUEST(S) PRESENT: April Butcher (via Zoom); Dotty Foley (via Zoom); Yvonne French, NC DHHS/DMH (Department of Health and Human Services/Division of Mental Health, Intellectual Disability, and Substance Abuse Services) (via Zoom); Mary Hutchings, Wake County Finance Department (via Zoom); and P Pande (via Zoom)

ALLIANCE STAFF PRESENT: Brandon Alexander, Communications and Marketing Specialist II (via Zoom); Ashley Brady, Public Policy Volunteer (via Zoom); Joey Dorsett, Senior Vice-President/Chief Information Officer(via Zoom); Angel Felton-Edwards, Senior Vice-President/Population Health and Care Management t (via Zoom); Ashley Holmes, Integrated Health Care Consultant II (via Zoom); Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer (via Zoom); Kelly Goodfellow; Executive Vice-President/Chief Finance Officer; Sandhya Gopal, Senior Director of Government Relations; Veronica Ingram, Executive Assistant II; Joshua Knight, Director of Internal Audit (via Zoom); Mehul Mankad, Chief Medical Officer; Shawn Mazyck, Senior Vice-President/Provider Network (via Zoom); Jennifer Meade, Community Health and System of Care Manager (via Zoom); Ann Oshel, Senior Vice-President/Community Health and Well-Being(via Zoom); Sara Pacholke, Senior Vice-President/Financial Operations; Victoria Palumbo; Financial Analyst (via Zoom); Brian Perkins, Senior Vice-President/Strategy and Government Relations; Monica Portugal, Executive Vice-President/Chief Risk and Compliance Officer; Robert Robinson, CEO; Paige Rosemond, Director of Foster Care Support (via Zoom); Sean Schreiber, Executive Vice-President/Chief Operating Officer; Tammy Thomas, Senior Vice-President/Business Evolution; Sara Wilson, Chief of Staff; Carol Wolff, General Counsel; and Ginger Yarbrough, QM Director (acting) (via Zoom)

1. **CALL TO ORDER:** Board Chair Lynne Nelson called the meeting to order at 4:03 p.m.

AGENDA ITEMS:	DISCUSSION:
2. Agenda Adjustments	There were no adjustments to the agenda.
3. Public Comment	There were no public comments.
4. Chair's Report	Chair Nelson reported the following: <ul style="list-style-type: none"> • A second June meeting may be needed; it is tentatively scheduled for June 28 from 8:00-8:30 am. Staff will confirm if the meeting is needed; if it is, it will be held virtually and may require supermajority approval. • Several items on today's agenda require supermajority approval as stated in the by-laws: budget and budget amendment will be covered under item 7B: Finance Committee Report.
5. CEO's Report	Mr. Robinson reported the following: <ul style="list-style-type: none"> • He introduced new staff: Jameelah Melton, Deputy CMO; Sandhya Gopal, Senior Director of Government Relations; and Ashley Brady, Public Policy Volunteer • Next Week's i2i Conference (Monday and Tuesday in Raleigh): Mr. Robinson reminded board members of the upcoming conference on June 6 and 7, 2022 • CFSP (Child and Family Specialty Plan) Update: He shared that House Bill 144 was reviewed at today's Senate Health Committee meeting. The bill included a start date of December 2023 instead of the LME/MCO and county-supported start date of December 2024.

AGENDA ITEMS:	DISCUSSION:
<p>6. Consent Agenda</p>	<p>A. Draft Minutes from May 5, 2022, Board Meeting – page 4 B. Executive Committee Report – page 9 C. Quality Management Committee Report – page 11 D. Draft FY23 Calendar of Board Meetings – page 14 E. HR FY23 Classification and Grade Plan – page 16</p> <p>The consent agenda was sent as part of the Board packet; it is attached to and made part of these minutes. There were no comments or discussion about the consent agenda.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Jackson to adopt the consent agenda; motion seconded by Ms. Diorio. Motion passed unanimously.</p>
<p>7. Committee Reports</p>	<p>A. Finance Committee – page 62 The Finance Committee’s function is to review financial statements and recommend policies/practices on fiscal matters to the Board, including reviewing/recommending budgets, audit reports, and financial statements. This month’s report includes draft minutes from the previous meeting. It also includes a public hearing on the FY23 budget (per NC General Statute 159-12 (b)), a FY22 budget amendment and FY23 budget. Per the by-laws, the budget and budget amendment require supermajority approval.</p> <p>David Hancock, Committee Chair, presented the report. The Finance Committee report is attached to and made part of these minutes.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Hancock to approve the CEO to enter into a contract with Milliman, Inc. for financial consulting services for an amount not to exceed \$1,500,000; motion seconded by Commissioner Cervania. Motion passed unanimously.</p> <p>Sara Pacholke, Senior Vice-President/Financial Operations, presented an update on the FY22 budget and the FY23 budget. The FY22 budget included funding from county realignments and allocation letters.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Hancock to approve the FY22 Budget Amendment 2 to increase the budget by \$148,830,211 bringing the total FY22 Budget to \$1,072,279,701; motion seconded by Chair Nelson. Motion passed unanimously.</p> <p>Ms. Pacholke continued the presentation on the FY23 budget. Chair Nelson opened the public hearing for the FY23 budget.</p> <p><u>BOARD ACTION</u> A motion was made by Ms. Diorio to close the public hearing on the FY23 budget; motion seconded by Dr. Silberman. Motion passed unanimously.</p> <p>A motion was made by Mr. Hancock to approve the FY23 Budget for \$1,370,306,955; motion seconded by Vice-Chair Gloston. Motion passed unanimously.</p>

Thursday, June 02, 2022

AREA BOARD REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-6:00 p.m.

AGENDA ITEMS:	DISCUSSION:
	<p>B. Consumer and Family Advisory Committee – page 27 The Alliance Consumer and Family Advisory Committee, or CFAC, is made up of consumers and/or family members that live in Cumberland, Durham, Johnston, Wake, Orange and Mecklenburg counties who receive mental health, intellectual/developmental disabilities and substance use/addiction services. This report includes draft minutes and documents from the steering committee and the county/sub-committee meetings.</p> <p>Dave Curro, CFAC representative to Alliance’s Board, presented the report on behalf of CFAC Chair, Jason Phipps. He mentioned that the steering committee meets monthly, and this month’s meeting occurs after the Alliance Board meeting. He mentioned review of the allocation slots, which was presented by Sara Wilson, Chief of Staff. Robert Robinson, CEO, reviewed Medicaid Direct services and the proposed Children and Family Specialty Plan. Mr. Curro noted that a CFAC retreat is planned for the fall and will include representation from all counties within Alliance’s catchment area. CFAC FY23 Officers will be elected June 6, 2023. The CFAC report is attached to and made part of these minutes.</p> <p>BOARD ACTION The Board received the report.</p>
8. Closed Session(s)	<p>BOARD ACTION A motion was made by Commissioner Altman to enter closed session pursuant to NC General Statute 143-318.11 (a) (1) and (a) (6) to prevent the disclosure of information that is confidential and not a public record under NCGS 122C-126.1 and to consider the qualifications, competence, and performance of an employee; motion seconded by Vice-Chair Gloston. Motion passed unanimously.</p>
9. Reconvene Open Session	<p>The Board returned to open session.</p>
10. Election of FY23 (Fiscal Year 2022-2023) Board Officers – page 104	<p>As stated in Article II, Section D of the by-laws, at each final regular Board meeting of the fiscal year, the officers of the Board of Directors shall be elected for a one-year term to begin July 1. The officers of the Board of Directors include chairperson and vice-chairperson. Nominations were presented.</p> <p>BOARD ACTION A motion was made by Ms. Council to elect Lynne Nelson as FY23 Board Chair; motion seconded by Mr. Hancock. Motion passed unanimously.</p> <p>A motion was made by Vice-Chair Gloston to elect David Hancock as FY23 Board Vice-Chair; motion seconded by Ms. Diorio. Motion passed unanimously.</p>
11. Special Update/ Presentation: Service Expansion Update, Part One – page 105	<p>Per Chair Nelson, this topic was postponed.</p>
12. Adjournment	<p>All business was completed; the meeting adjourned at 6:23 p.m.</p>

Next Board Meeting
Thursday, August 04, 2022
4:00 – 6:00 pm

Minutes approved by Board on [Click or tap to enter a date..](#)



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Draft Minutes from the May 5, 2022, Board Meeting

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: The Alliance Health (Alliance) Board of Directors (Board) per North Carolina General Statute 122C is responsible for comprehensive planning, budgeting, implementing, and monitoring of community based mental health, developmental disabilities and substance use/addiction services to meet the needs of individuals in Alliance's catchment area. The minutes from the previous meeting are attached and submitted for review and approval by the Board.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): N/A

REQUEST FOR AREA BOARD ACTION: Approve the draft minutes from the May 5, 2022, meeting.

CEO RECOMMENDATION: Approve the draft minutes from the May 5, 2022, meeting.

RESOURCE PERSON(S): Lynne Nelson, Board Chair; Robert Robinson, CEO

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Thursday, May 05, 2022

AREA BOARD REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-6:00 p.m.

MEMBERS PRESENT: Glenn Adams, Cumberland County Commissioner, JD; Leigh Altman, Mecklenburg County Commissioner, JD (via Zoom); Heidi Carter, Durham County Commissioner, MPH, MS (via Zoom); Maria Cervania, Wake County Commissioner, MPH (via Zoom); Carol Council, MSPH; David Curro, BS; Vicki Evans (via Zoom)-entered at 5:13 p.m.; Amy Fowler, Orange County Commissioner, MD (via Zoom); Lodies Gloston, Vice-Chair, MA; Ted Godwin, Johnston County Commissioner (via Zoom); David Hancock, MBA, MPAff; D. Lee Jackson, BA (via Zoom); John Lesica, MD (via Zoom); Lynne Nelson, Chair, BS; Pam Silberman, JD, DrPH (via Zoom); Samruddhi Thaker, PhD (via Zoom); and Anthony Trotman, MS (via Zoom)

APPOINTED MEMBERS ABSENT: Dena Diorio, MPA

GUEST(S) PRESENT: Mary Hutchings, Wake County Finance Department (via Zoom); Denise Foreman, Wake County Manager’s Office (via Zoom); Yvonne French, NC DHHS/DMH (Department of Health and Human Services/Division of Mental Health, Intellectual Disability, and Substance Abuse Services) (via Zoom); and Alex Vanderford (via Zoom)

ALLIANCE STAFF PRESENT: Brandon Alexander, Communications and Marketing Specialist II (via Zoom); Scott Bailey, Integrated Health Consultant Supervisor (via Zoom); Joey Dorsett, Senior Vice-President/Chief Information Officer (via Zoom); Angel Felton-Edwards, Senior Vice-President/Population Health and Care Management (via Zoom); Doug Fuller, Senior Director of Communications (via Zoom); Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Veronica Ingram, Executive Assistant II; Mehul Mankad, Chief Medical Officer; Shawn Mazyck, Senior Vice-President/Provider Network (via Zoom); Sara Pacholke, Senior Vice-President/Financial Operations; Brian Perkins, Senior Vice-President/Strategy and Government Relations; Monica Portugal, Chief Compliance Officer; Robert Robinson, CEO; Paige Rosemond, Director of Foster Care Support (via Zoom); Essence Scott, Community Health Worker (via Zoom); Sean Schreiber, Executive Vice-President/Chief Operating Officer; Ashley Snyder, Senior Director of Accounting and Finance (via Zoom); Tammy Thomas, Senior Vice-President/Business Evolution; Sara Wilson, Chief of Staff; Carol Wolff, General Counsel (via Zoom); Ginger Yarbrough, interim Quality Management Director (via Zoom)

1. **CALL TO ORDER:** Board Chair, Lynne Nelson called the meeting to order at 4:04 p.m.

AGENDA ITEMS:	DISCUSSION:
2. Agenda Adjustments	Chair Nelson shared one adjustment: an update on the IDD Peer Support Pilot; the update will be presented after closed session. There were no other adjustments to the agenda. <u>BOARD ACTION</u> A motion was made by Vice-Chair Gloston to approve the agenda adjustment; motion seconded by Commissioner Adams. Motion passed unanimously.
3. Public Comment	There were no public comments.
4. Chair’s Report	Chair Nelson shared that the June meeting has three annual agenda items; traditionally this meeting has run longer than the standard two hours. She encouraged members to plan for a longer meeting and shared an overview of the process to approve the next fiscal year’s budget and elect board officers.
5. CEO’s Report	Mr. Robinson shared the following: <ul style="list-style-type: none"> • May is mental health awareness month.

AREA BOARD REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-6:00 p.m.

AGENDA ITEMS:	DISCUSSION:
	<ul style="list-style-type: none"> Starting May 10 Alliance will launch the <i>Re-Think and Re-Tool Healthcare in the New Era</i> podcast. The podcast is available via Apple Podcasts, Google Podcasts, and the Stitcher app; it can also be viewed at AllianceHealthPlan.org/podcast or Alliance Health - YouTube. I2I CONFERENCE: If board members are interested in attending this conference, they may contact Ms. Ingram for more information and to register. EQR (external quality review) SCORE: the agency's EQR score is 100%; he congratulated staff for their efforts to achieve this score.
<p>6. Consent Agenda</p>	<p>A. Draft Minutes from April 7, 2022, Board Meeting – page 4 B. Client Rights/Human Rights Committee Report – page 8 C. Executive Committee Report – page 44 D. Network Development and Services Committee Report – page 46</p> <p>The consent agenda was sent as part of the Board packet; it is attached to and made part of these minutes. There were no comments or discussion about the consent agenda.</p> <p>BOARD ACTION A motion was made by Commissioner Altman to approve the minutes; motion seconded by Dr. Lesica. Motion passed unanimously.</p>
<p>7. Committee Reports</p>	<p>A. Consumer and Family Advisory Committee – page 49 The Alliance Consumer and Family Advisory Committee (CFAC) is composed of consumers and/or family members from Alliance's catchment area who receive mental health, intellectual/developmental disabilities or substance use/addiction services. This month's report included draft minutes from the steering and county CFAC meetings.</p> <p>Dave Curro presented the report on behalf of Jason Phipps, CFAC Chair. Mr. Curro reviewed recent meetings including an update on the foster care program, Medicaid Transformation, and a recent community recovery event. The CFAC report is attached to and made part of these minutes.</p> <p>BOARD ACTION The Board received the report.</p> <p>B. Finance Committee – page 78 The Finance Committee's function is to review financial statements and recommend policies/practices on fiscal matters to the Board, including reviewing/recommending budgets, audit reports, and financial statements. This Committee also reviews and recommends policies and procedures for managing contracts and other purchase of service arrangements. This month's report included documents and draft minutes from the previous meeting.</p> <p>David Hancock, Committee Chair, presented the report. Mr. Hancock reviewed highlights from the recent financial statement; he also reviewed a contract reviewed by the committee and recommended to the Board for approval. The Finance Committee report is attached to and made part of these minutes.</p>

AGENDA ITEMS:	DISCUSSION:
	<p>BOARD ACTION A motion was made by Mr. Hancock to approve the increased amount of SQL and Windows server licenses related to increased (number of) staff for an amount not to exceed \$676,000; seconded by Commissioner Adams. Motion passed unanimously.</p> <p>Sara Pacholke, Senior Vice-President/Financial Operations, provided an update on the FY22 (2021-2022) budget and a detailed overview of the recommended FY23 (2022-2023) budget. The FY22 budget update included the financial summary and fund balance as of March 31, 2022. The FY23 recommended budget presentation included a reminder of the budget timeline, the budget process by funding source, FY23 total recommended budget, Medicaid, state, and local services summaries, and next steps. This information was presented to the Finance Committee before it was presented to the Board. The presentation is saved as part of the board's files.</p> <p>BOARD ACTION The Board received the report.</p> <p>C. Audit and Compliance Committee – page 113 The purpose of the Audit and Compliance Committee is to put forth a meaningful effort to review the adequacy of existing compliance systems and functions and to assist the Board in fulfilling its oversight responsibilities. This Committee also develops, reviews, and revises the By-Laws and Policies that govern Alliance. This report included draft minutes from the previous meeting.</p> <p>Dave Curro, Committee Chair, presented the report. Monica Portugal, Executive Vice-President/Chief Risk and Compliance Officer, reviewed the Committee's recommendation: that the Board approves the updated Records Retention and Destruction Schedule. Per State policy, the Board of Directors must adopt the schedule before action can be taken by the organization. The report is attached to and made part of these minutes.</p> <p>BOARD ACTION A motion was made by Vice-Chair Gloston to adopt the updated Records Retention and Destruction schedule; motion seconded by Mr. Hancock. Motion passed unanimously.</p>
8. Closed Session(s)	<p>BOARD ACTION A motion was made by Commissioner Fowler to enter closed session pursuant to NC General Statute 143-318.11 (a) (1) and (a) (6) to prevent the disclosure of information that is confidential and not a public record under NCGS 122C-126.1 and to consider the qualifications, competence, and performance of an employee; motion seconded by Commissioner Adams. Motion passed unanimously.</p>
9. Reconvene Open Session	<p>The Board returned to open session.</p>
10. Special Update/ Presentation: IDD Peer Support Pilot – page 116	<p>Alliance Health partnered with Optum, National Association Council on Developmental Disabilities (NACDD), and North Carolina Council on Developmental Disabilities (NCCDD) to develop and pilot a peer supports training program for individuals who live independently with the use of Home and Community-Based Services (HCBS).</p> <p>Sara Wilson, Chief of Staff, presented the update. She noted progress on the pilot program and peer support specialist curriculum. This pilot was to develop a new training curriculum for IDD (intellectual/developmental disabilities), which is based on a similar training for</p>

Thursday, May 05, 2022

AREA BOARD REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-6:00 p.m.

AGENDA ITEMS:	DISCUSSION:
	<p>MH/SUD (mental health/substance use disorder) peer supports. Ms. Wilson noted the original modality for this training was changed from a classroom setting to a virtual one.</p> <p>Ms. Wilson introduced Scott Bailey and Essence Scott. Mr. Bailey reviewed Essence Scott's position and orientation to Alliance. Ms. Scott expressed gratitude for the opportunity, shared lessons learned from the training, and that she is looking forward to building her caseload.</p> <p><u>BOARD ACTION</u> The Board accepted the update.</p>
11. Adjournment	All business was completed; the meeting adjourned at 5:41 p.m.

Next Board Meeting
Thursday, June 02, 2022
4:00 – 6:00 pm

Minutes approved by Board on Click or tap to enter a date..



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Executive Committee Report

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: The Executive Committee sets the agenda for Board meetings and acts in lieu of the Board between meetings. The Executive Committee may act on matters that are time-sensitive between regularly scheduled Board meetings and fulfills other duties as set forth in the by-laws or as otherwise directed by the Board of Directors. The Executive Committees' actions are reported to the Board at the next scheduled meeting.

This report includes draft minutes from the previous meeting.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): N/A

REQUEST FOR AREA BOARD ACTION: Receive the report.

CEO RECOMMENDATION: Receive the report.

RESOURCE PERSON(S): Lynne Nelson, Board Chair; Robert Robinson, CEO

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Monday, May 16, 2022

BOARD EXECUTIVE COMMITTEE - REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-6:00 p.m.

APPOINTED MEMBERS PRESENT: David Curro, BS (Audit and Compliance Committee Chair) (via Zoom); Lodies Gloston, MA (Board Vice-Chair, Network Development and Services Committee Chair, Client Rights/Human Rights Committee Chair); Lynne Nelson, BS (Board Chair); and Pam Silberman, JD, DrPH (Quality Management Committee Chair) (via Zoom)

APPOINTED MEMBERS ABSENT: David Hancock, MBA, PFAff (Finance Committee Chair)

BOARD MEMBERS PRESENT: None

GUEST(S): None

STAFF PRESENT: Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Veronica Ingram, Executive Assistant II; Brian Perkins, Senior Vice-President/Strategy and Government Relations (via Zoom); Robert Robinson, CEO; Sara Wilson, Chief of Staff; and Carol Wolff, General Counsel (via Zoom)

- 1. WELCOME AND INTRODUCTIONS** – the meeting was called to order at 4:04 p.m.
- 2. REVIEW OF THE MINUTES** – The Committee reviewed minutes from the April 18, 2022, meeting; a motion was made by Vice-Chair Gloston to approve the minutes. Motion passed unanimously.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Closed Session	COMMITTEE ACTION: A motion was made by Dr. Silberman to enter closed session pursuant to NC General Statute 143-318.11 (a) (6) to consider the qualifications, competence, and performance of an employee. Motion seconded by Mr. Curro. Motion passed unanimously.	N/A	N/A
4. Reconvene Open Session	Committee returned to open session.	N/A	N/A
5. Draft FY23 Board/ Executive Committee Calendar	Committee reviewed the FY23 draft calendar, noting recommended changes in January and June due to company holidays; in those months the committee will meet on the second Monday instead of the third Monday.	N/A	N/A
6. Agenda for June Board Meeting	Committee viewed the draft agenda.	Ms. Ingram will forward the agenda to staff.	5/17/22

- 7. ADJOURNMENT:** the meeting adjourned at 5:28 p.m.; the next meeting will be December 20, 2021, at 4:00 p.m.

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Quality Management Committee Report

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: The Quality Management (QM) Committee serves as the Board's monitoring and evaluation committee charged with the review of statistical data and provider monitoring reports. The goal of the committee is to ensure quality and effectiveness of services and to identify and address opportunities to improve LME/MCO operations and local service system with input from consumers, providers, family members, and other stakeholders.

This report includes draft minutes from the previous meeting.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): N/A

REQUEST FOR AREA BOARD ACTION: Receive the report.

CEO RECOMMENDATION: Receive the report.

RESOURCE PERSON(S): Pam Silberman, Committee Chair; Ginger Yarbrough, Acting Director of QM/NCQA Accreditation Manager

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Thursday, May 05, 2022

BOARD QUALITY MANAGEMENT COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 1:00-2:30 p.m.

This meeting was held virtually, via Zoom

APPOINTED MEMBERS PRESENT: David Curro, BS (Board member); Marie Dodson (CFAC), Pam Silberman, JD, DrPH (Board member; Committee Chair)
 Israel Pattison (CFAC); Carol Council (Board Member); Lodies Gloston (Board Member); Maria Cervania, (Wake County Commissioner)

APPOINTED, NON-VOTING MEMBERS PRESENT: Diane Murphy, (Provider, IDD) Dava Muserallo, (Provider MH/SUD)

BOARD MEMBERS PRESENT:

GUEST(S) PRESENT: Mary Hutchings; Yvonne French (LME Liaison); Pamela Wade

STAFF PRESENT: Mehul Mankad, Chief Medical Officer; Ginger Yarbrough, Acting Director Quality Management and NCQA Accreditation Manager; Diane Fening, Executive Assistant I; Tia Grant, Quality Improvement Manager; Schuyler Moreno, QM Data Manager; Laini Jarrett, Quality Review Coordinator II; Nadiya Kaesemeyer, Associate Medical Director; Carlyle Johnson, Director of Provider Network Strategies and Initiatives; Aimee Izawa, Adult Services Program Manager

1. WELCOME AND INTRODUCTIONS – The meeting was called to order at 1:00 pm

2. REVIEW OF THE MINUTES –The minutes from the March 3, 2022 meeting were reviewed. Lodies Gloston moved to approve the minutes and Carol Council seconded. The motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
<p>OLD BUSINESS</p>	<p>MOUD (formerly known as MAT) Presentation - Carlyle Johnson Carlyle presented a PowerPoint on opioid treatment, challenges, Tailored Plan opportunities, and opioid settlement funding.</p> <p>QIP Measure Reporting – Tia Grant</p> <ul style="list-style-type: none"> As requested, the charts now have rolling averages Value based incentives are underway for Holly Hill TCL PCP Visits (TCL people that have seen their primary care physician within 12 months)-there have been challenges with getting claims information, especially with the dually eligible and uninsured that are in this cohort. The Project Advisory Team recommended changing the measure slightly to exclude those people and focus on Medicaid population. We are changing the QIP to continue measuring the percentage of TCL individuals that have received a PCP visit within 12 months for Medicaid only. A motion was made to discontinue looking at it for Medicare and uninsured individuals as part of the QIP. Alliance is still looking at the data, but it will not be a part of our QIP. <p>Marie moved to approve, it was seconded by Israel, and the motion passed.</p>	<p><i>MOUD-Medications for Opioid Use Disorder</i></p> <p><i>MAT – Medication-Assisted Treatment</i></p> <ul style="list-style-type: none"> Pam will let Rob Robinson and Lynn Nelson know that this committee recommended that Carlyle give his MOUD presentation to the board. Carlyle will reach out to Marie about presenting the MOUD information in Johnston County. 	<ul style="list-style-type: none">

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Thursday, May 05, 2022

BOARD QUALITY MANAGEMENT COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 1:00-2:30 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<p>EQR Update– Ginger Yarbrough – We received the final report for EQR. This was an abbreviated review because of Covid. Our result was a 100% score and no corrective action.</p> <p>Performance Dashboard – Ginger Yarbrough We have 4 areas that were not met, 2 of which are 7 day follow ups. They are on a QIP. One is the percentage of readmits assigned to care management and one was the proportion of new waiver beneficiaries who are receiving services according to their ISP within 45 days of ISP approval. We have one at risk which is the Medicaid percent claims processed within 30 days.</p>	<ul style="list-style-type: none"> Dr. Mankad will check with Carlyle on the whether the number of people with SUD that are on MOUD is 2%. <p><i>TCL-Transitions to Community Living</i> <i>QIP-Quality Improvement Plan</i> <i>EQR – external quality review</i> <i>ISP – Individual Service Plan</i></p>	
<p>3. NEW BUSINESS</p>	<p>Perception of Care Survey – Schuyler Moreno We were hoping to have the State’s summary by now, but they are still working on it. Schuyler cannot compare Alliance to rest of the State yet. We received results of Echo and the provider satisfaction surveys. If we have them all by the next meeting, she will present them.</p> <p>Topics for the next meeting on June 2:</p> <ul style="list-style-type: none"> TP QAPI & QMIP (Quality Assessment Performance Improvement Plan & Quality Management and Improvement Program) Annual re-eval of current QIPs and new TP PIPs TP go-live preparations State quality strategy overview Health equity presentation Any updates from Carlyle’s presentation. 	<p><i>QAPI-quality assurance and performance improvement plan</i></p> <p><i>QMIP-quality management and improvement program</i></p>	

5. ADJOURNMENT: the meeting adjourned at 2:20 pm; the next meeting will be June 2, 2022, at 1:00.

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Draft FY23 (2022-2023) Calendar of Board Meetings

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: As stated in the Board By-laws, regular meetings of the Board shall be held at least six times each year at a location and time designated by the Board. All meetings of the Board shall be conducted in accordance with provisions in the NC Open Meetings Law. The Board currently holds its regularly scheduled meetings on the first Thursday of each month except for January and July.

The matter placed before the Board is to confirm the upcoming meeting calendar. This includes the annual budget retreat scheduled for March 20, 2023, and a potential second meeting at the end of the fiscal year: June 29, 2023. Staff will confirm if a second June meeting is needed. As public health guidelines permit and adequate space is available, locations may be updated to include meetings at alternate locations within Alliance's catchment area.

This calendar does not include the meeting schedule for Board Committees; those are approved by the respective committees. The proper notice of all Board and Board Committee meetings will be published according to NC Open Meetings Law.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): Review and approve FY23 calendar.

REQUEST FOR AREA BOARD ACTION: Approve the proposal.

CEO RECOMMENDATION: Approve the proposal.

RESOURCE PERSON(S): Robert Robinson, CEO

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FY23 (July 1, 2022-June 30, 2023) Calendar of Board Meetings

DATE	TIME	LOCATION
Thursday, August 4, 2022	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, September 1, 2022	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, October 6, 2022	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, November 3, 2022	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, December 1, 2022	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, February 2, 2023	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, March 2, 2023	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Monday, March 20, 2023 (Annual Budget Retreat)	1:00-3:30 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, April 6, 2023	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, May 4, 2023	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, June 1, 2023	4:00-6:00 p.m.	5200 West Paramount Parkway, Morrisville, NC 27560
Thursday, June 29, 2023 (Potential second June meeting)	8:00-8:00 am	5200 West Paramount Parkway, Morrisville, NC 27560



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: HR FY23 Classification and Grade Plan

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: Annually in July, Alliance is required to report its classification and grade plan to the North Carolina Office of State Human Resources (OSHR). This report requires that the Alliance Board review and approve this Annual Plan.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): FY23 Classification and Grade Schedule

REQUEST FOR AREA BOARD ACTION: Approve the report.

CEO RECOMMENDATION: Approve the report.

RESOURCE PERSON(S): Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer

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Classification and Grade Schedule FY23

Job Code	JOB TITLE	Class Code	CLASSIFICATION TITLE	Salary Grade	Annual					Hourly				
					Min	25th Percentile	Mid	75th Percentile	Max	Min	25th Percentile	Mid	75th Percentile	Max
ACC00001	Access Clinician	C00149	Access Clinician	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
ACC00002	Access Coordinator	C00150	Access Coordinator	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
FIN00001	Accountant I	C00148	Accountant I	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
FIN00013	Accountant I-Grants	C00148	Accountant I	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
FIN00002	Accountant II	C00151	Accountant II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
FIN00012	Accountant II-Grants	C00151	Accountant II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
FIN00014	Accountant I-Payroll	C00148	Accountant I	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
FIN00004	Accounting Technician	C00050	Accounting Technician	26	34,297	40,483	46,669	52,855	59,041	16.4889	19.4630	22.4370	25.4111	28.3852
FIN00006	Accounts Payable Specialist	C00112	Accounting Specialist	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
QM00001	Accreditation Manager	C00152	Accreditation Manager	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
	Administrative Assistant I	C00010	Administrative Assistant I	25	32,648	38,537	44,426	50,314	56,203	15.6962	18.5273	21.3584	24.1896	27.0207
	Administrative Assistant II	C00088	Administrative Assistant II	27	36,029	42,527	49,026	55,524	62,023	17.3216	20.4459	23.5701	26.6944	29.8187
	Administrative Assistant III	C00009	Administrative Assistant III	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
UM00002	Administrative Clinical Support Specialist I	C00081	Administrative Clinic Support Specialist I	27	36,029	42,527	49,026	55,524	62,023	17.3216	20.4459	23.5701	26.6944	29.8187
IT000031	Application Database Developer	C00154	Application Database Developer	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
IT00002	Application/Web Developer I	C00155	Application/Web Developer I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
IT00003	Applications Configuration Specialist	C00156	Applications Configuration Specialist	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
IT00004	Applications System Analyst	C00157	Applications System Analyst	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
ADM00001	Area Director/Chief Executive Officer	C00001	CEO	CEO	208,400	250,050	291,700	333,400	375,100	100.1923	120.2163	140.2404	160.2885	180.3365
LEG00001	Assistant General Counsel	C00231	Assistant General Counsel	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
MED00001	Associate Medical Director	C00158	Associate Medical Director	59	174,311	205,751	237,191	268,632	300,072	83.8033	98.9188	114.0343	129.1498	144.2653
HUM00009	Benefits Specialist	C00249	Human Resources Business Partner	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
IT00005	BI Report Developer	C00160	BI Report Developer	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
	Business Analyst	C00124	Business Analyst	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
	Capitation Analyst		Capitation Analyst	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
CM00061	Care Management Dept. of Social Services Liaison	C00061	Care Management Community Liaison	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
CM00059	Care Management Learning & Development Specialist II	C00208	Organizational Development & Learning Specialist II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CM00043	Care Manager I	C00254	Care Manager I	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
CM00044	Care Manager II	C00255	Care Manager II	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
CM00048	Care Worker	C00256	Care Worker	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477

Classification and Grade Schedule FY23

CMP00019	Chief Information Security Officer	C00270	Chief Information Security Officer	53	129,703	153,097	176,491	199,885	223,279	62.3570	73.6042	84.8515	96.0987	107.3459
ADM00007	Chief Medical Officer	C00232	Chief Medical Officer	68	271,575	320,558	369,542	418,525	467,509	130.5647	154.1145	177.6643	201.2140	224.7638
ADM00012	Chief of Staff	C00251	Chief of Staff	53	129,703	153,097	176,491	199,885	223,279	62.3570	73.6042	84.8515	96.0987	107.3459
CMP00021	Claims Audit Nurse	C00275	Claims Audit Nurse	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
CMP00008	Claims Auditor	C00161	Claims Auditor	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
BUS00007	Claims Research Analyst I	C00162	Claims Research Analyst I	28	37,848	44,675	51,502	58,328	65,155	18.1963	21.4784	24.7604	28.0425	31.3245
BUS00008	Claims Research Analyst II	C00163	Claims Research Analyst II	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
BUS00009	Claims Research Analyst III	C00164	Claims Research Analyst III	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
BUS00010	Claims Research Analyst IV	C00165	Claims Research Analyst IV	31	43,877	51,791	59,705	67,619	75,533	21.0946	24.8994	28.7042	32.5090	36.3138
HUM00014	Classification & Compensation Specialist	C00249	Human Resources Business Partner	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CLI00008	Clinical Business Systems Analyst	C00147	Clinical Business Systems Analyst	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
NET00005	Clinical Service Evaluator I	C00070	Social Research Associate I	31	43,877	51,791	59,705	67,619	75,533	21.0946	24.8994	28.7042	32.5090	36.3138
NET00003	Clinical Service Evaluator II	C00073	Social Research Associate II	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
COM00001	Communications and Marketing Specialist I	C00228	Communications and Marketing Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
COM00002	Communications and Marketing Specialist II	C00229	Communications and Marketing Specialist II	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
CH00007	Community Education Specialist	C00041	Community Relations Specialist	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CH00035	Community Engagement Specialist	CH00041	Community Relations Specialist	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CM00054	Community Health Worker I - IDD Peer Support	C00266	Community Health Worker I	26	34,297	40,483	46,669	52,855	59,041	16.4889	19.4630	22.4370	25.4111	28.3852
CM00046	Community Health Worker II	C00257	Community Health Worker II	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
CM00047	Community Health Worker III	C00258	Community Health Worker III	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
CH00030	Community Inclusion Coordinator	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CH00031	Community Inclusion Planning Specialist	C00041	Community Relations Specialist II	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
CH00009	Community Liaison	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CH00005	Community Support Coordinator	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CMP00001	Compliance Analyst I (Policy)	C00113	Compliance Analyst I	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
CMP00009	Compliance Analyst II	C00230	Compliance Analyst II	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
NET00006	Contract Administrator	C00018	Contract Administrator	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
CH00027	Court & Criminal Justice Special	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CH00032	Court Liaison	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
NET00009	Credentialing Specialist I	C00166	Credentialing Specialist I	27	36,029	42,527	49,026	55,524	62,023	17.3216	20.4459	23.5701	26.6944	29.8187
NET00026	Credentialing Specialist II	C00167	Credentialing Specialist II	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
CH00010	Criminal Justice Specialist	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682

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CH00024	Crisis Counselor Program Manager	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
QM00003	Data Analyst I (Non-IT)	C00116	Data Analyst I (Non-IT)	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
IT00006	Data Architect	C00168	Data Architect	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
	Data Architect II	C00290	Data Architect II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
IT00032	Data Engineer	C00169	Data Enginner	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
IT00033	Data Operations Engineer	C00170	Data Operations Engineer	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
IT00045	Data Platform Administrator	C00276	Data Platform Administrator	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
IT00007	Data Scientist	C00171	Data Scientist	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
IT00008	Database Administrator	C00172	Database Administrator	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
CH00029	Department of Social Services Liaison	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CLI00010	Deputy Chief Medical Officer	C00245	Deputy Chief Medical Officer	64	223,000	263,222	303,444	343,667	383,889	107.2116	126.5492	145.8868	165.2244	184.5619
LEG00002	Deputy General Counsel	C00250	Deputy General Counsel	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
IT00010	Desktop Infrastructure Technician	C00173	Desktop Infrastructure Technician	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
IT00047	Development & Operations Engineer	C00287	Development & Operations Engineer	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
BUS00001	Director-Accounting & Finance	C00146	Financial Operations Director	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
CM00010	Director-Care Management Support	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CM00062	Director-Child & Adult Welfare	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CH00011	Director-Community & Member Engagement	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CM00034	Director-Community Care Management	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CH00012	Director-Community Education & Outreach	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
IT00011	Director-Core System Development	C00175	Director of Core Systems Development	49	106,504	125,713	144,923	164,133	183,343	51.2036	60.4392	69.6747	78.9102	88.1457
CMP00016	Director-Corporate Compliance	C00280	Corporate Compliance Director	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
IT00012	Director-Data Science and Analytical Research	C00176	Director of Data Science and Analytical Research	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
IT00013	Director-Enterprise Analytics	C00177	Director of Enterprise Analytics	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
BUS00005	Director-Facilities	C00119	Facilities Director	46	91,870	108,441	125,012	141,582	158,153	44.1685	52.1351	60.1017	68.0683	76.0349
CH00033	Director-Foster Care Support	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CMP00004	Director-HIPAA Compliance	C00234	HIPAA Compliance Director	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CH00013	Director-Housing	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
HUM00005	Director-Human Resources	C00107	Human Resources Director	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
IT00014	Director-Infrastructure and Security	C00178	Director of Infrastructure and Security	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
CM00011	Director-Integrated Healthcare Management	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CMP00017	Director-Internal Audit	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351

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NET00011	Director-Network Evaluation	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
NET00023	Director-Network Strategic Initiatives	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
HUM00006	Director-Organizational Development & Learning	C00107	Human Resources Director	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CLI00009	Director-Pharmacy	C00243	Pharmacy Director	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
IT00016	Director-Product Management Support	C00180	Director of Product Management Support	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
NET00036	Director-Provider Network Operations	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
NET00038	Director-Provider Network Project Mgmt	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
FIN00010	Director-Purchasing	C00145	Purchasing Director	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
SBC00002	Director-School Based Behavioral Health	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
UM00003	Director-Utilization Management	C00040	Program/Unit Director I	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CH00017	Diversion Housing Specialist	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
ODL00001	Diversity, Equity, & Inclusion Manager	C00138	Human Resources Manager	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
BUS00013	EDI Specialist	C00183	EDI Specialist	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
IT00001	Electronic Data Interface (EDI) Technical Specialist	C00184	Electronic Data Interface (EDI) Technical Specialist	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
BUS00015	Eligibility Specialist	C00080	Eligibility Specialist	25	32,648	38,537	44,426	50,314	56,203	15.6962	18.5273	21.3584	24.1896	27.0207
IT00018	ETL Developer	C00185	ETL Developer	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
ADM00008	EVP-Chief Compliance & Risk Officer	C00043	Chief Compliance & Risk Officer	60	183,114	216,142	249,170	282,198	315,225	88.0354	103.9142	119.7931	135.6719	151.5507
OP00004	Executive Assistant I	C00020	Executive Assistant I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CLI00003	Executive Assistant I (Clinical Ops)	C00020	Executive Assistant I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
LEG00005	Executive Assistant I (Legal)	C00020	Executive Assistant I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
ADM00003	Executive Assistant II	C00014	Executive Assistant II	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
ADM00006	Executive Vice President-CFO	C00004	Chief Financial Officer	63	212,280	250,569	288,857	327,146	365,434	102.0577	120.4657	138.8736	157.2816	175.6896
ADM00004	Executive Vice President-COO	C00109	Chief Operations Officer	61	192,361	227,057	261,753	296,448	331,144	92.4812	109.1619	125.8426	142.5233	159.2040
ADM00005	Executive Vice President-HR	C00016	Human Resources Executive	58	165,931	195,860	225,789	255,718	285,647	79.7747	94.1636	108.5524	122.9413	137.3301
FAC00001	Facilities Manager	C00015	Facilities Manager	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
CM00014	Family Navigator	C00187	Advocate II	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
CH00014	Family Partner Coordinator	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
FIN00008	Financial Analyst I	C00052	Financial Analyst I	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
FIN00009	Financial Analyst II	C00094	Financial Analyst II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
BUS00004	Financial Executive Assistant	C00186	Financial Executive Assistant	31	43,877	51,791	59,705	67,619	75,533	21.0946	24.8994	28.7042	32.5090	36.3138
ADM00010	General Counsel	C00233	General Counsel	59	174,311	205,751	237,191	268,632	300,072	83.8033	98.9188	114.0343	129.1498	144.2653
QM00004	Grievance-Appeals Analyst	C00070	Social Research Associate I	31	43,877	51,791	59,705	67,619	75,533	21.0946	24.8994	28.7042	32.5090	36.3138

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MED00005	Healthcare Integration Nurse(Medical Management)	C00188	Healthcare Integration Nurse	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
NET00012	Healthcare Network Program Manager	C00189	Administrative Manager	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
NET00033	HN Project Manager	C00091	Project Manager I	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
CH00028	Housing Subsidy Administrator	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
HUM00007	Human Resources Business Partner-Employee Relations	C00249	Human Resources Business Partner	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
MED00006	I/DD-TBI Clinical Director	C00079	I/DD Clinical Director	49	106,504	125,713	144,923	164,133	183,343	51.2036	60.4392	69.6747	78.9102	88.1457
CH00016	Independent Living Initiative Coordinator	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
CM00051	Integrated Health Consultant I	C00259	Integrated Health Consultant I	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
CM00052	Integrated Health Consultant II	C00260	Integrated Health Consultant II	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
CMP00014	Internal Auditor I	C00235	Internal Auditor I	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CMP00015	Internal Auditor II	C00236	Internal Auditor II	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CMP00011	Investigator I	C00022	Investigator I	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
CMP00012	Investigator II	C00191	Investigator II	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
IT00019	IT Business Analyst	C00192	IT Business Analyst	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
IT00046	IT Data Analyst	C00277	IT Data Analyst	41	71,812	84,764	97,717	110,670	123,622	34.5249	40.7521	46.9793	53.2065	59.4337
IT00020	IT Project Manager	C00193	IT Project Manager	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
IT00021	IT Quality Engineer	C00194	IT Quality Engineer	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
	IT Quality Engineer II		IT Quality Engineer II	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
IT00023	IT Security & Compliance Specialist	C00202	IT Security & Compliance Specialist	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
ODL00010	Learning Experience Designer	C00208	Organizational Development & Learning Specialist II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CM00018	LTS Access Coordinator	C00159	LTSS Care Professional	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
FIN00003	Manager-Accounting	C00200	Accounting Manager	45	87,454	103,228	119,002	134,776	150,550	42.0452	49.6288	57.2125	64.7961	72.3797
FIN00005	Manager-Accounts Payable	C00200	Accounts Payable Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CM00030	Manager-Adult Services Programs	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
IT00036	Manager-Application Development	C00240	Application Development Manager	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
FIN00015	Manager-Capitation	C00200	Capitation Manager	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CM00056	Manager-Care Workers	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
BUS00017	Manager-Claims	C00125	Claims Manager	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
HUM00017	Manager-Classification & Compensation	C00138	Human Resources Manager	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
CM00056	Manager-Community Care Management	C00272	Program/Unit Clinical Manager	41	71,812	84,764	97,717	110,670	123,622	34.5249	40.7521	46.9793	53.2065	59.4337
CH00008	Manager-Community Engagement	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CH00006	Manager-Community Health & Strategy	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766

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IT00044	Manager-Data Architecture	C00269	Data Architecture Manager	46	91,870	108,441	125,012	141,582	158,153	44.1685	52.1351	60.1017	68.0683	76.0349
IT00043	Manager-Data Interoperability	C00268	Data Interoperability Manager	46	91,870	108,441	125,012	141,582	158,153	44.1685	52.1351	60.1017	68.0683	76.0349
IT00037	Manager-Database Administration	C00239	Database Administration Manager	46	91,870	108,441	125,012	141,582	158,153	44.1685	52.1351	60.1017	68.0683	76.0349
IT00027	Manager-Enterprise Reporting	C00217	Reporting Enterprise Manager	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
FIN00007	Manager-Finance	C00200	Finance Manager	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
HUM00013	Manager-HR Benefits	C00138	Human Resources Manager	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
HUM00011	Manager-HR Employee Relations/P&P	C00138	Human Resources Manager	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
HUM00010	Manager-HR Information Systems/Reporting	C00138	Human Resources Manager	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
HUM00012	Manager-HR Talent Acquisition	C00138	Human Resources Manager	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
CM00057	Manager-Integrated Healthcare	C00272	Program/Unit Clinical Manager	41	71,812	84,764	97,717	110,670	123,622	34.5249	40.7521	46.9793	53.2065	59.4337
IT00038	Manager-IT Business Analysts	C00241	IT Business Analysts Manager	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
IT00022	Manager-IT Quality Engineer	C00201	IT Quality Engineer Manager	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
CM00035	Manager-Long Term Services Care Management	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CM00035	Manager-Long Term Services Program	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CH00019	Manager-Member Engagement	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CM00022	Manager-Olmstead Policy	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
ODL00009	Manager-Organizational Development & Learning	C00138	Human Resources Manager	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
NET00019	Manager-Provider Network Operations	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
BUS00019	Manager-Purchasing	C00200	Purchasing Manager	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
QM00008	Manager-Quality Improvement	C00143	Business Systems Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
QM00005	Manager-Quality Management Data	C00071	Quality Management Data Manager	41	71,812	84,764	97,717	110,670	123,622	34.5249	40.7521	46.9793	53.2065	59.4337
QM00006	Manager-Quality Management Incidents, Grievances, & Appeals	C00071	Quality Management Manager	40	68,360	84,805	93,019	110,722	117,679	32.8652	40.7715	44.7209	53.2318	56.5766
IT00030	Manager-SharePoint Development	C00223	SharePoint Manager	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
CH00021	Manager-Special Populations	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CH00025	Manager-Supportive Housing	C00210	Program/Unit Manager	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CMP00006	Medical Records Manager	C00144	Medical Records Manager	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
CMP00018	Medical Records Specialist	C00265	Medical Records Specialist	27	36,029	42,527	49,026	55,524	62,023	17.3216	20.4459	23.5701	26.6944	29.8187
CH00018	Member Inclusion & Outreach Specialist	C00045	Advocate I	28	37,848	44,675	51,502	58,328	65,155	18.1963	21.4784	24.7604	28.0425	31.3245
UM00005	Mental Health Nurse	C00181	Behavioral Health Nurse	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
IT00024	Microstrategy Administrator	C00205	Microstrategy Administrator	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
CM00063	NC InCK- Service Integration Consultant	C00260	Integrated Health Consultant II	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
IT00026	Network Specialist II	C00132	Network Specialist II	41	71,812	84,764	97,717	110,670	123,622	34.5249	40.7521	46.9793	53.2065	59.4337

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ODL00008	Organizational Development & Learning Specialist I-Care Management	C00207	Organizational Development & Learning Specialist I	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
ODL00004	Organizational Development & Learning Specialist II-Change Management	C00208	Organizational Development & Learning Specialist II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
ODL00005	Organizational Development & Learning Specialist II-Employee Onboarding	C00208	Organizational Development & Learning Specialist II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
ODL00003	Organizational Development & Learning Specialist II-Leadership Development	C00208	Organizational Development & Learning Specialist II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
ODL00007	Organizational Development & Learning Specialist I-Provider Education	C00207	Organizational Development & Learning Specialist I	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
LEG00004	Paralegal	C00096	Paralegal	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
MED00003	Pharmacist	C00105	Pharmacist	46	91,870	108,441	125,012	141,582	158,153	44.1685	52.1351	60.1017	68.0683	76.0349
CH00020	Post Transition Engagement Specialist	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
NET00020	Practice Transformation Specialist	C00066	Program/Services Development Specialist II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CMP00020	Privacy Analyst	C00274	Privacy Analyst	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
CMP00010	Program Integrity Analyst	C00113	Compliance Analyst I	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
PPM00001	Project Manager I	C00091	Project Manager I	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
PPM00002	Project Manager II	C00244	Project Manager II	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
NET00021	Provider Enrollment Specialist	C00063	Administrative Clinic Support Specialist II	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
NET00022	Provider Network Evaluator I	C00214	Provider Network Evaluator I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
NET00031	Provider Network Evaluator I-HCBS	C00214	Provider Network Evaluator I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
NET00017	Provider Network Evaluator II	C00215	Provider Network Evaluator II	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
NET00035	Provider Network Evaluator II-Routine Monitoring	C00215	Provider Network Evaluator II	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
NET00032	Provider Network Evaluator II-Targeted	C00215	Provider Network Evaluator II	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
NET00034	Provider Network Evaluator I-Routine Monitoring	C00214	Provider Network Evaluator I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
NET00030	Provider Network Evaluator I-Targeted	C00214	Provider Network Evaluator I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
NET00018	Provider Network Helpdesk Specialist	C00081	Administrative Clinic Support Specialist I	27	36,029	42,527	49,026	55,524	62,023	17.3216	20.4459	23.5701	26.6944	29.8187
NET00039	Provider Network Operations Specialist	C00065	Program/Services Development Specialist I	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
NET00041	Provider Network Service Development Specialist	C00066	Program/Services Development Specialist II	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
NET00040	Provider Relations Specialist	C00065	Program/Services Development Specialist I	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
FIN00011	Purchasing Specialist	C00216	Purchasing Specialist	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
QM00007	Quality Assurance Analyst	C00070	Social Research Associate I	31	43,877	51,791	59,705	67,619	75,533	21.0946	24.8994	28.7042	32.5090	36.3138
	Quality Improvement Specialist I	C00247	Quality Improvement Specialist I	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
QM00011	Quality Improvement Specialist II	C00246	Quality Improvement Specialist II	38	61,945	84,806	84,291	110,723	106,637	29.7813	40.7720	40.5246	53.2323	51.2678
QM00010	Quality Review Coordinator I	C00070	Social Research Associate I	31	43,877	51,791	59,705	67,619	75,533	21.0946	24.8994	28.7042	32.5090	36.3138
QM00009	Quality Review Coordinator II	C00073	Social Research Associate II	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
SBC00007	SB LTSS Care Coordinator	C00159	LTSS Care Professional	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477

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SBC00005	School Based Care Coordinator	C00181	Behavioral Health Clinician	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
SBC00006	School Based Diversion Coordinator	C00218	SB Diversion Coordinator	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
SBC00008	School Based Team Lead	C00291	Behavioral Health Team Lead	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
OP00006	Senior Director-Access	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
FIN00020	Senior Director-Accounting & Finance	C00285	Senior Director-Accounting & Finance	51	117,532	138,731	159,930	181,129	202,328	56.5058	66.6977	76.8895	87.0814	97.2732
IT00011	Senior Director-Application Development	C00238	Application Development Director II	50	111,882	132,062	152,242	172,422	192,602	53.7894	63.4913	73.1933	82.8952	92.5971
CLI00004	Senior Director-Care Management Operations	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
BUS00006	Senior Director-Claims	C00219	Senior Claims Director	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
CLI00005	Senior Director-Clinical Innovation	C00220	Senior Director Clinical Innovation	52	123,467	145,737	168,007	190,276	212,546	59.3593	70.0659	80.7724	91.4790	102.1855
OP00003	Senior Director-Communications	C00174	Communications Director	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
CH00034	Senior Director-Community & Member Engagement	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
IT00042	Senior Director-Enterprise Analytics & Data Interoperability	C00264	Information Technology Director II	50	111,882	132,062	152,242	172,422	192,602	53.7894	63.4913	73.1933	82.8952	92.5971
GOV00001	Senior Director-Government Relations	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
CLI00006	Senior Director-Healthcare Integration	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
IT00040	Senior Director-IT Infrastructure & Security	C00264	Information Technology Director II	50	111,882	132,062	152,242	172,422	192,602	53.7894	63.4913	73.1933	82.8952	92.5971
OP00005	Senior Director-Org Project Portfolio Management	C00114	Project Management Program Director	50	111,882	132,062	152,242	172,422	192,602	53.7894	63.4913	73.1933	82.8952	92.5971
CLI00013	Senior Director-Population Health	C00036	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
NET00028	Senior Director-Practice & Payment Transformation	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
IT00041	Senior Director-Product Management & Support	C00264	Information Technology Director II	50	111,882	132,062	152,242	172,422	192,602	53.7894	63.4913	73.1933	82.8952	92.5971
CMP00005	Senior Director-Program Integrity	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
NET00024	Senior Director-Provider Network Operations	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
FIN00021	Senior Director-Purchasing & Accounts Payable	C00286	Senior Director-Purchasing & Accounts Payable	50	111,882	132,062	152,242	172,422	192,602	53.7894	63.4913	73.1933	82.8952	92.5971
OP00007	Senior Director-Quality Management	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
CLI00007	Senior Director-Utilization Management	C00037	Program/Unit Director II	44	83,250	98,266	113,281	128,297	143,313	40.0240	47.2431	54.4621	61.6812	68.9003
MED00004	Senior Psychologist	C00082	Senior Psychologist	42	75,438	89,045	102,652	116,258	129,865	36.2684	42.8101	49.3518	55.8934	62.4351
BUS00016	Senior Vice President-Business Evolution	C00253	Senior Vice President-Business Evolution	50	111,882	132,062	152,242	172,422	192,602	53.7894	63.4913	73.1933	82.8952	92.5971
NET00001	Senior Vice President-Community Health & Well-Being	C00140	Vice President Community Health	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
BUS00002	Senior Vice President-Financial Ops	C00051	Vice President-Financial Operations	55	143,133	168,950	194,767	220,583	246,400	68.8141	81.2259	93.6378	106.0497	118.4616
CLI00002	Senior Vice President-Population Health and Care Management	C00242	Senior Vice President-Population Health and Care Management	54	136,252	160,828	185,404	209,979	234,555	65.5060	77.3212	89.1364	100.9517	112.7669
NET00029	Senior Vice President-Provider Network	C00263	Senior Vice President-Provider Network	57	157,955	186,445	214,935	243,425	271,915	75.9398	89.6369	103.3341	117.0312	130.7283
CLI00011	Senior Vice President-Quality Management	C00261	Senior Vice President-Quality Management	48	101,384	119,670	137,957	156,243	174,529	48.7422	57.5337	66.3253	75.1168	83.9084
OP00008	Senior Vice President-Strategy & Government Relations	C00142	Vice President Government Relations	58	165,931	195,860	225,789	255,718	285,647	79.7747	94.1636	108.5524	122.9413	137.3301

Classification and Grade Schedule FY23

IT00028	Server Administrator	C00221	Server Administrator	41	71,812	84,764	97,717	110,670	123,622	34.5249	40.7521	46.9793	53.2065	59.4337
IT00039	Server Support Specialist	C00054	Network Specialist I	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
IT00029	SharePoint Developer	C00222	SharePoint Developer	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CM00027	SIS Evaluator	C00224	SIS Evaluator	32	46,093	54,406	62,720	71,034	79,347	22.1599	26.1569	30.1538	34.1507	38.1477
IT00034	Software Support Analyst	C00060	Business Systems Analyst	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
CM00041	Supervisor I-Care Managers	C00211	Program/Unit Supervisor I	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CM00039	Supervisor I-Care Workers	C00211	Program/Unit Supervisor I	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CM00040	Supervisor I-Community Health Workers	C00211	Program/Unit Supervisor I	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CM00042	Supervisor II-Care Managers	C00212	Program/Unit Supervisor II	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
CM00045	Supervisor II-Integrated Health Consultant	C00212	Program Unit Supervisor II	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
CM00060	Supervisor I-Integrated Health Consultant	C00211	Program/Unit Supervisor I	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
ACC00003	Supervisor-Access	C00195	Access Supervisor	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
FIN00016	Supervisor-Accounting	C00288	Accounting Supervisor	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
FIN00017	Supervisor-Accounting (Grants)	C00288	Accounting Supervisor	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
FIN00018	Supervisor-Accounts Payable	C00271	Accounts Payable Supervisor	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
BUS00011	Supervisor-Claims	C00028	Claims Supervisor	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
CMP00007	Supervisor-Claims Audits	C00209	Program Integrity Claims Supervisor	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
NET00010	Supervisor-Credentialing	C00198	Credentialing Supervisor	34	50,865	60,040	69,215	78,389	87,564	24.4546	28.8654	33.2762	37.6871	42.0979
IT00009	Supervisor-Desktop Infrastructure	C00199	Desktop Infrastructure Supervisor	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
BUS00014	Supervisor-Eligibility & Enrollment	C00078	Processing Unit Supervisor	31	43,877	51,791	59,705	67,619	75,533	21.0946	24.8994	28.7042	32.5090	36.3138
BUS00018	Supervisor-Encounters	C00028	Claims Supervisor	35	53,434	63,072	72,710	82,348	91,986	25.6895	30.3231	34.9567	39.5903	44.2238
IT00025	Supervisor-Network Security	C00206	Network Security Specialist II	41	71,812	84,764	97,717	110,670	123,622	34.5249	40.7521	46.9793	53.2065	59.4337
FIN000196	Supervisor-Payroll	C00261	Payroll Supervisor	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
NET00027	Supervisor-Provider Network Development LTS Services	C00212	Program/Unit Supervisor II	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
NET00015	Supervisor-Provider Network Development MH Services	C00212	Program/Unit Supervisor II	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
NET00016	Supervisor-Provider Network Evaluation	C00212	Program/Unit Supervisor II	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
SBC00003	Supervisor-School Based Team	C00212	Program/Unit Supervisor II	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
SBC00004	Supervisor-School Based Team-Crisis Services	C00212	Program/Unit Supervisor II	39	65,073	76,811	88,548	100,285	112,022	31.2853	36.9282	42.5711	48.2139	53.8568
CM00026	Supervisor-SIS Evaluation	C00203	LTSS Program Supervisor	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
CMP00013	Supervisor-Special Investigations	C00111	Program Integrity Unit Supervisor	38	61,945	73,118	84,291	95,464	106,637	29.7813	35.1530	40.5246	45.8962	51.2678
UM00004	Supervisor-Utilization Management LTS	C00204	LTSS UM Supervisor	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
UM00009	Supervisor-Utilization Management- MH/SUD	C00213	Program/Unit Supervisor III	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766

Classification and Grade Schedule FY23

UM00011	Supervisor-Utilization Management-Physical Health	C00213	Program/Unit Supervisor III	40	68,360	80,690	93,019	105,349	117,679	32.8652	38.7931	44.7209	50.6487	56.5766
CH00015	Supportive Housing Specialist	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
OP00001	SVP-CIO	C00084	Information Technology Executive	59	174,311	205,751	237,191	268,632	300,072	83.8033	98.9188	114.0343	129.1498	144.2653
CH00022	System of Care Coordinator	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
HUM00016	Talent Acquisition Coordinator	C00267	Human Resources Technician	29	39,760	46,931	54,102	61,274	68,445	19.1152	22.5630	26.0108	29.4586	32.9064
HUM00015	Talent Acquisition Specialist	C00249	Human Resources Business Partner	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032
BUS00020	Team Lead-Claims	C00292	Claims Team Lead	33	48,420	57,154	65,887	74,621	83,354	23.2790	27.4778	31.6766	35.8754	40.0742
CH00023	Tenancy Support Coordinator	C00041	Community Relations Specialist I	30	41,768	49,301	56,835	64,368	71,902	20.0806	23.7025	27.3244	30.9463	34.5682
UM00007	UM Care Manager-MHSUD I	C00225	UM Care Manager-MHSUD I	36	56,133	66,257	76,382	86,506	96,631	26.9868	31.8544	36.7220	41.5896	46.4571
UM00006	UM Care Manager-MHSUD II	C00226	UM Care Manager-MHSUD II	37	58,967	69,603	80,239	90,875	101,511	28.3497	33.4631	38.5765	43.6898	48.8032



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Consumer and Family Advisory Committee (CFAC) Report

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: The Alliance Consumer and Family Advisory Committee, or CFAC, is made up of consumers and/or family members that live in Cumberland, Durham, Johnston, Wake, Orange and Mecklenburg counties who receive mental health, intellectual/developmental disabilities and substance use/addiction services. CFAC is a self-governing committee that serves as an advisor to Alliance administration and Board of Directors. The Alliance CFAC meets at 5:30 p.m. on the first Monday in the months of February, April, June, August, October and December at the Alliance Corporate Office, 5200 West Paramount Parkway in Morrisville. Sub-committee meetings are held in individual counties; the schedules for those meetings are available on our [website](#).

This report includes draft minutes and documents from the steering committee and the county/sub-committee meetings.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): N/A

REQUEST FOR AREA BOARD ACTION: Receive the report.

CEO RECOMMENDATION: Receive the report.

RESOURCE PERSON(S): Jason Phipps, CFAC Chair; Ramona Branch, Member Inclusion and Outreach Manager; Lakeisha McCormick, Member Inclusion and Outreach Manager

[\(Back to agenda\)](#)

Monday, April 04, 2022

CONSUMER AND FAMILY ADVISORY COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 5:30pm – 7:00 p.m.



APPOINTED MEMBERS PRESENT: ,

MEMBERS PRESENT: Pinkey Dunston, Trula Miles, Marie Dodson, Jerry Dodson, Jason Phipps, Brianna Harris, Sharon Harris
 Shirley Francis, Brenda Solomon, Dave Curro, Annette Smith, Charlitta Burrus, Regina Mays, Felishia McPherson, Michael Maguire,
 Faye Griffin, Randy Sperling, Dave Swab, Steve Furman, Tekeyyon Lloyd, Jean Greer, Brian Perkins, Renee Lloyd, Ruth Reynolds,
 Lois Stickell

BOARD MEMBERS PRESENT: None

GUEST(S): ShaValia Ingram, NCDHHS;

STAFF PRESENT: Ramona Branch, Member Inclusion and Outreach Manager; Noah Swabe, Member Inclusion and Outreach Specialist, Erica Asbury, Member Inclusion and Outreach Specialist, LaKeisha McCormick, Member Inclusion and Outreach Manager; Douglass McDonnell, Member Inclusion and Outreach Specialist; Eileen Bennett, Member Inclusion and Outreach Specialist, India K. Perez, Member Inclusion & Outreach Specialist, Starlett Davis, Member Inclusion and Outreach Specialist, Beth Callahan, TBI Coordinator, Lori Caviness, Community Health and Strategy Manager, Aalece Pugh-Lilly, Sr. Director Community Health & Well-Being, Rob Robinson, Chief Executive Director Sara Wilson, Alliance Health Chief of Staff

1. **WELCOME AND INTRODUCTIONS** – the meeting was called to order at 5:30 pm by Jason Phipps
2. **REVIEW OF THE MINUTES** – The minutes from the March 7, 2022 meeting were reviewed; **a motion was made by Marie Dodson and seconded by Ruth Reynoldst to approve the minutes.** Motion passed unanimously.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Public Comment Individual/Family Challenges and Solutions	No Public Comment/Solutions	N/A	N/A
4. LME/MCO Updates	Innovations Waiver Slot Allocation - Sara Wilson, Alliance Health Chief of Staff <ul style="list-style-type: none"> ➤ NC General Assembly appropriated Funding for 1000 new Innovations Waiver slots, expecting allocation letters from the state ➤ Distribute 400 slots, available by March 1, 2022 (Statewide) ➤ Distribute 600 slots, available by June 1, 2022 (Statewide) ➤ The legislation includes two ways that the slots must be allocated: Current method based on Medicaid population per county – New method based on total population per county ➤ 105 slots allocated by to Alliance Health per county <ul style="list-style-type: none"> ○ Cumberland: 16 Slots ○ Durham: 10 Slots ○ Johnston: 8 Slots ○ Orange: 3 Slots 		

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Monday, April 04, 2022

CONSUMER AND FAMILY ADVISORY COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 5:30pm – 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> ○ Mecklenburg: 38 Slots ○ Wake: 30 Slots <p>Medicaid Transformation Update – Lori Caviness, Community Health and Strategy Manage</p> <p>Medicaid Direct</p> <ul style="list-style-type: none"> ➤ Tailored Plans will be responsible for behavioral health coverage for Medicaid Direct populations. (Includes Foster Care Population – Only managing their Behavioral Health Needs) ➤ Some of these individuals will be eligible for Tailored Plan Care Management and some of them will not. ➤ Medicaid Direct contracts between the state and MCO’s have not yet been finalized. <p><i>Discussion: Rob advised that we will talk more about Medicaid Direct in the upcoming Steering Committee Meeting.</i></p> <p>NC’s Children and Families Specialty Plan – Rob Robinson, Chief Executive Director</p> <ul style="list-style-type: none"> ➤ Kids in foster care must be supported within foster care system – Medicaid Transformation law requires the Department to develop a plan for adding coverage, under BH I/DD Tailored Plans or another specialty plan ➤ Department released policy paper Feb 2022, outlining design for Foster Care Plan – Children and Family Specialty Plan Design ➤ Single Statewide Plan available for children, youth, and families ➤ Only Standard Plans and Tailored Plans will be eligible to bid on and contract for the CFSP ➤ Timeline: Awarded Contract Fall 2022, Implementation Planning Fall 2022 – Winter 2023, Launch by 12/2023 <p>Concerns:</p> <ul style="list-style-type: none"> ➤ Negative impact of existing collaboration of Alliance and County Partners ➤ Disruption of Alliance Service Expansion Plan for Foster Care Population ➤ Duplication of many of the elements of the Tailored Plan ➤ Plan does not take into account provider capacity ➤ Timing of RFP relative to Tailored Plan implementation 		

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Monday, April 04, 2022

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 5:30pm – 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<p>➤ Additional confusion for Members Served</p> <p>Recommendations:</p> <ul style="list-style-type: none"> ➤ Delay implementation of single statewide CFSP to prevent more system disruption for Medicaid Population ➤ Fully enroll these youth in Behavioral Health I/DD Tailored Plans, on a regional basis aligned with the Tailored Plan regions ➤ Services/Resources utilized immediately to address identified service gaps and systemic challenges across the state ➤ Take action to improve and ensure standardization of key areas across LME/MCO <p><i>Discussion:</i></p> <ul style="list-style-type: none"> • CFAC can give recommendations via letter, decision on how to provide recommendations shall be determined • Number of children currently in foster care? Sara responded: about 8,000 children subject to proposed change. • Who can be contacted and what are next steps toward this initiative Rob responded: information individually or as a CFAC, Alliance can help provide names and contacts. Send out white letter for NC's Children and Families Specialty. <p>Tailored Plan Readiness Reviews</p> <ul style="list-style-type: none"> • Desktop reviews will be held from 3/29-8/5 • On-site review for Alliance will be held on 7/25-7/26 • Call Center Virtual On-Site Reviews will be held 5/10-5/12 <p>Alliance Health Training Opportunities Alliance Health Calendar of Events/Trainings</p>		
<p>5. One Community in Recovery Event</p>	<p>Approve requests to attend. Alliance has two tickets because we are a sponsor. Marie Dodson (Johnston) has already received one of the sponsorships. Other requests have been made by:</p> <ul style="list-style-type: none"> ○ Regina Mays (Durham) ○ Charlitta Burrus (Durham) ○ Jerry Dodson (Johnston) 		

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Monday, April 04, 2022

CONSUMER AND FAMILY ADVISORY COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 5:30pm – 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> ➤ Conference April 27th – April 29th ➤ Shelly Harris must approve each Member that plans to attend ➤ Location: Greensboro Technical Community College ➤ Scholarship Options: Apply by March 19th <p><i>Discussion: Committee should decide on approval for three additional members to attend the Community in Recovery Event. Felishia would like to approve Michael for attendance. CFAC must fund two other tickets for additional members to attend, funds needed for mileage, per diem.</i></p> <p><i>Want to know options and budget for sponsorship for each county to have representation for this event. Allowing one member per county to attend. This event is hybrid, that being the case there is an option for all to attend via zoom.</i></p> <p><i>Starlett made recommendation to vote on CFAC Members from each county who can attend and represent. Dave made recommendation that county chair make the decision.</i></p> <p>Motion was made by Randy to approve request and seconded by Gina and Faye to approve slots for Community In Recovery Event.</p>		
6. State Updates	<p>ShaValia Ingram, NCDHHS</p> <ul style="list-style-type: none"> ➤ April 27th, Administrative Assistance Day ➤ Facing Mental Health Crisis Care – Tuesday, April 5, 2022, Virtual (1st Tuesday of every month from 12:30 pm – 1:30 pm) <ul style="list-style-type: none"> ○ Registration is required for this event, find link on CEE Update ➤ April Awareness Month <ul style="list-style-type: none"> ○ Alcohol Awareness Month ○ National Autism Awareness Month – Visit the NC Autism Society to increase your knowledge of this diagnosis ○ Stress Awareness Month – Contact CEE Team for training on Managing Wellness ○ Minority Health Month - Lunch and Learn blurbs will be shared throughout the month ➤ Monthly Meetings <ul style="list-style-type: none"> ○ Provider and Consumer Calls – Joint DMHDDSAS &DHB call for Providers held Thursday, April 7, 2022 (3:00 pm – 4:00 pm) 		

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Monday, April 04, 2022

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 5:30pm – 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> ○ State CFAC – Meeting Wednesday of every month. April SCFAC is a hybrid meet; in-person option is only for committee members. Next Meeting: Wednesday, April 13, 2022 (9:00 am – 3:00 pm) ○ State Local Collaboration Meeting; Next Call: 04/27/2022 from 6:00 pm – 7:30 pm ○ The NC Medicaid Managed Care Hot Topic Series held every 3rd Thursday, Next Meeting: Thursday, April 21, 2022 (5:30 pm – 6:30 pm). ➤ Tailored Care Management Updates – Launch in December 2022 ➤ Veterans, Service Members and Families – Resource Links for Veterans and Military Members ➤ Educational Opportunities <ul style="list-style-type: none"> ○ National Council for Mental Health Well-Being, largest conference in Mental Health and Substance Use Treatment – April 11 – 13, 2022 at the Gaylord National Resource and Convention Center in Washington, DC. Registration open now. ○ NC Tide 2022 – Behavioral Health Conference – April 25-27, 2022, in Wilmington, NC. Register by April 1, 2022. ○ “One Community in Recovery” Conference: Healing Together After Being Apart – April 27-29, 2022 ○ National Crime Victims’ Rights Week – April 24-30, 2022 ○ Women’s Recovery Conference, Healing Clients, Families and Ourselves – May 4-6, 2022 ➤ Press Release from the State – Checkout the website to view the newest information ➤ Peer Support Specialist <ul style="list-style-type: none"> ○ Reminder about Peer Support Certification Renewal ○ Upcoming Peer Support Trainings 40-hr and 20-hr trainings are available ○ Peer Support Job board is available 		
<p>7. Subcommittees</p> <ul style="list-style-type: none"> • Wake • Durham • Cumberland • Johnston 	<p>Annette Smith – Not Present</p> <p>Charlitta Burrus – No Comments</p> <p>Felishia McPherson – Farewell in person for Doug, no other news to report. Spoke about Budget Retreat and the concerns that CFAC posed, what the discussion would be at that meeting. Mentioned State NAMI Walk, encouraged attendance.</p>	<p>Ongoing</p>	<p>N/A</p>

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Monday, April 04, 2022

CONSUMER AND FAMILY ADVISORY COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 5:30pm – 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
<ul style="list-style-type: none"> • Orange • Mecklenburg • Area Board • Human Rights • Quality Management 	<p>Marie Dodson – Johnston County will trial Hybrid CFAC meeting later this month. Completed Guardianship Event, discussion to further this and have another event prior to the end of the school year.</p> <p>Steve Furman – Location for in-person meetings has been identified.</p> <p>Ruth Reynolds – No Comments</p> <p>Dave Curro – Budget Retreat, lots of interest in registry of unmet needs, lots of conversation. Went very well and all were receptive in what CFAC had to say. 1000 slots over two years, budget stands for two years. The board is meeting this Thursday, share what you would like to be passed on to the board with Jason and Dave.</p> <p>Ramona/Lakeisha – No updates, Meeting is not until 04/17/2022</p> <p>Israel Pattison/Marie Dodson/Dave Curro – No Comment</p>		
<p>10. Announcements</p>	<ul style="list-style-type: none"> ➤ Lori advised on Doug’s departure and her role as interim, Director of Community Engagement. ➤ CFAC Retreat, Jason requested feed-back about having one next fiscal year. Possibly in the month of July. Would like ideas discussed with local CFACs and shared at the next Steering Committee meeting. ➤ Nomination Committee to hire new chair for Steering Committee, get nomination committee in place for next month’s meeting. <ul style="list-style-type: none"> ○ Nominate one person from each CFAC ○ Committee Members who Volunteered: Felishia, Dave, Jason 	<p>Ongoing</p>	<p>N/A</p>

11. ADJOURNMENT: ADJOURNMENT: **Motion was made by Marie Dodson to approve request and second by Felishia McPherson at 7:00pm.** The next meeting will be May 2, 2022, at 5:30 p.m.

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



COMMUNITY ENGAGEMENT & EMPOWERMENT TEAM

Community Updates | April, 2022

NCDHHS- DMH/DD/SUS

Administrative Assistance Day: 4/27

Please take time to wish all those wonderful people who support the staff in getting information to you and keeping everything running smooth. Without the administrative assistance staff we would not be able to give the citizens of NC our best. Thank you, to all that work with us and those that work for the providers and stakeholders across the state!

Facing Mental Health Crisis Care - Tuesday, April 5, 2022

Virtual, 1st Tuesday of every month from 12:30-1:30 p.m.

You Are Invited to
Our Diversity Inclusion Forum

First Tuesday of every month
from 12:30 to 1:30 pm ET. (virtually)







Presented by: UHS NC System of Care — Brynn Marr Hospital, Holly Hill Hospital and Old Vineyard Hospital

Please register in advance for Zoom link:

The objective for the monthly forums is to facilitate discussion and awareness of the mental health challenges those in marginalized populations face. Our goal is to have healthy discussions that include data and resources for participants to use as needed. This forum is open to anyone who is impacted by mental health including practitioners and community members from across the state and beyond. Topics will vary.





With limited exceptions, physicians are not employees or agents of these hospitals. For language assistance, disability accommodations, and the nondiscrimination notice, visit our website. 21678-2684 9/21

The objective for the monthly forums is to facilitate a discussion and awareness of the mental health challenges those in marginalized populations face. Our goal is to have a healthy discussion that includes data and resources for participants to use as needed. This forum is open to anyone who is impacted by mental health, including practitioners and community members from across the state and beyond. Topics will vary. Presented by UHS NC Systems of Care – Brynn Marr Hospital, Holly Hill Hospital and Old Vineyard Hospital. Please register in advance for Zoom Link.

[Register Here](#)

April Awareness Month

As we enter into April we also watch as nature has a rebirth, we shake off the winter cold and welcome in the warmth of a spring day, the beauty of nature awakening from its sleep.

April brings with it a variety of issues that need a light shined on them.

Alcohol Awareness Month - “It takes more than a day to educate the American youth about the risks of getting stoned. April marks National Alcohol Awareness Month and is sponsored by the National Council on Alcoholism and Drug Dependence (NCADD) to educate the masses about America’s #1 health problem: alcohol dependence. Claiming the lives of more than 90,000 people every year, this month focuses on raising awareness about alcohol abuse and dependency before it is fatal. “ <https://www.ncadd.org>



<https://prevention.dasa.ncsu.edu/aod/aodapril/>

April is also **National Autism Awareness Month**— “Autism Awareness Month in April aims to celebrate and promote acceptance for the condition that occurs in one in every 54 children as of 2020 in the United States. Autism, a complex developmental condition affecting the patient’s ability to interact, communicate, and progress, has not one but many subtypes. First held in the year 1972 by the Autism Society, Autism Awareness Month emphasizes the need for public awareness to promote acceptance, celebrate the differences, and be more inclusive towards autistic individuals around us.” There is a movement to change the name of Autism Awareness month to Autism Acceptance Month “

PBS has many wonderful resources to watch and explore:

<https://www.pbsnc.org/blogs/health-wellness/april-is-autism-acceptance-month/>

NC Autism Society is also a wonderful place to visit to increase your knowledge on this diagnosis.

<https://www.autismsociety-nc.org/awareness-acceptance/>

Stress Awareness Month just so happens to fall in April. How many of us are dealing with our stress well, are we practicing self care in a healthy way? The CEE team has a great training on Managing Wellness were we provide practical steps in increasing your wellness and reducing stress. Contact us if you would like the training.



Monthly Meetings

PROVIDER & CONSUMER CALLS

Joint DMHDDSAS & DHB Update call: Providers

During this call, panelists will present policy updates to Providers from DMHDDSAS and DHB representatives followed by an open Q&A session.

Thursday, April 7, 2022 3:00 p.m. — 4:00 p.m.

[Register Here](#) [Closed Captioning](#)

Joint DMHDDSAS & DHB Update call: Consumers & Family Members— Canceled for April

During this call, panelists will present policy updates to Consumers & Family Members from DMHDDSAS and DHB representatives followed by an open Q&A session.

NCCDD's Self Advocate Discussion Series

The NC Council on Developmental Disabilities (NCCDD) will again sponsor a virtual monthly self-advocate discussion series. Discussions aim to emphasize the value of people with disabilities to build and maintain relationships with NC legislators and decision-makers while bridging relationships and a network among NC self-advocates. The dates and times are as follows:

Webinars will be held monthly from 1-2 PM via Zoom

- [Wednesday, April 6 - 1 PM](#)
- [Wednesday, May 4 - 1 PM](#)
- [Wednesday, June 1 - 1 PM](#)



In Person Training—CE&E Team

As we start to Prepare for 2022– Remember to get with your CE&E Team member to set up Trainings for your community events, committee's, and CFAC meetings.

The CE&E Team has started our Community Training's in-person! Reach out to your CE&E Team members to set up any of our trainings from our Training & Technical Assistance Program (TTAP). Our team will continue to follow all guidelines that are suggested by the State, the CDC or your organization/facility. The CE&E Team is here to help. Contact us to begin planning for your next event!

Please reach out to our team at: CEandE.staff@dhhs.nc.gov

Stacey Harward, BSW: Stacey.Harward@dhhs.nc.gov

ShaValia Ingram MS, MSW, LCSWA:
Shavalia.Ingram@dhhs.nc.gov

Wes Rider, BSW: Wes.Rider@dhhs.nc.gov

Badia Henderson: Badia.Henderson@dhhs.nc.gov

State CFAC

The State Consumer and Family Advisory Committee (SCFAC)

meeting is on the 2nd Wednesday of every month and is open to the public. April's

Nothing About Us, Without Us.



SCFAC meeting will be held as a hybrid meeting – the in-person option at this time is only for committee members. A virtual platform and teleconference options are provided for additional attendees.

Visit the State CFAC page for more information:

www.ncdhhs.gov/divisions/mhddsas/councils-commissions/state-consumer-and-family-advisory-committee.

Next Meeting: Wednesday, April 13, 2022 – Hybrid meeting

Time: 9:00 a.m. — 3:00 p.m.

Join by web browser: <https://tinyurl.com/htra3ane>

Phone in option: 1-415-655-0003 **Meeting #:** 24255343106

Passcode: N5whNFFJD33

State to Local Collaboration Call

The State to Local Collaboration Call is scheduled for every **4th Wednesday** of the month. The call-in number and conference ID will not change.

Next Call: April 27, 2022 from 6:00 p.m.– 7:30 p.m.

To Join click here: <https://tinyurl.com/yc5crpv6>

Phone in option: 1-415-655-0003 US Toll

NC Medicaid Managed Care Information

Beneficiaries have several resources to [help answer questions](#) about their transition to NC Medicaid Managed Care. Those who want a reminder of which health plan they are enrolled in should call the [Enrollment Broker](#) at 833-870-5500 (TTY: 833-870-5588). Questions about benefits and coverage can be answered by calling their health plan at the number listed in the welcome packet or on the [What Beneficiaries Need to Know on Day One fact sheet](#). For other questions, beneficiaries can call the NC Medicaid Contact Center at 888-245-0179 or visit the "Beneficiaries" section of the [Medicaid website](#). To learn more [click here](#).

Tailored Care Management Updates

With NC Medicaid's transformation to managed care, the North Carolina Department of Health and Human Services (NCDHHS) will continue to offer to Medicaid beneficiaries a comprehensive array of behavioral health, intellectual/developmental disability (I/DD) and traumatic brain injury (TBI) services.

In previous guidance, including the [Behavioral Health and Intellectual/Development Disability Tailored Plan Final Policy Guidance](#) and [Behavioral Health and Intellectual/Development Disability Tailored Plan Request for Applications](#), NCDHHS released detailed information about the Standard Plan and future Behavioral Health (BH) and I/DD Tailored Plan (Tailored Plan) benefit packages. NCDHHS currently covers a subset of BH services under its 1915(b)(3) waiver, which will sunset upon Tailored Plan launch in December 2022. NCDHHS is seeking authority to cover most of the current 1915(b)(3) services through the 1915(i) authority (Tailored Plans). Information on the 1915(i) services is available in the [NC Medicaid Transition of 1915\(b\)\(3\) Benefits to 1915\(i\) Authority white paper](#).

Updated March 25, 2022

Tailored Care Management Updates—continued

Updated Guidance

NC Medicaid has published updated guidance on Tailored Care Management, including updates to the [Tailored Care Management Provider Manual](#), the [use of Care Manager extenders](#), [Tailored CM 101 Frequently asked Questions](#) and [updated guidance on rates](#). For more information, please see Medicaid bulletin article [Tailored Care Management Update: AMH+/CMA Certification Round Two Desk Reviews Completed](#)

All updates can be found on the Tailored Care Management webpage at: <https://medicaid.ncdhhs.gov/transformation/tailored-care-management>

Have a question about anything— send it to us!!

The Division of Mental Health, Developmental Disabilities and Substance Abuse Services is working to centralize questions coming in so that we can ensure questions are answered in a timely manner by the appropriate subject matter experts. In order to do this we have two portals for incoming questions, our email BHIDD.helpcenter@dhhs.nc.gov or web portal <https://tinyurl.com/386hpk6h>

Please help us better our response time by using these avenues for submitting questions.

More Information:

Medicaid Transformation:

Here are some additional sites that you may go to find more information on Medicaid Transformation:

<https://medicaid.ncdhhs.gov/transformation>
<https://medicaid.ncdhhs.gov/transformation/more-information>

NC Olmstead:

Learn more about NC Olmstead
<https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-abuse/nc-olmstead>
<https://www.ncdhhs.gov/events>

Grant Opportunities:

<https://tinyurl.com/DMHDDSAS-Grants>

NC Medicaid Managed Care Hot Topics Webinar Series

Every 3rd Thursday of the month from 5:30 p.m.-6:30 p.m.
Medicaid Hot Topics Tailored Plan and Behavioral Health

Apr 21, 2022 05:30 PM
May 19, 2022 05:30 PM
Jun 16, 2022 05:30 PM

[Register for 3rd Thursday webinars](#)

NC Medicaid Beneficiary Portal

Medicaid serves low-income parents, children, seniors, and people with disabilities. The Beneficiary Portal offers information on applying for Medicaid and more.

How do I get a ride to my medical appointment?
How do I change my health plan (PHP)?

[Go to the Beneficiary Portal](#)

Traumatic Brain Injury

- As part of the TBI grant, the Brain Injury Association of NC (BIANC) will be initiating a **pilot with Family Services of Davidson County to screen individuals for TBI starting in late April**.
- A new pilot program is being developed in collaboration with the Justice Innovations Section and the Brain Injury Association of NC (BIANC) to screen individuals for TBI and Mental Health within the criminal justice system.
- The **TBI State Action Plan is currently under review for updates**. Anyone interested in participating in these workgroup meetings are encouraged to reach out to the TBI program at TBIContact@dhhs.nc.gov
- The **TBI Program is recruiting for membership on the TBI Grant Steering Committee**. This steering committee plays an important role in oversight of grant activity, monitoring project progress, making recommendations, problem solving challenges and other critical functions. Interested individuals should contact Sandy Pendergraft at, sandy.pendergraft@bianc.net, or Michael Brown at, michael.brown@dhhs.nc.gov. All are welcome and encouraged to join!
- The Brain Injury Association of NC (BIANC) website offers a large variety of information, educational learning tools and maintains a comprehensive online resource guide. The website can be found at www.bianc.net
- Centers for Medicare and Medicaid Services (CMS) has approved the TBI waiver renewal effective April 1, 2022. In the coming months this waiver will expand into Orange and Mecklenburg counties. Additional information will be available on the TBI program webpage in the near future at [Traumatic Brain Injury | NCDHHS](#)

A diverse and growing library of free online TBI training modules can be found at www.biancteach.net

Veterans, Service Members & Families

Resource Link for Veterans and Military Members:

<https://www.va.gov/VE/pressreleases/2021081801.asp>

[Guidelines for Helping Your Family after Combat Injury](#)

[Impact of Invisible Injuries: Helping your Family and Children](#)
[Understanding Refugee Trauma: For School Personnel](#)
[After a Crisis: Helping Young Children Heal](#)

[NCGWG Meetings](#)

[Resource Guide for Veterans](#)



Educational Opportunities



The National Council For Mental Wellbeing invites you to join thousands of professionals representing the very best of our field as they convene at NatCon22, the largest conference in mental health and substance use treatment, from April 11-13, 2022, to be held at the Gaylord National Resort & Convention Center in the Washington, D.C., metropolitan area .

[Register Now](#)

NC TIDE 2022

Behavioral Health Conference

April 25-27, 2022 in Wilmington, NC

[Registration link](#)

[Session Information](#)

[Sponsorship Opportunities](#)

[Hotel Reservation](#)



Registration is Open click on above links. Register by 4/1/22 to take advantage of the early bird savings!!

Buy 4 and get the 5th one for free!

Save the Date for Spring 2022 13th Annual NC
"One Community in Recovery" Conference:
Healing Together After Being Apart
April 27-29, 2022

The Conference Center at GTCC, Colfax, NC Attend in person or via live webinar! To find out more about this conference or to register, click on the following link:

<https://tinyurl.com/y63cmanc>



Educational Opportunities



[Register Here](#)

Healing Clients, Families, and Ourselves
Mountain Area Health Education Center

121 Hendersonville Road, Asheville, NC 28803-2868

May 4-6, 2022



**RIGHTS
ACCESS
EQUITY**
for all victims

Help crime survivors find their justice.

National Crime Victims' Rights Week | April 24-30, 2022

Join Us!

As we renew our dedication to helping crime victims find justice.

Monday, April 25, 2022, 12:30 p.m.

Iredell County Hall of Justice, 226 Stockton St.

(Rain location: Courtroom 2, Iredell County Hall of Justice)

Speakers:

Jim Mixson, Iredell County Clerk of Superior Court

Sarah Kirkman, District Attorney, Iredell and Alexander counties

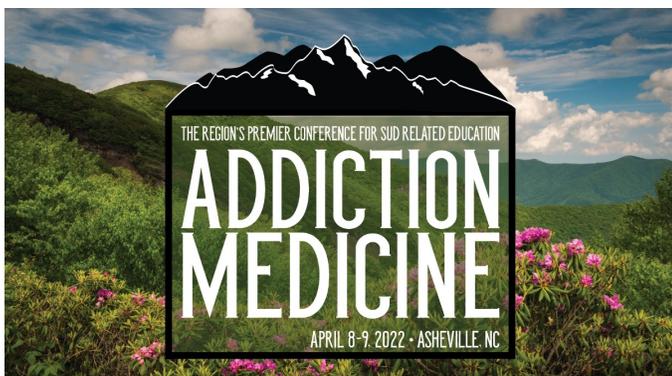
Prayer by Pastor Jason Whitley, Major, Wilkes County Sheriff's Office

Provider Appeal Rights Defined in the Standard Plan

Provider appeal rights defined in the Standard Plan Contract Section V.D.5 Provider Grievances and Appeals, and the appeal processes outlined in the Prompt Payment Fact Sheet, include deadlines to submit appeals which may vary by Standard Plans, from 30 days to 365 days after the decision, giving rise to the right to appeal. The Department shared concerns from providers about these deadlines with the Standard Plans. In response, Standard Plans will temporarily extend the following minimum appeal timeframes to support the transition to NC Medicaid Managed Care:

For more information, see [Extension to NC Medicaid Managed](#)

Appeal Submission Date	Minimum Appeal Timeframe
Through Jan. 31, 2022	90 calendar days from the decision giving rise to the right to appeal
Feb. 1, 2022 through March 31, 2022	60 calendar days from the decision giving rise to the right to appeal
April 1, 2022 and later	30 calendar days from the decision giving rise to the right to appeal



[Register Today!](#)

Press Releases from the State

To find out the newest information from the State please check our web site at:

<https://www.ncdhhs.gov/press-releases>

Peer Support Job Board

Click [here](#) for up-to-date available peer support jobs across the state.

Peer Support Certification Renewal Reminders

Attention Peer Support Specialists!

Peer Support Certification Renewal reminders are sent 60 days before your certification expires. Please visit the Peer Support Program [website](#) for details on how to renew your certification.

Upcoming PSS Trainings

- [New PSS 40-Hour Trainings](#)
- [20-Hour Additional Trainings](#)

Reporting Complaints or Ethical Violations

Allegations or observation of unethical and/or illegal behavior of a CPSS may be reported at <https://pss.unc.edu/contact-us> or by calling 919-843-3018.

PSS Employment Information

- 3897 Certified Peer Support Specialists as of January 21, 2021
- 1618 Certified Peers are employed as PSS
- 802 PSS are seeking employment

Full & up-to-date statistics can be found by visiting:

<https://pss.unc.edu/data>

Your feedback is appreciated

Your feedback on this page is much appreciated! Please feel free to email us at CEandE.Staff@dhhs.nc.gov with any tips.

Community Engagement & Empowerment Team

The Division of MH/DD/SAS, Community Engagement and Empowerment team provides education, training, and technical assistance to internal and external organizations and groups to facilitate community inclusion and meaningful engagement of persons with lived MH/DD/SUD experience across HHS policy making, program development, and service delivery systems. Learn more at: <https://www.ncdhhs.gov/assistance/mental-health-substance-abuse/community-empowerment-and-engagement>



Innovations Waiver Slot Allocation

Consumer Family Advisory Council (CFAC)

April 4, 2022

Background

- The NC General Assembly appropriated funding for 1000 new Innovations waiver slots statewide per the state budget:
 - 400 slots to be made available by March 1, 2022
 - 600 slots to be made available by June 1, 2022

Background

- The legislation includes two ways that the slots must be allocated:
- Current method: based on Medicaid population per county
- New method: based on total population per county

Allocation By County

	Cumberland	Durham	Johnston	Orange	Mecklenburg	Wake	Total
Total Population Allocation	3	2	2	1	8	8	24
Total Medicaid Allocation	13	8	6	2	30	22	81
Total Slots	16	10	8	3	38	30	105



Monday, April 11, 2022

Durham CFAC MEETING - REGULAR MEETING

Virtual meeting via videoconference

MEMBERS PRESENT: Steve Hill, Tammy Shaw, James Henry, Latasha Jordan, Dave Curro, Brenda Solomon, Chris Dale, Pinkey Dunston, Regina Mays, Charlitta Burruss, Helen Castillo

BOARD MEMBERS PRESENT: None

GUEST(S): ShaVaila Ingram DHHS, Victoria Nneji

STAFF PRESENT: Ramona Branch, Member Inclusion & Outreach Manager, Fantasia Jones, Member Inclusion & Outreach Specialist

<https://alliancehealthplan.zoom.us/j/98180766572>

1. WELCOME AND INTRODUCTIONS

2. REVIEW OF THE MINUTES – The minutes from the March 14, 2022, Consumer and Family Advisory Committee (CFAC) meeting were reviewed; a motion was made by Steve Hill and seconded by Brenda Solomon to approve the minutes. Motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Public Comments	No public comments	N/A	N/A
4. State Updates	<p>ShaVaila Ingram, DHHS was in attendance and went over the April CE&E:</p> <ul style="list-style-type: none"> ➤ Administrative Assistance Day: 4/27 ➤ April is Alcohol awareness and National Autism awareness ➤ Provider and Consumer Calls: Joint DMHDDSAS & DHB Update call: Provider Thursday, April 7, 2022 3:00 p.m.— 4:00 p.m ➤ The State Consumer and Family Advisory Committee (SCFAC) meeting is on the 2nd Wednesday of every month and is open to the public. Next Meeting: Wednesday, April 13, 2022 – Hybrid meeting Time: 9:00 a.m.— 3:00 p.m. ➤ NC Medicaid Managed Care Information Beneficiaries have several resources to help answer questions about their transition to NC Medicaid Managed Care. ➤ NC Medicaid Managed Care Hot Topics Webinar Series; Every 3rd Thursday of the month from 5:30 p.m.-6:30 p.m. Medicaid Hot Topics Tailored Plan and Behavioral Health Apr 21, 2022 05:30 PM May 19, 2022 05:30 PM Jun 16, 2022 05:30 PM ➤ Tailored Care Management Updates NCCDD’s Self Advocate Discussion Series The NC Council on Developmental Disabilities (NCCDD) will again sponsor a virtual monthly self-advocate discussion series. Discussions aim to emphasize the value of people with disabilities to build and maintain relationships with NC 		

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Monday, April 11, 2022

Durham CFAC MEETING - REGULAR MEETING

Virtual meeting via videoconference

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<p>legislators and decision-makers while bridging relationships and a network among NC self-advocates. Webinars will be held monthly from 1-2 PM via Zoom • Wednesday, April 6 - 1 PM • Wednesday, May 4 - 1 PM • Wednesday, June 1 - 1 PM With NC Medicaid’s transformation to managed care, the North Carolina Department of Health and Human Services (NCDHHS) will continue to offer to Medicaid beneficiaries a comprehensive array of behavioral health, intellectual/ developmental disability (I/DD) and traumatic brain injury (TBI) services.</p> <ul style="list-style-type: none"> ➤ Veterans, Service Members & Families Update and resources ➤ Redefined NATCON22 is the largest conference in mental health and substance use treatment, from April 11- 13, 2022, to be held at the Gaylord National Resort & Convention Center in the Washington, D.C., metropolitan area. ➤ Women’s Recovery Conference in person or webinar 121 Hendersonville Road, Asheville, NC 28803-2868 May 4-6, 2022 ➤ Nation Crime Victims’ Rights Week: Renewing dedication to helping crime victims find justice. Monday, April 25, 2022, 12:30 p.m. Iredell County Hall of Justice, 226 Stockton St. (Rain location: Courtroom 2, Iredell County Hall of Justice) ➤ PSS updates 		
<p>5. LME/MCO Updates</p>	<p>Innovations Waiver Slots (Share Rob’s PPT)</p> <ul style="list-style-type: none"> ➤ The NC General Assembly appropriated funding for 1000 new Innovation’s waiver slots statewide per the state budget: 400 slots to be made available by March 1, 2022 and 600 slots to be made available by June 1, 2022 ➤ Alliance will receive 105 slots for March 1, 2022, out of the 400, we do not know just yet how Alliance will receive for the second allocation on June 1, 2022. <p>Child and Family Specialty Plan (Share Paige’s document from Leadership Meeting)</p> <ul style="list-style-type: none"> ➤ Delay the implementation of a single statewide CFSP to prevent more system disruption for the Medicaid population and enable the benefit of current service and infrastructure investments to be realized. 		<p>N/A</p>

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> ➤ Fully enroll these youth in Behavioral Health I/DD Tailored Plans, on a regional basis aligned with the Tailored Plan regions, launching December 1, 2022, to ensure that they and their families receive integrated care as timely as possible. ➤ For any CFSP model to be successful, we recommend that time and resources (state and local) be immediately utilized to address identified service gaps and systemic challenges across the state. ➤ Take action to improve and ensure standardization of key areas across LME/MCOs including provider networks, transitions of care, and service authorizations/passthroughs. <p>Child and Family Specialty Plan (Share Paige’s document from Leadership Meeting)</p> <ul style="list-style-type: none"> ➤ Delay the implementation of a single statewide CFSP to prevent more system disruption for the Medicaid population and enable the benefit of current service and infrastructure investments to be realized. ➤ Fully enroll these youth in Behavioral Health I/DD Tailored Plans, on a regional basis aligned with the Tailored Plan regions, launching December 1, 2022, to ensure that they and their families receive integrated care as timely as possible. ➤ For any CFSP model to be successful, we recommend that time and resources (state and local) be immediately utilized to address identified service gaps and systemic challenges across the state. ➤ Take action to improve and ensure standardization of key areas across LME/MCOs including provider networks, transitions of care, and service authorizations/passthroughs. 		
<p>6. Steering Committee Updates</p>	<p>Ramona discussed the following updates</p> <p>Medicaid Direct Update</p> <ul style="list-style-type: none"> ➤ What is NC Medicaid Direct? 		<p>N/A</p>

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Monday, April 11, 2022

Durham CFAC MEETING - REGULAR MEETING

Virtual meeting via videoconference

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<p>NC Medicaid Direct is North Carolina's current health care program for Medicaid beneficiaries who are not enrolled in NC Medicaid Managed Care.</p> <ul style="list-style-type: none"> ➤ Tailored Plans will be responsible for behavioral health coverage for Medicaid Direct populations. (Includes Foster Care Population – Only managing their Behavioral Health Needs) ➤ Some of these individuals will be eligible for Tailored Plan Care Management and some of them will not. ➤ Medicaid Direct contracts between the state and MCO's have not yet been finalized. <p>Tailored Plan Readiness Reviews</p> <ul style="list-style-type: none"> ➤ Desktop reviews will be held from 3/29-8/5 ➤ On-site review for Alliance will be held on 7/25-7/26 ➤ Call Center Virtual On-Site Reviews will be held 5/10-5/12 		
7. Announcements	<ul style="list-style-type: none"> ➤ Charlitta discussed the updates of the installation of hygiene hand washing stations at Edgemont Park on April 20th, children will be included in the artwork of the project. ➤ Ramona mentions the process and committee opinion on upcoming face to face meetings. ➤ Steve announces his plans to discontinue being apart of the CFAC committee and introduced his replacement for TROSA representation Herb Trippert. ➤ Herb agreed to get information in regard to TROSA agreeing to upcoming CFAC face to face meetings. 	N/A	N/A

ADJOURNMENT: 6:57 pm the next meeting will be May 9, 2022, at 5:30 p.m.

Respectfully Submitted by:

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Monday, April 11, 2022

Durham CFAC MEETING - REGULAR MEETING

Virtual meeting via videoconference

[Click here to enter text.](#)

Date Approved

DRAFT

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.

North Carolina's Children and Families Specialty Plan (CFSP)

March-April 2022
Revise & Finalize CFSP RFP



June-November 2022
Issue & Award CFSP RFP



December 2023
CFSP Launch

Alliance Health Response to the February 2022 'Children and Family Specialty Plan Policy Paper':



- **Delay the implementation** of a single statewide CFSP to prevent more system disruption for the Medicaid population and enable the benefit of current service and infrastructure investments to be realized.
- **Fully enroll these youth in Behavioral Health I/DD Tailored Plans**, on a regional basis aligned with the Tailored Plan regions, launching December 1, 2022, to ensure that they and their families receive integrated care as timely as possible.
- In order for any CFSP model to be successful, we recommend that **time and resources** (state and local) be immediately **utilized to address identified service gaps and systemic challenges** across the state.
- Take action to **improve and ensure standardization** of key areas across LME/MCOs including **provider networks, transitions of care, and service authorizations/passthroughs**.

Recommendations from 'Transforming Child Welfare and Family Well-Being Together: A Coordinated Action Plan for Better Outcomes':

- **Expand High-Fidelity Wraparound Services Pilots Statewide**, \$5.1M in recurring funding needed for statewide expansion
- **Launch Sobriety, Treatment & Recovery Teams (START) Substance Use Treatment Pilots in 10 Counties**, Funding secured through SFY 24, \$2.8M in recurring funding beginning in SFY 25
- **Expand MORES Mobile Crisis Intervention Teams Statewide**, \$28M in recurring funding needed for statewide expansion
- **Strengthen Care Coordination for Children and Youth in DSS Care and for Former Foster Youth**, No new funding needed, recurring funding secure through NC Medicaid until the launch of Tailored Plans and CFSP
- **Expand NC Psychiatric Access Line (NC-PAL) Program Statewide**, No new funding needed, funded through MH Block Grant and NC Medicaid
- **Implement the "988" Statewide Crisis Hotline**, \$2.7M in recurring funding needed to expand call center
- **Establish Placement First Pilots**, \$8M in recurring funding needed to implement NEW strategy
- **Establish Crisis, Inpatient and Residential Bed Tracking and Crisis Referral System**, \$10M in recurring funding needed to maintain tracking system



HELPFUL RESOURCES

[NC Medicaid Children and Families Specialty Plan Website](#)

UPDATE: [Children and Family Specialty Plan Policy Paper \(Responded on 3/4/2022\)](#)

Original: [NC's Specialized Foster Care Plan Frequently Asked Questions](#)

***NEW*:** [Transforming Child Welfare and Family Well-Being Together Action Plan](#)

- **Establish Emergency Respite Pilots for Caregivers**, \$3.6M in recurring funding needed to provide state match
- **Build Professional Foster Parenting Programs**, \$2M in recurring funding needed for pilot
- **Strengthen NCDHHS Rapid Response Team**, \$500K in recurring funding needed for staffing and data management
- **Develop a Plan to Increase Supply of Appropriate Treatment and Residential Placements for Children Needing Behavioral Health Services**, No additional funding needed to develop plan
- **Use Administrative Flexibilities and Enforcement to Create New Placement and Service Options for Children**, \$200K in recurring funding for staffing



Tuesday, April 19, 2022

Johnston CFAC MEETING - REGULAR MEETING
Hybrid/Virtual Via Zoom
5:30 – 7:00 p.m.

MEMBERS PRESENT: Marie Dodson, Jason Phipps, Jerry Dodson, Albert Dixon, Bobby Dixon, and Leanna George

BOARD MEMBERS PRESENT: None

GUEST(S): Suzzanne Thompson, DHHS

STAFF PRESENT: Ramona Branch, Member Inclusion & Outreach Manager, Noah Swabe, Member Inclusion Specialist

Zoom Link: <https://alliancehealthplan.zoom.us/j/97531673591>

1. WELCOME AND INTRODUCTIONS

2. REVIEW OF THE MINUTES – The minutes from March were reviewed a motion was made by Albert, seconded by Jason, motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Public Comment Individual/Family Challenges and Solutions	<p>Albert shared he has been struggling with his supervised living low provider and individuals receiving the proper amount of support. Albert reports he has filed several complaints with Alliance about the issue but has not seen resolution. Albert did express interest in meeting with Noah to further discuss the matter and possibly put in another grievance.</p> <p>Jason shared he continues to struggle with the public school system. Highlighting the clear lack of engagement with Vocational Rehabilitation and what appears to be a lack of engagement on the public school system. Jason asked about the process to file a grievance with Vocational Rehabilitation and the public school system. It was suggested Jason seek out support from the Department of Public Instruction in regard to the school system and Suzzanne with DHHS was going to look into the process with VR.</p>	<p>Marie suggested inviting several of the representatives for the school system to an upcoming CFAC meeting. Noting there has been on going challenges, opening the meeting to discuss some of the family challenges with school leaders, the group will revisit this at the May meeting.</p> <p>Noah will reach out to Albert to follow up on next steps regarding his grievance.</p>	Ongoing
4. LME/MCO Updates	<p>Innovations Waiver Slots</p> <ul style="list-style-type: none"> The NC General Assembly appropriated funding for 1000 new Innovation's waiver slots statewide per the state budget:400 slots to be made available by March 1, 2022 and 600 slots to be made available by June 1, 2022 Alliance will receive 105 slots for March 1, 2022, out of the 400, we do not know just yet how Alliance will receive for the second allocation on June 1, 2022. <p>Child and Family Specialty Plan</p>	CFAC members have been given information on the Child Specialty Plan to review. If members see fit they will provide input for a letter supporting the delayed implantation.	Ongoing

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Tuesday, April 19, 2022

Johnston CFAC MEETING - REGULAR MEETING
Hybrid/Virtual Via Zoom
 5:30 – 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> • Delay the implementation of a single statewide CFSP to prevent more system disruption for the Medicaid population and enable the benefit of current service and infrastructure investments to be realized. • Fully enroll these youth in Behavioral Health I/DD Tailored Plans, on a regional basis aligned with the Tailored Plan regions, launching December 1, 2022, to ensure that they and their families receive integrated care as timely as possible. • For any CFSP model to be successful, we recommend that time and resources (state and local) be immediately utilized to address identified service gaps and systemic challenges across the state. • Take action to improve and ensure standardization of key areas across LME/MCOs including provider networks, transitions of care, and service authorizations/passthroughs. <p>NC Medicaid Direct is North Carolina’s current health care program for Medicaid beneficiaries who are not enrolled in NC Medicaid Managed Care.</p> <ul style="list-style-type: none"> • Tailored Plans will be responsible for behavioral health coverage for Medicaid Direct populations. (Includes Foster Care Population – Only managing their Behavioral Health Needs) • Some of these individuals will be eligible for Tailored Plan Care Management and some of them will not. • Medicaid Direct contracts between the state and MCO’s have not yet been finalized. <p>Tailored Plan Readiness Reviews</p> <ul style="list-style-type: none"> • Desktop reviews will be held from 3/29-8/5 • On-site review for Alliance will be held on 7/25-7/26 • Call Center Virtual On-Site Reviews will be held 5/10-5/12 		
<p>5. State Updates</p>	<p>Suzanne Thompson, DHHS was in attendance and went over the April CE&E:</p> <ul style="list-style-type: none"> • Administrative Assistance Day: 4/27 • April is Alcohol awareness and National Autism awareness 	<p>None</p>	<p>Ongoing</p>

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Tuesday, April 19, 2022

Johnston CFAC MEETING - REGULAR MEETING
Hybrid/Virtual Via Zoom
 5:30 – 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> • NC Medicaid Managed Care Information Beneficiaries have several resources to help answer questions about their transition to NC Medicaid Managed Care. • NC Medicaid Managed Care Hot Topics Webinar Series; Every 3rd Thursday of the month from 5:30 p.m.-6:30 p.m. Medicaid Hot Topics Tailored Plan and Behavioral Health Apr 21, 2022 05:30 PM May 19, 2022 05:30 PM Jun 16, 2022 05:30 PM • Women’s Recovery Conference in person or webinar 121 Hendersonville Road, Asheville, NC 28803-2868 May 4-6, 2022 • Nation Crime Victims’ Rights Week: Renewing dedication to helping crime victims find justice. Monday, April 25, 2022, 12:30 p.m. Iredell County Hall of Justice, 226 Stockton St. (Rain location: Courtroom 2, Iredell County Hall of Justice) 		
6. Guardianship Video/One Pager	Noah showed a demo of the guardianship html website. This website will serve in place of the PDF one pager as it would make the material more accessible and easy to update. CFAC members made comments on additional resources and changes before launching the site.	Noah has compiled a list of additions, changes, and corrections. Noah will work with marketing and communications department to put together a final draft and send out to the CFAC for approval.	ASAP
7. Announcements	NAMI Walk May 21 st at Dorothea Dix Park		

8. **ADJOURNMENT:** Next Meeting May 17, 2022 at 5:30pm via Zoom

Respectfully Submitted by:

Noah Swabe, Member Inclusion Specialist

[Click here to enter text.](#)

Date Approved

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Monday, April 25, 2022

**Mecklenburg CFAC Subcommittee Meeting
Via Video Conference**

MEMBERS PRESENT: ☒ Ron Clark ☒ Linda Campbell ☒ John Corrigan ☒ Randy Sperling ☒ Ruth Reynolds
☒ Jim Sonda ☒ Shagun Gaur ☒ Melida Baldera

BOARD MEMBERS PRESENT:

GUEST(S): ☒ ShaValia Ingram, DHHS ☒ Michael Flood ☒ Beverly Corpening ☒ Vanessa Infazon ☒ Lois Stickell ☒ Shari Phillips-Stratton ☒ Jocie Cremisi

STAFF PRESENT: ☒ Lakeisha McCormick, Manager Member Inclusion and Outreach ☒ Eileen Bennett Member Inclusion and Outreach Specialist, ☒ Aalece Pugh-Lilly, Sr Director Community Health & Well Being.

Please sign-up for each meeting via: Please Right Click on the below link and press “OPEN HYPERLINK” to register

Zoom Link: <https://alliancehealthplan.zoom.us/j/96957815983>

Meeting ID: 969 5781 5983

Phone Number:

+1 646 558 8656 US (New York)

1. **WELCOME AND INTRODUCTIONS** Ruth Reynolds
2. **Review of the Minutes**-The minutes from the February 28, 2022 and the March 28, 2022 Consumer and Family Advisory Committee (CFAC) meeting were reviewed; a motion was made and seconded to approve the minutes. Motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. State Updates	ShaValia Ingram provided an update on State Events. Ron Clark asked a question regarding grant opportunities. Shavalia provided some navigational support to him. Linda Campbell asked if there was a way to get a synopsis of the Medicaid Hot Topics Webinar. Shavalia mentioned that anyone can participate. Eileen Bennett noted that she attends the webinars and can provide a synopsis from time to time if that would be helpful.		
5. Training Topic Updates/Timeline	Eileen Bennett-provided an overview of the topics we discussed last month and asked the members to decide what order they would like to have the topics of interest. The members discussed and chose the following topics: May-CFAC/Self Care June Innovations Waiver/CFAC July-TBI/Housing August-Accessing Care/Advocacy		

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.

Monday, April 25, 2022

**Mecklenburg CFAC Subcommittee Meeting
Via Video Conference**

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
6. LME/MCO Updates/Human Rights Committee	-Lakeisha McCormick said that she and Eileen Bennett would be reaching out to everyone to schedule 1-1 meetings in regard to CFAC. She also indicated that we need some members for the Human Rights Committee. Lakeisha described that the Human Rights Committee reviews data around grievances, complaints, and incident trends. The committee meets quarterly virtually from 4-5:30pm; next meeting July 14 th . And, if there was any interest in that to reach out to her or Eileen Bennett. Lakeisha offered some updates on Medicaid Direct, who qualifies, and the Child and Family Specialty Plan. Lakeisha also went over the Innovations Waiver new slots updates. She discussed the legislation as well as what this means for Mecklenburg County. Shagun Gaur asked a question in regard to the waitlist being shorter now that Meck has more slots. Lois Stickell asked a question in regard to Medicaid Direct. Jim Sonda Asked if Medicaid Direct and other Medicaid providers would offer the same services. Jocie Cremisi asked if members with Dual Coverage if Medicaid Direct would change their behavior coverage.		
7. Vote on New Members	Ruth Reynolds-Noted that May 19 th there would be an event at Goodwill and Eileen Bennett pulled up the flyer for everyone to see. Next we had a motion to vote in two new members. Lois Stickell and Shari Phillips-Stratton. Beverly Corpening made a point of order that she was eligible to be voted in as she had attended two consecutive meetings. Eileen Bennett noted that there was no record of her attending the first meeting and that she had sent an email regarding this issue earlier in the month directly to Beverly. Beverly noted that she did not receive the note. Beverly noted that she had joined the meeting under another name. Eileen Bennett noted that that name was noted in her minute notes but that no one had come forward to say who it was. Randy Sperling made a point of order that Beverly was at the first meeting. Eileen Bennett noted that the decision as to whether Beverly should be voted in or should not rests with the Chair. Ruth Reynolds noted that she approved voting on Beverly Corpening. A vote was tendered for Beverly, Lois and Shari with a show of hands. A majority of hands were noted for each and all three were voted in.		
8. Public Comments/Questions	No other questions were asked. Randy Sperling motioned to adjourn the meeting and Shagun Gaur seconded.		

9. ADJOURNMENT: the next meeting will be May 23, 2022, at 5:30 p.m.

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.

Monday, April 25, 2022

**Mecklenburg CFAC Subcommittee Meeting
Via Video Conference**

Respectfully Submitted by:

Eileen Bennett, Member Inclusion and Outreach Specialist

Date Approved

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Tuesday, April 26, 2022

CFAC MEETING - REGULAR MEETING

201 Sage Rd. Suite 100A Chapel Hill, NC 27514
5:30- 7:00 p.m.

MEMBERS PRESENT: , Steve Furman- Chair Person , Allen Dittmer , Paula Harrington , Aiden Malsbary

BOARD MEMBERS PRESENT: None

GUEST(S): , Shavalia Ingram Carol Conway

STAFF PRESENT: , Lori Caviness-Interim Director of Community and Member Inclusion , Ramona Branch-Inclusion & Outreach Manager , Douglas McDowell- Member Inclusion and Outreach Specialist-Orange County

1. **WELCOME AND INTRODUCTIONS-** Ramona Branch made introductions and discussed issues with connectivity and the Zoom link
2. **REVIEW OF THE MINUTES –** The minutes from the March 22, 2022, Consumer and Family Advisory Committee (CFAC) meeting were reviewed; a motion was made by Steve Furmqn and seconded by Paula Harrington to approve the minutes. Motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Public Announcements	Guest Carol Conway-Discussions surrounding local planned events and possible collaboration with existing plans, i.e., justice united, etc	Outreach event planned and presented-Before next fiscal year	
4. State Updates	<p>Ramona Branch offered state updates as follows: Reminded all, most events have already come and gone for April.</p> <ul style="list-style-type: none"> •Administrative Assistance Day: 4-27 •April is Alcohol awareness and National Autism awareness • Provider and Consumer Calls: Joint DMHDDSAS & DHB Update call: Provider Thursday, April 7, 2022 3: p.m.— 4:p.m • The State Consumer and Family Advisory Committee (SCFAC) meeting is on the 2nd Wednesday of every month and is open to the public. Next Meeting: Wednesday, April 13, 2022 Hybrid meeting Time: 9 a.m.-3 p.m. • Tailored Care Management Updates NCCDD’s Self Advocate Discussion Series -The NC Council on Developmental Disabilities (NCCDD) will again sponsor a virtual monthly self-advocate discussion series. Discussions to focus on the value of people with disabilities, and importance on building/maintaining relationships with local legislators and professionals. Webinars held monthly from 1-2 PM via Zoom • Wednesday, April 6 @1 PM • Wednesday, May 4 @ 1 PM • Wednesday, June 1 - 1 PM With NC Medicaid’s transformation to managed care, the (NCDHHS) will continue to offer to Medicaid beneficiaries a comprehensive array of behavioral health, intellectual/ developmental disability (I/DD) and traumatic brain injury (TBI) services. • Veterans, Service Members & Families Update and resources 		

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.

Tuesday, April 26, 2022

CFAC MEETING - REGULAR MEETING

201 Sage Rd. Suite 100A Chapel Hill, NC 27514

5:30- 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> NATCON 2022 is the largest conference in mental health and substance use treatment, from April 11- 13, 2022, Gaylord National Resort & Convention Center in the Washington, D.C. PSS updates and information pertaining to credentialing/recertifications 		
<p>5. LME/MCO Updates</p>	<p>Ramona Branch discussed Innovations Waiver Slots were discussed, and numbers allotted to each county. Ramona continued with LME/MCO updates</p> <ul style="list-style-type: none"> NC General Assembly appropriated funding for 1000 new Innovation's waiver slots statewide per the state budget: 400 slots made available by March 1, 2022 and 600 slots made available by June 1, 2022 Alliance will receive 105 slots for March 1, 2022, out of the 400, we do not know just yet how Alliance will receive for the second allocation on June 1, 2022. Alliance then further crunched the numbers, with Orange County receiving one slot. <p>Much discussion among committee members about the Child and Family Specialty Programs when topic was raised.</p> <ul style="list-style-type: none"> There will be a delay in implementation of a single statewide CFSP to prevent more system disruption for the Medicaid population and enable the benefit of current service and infrastructure investments to be realized. For any CFSP model to be successful, we recommend that time and resources (state and local) be immediately utilized to address identified service gaps and systemic challenges across the state. Take action to improve and ensure standardization of key areas across LME/MCOs including provider networks, transitions of care, and service authorizations/passthroughs. Delay the implementation of a single statewide CFSP to prevent more system disruption for the Medicaid population and enable the benefit of current service and infrastructure investments to be realized. 		
<p>6. Steering Committee Updates</p>	<p>Ramona discussed the steering committee updates, starting with information about Medicaid Direct</p> <ul style="list-style-type: none"> Medicaid Direct explained by Ramona Branch- NC Medicaid Direct is North Carolina's current health care program for Medicaid beneficiaries who are not enrolled in NC Medicaid Managed Care. Tailored Plans will be 		

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.

Tuesday, April 26, 2022

CFAC MEETING - REGULAR MEETING

201 Sage Rd. Suite 100A Chapel Hill, NC 27514
5:30- 7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	responsible for behavioral health coverage for Medicaid Direct populations. (Includes Foster Care Population/Only managing their Behavioral Health Needs) • Some of these individuals might be eligible for Tailored Plan Care Management and some of them will not. Medicaid Direct contracts between the state and MCO's yet to be finalized. Discussions related to Tailored Plan Readiness Reviews • Desktop reviews will be held from 3/29-8/5 •On-site review for Alliance held on 7-25-7-26 • Call Center Virtual On-Site Reviews will be held 5/10-5/12		
7. Outreach Events	•Much discussion was had concerning outreach events: Carol Conway-(guest) shared about the work Justice United is doing in Orange county and how it pertains to the Latin X population-•Paula Harrington suggested having someone come speak about whatever service they provide to educate and inform members.	Ramona Branch- "Need to have an outreach planned and presented before the start of the next fiscal year". July 2022	
8. CFAC Recruitment	•Carol Conway was present and participating -Disability Representation (IDD Family Member)-has completed and submitted profile information (2 nd meeting as of 04-26) •Candace Alley was present via Zoom-Disability Representation Substance Use/Complex-Trauma -2 nd meeting as of 04-26	Candace Alley-Next meeting can be voted on to the committee. Carol Conway- Two more meetings before vote.	

ADJOURNMENT: The next meeting will be May 24, 2022, 5:30 p.m.- 7:00 p.m.

Respectfully Submitted by:

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.

Tuesday, April 26, 2022

CFAC MEETING - REGULAR MEETING
201 Sage Rd. Suite 100A Chapel Hill, NC 27514
5:30- 7:00 p.m.

Douglas McDowell-BA CPSS- Member Inclusion and Outreach Specialist
Date Approved

DRAFT

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Thursday, April 28, 2022

CFAC MEETING - REGULAR MEETING
(Virtual Meeting via Video Conferencing and In Person)

MEMBERS PRESENT: Michael McGuire Ellen Gibson, Dorothy Johnson Carrie Morrisy Jackie Blue Sharon Harris Briana Harris Shirley Francis
 Tekeyon Lloyd Tracey Glenn- Thomas Renee Lloyd Carson Lloyd Jr. Felishia McPherson Alejandro Vasquez Andrea Clementi

BOARD MEMBERS PRESENT:
GUEST(S):

STAFF PRESENT: Starlett Davis, Member Engagement Specialist, Ramona Branch Membership Outreach and Inclusion Management

Join Zoom Meeting

[https://alliancehealthplan.zoom.us/meeting/register/tJ0scOyrpjwrE9x3eLYcqpxB0H5r6YLuY0K2](https://alliancehealthplan.zoom.us/join/https://alliancehealthplan.zoom.us/meeting/register/tJ0scOyrpjwrE9x3eLYcqpxB0H5r6YLuY0K2)

Call in Number: +1 646 558 8656

Meeting ID: 910 6733 3915

1. **WELCOME AND INTRODUCTIONS:** Michael Maguire
2. **REVIEW OF THE MINUTES** – The minutes from the March 24, 2022, Consumer and Family Advisory Committee (CFAC) meeting were reviewed; a motion was made by Michael Maguire and seconded by Dorothy Johnson to approve the minutes. Motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Public Comments	N/A		Ongoing
4. ADA Updates	Shirley Francis was not in attendance- no updates given	Please see Shirley, Starlett or Ramona for any questions.	Ongoing
5. State Updates	<p>ShaVaila Ingram was not in attendance, Ramona went over the April CE&E update-</p> <ul style="list-style-type: none"> ➤ April is Alcohol awareness and National Autism awareness ➤ The State Consumer and Family Advisory Committee (SCFAC) meeting is on the 2nd Wednesday of every month and is open to the public. Next Meeting: Wednesday, May 11, 2022 – Hybrid meeting Time: 9:00 a.m.— 3:00 p.m. ➤ NC Medicaid Managed Care Information Beneficiaries have several resources to help answer questions about their transition to NC Medicaid Managed Care 	Please see Ramona, or Starlett for any questions.	Ongoing

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Thursday, April 28, 2022

CFAC MEETING - REGULAR MEETING
 (Virtual Meeting via Video Conferencing and In Person)

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> ➤ NC Medicaid Managed Care Hot Topics Webinar Series: Every 3rd Thursday of the month from 5:30 p.m.-6:30 p.m. Medicaid Hot Topics Tailored Plan and Behavioral Health May 19, 2022 05:30 PM Jun 16, 2022 05:30 PM ➤ Women’s Recovery Conference in person or webinar 121 Hendersonville Road, Asheville, NC 28803-2868 May 4-6, 2022 		
6. MCO	<p>Ramona Branch MCO Updates</p> <p>Innovations Waiver Slots</p> <ul style="list-style-type: none"> • The NC General Assembly appropriated funding for 1000 new Innovation’s waiver slots statewide per the state budget: • 400 slots to be made available by March 1, 2022 • 600 slots to be made available by June 1, 2022 • Alliance will receive 105 slots for March 1, 2022, out of the 400, we do not know just yet how Alliance will receive for the second allocation on June 1, 2022 <p>Child and Family Specialty Plan</p> <ul style="list-style-type: none"> • Delay the implementation of a single statewide CFSP to prevent more system disruption for the Medicaid population and enable the benefit of current service and infrastructure investments to be realized • Fully enroll these youth in Behavioral Health I/DD Tailored Plans, on a regional basis aligned with the Tailored Plan regions, launching December 1, 2022, to ensure that they and their families receive integrated care as timely as possible • For any CFSP model to be successful, we recommend that time and resources (state and local) be immediately utilized to address identified service gaps and systemic challenges across the state 	Paige Rosemond will be in attendance to the May Steering Committee and will give a presentation on the CFSP	N/A

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Thursday, April 28, 2022

CFAC MEETING - REGULAR MEETING
 (Virtual Meeting via Video Conferencing and In Person)

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> Take action to improve and ensure standardization of key areas across LME/MCOs including provider networks, transitions of care, and service authorizations/passthroughs <p>Medicaid Direct Update</p> <ul style="list-style-type: none"> What is NC Medicaid Direct? NC Medicaid Direct is North Carolina’s current health care program for Medicaid beneficiaries who are not enrolled in NC Medicaid Managed Care. Tailored Plans will be responsible for behavioral health coverage for Medicaid Direct populations. (Includes Foster Care Population – Only managing their Behavioral Health Needs) Some of these individuals will be eligible for Tailored Plan Care Management and some of them will not Medicaid Direct contracts between the state and MCO’s have not yet been finalized Rob and Sara offered to come back at a later date to give CFAC a more comprehensive Medicaid Direct update once we have additional clarification from the state about contract requirements <p>Tailored Plan Readiness Reviews</p> <ul style="list-style-type: none"> Desktop reviews will be held from 3/29-8/5 On-site review for Alliance will be held on 7/25-7/26 Call Center Virtual On-Site Reviews will be held 5/10-5/12 		
7. Appreciation	N/A	N/A	N/A

ADJOURNMENT: Meeting was adjourned at 6:54pm. The next meeting will be May 26th at 5:30pm virtual on Zoom

Respectfully Submitted by:

[Click here to enter text.](#)

Date Approved

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Finance Committee Report

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: The Finance Committee's function is to review financial statements and recommend policies/practices on fiscal matters to the Board, including reviewing/recommending budgets, audit reports, and financial statements. This Committee also reviews and recommends policies and procedures for managing contracts and other purchase of service arrangements.

This month's report includes documents and draft minutes from the previous meeting.

Also, as part of this month's report, per NCGS (NC general statute) 159-12 (b), a public hearing shall be held to allow any persons who wish to be heard on the budget to appear. The public hearing is separate from public comments that are part of each regular Board meeting. As Alliance is currently holding all Board meetings virtually; all participants must participate via electronic means only.

Public hearing on the FY23 budget may be submitted with the following guidelines:

- Comment may be submitted during the June 2 meeting. When the board chairperson calls for comments during the public hearing, virtual attendees may unmute and respond.
- Or-
- Comment on the FY23 budget may be submitted by 5:00 pm on June 1 via email to VIngram@AllianceHealthPlan.org or by voicemail message left at (919) 651-8466. Messages must include that you are commenting on the FY23 budget and must be no more than 350 words

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): Accept a motion to approve the FY22 Budget Amendment 2 to increase the budget by \$148,830,211 bringing the total FY22 budget to \$1,072,279,701.

Accept a motion to approve the FY23 Budget for \$1,370,306,955.

Accept a motion to authorize the CEO to enter into a contract with Milliman, Inc. for financial consulting services for an amount not to exceed \$1,500,000.

REQUEST FOR AREA BOARD ACTION: Approve the proposal.

CEO RECOMMENDATION: Approve the proposal.

RESOURCE PERSON(S): David Hancock, Committee Chair, Kelly Goodfellow, Executive Vice-President/Chief Financial Officer

[\(Back to agenda\)](#)



Finance Committee Meeting

Thursday, June 2, 2022

2:30-4:00 pm

AGENDA

1. **Review of the Minutes – May 5, 2022**
2. **Monthly Financial Reports as of April 30, 2022**
 - a. Summary of Savings/(Loss) by Funding Source
 - b. Statement of Revenue and Expenses (Budget & Actual)
 - c. Senate Bill 208 Ratios
 - d. DHB Contractual Ratios
3. **Contract(s)**
 - a. A **motion** to recommend the Board authorize the CEO to enter into a contract with Milliman, Inc. for financial consulting services for an amount not to exceed \$1,500,000.
4. **FY22 Amendment 2 and FY23 Budget Recommended for Approval**
 - a. A **motion** to recommend the Board approve the FY22 Budget Amendment 2 to increase the budget by \$148,830,211 bringing the total FY22 Budget to \$1,072,279,701.
 - b. A **motion** to recommend the Board approve the FY23 Budget for \$1,370,306,955.
5. **Adjournment**

Next Meeting: Thursday, August 4, 2022 from 3:00-4:00

Alliance Health

Hybrid meeting available in person and via Zoom



Thursday, May 05, 2022

BOARD FINANCE COMMITTEE - REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
 Virtual Meeting via videoconference - 2:30-4:00 p.m.

APPOINTED MEMBERS PRESENT: David Hancock, MBA, MPA (Committee Chair), D. Lee Jackson, Carol Council, and Vicki Evans

BOARD MEMBERS PRESENT: n/a

GUEST(S) PRESENT: Mary Hutchings, Wake County; Denise Foreman, Wake County

STAFF PRESENT: Rob Robinson, CEO, Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Ashley Snyder, Senior Director of Accounting, Sara Pacholke, Senior VP of Financial Operations

1. **WELCOME AND INTRODUCTIONS** – the meeting was called to order at 2:39 PM
2. **REVIEW OF THE MINUTES** – The minutes from the April 7, 2022, meeting were reviewed; a motion was made by Ms. Evans and seconded by Mr. Hancock to approve the minutes. Motion passed unanimously.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Monthly Financial Report	<p>The monthly financial reports were discussed which includes the Statement of Net Position, Summary of Savings/(Loss) by Funding Source, the Statement of Revenue and Expenses, Senate Bill 208 Required Ratios, and DHB Contract Ratios as of March 31, 2022.</p> <p>Ms. Pacholke discussed the following:</p> <ul style="list-style-type: none"> • Through 3/21/22 we have total assets of \$431,193,698. Total cash increased by \$38M due to cash received from Cardinal for unrestricted fund balance related to the county realignment. Due from other governments increased from the last quarter but was expected due to the increase in revenue as a result of the county realignment. We have total liabilities of \$173,296,810. Claims and other service liabilities increased \$32M since the last quarter as a result of the county realignment. • Through 3/31/22, we have savings of \$117.5M with \$85.6M being a transfer received from Cardinal for our share of Mecklenburg and Orange (restricted and unrestricted) fund balance. Administrative savings from an operational perspective and excluding TP reinvestment expenses have savings of \$3.6M (reported information includes TP reinvestment expenses). • We are meeting all SB208 and DHB contractual ratios. The Medical Loss Ratio (MLR) is over 88% however we continue to monitor this closely throughout the year. 		
4. Contract Approvals	<p>A contract increase for additional SQL and windows servers was presented. Alliance utilizes Microsoft software for operating systems and applications to run computers and servers. Due to the increase in total employees Alliance required more SQL and Windows server licenses. A motion was made by Mr. Hancock and seconded by Ms. Evans to recommend the Board approve the increased amount for</p>		

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Thursday, May 05, 2022

BOARD FINANCE COMMITTEE - REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
 Virtual Meeting via videoconference - 2:30-4:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	additional SQL and Windows server licenses related to increase staff under the contract with SHI for an amount not to exceed \$676,746. Motion passed unanimously.		
5. FY23 Recommended Budget	Ms. Pacholke presented the FY23 Recommended budget. The presentation included assumptions for each major revenue source. The recommended budget is \$1,010,355,380. This budget includes April 2022 rates due to the State not yet providing July 1 or December 1 (Tailored Plan go live) rates. As a result, the budget will increase significantly when these rates are received. The FY23 Recommended for Approval Budget will be presented at the June meeting and will incorporate all changes received between now and then. The budget approval in June will require super majority approval.		

6. **ADJOURNMENT:** the meeting adjourned at 3:30 PM; the next meeting will be June 2, 2022, from 2:30 p.m. to 4:00 p.m.

DRAFT

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



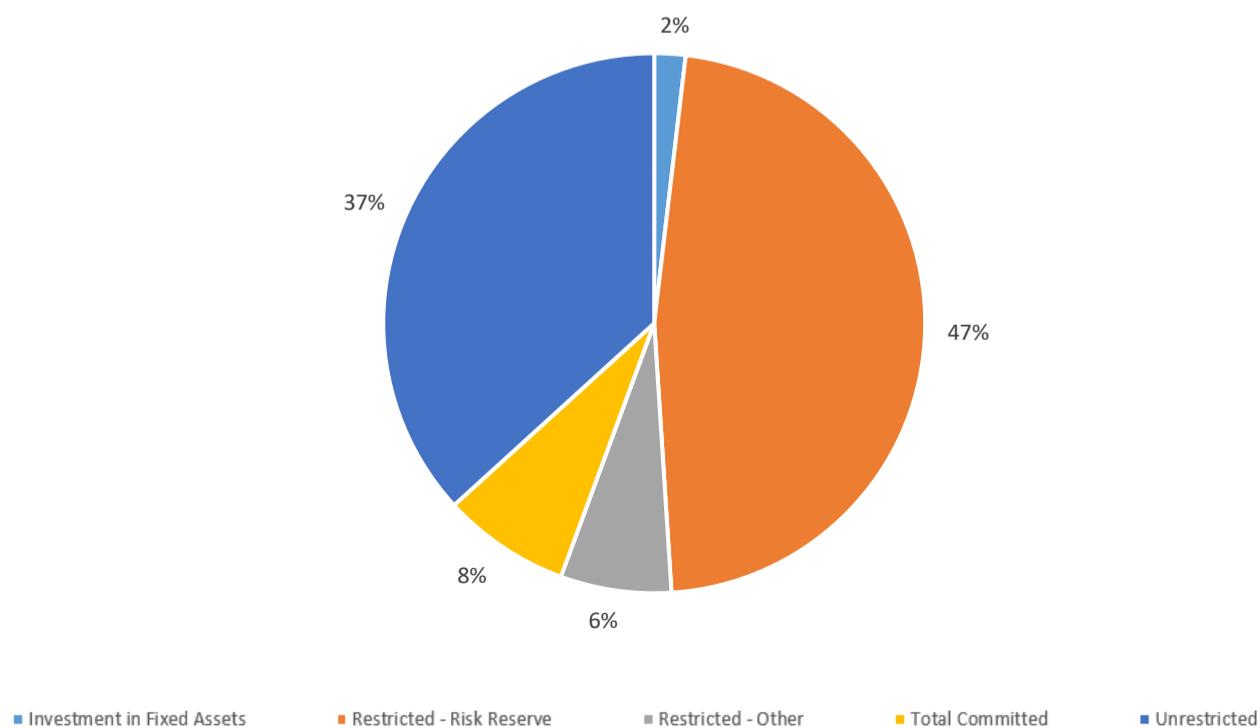
Summary of Savings/(Loss) by Funding Source as of April 30, 2022

	Revenue	Expense	Savings/(Loss)
Medicaid Waiver Services	\$ 530,901,086	\$ 489,178,415	\$ 41,722,671
Medicaid Waiver Risk Reserve	59,669,198	-	59,669,198
Federal Grants & State Funds	81,976,351	81,923,623	52,728
Local Funds	21,902,522	21,902,522	-
Administrative	81,544,861	83,235,329	(1,690,468)
Nonoperating	38,212,248	-	38,212,248
Total	\$ 814,206,266	\$ 676,239,889	\$ 137,966,377

Fund Balance

	June 30, 2021	Change	April 30, 2022
Investment in Fixed Assets	5,031,938	148,357	5,180,295
Risk Reserve	71,494,795	59,669,197	131,163,992
Other	17,654,564	769,950	18,424,514
Total Restricted	89,149,359	60,439,147	149,588,506
Committed	33,939,808	(12,703,977)	21,235,831
Unrestricted	12,274,370	90,082,850	102,357,220
Total Unrestricted	46,214,178	77,378,873	123,593,051
Total Fund Balance	\$ 140,395,474	\$ 137,966,377	\$ 278,361,852

April 30, 2022 Actual



Reinvestment Detail

	Committed Funds FY22	Spent April 30, 2022	Balance to Spend
General Expenses	\$ 2,000,000	-	\$ 2,000,000
Child Facility Based Crisis Center	4,000,000	1,963,750	2,036,250
Total - Services	6,000,000	1,963,750	4,036,250
Administration			
Tailored Plan planning and implementation	24,945,355	6,978,312	17,967,043
Total - Administrative	24,945,355	6,978,312	17,967,043
 Total Service and Administration	 \$ 30,945,355	 \$ 8,942,062	 \$ 22,003,293

Fund Balance Detail

	June 30, 2021	Change	April 30, 2022
Investment in Fixed Assets	5,031,938	148,357	5,180,295
Restricted - Risk Reserve	71,494,795	59,669,197	131,163,992
Restricted - Other			
State Statutes	12,686,096	-	12,686,096
Prepays	842,976	1,348,785	2,191,761
State	351,452	(351,452)	-
Cumberland	3,002,823	(227,383)	2,775,440
Durham	771,217	-	771,217
Restricted - Other	17,654,564	769,950	18,424,514
Committed			
Intergovernmental Transfer	2,994,453	(3,761,915)	(767,462)
Reinvestments-Service	6,000,000	(1,963,750)	4,036,250
Reinvestments-Administrative	24,945,355	(6,978,312)	17,967,043
Total Committed	33,939,808	(12,703,977)	21,235,831
Unrestricted	12,274,370	90,082,850	102,357,220
 Total Fund Balance	 \$ 140,395,475	 \$ 137,966,377	 \$ 278,361,852
 Restricted			60,587,504
Unrestricted			77,378,873
Total Fund Balance Change			\$ 137,966,377

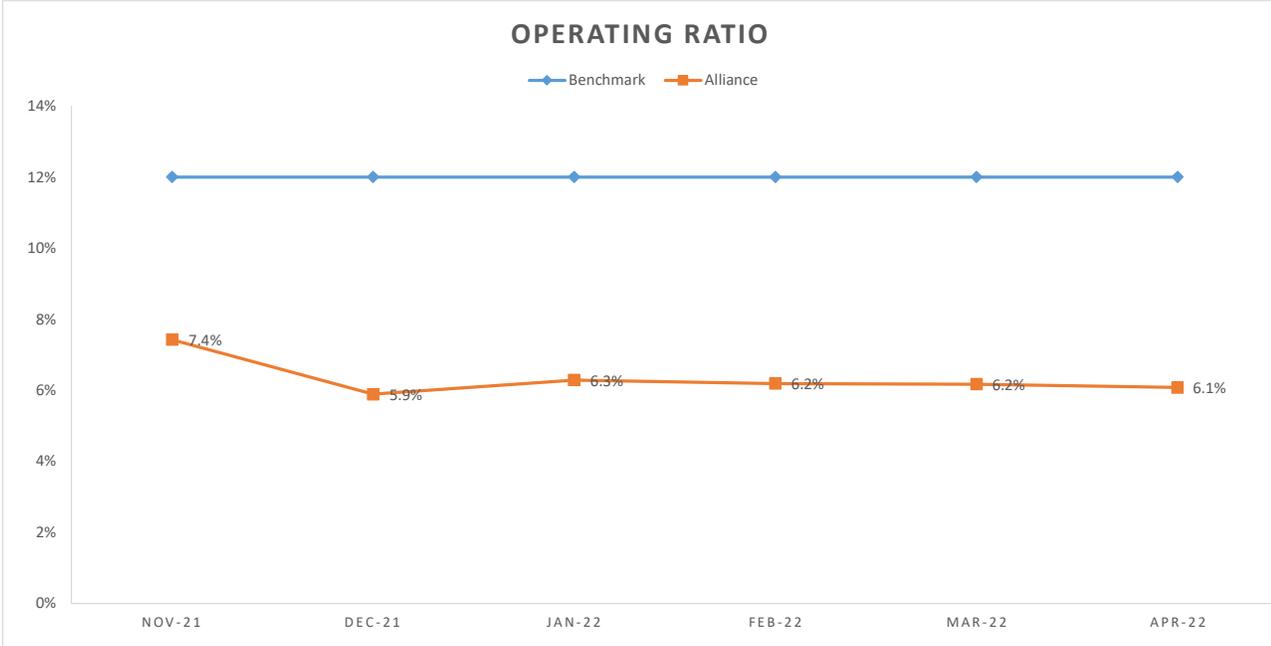


Alliance Health
Statement of Revenue and Expenses
As of April 30, 2022

	For the Month of July 31, 2021	For the Month of August 31, 2021	For the Month of September 30, 2021	For the Month of October 31, 2021	For the Month of November 30, 2021	For the Month of December 31, 2021	For the Month of January 31, 2022	For the Month of February 28, 2022	For the Month of March 31, 2022	For the Month of April 30, 2022	Year to Date Actual April 30, 2022	Current Year Budget June 30, 2022	Budget Remaining June 30, 2022 Remaining Budget
Revenue													
Service Revenue													
Medicaid Waiver Service	39,557,391	39,745,949	40,871,739	39,002,996	40,172,618	116,271,670	64,805,092	68,212,304	70,544,639	71,385,885	590,570,284	670,548,729	79,978,445
State and Federal Grants	5,488,603	5,649,902	8,189,174	6,534,098	5,781,516	8,067,474	8,567,095	12,120,410	11,143,418	10,434,660	81,976,351	92,471,700	10,495,349
Local Grants	1,622,939	3,161,254	1,459,907	3,411,637	1,944,963	2,560,903	2,203,765	1,166,270	2,164,219	2,206,668	21,902,522	45,612,184	23,709,662
Total Service Revenue	46,668,933	48,557,105	50,520,820	48,948,731	47,899,097	126,900,047	75,575,952	81,498,984	83,852,276	84,027,213	694,449,157	808,632,613	114,183,456
Administrative Revenue													
Medicaid Waiver	5,431,782	5,352,163	5,558,069	4,713,528	6,097,050	9,393,278	8,840,462	9,292,625	9,635,266	9,725,889	74,040,114	106,009,045	31,968,931
State and Federal	395,692	395,692	395,693	395,693	395,692	663,343	663,343	1,028,783	785,156	785,156	5,904,242	6,321,860	417,618
Local	32,545	32,545	32,545	32,545	32,545	32,545	32,545	32,545	32,545	32,545	325,450	390,540	65,090
Other Lines of Business	121,286	121,286	121,286	121,286	121,286	121,286	121,286	121,286	121,286	121,286	1,212,860	1,595,432	382,572
Miscellaneous	1,893	1,931	1,857	1,692	14,035	1,983	2,609	4,657	9,572	21,965	62,195	500,000	437,804
Total Administrative Revenue	5,983,198	5,903,617	6,109,450	5,264,744	6,660,608	10,212,435	9,660,245	10,479,896	10,583,825	10,686,841	81,544,861	114,816,877	33,272,015
Total Revenue	52,652,131	54,460,722	56,630,270	54,213,475	54,559,705	137,112,482	85,236,197	91,978,880	94,436,101	94,714,054	775,994,018	923,449,490	147,455,471
Expenses													
Service Expense													
Medicaid Waiver Service	40,281,037	34,775,309	36,330,734	31,983,862	30,909,801	64,148,709	59,613,843	64,037,815	75,009,680	52,087,625	489,178,415	670,548,729	181,370,314
State and Federal Service	5,488,707	5,679,369	8,388,288	7,071,611	5,644,604	7,758,192	8,567,095	10,914,970	11,840,328	10,570,459	81,923,623	92,471,700	10,548,077
Local Service	1,622,939	3,161,253	1,459,907	3,411,636	1,944,964	2,560,902	2,203,764	1,166,270	2,164,219	2,206,668	21,902,523	45,612,183	23,709,660
Total Service Expense	47,392,683	43,615,931	46,178,929	42,467,109	38,499,369	74,467,803	70,384,702	76,119,055	89,014,227	64,864,752	593,004,561	808,632,612	215,628,051
Administrative Expense													
Salaries and Benefits	5,189,467	4,881,026	5,298,774	5,152,425	5,793,815	7,283,006	7,112,293	7,026,811	7,773,042	7,464,754	62,975,411	86,560,740	23,585,329
Professional Services	370,303	732,071	877,426	912,691	856,144	997,357	805,825	998,523	1,189,134	991,180	8,730,654	13,660,867	4,930,213
Operational Expenses	680,911	774,999	896,301	784,108	1,422,620	858,388	2,404,749	879,601	1,901,567	928,001	11,531,244	14,095,271	2,564,027
Miscellaneous Expense	(3,301)	14	514	(515)	159	447	(203)	144	356	403	(1,980)	500,000	501,980
Total Administrative Expense	6,237,380	6,388,110	7,073,015	6,848,709	8,072,738	9,139,198	10,322,664	8,905,079	10,864,099	9,384,338	83,235,329	114,816,878	31,581,549
Total Expenses	53,630,063	50,004,041	53,251,944	49,315,818	46,572,107	83,607,001	80,707,366	85,024,134	99,878,326	74,249,090	676,239,890	923,449,490	247,209,600
Non Operating													
Other Income (Loss)	-	-	-	-	-	-	-	-	38,212,248	-	38,212,248	-	(38,212,248)
Non Operating Income (Expense)	-	-	-	-	-	-	-	-	38,212,248	-	38,212,248	-	(38,212,248)
Current Year Change in Net Position	(977,931)	4,456,681	3,378,325	4,897,657	7,987,599	53,505,481	4,528,831	6,954,746	32,770,023	20,464,964	137,966,377	-	(137,966,377)



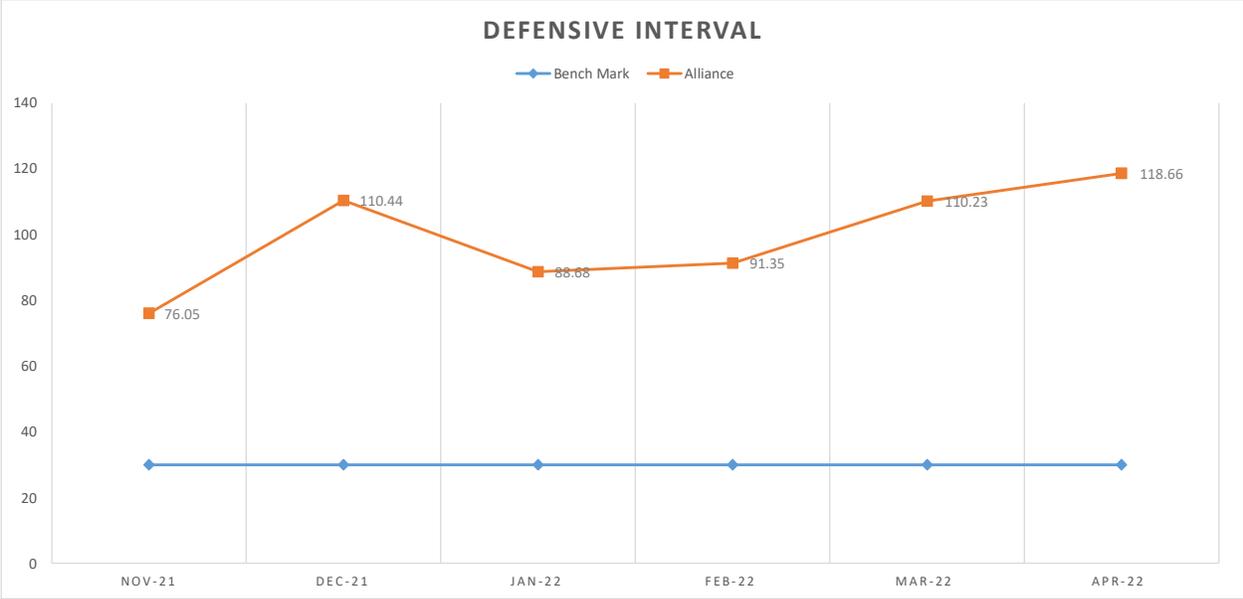
Operating Ratio - As of April 30, 2022



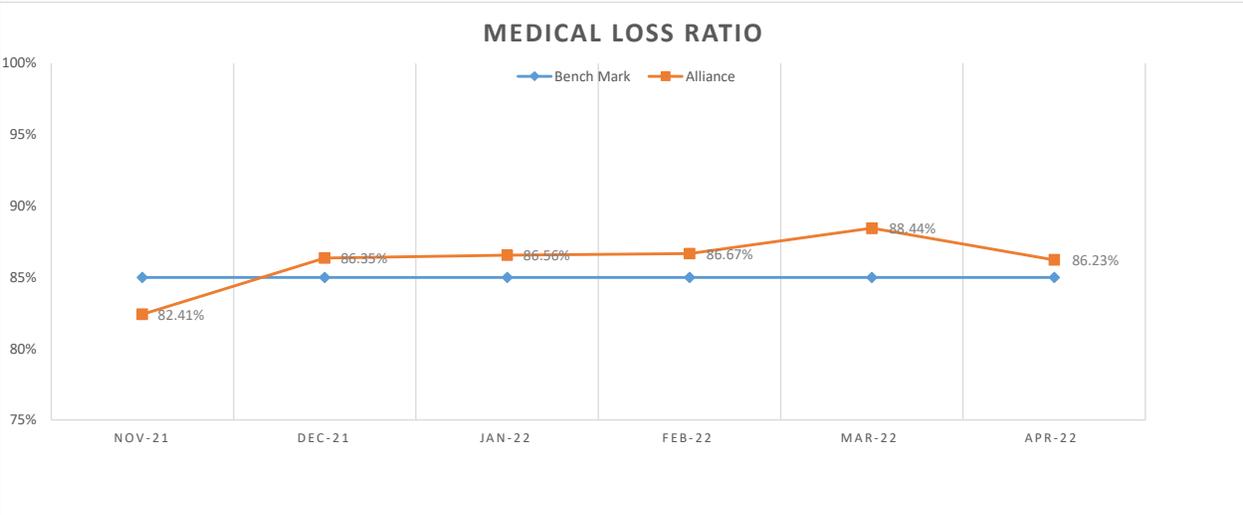
Operating Ratio = Compares total administrative expenses (less administrative expenses that directly improve health outcomes) to total revenue. The Operating Ratio is used to measure the operational efficiency of the management. The recommended benchmark is **no more than 12%**. When combined with the MLR ratio, the percentage should be less than 100% to show savings.



Division of Health Benefits Ratios - As of April 30, 2022



Defensive Interval = Cash + Current Investments divided by average daily operating expenses. This ratio shows how many days the organization can continue to pay expenses if no additional cash comes in. The requirement is 30 days or greater.



Medical Loss Ratio (MLR) = Total Services Expenses plus Administrative Expenses that go towards directly improving health outcomes divided by Total Medicaid Revenue. The requirement is 85% or greater cumulative for the rating period (7/1/21-6/30/22).



1) Contract for Milliman, Inc.

Approval for FY23 contract for Milliman, Inc. In FY20, Milliman was awarded the RFP for actuary services. In early FY21, through an informal bid process, we extended their contract to perform financial consulting services including assessment of our medical cost management program, reporting, and staffing structure. As a result of this work, they will be assisting not only Business Operations but other areas to improve our readiness for Tailored Plan Go Live. In addition, Milliman is assisting Provider Networks to develop Alternative Payment Models. Below includes the list of services provided through this contract:

- a. Monthly Dashboard Development
- b. Prospective capitation rate review and negotiations
- c. Proforma Preparation
- d. IBNR reserving
- e. Managed Care Savings
- f. Performance Management Committee Support
- g. Provider Network Support
- h. Alternative Payment Model Support
- i. Pre and Post Tailored Plan assistance
- j. Ad hoc analysis requests from Alliance

Contract Amount \$1,500,000

**FY 2021-2022 BUDGET ORDINANCE
ALLIANCE HEALTH
AMENDMENT NUMBER 2022-02**

WHEREAS, the annual budget ordinance for FY 2021 - 2022 was approved by the Alliance Health Board on June 3, 2021;

WHEREAS, on June 3, 2021, the Alliance Health Board adopted a budget ordinance making appropriations in such sums that the Board considers sufficient and proper in accordance with G.S. 159-13;

BE IT ORDAINED by the Alliance Health Board that for the purpose of operations for the LME/MCO, that the 2021-2022 budget ordinance is hereby amended to reflect the following budget adjustments.

Section 1: General Fund Appropriations

Administrative	\$ 120,480,820
Medicaid Services	748,777,462
Federal and State Services	116,911,555
Local Services	45,612,184
Grant Funded Services	190,000
Other Business Line	1,595,432
Nonoperating Income	38,712,248
TOTAL	<u><u>\$ 1,072,279,701</u></u>

Section 2: General Fund Revenue

Administrative	\$ 102,466,522
Medicaid Services	742,777,462
Federal and State Services	116,560,103
Local Services	41,838,144
Grant Funded Services	190,000
Other Business Line	1,595,432
Nonoperating Income	38,712,248
Fund Balance Appropriation	28,139,790
TOTAL	<u><u>\$ 1,072,279,701</u></u>

The Budget as amended continues to satisfy the requirements of G.S. 159-8 and 159-13. All ordinance and portions of ordinance in conflict herewith are hereby repealed.

Budget Amendment Details

	<u>Amended Budget February 3, 2022</u>	<u>Amended Budget June 2, 2022</u>	<u>Difference</u>	<u>Footnote</u>
Section 1: General Fund Appropriations				
Administrative				
Administrative	83,281,637	102,466,522		
Fund Balance Appropriations	<u>29,439,808</u>	<u>18,014,298</u>		
Total Administrative	\$ 112,721,445	\$ 120,480,820	\$ 7,759,375	A
Medicaid Services				
Medicaid Services	664,548,729	735,194,782		
Capacity Building		7,582,680		
Fund Balance Appropriations	<u>6,000,000</u>	<u>6,000,000</u>		
Total Medicaid Services	670,548,729	748,777,462	78,228,733	B
Federal and State Services				
Federal and State Services	91,930,248	116,560,103		
Fund Balance Appropriations	<u>351,452</u>	<u>351,452</u>		
Total Federal and State Services	92,281,700	116,911,555	24,629,855	C
Local Services				
Local Services	41,838,144	41,838,144		
Fund Balance Appropriations	<u>3,774,040</u>	<u>3,774,040</u>		
Total Local Services	45,612,184	45,612,184	-	
Grant Funded Services	190,000	190,000	-	
Other Business Line	1,595,432	1,595,432	-	
Nonoperating Income	500,000	38,712,248	38,212,248	D
TOTAL	<u>\$ 923,449,490</u>	<u>\$ 1,072,279,701</u>	<u>\$ 148,830,211</u>	
Section 2: General Fund Revenue				
Administrative	\$ 83,281,637	\$ 102,466,522	\$ 19,184,885	A
Medicaid Services	664,548,729	742,777,462	78,228,733	B
Federal and State Services	91,930,248	116,560,103	24,629,855	C
Local Services	41,838,144	41,838,144	-	
Grant Funded Services	190,000	190,000	-	
Other Business Line	1,595,432	1,595,432	-	
Nonoperating Income	500,000	38,712,248	38,212,248	D
Fund Balance Appropriation	39,565,300	28,139,790	(11,425,510)	E
TOTAL	<u>\$ 923,449,490</u>	<u>\$ 1,072,279,701</u>	<u>\$ 148,830,211</u>	

A *Administrative Appropriations & Revenue*

The Administrative appropriation and revenue increased overall. The increase is due to an increase in Medicaid service revenue as a result of an increase in monthly member lives and additional administrative funding related to Care Management capacity building. The amount of fund balance appropriation related to administrative appropriations decreased related to the change in the Tailored Plan go live date.

B *Medicaid Services Appropriations & Revenue*

The Medicaid appropriation and revenue increased overall. The increase is due to an increase in Medicaid monthly member lives and the addition of Care Management capacity building funds.

C *State Services Appropriations & Revenue*

The State Services appropriation and revenue increased overall. The increase is due to a one-time increase in single stream as well as receipt of additional Federal and State allocation letters. Examples of some of the additional allocations include, Transition to Community Living (TCL), Subsidy Administration, Alcohol and Drug Abuse Treatment Centers (ADATC), short term group home funding, community based capacity restoration funds, and prevention funds.

D *Nonoperating Income Appropriations & Revenue*

The Nonoperating Income appropriations and revenue increased due to an unrestricted fund balance transfer related to the county realignment.

E *Fund Balance Appropriations*

The required fund balance appropriation amount decreased as a result of the change in the Tailored Plan go live date.



**FY23 RECOMMENDED FOR
APPROVAL BUDGET
June 2, 2022**

**Alliance Health
Annual Budget
FY 2022-2023**

Board of Directors

Lynne Nelson, Chair

Lodies Gloston, Vice Chair

Durham County

Commissioner Heidi Carter

Carol Council

Samruddhi Thaker

Pam Silberman

Wake County

Commissioner Maria Cervania

David Hancock

Lynne Nelson

Vacancy

Cumberland County

Commissioner Glenn Adams

Lodies Gloston

John Lesica

Vicki Evans

Johnston County

Lee Jackson

Commissioner Ted G. Godwin

Orange County

Commissioner Amy Fowler

Vacancy

CFAC

David Curro

Mecklenburg County

Commissioner Leigh Altman

Dena Diorio

Anthony Trotman

Vacancy (effective 10/1/22)

Robert Robinson, CEO

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June 2, 2022

Alliance Board Members,

We are pleased to share with you our FY23 recommended budget for your approval.

This budget reflects a few changes from the recommended budget that was presented to you on May 5th. To summarize, changes were made in the following areas:

- The total budget increased by \$360 million
- Medicaid increased by \$291.2 million due to Alliance receiving July 1 per member, per month rates and December 1 rate information
- Federal and State funding increased by \$5.8 million due to receipt of additional allocation letters
- Local funding increased by \$1.8 million to incorporate additional County funding
- Administrative funds increased by \$60.9 million due to the Medicaid revenue increasing and to appropriate funds from our fund balance

The budget reflects our continued commitment to quality services, financial sustainability, and a strong provider network. Approving the recommended budget is a significant step but as you know, FY23 will present a unique evolution in our line of business as we become operators of a Tailored Plan. We look forward to working closely with you throughout the year to incorporate budgetary changes as we move towards our December 1st go-live.

Thank you for your participation during the budget process. We appreciate your guidance and dedication to our members.

Best Regards,

A handwritten signature in black ink that reads "Rob Robinson". The signature is fluid and cursive, with the first name "Rob" and last name "Robinson" clearly legible.

Rob Robinson
Chief Executive Officer

Reader's Guide

FY 2022 - 2023 is the eleventh annual budget presented for Alliance Health (Alliance). This section is provided to help the reader understand the budget by explaining how the document is organized. This document details the budget for fiscal year 2022-2023 for Alliance's administrative and service operations covering Cumberland, Durham, Johnston, Mecklenburg, Orange and Wake counties. The budget year begins July 1, 2022 and ends June 30, 2023. The document will show how the funds are allocated and how they will be spent.

Alliance Health LME/MCO will have one fund called the General Fund. The General Fund will account for all administrative and service operations and will be divided into functional areas for Administration, Medicaid Services, State Services, Local Services, and Grant Funds, when applicable.

Revenues and Expenditures of the General Fund

The categories of the revenue and expenditures are the same. They include the following:

Administrative Funds

Alliance Health is administratively funded through a combination of the Medicaid waiver, state LME allocation, and county administrative contribution.

Alliance began the management of Medicaid services under a waiver according to Session Law 2011-264 House Bill 916 on February 1, 2013. These funds refer to the administration dollars allocated under a contract with the NC Division of Medical Assistance, now referred to the Division of Health Benefits. The funds are allocated based on a per member per month (PMPM) basis. The members per month budgeted are based on historical experience and projections. Alliance will begin Tailored Plan operations December 1, 2022.

The NC Division of Mental Health, Developmental disabilities, and Substance Abuse services (NC DMH) continue to allocate funds to administer state and federal block grant dollars for the purposes of serving the non-Medicaid population.

Alliance receives administrative funding for management of the Care Management Capacity Building funding included in Medicaid Services. This funding is for startup and implementation of Care Management systems at the provider level.

Cumberland, Durham, Mecklenburg, Orange, and Wake counties allocate 1-2% of the county dollars in administrative support for the management of their dollars in serving consumers in their respective county.

Other Business Line

Alliance provides 24-hour behavioral health crisis line and after hour/weekend/holiday services for Standard Plans.

Nonoperating Income

This category is to account for any funds received during the fiscal year that do not fall into one of the above mentioned categories and are not significant enough to require their own category.

Medicaid Services

Alliance Health began the management of Medicaid services under a waiver according to Session Law 2011-264 House Bill 916 on February 1, 2013. These funds refer to the dollars allocated under the contract with the NC Division of Medical Assistance, now referred to the Division of Health Benefits, to provide services to Medicaid enrollees of Cumberland, Durham, Johnston, Mecklenburg, Orange, and Wake counties. Alliance will begin Tailored Plan operations December 1, 2022.

Included in Medicaid Services funding is funding for the Care Management Capacity Building. This funding is for startup and implementation of Care Management systems at the provider level.

Federal and State Services

These funds represent state allocated dollars for Cumberland, Durham, Johnston, Mecklenburg, Orange, and Wake communities to provide services for non-Medicaid citizens with mental health, intellectual/developmental disabilities and substance use disorder needs. The funds include Federal Block Grant dollars as allocated from the NC DMH. Funding is categorized as follows:

- Federal Block Grant Continuation – annual allocation received for Federal Block Grant funds for the year. Funding specifies how it can be spent (i.e., claims or expense based), the population (i.e., adult/child), and the disability category (i.e., Mental Health (MH), Substance Use Disorder (SUD), and Intellectual and Developmental Disabilities (IDD)). Alliance receives this funding on a reimbursement basis.
- Federal Block Grant Allocations – funding received throughout the year for specific purpose (i.e., Mental Health Block Grant to support expansion of high fidelity wraparound. Alliance receives this funding on a reimbursement basis.
- State Single Stream – annual funding to support behavioral Health services for uninsured and underinsured individuals. Alliance receives this funding monthly in 1/12th increments.
- State Allocations – funding received throughout the year for specific purpose (i.e., to support traumatic brain injury). Alliance receives this funding on a reimbursement basis.

Local Services

These funds represent the Cumberland, Durham, Mecklenburg, Orange, and Wake county allocations to Alliance to provide services for citizens with mental health, intellectual/developmental disabilities, and substance use disorder needs in their respective counties.

Grants

When applicable, grant funds are those that are specified for a particular project or program.

Additional Information

The basis of accounting and budgeting for Alliance Health is modified accrual per G.S. 159-26. This means that revenues are recorded in the time period in which they are measurable and available. Revenues are recognized when they are received in cash. Expenditures are recognized in the period when the services are received or liabilities are incurred.

Category of Service Key

Innovations (Medicaid only)

A range of habilitative, community and residential support services that assist individuals with intellectual and developmental disability to live outside of institutional settings. Some of these services are geared at helping individuals gain skills and some are intended to address personal care and safety needs. These services are only available to individuals on the Medicaid C Home and Community Based Supports waiver.

Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) (Medicaid only)

Intermediate Care Facilities are licensed residential facilities that provide an array of treatment, health and support services to individuals with intellectual and developmental disabilities who meet eligibility requirements for institutional level of care.

Outpatient

This category of services includes traditional office-based psychotherapy, family therapy, group therapy and psychiatric assessment and medication management. It also includes intensive levels of community-based substance abuse treatment services and assessment, follow-up and consultative services rendered to individuals when they are in the ED or other hospital settings.

Intensive In-Home Services (IIHS)

Intensive In-Home Services are treatment and support services delivered to children and their families typically within a child's home. This service provides a mix of family and individual therapy, skill building and parent training as well as some case management support.

Inpatient

Intensive stabilization and management services provided within an inpatient, typically locked psychiatric unit or hospital geared to addressing the treatment needs of individuals determined to be at immediate risk to harm themselves or others. The service is typically provided to children and adults who are experiencing a psychiatric crisis and can be provided to individuals whose substance use or detoxification is life threatening.

Behavioral Health Long-Term Residential (BH LT Residential)

Behavioral Health Long-Term Residential Services are a residential services provided in licensed group homes or therapeutic foster care homes that are provided to children and adolescents with behavior challenges that require greater level of support and supervision than can be provided in their homes. Services are intended to last for several months. This level of care provides for graduated levels of supervision based on need.

Assertive Community Treatment Team (ACTT)

Assertive Community Treatment Team is a team and community-based service designed to meet the treatment needs of individuals with severe and persistent mental illness and histories of extensive inpatient and crisis service utilization. An ACT Team includes social workers, psychiatrists, nurses, peer support professionals and other professionals as needed and is designed to deliver all services to an individual in their home and in the community.

Psychiatric Residential Treatment Facilities (PRTF)

Psychiatric Residential Treatment Facility services are provided to children who require 24/7 supervision and support as part of their care. These services are usually provided in a locked, licensed residential setting and are responsible for providing a range of daily treatment and educational services. The service is similar to inpatient services for children however the length of stay is several months with less intensive medical involvement.

1915(b)(3) Services

A collection of optional Medicaid services that can be provided to Medicaid-eligible individuals who are not part of the State Medicaid Plan array of services. They include supported employment services, community respite, peer supports and other services that support recovery, independence, connections to the community and skill acquisition.

Psychosocial Rehabilitation (Psych Rehab)

Psychosocial Rehabilitation Services are day services provided to individuals with serious and persistent mental illness. The service includes support, skill building, pre-vocational activities and wellness and recovery-oriented activities for the attendees. This tends to be a longer-term service that individuals can access daily for several hours.

Day Treatment/Partial Hospital

Day Treatment Services is a community-based program for children that is available at least three hours per day and five days a week. These licensed settings provide therapy and skill building activities and for members. Partial Hospitalization provides daily treatment services and can be provided to children or adults. The service provides a more intensive level of therapy and psychiatric care than day treatment or psychosocial rehabilitation.

Crisis Services

This category includes mobile crisis services and facility based crisis services. Facility Based Crisis Services are provided in licensed residential treatment units that offer 24/7 staff supervision. This level of care is similar to inpatient treatment, although the individuals served do not require the same level of medical and clinical management that is provided in an inpatient psychiatric unit. Mobile Crisis Services provides support to individuals in the community who are experiencing a behavioral health emergency. Clinicians provide assessment and can provide ongoing counseling and support during a crisis episode with the goals of avoiding emergency department and inpatient services usage.

Community Support Team (CST)

Community Support, also referred to as CST, or Community Support Team, is an intensive community-based service delivered to adults with high usage of crisis services and provides both counseling and case management support to ensure individuals receive all necessary supports including housing.

Multisystemic Therapy (MST)

Multisystemic Therapy is an evidenced based, intensive, support, therapy and case management service geared at the needs of children with behavioral challenges that place them at high risk for involvement in the juvenile justice system or those children already in the system. The program seeks to assist parents and caregivers to develop needed support that allow them to more effectively address their children's behaviors.

This document was prepared by Alliance Health Business Operations and is available online at www.alliancehealthplan.org. If further information is needed, please contact Kelly Goodfellow, Executive Vice President/CFO, at 5200 W. Paramount Parkway, Suite 200 Morrisville, NC 27560 or by email at kgoodfellow@alliancehealthplan.org.

Alliance Demographic Information as of June 30, 2021

ALLIANCE REGIONAL POPULATION DATA						
County	Population	Medicaid Eligible	Medicaid %	Medicaid Served	Non-Medicaid Served	Total
Cumberland	334,728	85,521	25.55%	13,204	2,953	16,157
Durham	324,833	52,109	16.04%	7,407	2,927	10,334
Johnston	215,999	38,338	17.75%	5,107	1,625	6,732
Mecklenburg	1,115,482	0	0.00%	0	0	0
Orange	148,696	0	0.00%	0	0	0
Wake	1,129,410	122,938	10.89%	15,747	6,657	22,404
Total	3,269,148	298,906	9.14%	41,465	14,202	55,667

Based on 2021 Statistics, US Census Bureau – July 1 2020 through June 30, 2021 (pre county realignment)

PERSONS SERVED BY AGE AND DISABILITY BASED ON CLAIMS PAID BY MEDICAID AND IPRS					
Age Group	County	MH	SA	IDD	Totals
Child/Youth (ages 3-17)	Cumberland	5,171	46	559	5,776
	Durham	2,901	46	337	3,284
	Johnston	2,063	17	200	2,280
	Mecklenburg	0	0	0	0
	Orange	0	0	0	0
	Wake	6,294	69	785	7,148
	Total	16,429	178	1,881	18,488
Adult (ages 18+)	Cumberland	8,134	2,393	717	11,244
	Durham	5,065	2,054	781	7,900
	Johnston	3,627	809	387	4,823
	Mecklenburg	0	0	0	0
	Orange	0	0	0	0
	Wake	11,389	3,333	1,869	16,591
	Total	28,240	8,606	3,754	40,600

Based on 2021 Statistics, US Census Bureau – July 1 2020 through June 30, 2021 (pre county realignment)

PROVIDER BREAKDOWN as of March 2022	
Organization Type	Provider Count
Agencies	387
Hospital/Residential Treatment Facilities	75
Licensed Professionals	5,999
Outpatient Practices	297
Total	6,758

Division Information

Clinical Operations Division

Clinical Operations at Alliance Health is a data-informed, collaborative effort that identifies and addresses the full range of medical, functional, social, emotional, and environmental needs across all populations in order to improve health outcomes by focusing on prevention and person-directed care. The Clinical Operations Division is comprised of four departments and is led by the Chief Medical Officer.

Brief Description of Department and Units

- Utilization Management (UM) is responsible for authorizing behavioral health, Intellectual and Developmental Disability and Traumatic Brain Injury (BH, IDD and TBI) services and monitoring individuals during an episode of care. Activities include monitoring utilization of services authorized, reviewing effectiveness of treatment interventions and making recommendations to improve the effectiveness of individual treatment plans.
- Care Management (CM) is responsible for working with specific high-risk populations identified within the waiver contract and priority populations that have been identified by Alliance, including individuals discharging from inpatient and those identified by advanced data analytics to be at risk for higher levels of services. Care Management assesses individual service and social determinants of health support needs, links individuals to both services and supports and helps eliminate barriers that allow individuals to live as successfully as possible within the community.
 - MH/SUD Care Management is focused on supporting the needs of individuals with serious and persistent mental illness. Their scope is expanding to include members with co-occurring physical health conditions that may complicate their recovery journey. Part of the MH/SUD Care Management program is the Transition to Community Living Settlement (TCLI) agreement. In reach support specialists, Diversion specialists, and Transition Coordinators all assist members with moving from institutional care settings including state psychiatric hospitals and community-based adult care homes into supportive housing with individualized services to support their recovery while living in the communities of their choice.
 - IDD Care Management is responsible for working with individuals on the Innovations waiver, as well as those needing short-term coordination of state-funded IDD supports. IDD Care Management educate members about the Innovations waiver, their options of providers, and facilitate the individual plan of care for the Innovations waiver services Liaisons assist with transition support when individuals are wanting to move to the community from long term care facilities like community and state operated ICF-IID facilities. IDD Care Management helps individuals identify the services and supports they need to live the lives they want in the community. TBI Care Management is responsible for working with individuals who are identified as eligible for the TBI Medicaid Waivers. Similar to the IDD Care Management scope of work, TBI Care Management assess member needs, provide education about waiver services and network provider options, and facilitate development of plans of care. In addition, TBI Care Management provide additional face-to-face support to the

population through the waiver enrollment process when the need for this support is identified. These waivers are a pilot unique to Alliance and so additional recommendations regarding workflow development and policy require input from the Care Management teams working directly with members.

- The Medical Management team provides guidance and oversight of clinical services including authorization of services, clinical operations and overall clinical direction. The team is responsible for maintaining the clinical integrity of the program, including concurrent reviews of inpatient and rehabilitation services; provision of oversight to utilization management and quality staff; oversight of the Credentialing Program; providing medical/clinical support for care coordination units and the Access to Care unit; and consultation to providers and other community based clinicians, including general practitioners. The Medical Team conducts medical necessity review and recommendations, service denial reviews, grievance issues, medication reviews, and develops clinical best practices guidelines in collaboration with regional experts. The Medical Team is comprised of the Chief Medical Officer, three Associate Medical Directors, the IDD/TBI Clinical Director, two Pharmacists, and a Psychologist.
- Quality Management is responsible for the continual self-assessment of services, operations, and implementation of quality improvement plans. The reach of the Quality Management department extends to internal Alliance operations as well as activities completed by providers in service to Alliance members. Quality Management activities are overseen by the Continuous Quality Improvement (CQI) committee and its subcommittees. CQI reports directly to the Board Global Quality Management Committee (Global QMC). Quality Management also serves the function of timely identification, response, reporting, and follow-up to member incidents and complaints regarding healthcare services. Some priority goals for the Quality Management team have included follow-up after mental health discharge, follow-up after substance use discharge, diabetes screening for people using antipsychotic medication, and primary care visits for people enrolled in the Transitions to Community Living (TCL) program.

Significant Accomplishments for FY22

- Alignment of Medicaid and Single Stream benefit plans between existing Alliance plan and new counties received from Cardinal Innovations LME/MCO. New services were added to the Alliance benefit plan and existing authorizations were continued to honor continuity of care for members.
- A new web-based Benefit Plan Services Tool was launched on March 1, 2022. One provider commented, “This is awesome. I wish all MCOs would design services this way.”
- 126 new staff were hired for the Care Management Department within a span of three months to support the expansion of Alliance Health into two new county regions.
- The Care Management Department completed the transfer of Mecklenburg and Orange county members from care management performed by Cardinal Innovations staff to Alliance Health staff. Every effort was made to maintain members with care management staff who themselves changed employment from Cardinal to Alliance.
- A new Care Management Director position dedicated to oversight of children in foster care and adults with guardians was created.

- A new doctorate-level Clinical Director for IDD/TBI was added to the Medical Management department with plans to impact services and policies in Care Management and Utilization Management.
- In preparation for Tailored Plan, Pharmacy Benefit Management implementation was launched under the supervision of the new Pharmacy Director.
- A HEDIS vendor was identified, contracted, and implemented during this fiscal year.
- The QM department was expanded by increasing the number of staff in the Appeals and Grievances section as well as movement of Data Science team from IT to QM.

Summary of Goals and Objectives for FY23

- In preparation for physical health (PH) utilization management, the Alliance UM department will implement the MCG level of care decision tool. The care decision tool is a tool which helps ensure the right levels of treatment, the right length of hospital stay, and helps prevent unnecessary hospital readmissions.
- The UM department will continue to develop staff, policies, and procedures for physical health UM. The goal is for PH UM to be tested and operational prior to the launch of the Tailored Plan on 12/1/2022.
- All staff in Care Management (370+ individuals) will receive training in integrated healthcare and the Tailored Care Management contract.
- Alliance Health will go live for Tailored Care Management serving all Medicaid members who choose to engage with this high intensity support designed to improve overall health outcomes and return value for total healthcare spending.
- The first Deputy Chief Medical Officer at Alliance with subject matter expertise in primary care will work jointly with the Chief Medical Officer to further develop integrated health in the domains of population health programs, pharmacy benefit management, physical health utilization management, complex care management, and physical health quality indicators.
- The Medical Management department will incorporate data-driven approaches to Care Management Continuum Rounds to identify and consult upon members with rising risk rather than primarily focusing on members who are already experiencing high risk circumstances.
- The Data Science team will further refine their predictive model for at-risk youth.
- The QM department will use the newly available HEDIS data from the software that was implemented in FY22 to develop targeted QI projects aligned with Tailored Plan.

Member, Provider and Infrastructure Solutions Division

The Member, Provider and Infrastructure Solutions Divisions focuses on both internal and external operations that support our members, providers, and Alliance staff. The goal of this division is to ensure that our members, communities, providers, and staff have access to the tools, systems and supports that help support and deliver better health. The division is comprised of the following departments: Member and Recipient Services, inclusive of the Provider Helpdesk, Community Health and Wellbeing, Provider Network Operations, Development and Evaluation, Practice Transformation, Information Technology and Analytics, and Vendor Management

Brief Description of Department and Units

- The Provider Network Department is responsible for developing and maintaining a network of high-quality behavioral health, Intellectual and Developmental Disability and Traumatic Brain Injury service and support providers. The Department continuously reviews and evaluates the provider network for accessibility, quality of services, adherence to contract requirements, standards of care and performance, while ensuring a full array of providers is available to meet the needs of our service recipients. It also is responsible to ensure the quality of all Alliance services by reviewing program outcomes and evaluating program effectiveness. The Department provides an array of supports to providers to promote optimal treatment outcomes for our members. The Department actively promotes, develops and implements alternative payment models/value-based contracting models to improve member outcomes, increase provider efficiency and incentivize overall quality. The Department is comprised of four sections:
 - Provider Network Operations has five components:
 - *Provider Relations* recruits and maintains a network that complies with adequacy and accessibility standards. The section serves as liaisons to providers including managing the communication and dissemination of information to the community of providers, developing and reviewing provider contract scopes of work, and providing or arranging for technical assistance for currently enrolled providers.
 - *Credentialing* assures that all providers in the Alliance network meet agency, State, Federal and accreditation requirements and that credentialing information is reviewed and tracked for continuous and timely review. This function will end under the Tailored Plan and possibly by the beginning of FY2023 and will transition to a small enrollment team that ensures all documents and files are in order before moving providers into a contract status.
 - *Contracts* is responsible for the timely development and distribution of all contracts, amendments, and extensions and ensures coordination of administrative activities including official correspondence with providers, provider education and liaison, and administration of provider contracts.

- Provider Evaluation
 - Monitoring of providers
 - Collect and analyze provider outcome data
 - Evaluate service and program effectiveness
 - Produce reports and analysis to better manage the provider network and provide information to providers to support quality improvement
 - Support value-based contracting efforts and evaluate models
- Strategic Initiatives and Special Projects manages the following functions and initiatives:
 - Community Needs Assessment and Network Development Plan
 - New Service Definitions
 - Special Provider Initiatives
 - Provider Collaboratives
 - Requests for Proposals
 - Hospital Relations
 - Value-Based Contracting
- Practice Transformation
 - Primary responsibility for building provider-led care management capacity
 - Assisting care management entities to pass desk and site reviews
 - Assesses provider capacity to provide integrated care and participate in alternative payment arrangements
 - Shares and reviews clinical and administrative data with providers to inform provider quality management processes
 - Works with providers to achieve desired member outcomes and help providers reach quality measure targets
 - Share gaps in care and practice information with providers, including scorecards on priority Alliance measures
 - Develops practice support tools
- Provider Network Project Management and Development
 - Partners with Alliance Clinical Team and Community providers to bring new practices and services to the community
 - Manages start-up and implementation of new services and new facility-based treatment programs in the region

- Community Health and Well-Being (CHWB) is one of the most varied and diverse departments within Alliance. Recognizing that a local and visible presence is essential to building and sustaining partnerships critical to meeting organizational outcomes, the CHWB teams take an innovative approach to improving the systems that support the effectiveness of services. Teams are continually assessing system and service gaps from multiple vantage points including co-location within other systems, outreach activities to member, stakeholders and advocates, and hosting community collaborative and workgroups. Utilizing a System of Care (SOC) framework, CHWB focuses on the strengths and vulnerabilities of complex public systems, treatment of the “whole person,” and system transformation to improve policy, shared funding, collaboration and best practices. Recognizing that social determinants of health (i.e., homelessness, poverty/inequality, health literacy and lack of education/employment) are key drivers of health care costs, CHWB often plays a tangential role to the MCO functions - improving the environments in which people live increases engagement and retention in services, overall health and wellness, and more meaningful and productive lives that promote recovery.
- The Access and Information Center has transitioned to become the Alliance Member and Recipient Services Department. The department is responsible for three service lines:
 - Member and Recipient Services: Provides information on all available services and benefits available through Alliance Health. Performs a range of customer service functions and links members to needed services and supports.
 - Behavioral Health Crisis Line: Alliance maintains a 24/7 behavioral health crisis line that provides screening, triage and referral of individuals calling that are experience high levels of distress or a behavioral health emergency. The line is staffed by licensed clinicians and provides follow-up to ensure that individuals successfully link with crisis services.
 - Behavioral Health Crisis Line for Standard Plans: Alliance maintains a 24/7 behavioral health crisis line for three of the Standard Plans in North Carolina
- The Information Technology (IT) Department is comprised of five distinct teams:
 - *Application Development and Quality Engineering* is responsible for internal application development and support, including SharePoint and the corporate Intranet. Manages all quality assurance and user acceptance testing and documentation, including the Alliance Claims System (ACS). Manages database security, file downloads, and IT Project Management.
 - *Core Systems Development* is responsible for software development and support of ACS, including the transition of the software to allow processing of Physical Health claims for the Tailored Plan implementation.
 - *Product Management and Support* provides support for ACS and management of Alliance configuration services for the JIVA – Population Health/Care Management platform.
 - *Data Analytics/Business Intelligence* is comprised of the business intelligence and data science teams, this group is responsible for the engineering and management of the Alliance Enterprise Data Warehouse and the utilization of the key software platforms of Microsoft SQL Server, and MicroStrategy. They are additionally responsible for developing and deploying data actionable reports, dashboards and

other data products to meet the advanced analytics and other informational needs of the organization.

- The Vendor Management is currently being formed. This role will be responsible for maintaining relationships, providing oversight, and serving as the single point of contact for troubleshooting with vendors that are performing delegated functions on behalf of Alliance. Vendor Management will be responsible for vendor contracts related to value-added services that will be available to tailored plan members and will be responsible for item fulfillment.

Significant Accomplishments for FY22

- Executed first value-based contract with a local inpatient hospital to improve 7-day follow-up. During the performance period, the provider exceeded the quality targets for SUD and MH timely follow-up. **50% of members discharged with a SUD were seen within 7 days, 68% of members with MH were seen within 7 days.**
- The Practice Transformation Team's outreach, engagement and support efforts lead to **47 providers** in the Alliance region submitting applications to become certified care management entities, including **17 historically underutilized providers**. To date, **46 have passed the desk review**.
- Provider Network Development team partnered with two local Department of Social Services and two providers to launch two 45-day crisis group home programs.
- Alliance Behavioral Health responded to **6384 calls** under our contract to provide the Behavioral Health Crisis Line for the Standard Plans and have **exceeded all performance targets**.
- Transitioned Individual Placement and Supports/ Supported Employment from fee for service to a pay for performance model where providers are only paid if members reach pre-defined employment milestone. Since launch, **29 Alliance members have become employed** for over four months, with **39% of all Alliance members receiving IPS being employed**. Another **47 are in the active job search** component of the model and an additional 87 are in the early engagement phase.
- Opened third Bridge Housing program in the region. In FY22 Programs assisted **67 TCLI** members and previously homeless individuals to move towards permanent supportive housing.
- Created and filled a critical new Director of Foster Care Support position.

Summary of Goals and Objectives for FY23

- Continue to support provider-led care management to ensure that at least 50% of care management can be provided by CMAs and AMH+ providers by Tailored Plan Go Live.
- Meet Tailored Plan Network Adequacy Standards prior to Tailored Plan go-live.
- Expand crisis service options for youth with complex needs in DSS custody.
- Complete Social Determinants of Health Comprehensive Strategy which includes an evaluation and return on investment review of new housing programs.
- Fully implement Jiva provider and member portals.
- Finish development of the Alliance Claim System (ACS) in time for Tailored Plan system testing.
- Ensure vendors are under contract by tailored plan go-live to provide items available to members under the value-added services program.

Business Operations Division

The Business Operations Division is responsible for the oversight and management of Alliance's financial accountability relating to budgeting, claims, auditing and financial analysis. In addition, the Division serves to oversee the functionality, comfort, safety, and efficiency of our built and leased buildings.

Brief Description of Department and Units

- The Claims Department is responsible for the monitoring and review of all claims processing for all funding sources, analysis of paid and denied claims, special Emergency Department claim review, etc. The team consists of Claim Research Analysts that assist providers daily on basic billing, work on denials and claims analysis, encounter claim submission, and large projects.
- The Financial Operations Department is responsible for planning, organizing, auditing, accounting for and controlling the Organization's finances. The Department is comprised of four units:
 - *Accounting* is responsible for the Organization's financial transactions, financial reporting, adherence to Generally Accepted Accounting Principles (GAAP), ensuring adequate and effective internal controls, cash receipts, and processing payroll.
 - *Budget and Financial Analysis* is responsible for the development and monitoring of the Alliance budget and analyzing budget to actual at both the administrative and service level. The team in this unit are also responsible for the review and analysis of Medicaid dollars to include Per Member Per Month (PMPM) spending by category of service and aid, budget vs. actual, individual provider or service trends, etc. Responsibility also includes rate setting for programs, services, and providers.
 - *Accounts Payable* is responsible for ensuring all providers and vendors are paid accurately and timely.
 - *Purchasing* is responsible for ensuring all administrative purchases are made in accordance with applicable laws and procedures as well as meet the purchasing needs
 - *Facilities* is responsible for maintaining property, buildings, equipment, and other environments that house personnel, inventory, and other elements of operations including Crisis Centers.
- The Business Evolution Department's primary focus is to lead in the evolution of the Alliance Health business by oversight, management and implementation of large-scale cross-functional business changes and strategic priorities. This supports leadership's need to closely manage investment funds, staff resources, and business priorities in an effort to tightly manage projects that affect the strategy, health, and profitability of the organization.

Significant Accomplishments for FY22

- Expanded Claims Department to include an Encounter Team to support Tailored Plan requirements and upcoming vendor relationship.
- Began with the IT Department to improve the Alliance Claims System (ACS) for physical Health claims processing.
- Collaborated with all departments to successfully onboard Mecklenburg and Orange County providers to ensure prompt payment and minimal processing errors.
- Improved financial reporting and processing through automation of the financial system.
- Collaborated with Alliance leadership to develop the strategic direction for Tailored Plan implementation. This included identifying major implementation milestones, tracking all Tailored Plan initiatives, and successfully submission of 230 deliverables to DHHS.
- The legislatively required semi-annual audits for September 2020 through February 2021 and March 2021 through August 2021 had average high scores higher than 99% in timeliness of provider payment, claims processing accuracy, and financial accuracy.
- Expanded the use of the Planview Pro Project Portfolio Management (PPM) system by managing resource availability for the 12 Tailored Plan Workstreams.

Summary of Goals and Objectives for FY23

- Improve provider training and technical assistance related to claim submission in advance of Tailored Plan go live.
- Collaborate with the IT team to improve claims Accounts Receivable system to manage additional encounter volume and results from new State Encounter Processing System (EPS).
- Continued implementation of financial recommendations and requirements to improve operations and ensure readiness for the Tailored Plan.
- Complete construction of our Child Facility Based Crisis building in Fuquay Varina and begin operations.
- Collaborate with leadership to develop the strategic direction and lead implementation efforts to successfully complete the DHHS readiness review process and go live in support of the Tailored Plan and Medicaid Direct contracts.

Office of Compliance & Risk Management Division

Brief Description of Department and Units

The purpose of the Office of Compliance and Risk Management is to encourage ethical and proper ways to do business, enforce the agency's commitment to compliance, encourage problems to be reported, and provide continuous monitoring and support processes which prevent, detect and deter non-compliant behavior. The Office of Compliance and Risk Management identifies, assesses and works to mitigate risks and potential threats that may interfere with the organization's operations and strategic objectives on an ongoing basis and as part of the annual organization-wide risk management cycle. It evaluates and investigates concerns regarding non-compliance, HIPAA and security incidents, fraud and abuse in the provider network, conducts delegation and internal audits, develops remediation plans, and tracks and reports outcomes. The Office of Compliance and Risk Management includes the following departments: Corporate Compliance, Health Information, Internal Audit, and Program Integrity.

Significant Accomplishments for FY22

- Supported the organization in the development of approximately 280 Tailored Plan policies and procedures by providing guidance, coordination, compliance review, and editing.
- Developed and implemented a Delegation Oversight program for monitoring performance and compliance of contractors who will perform Tailored Plan contract functions on Alliance's behalf.
- Q1-Q2: Processed and investigated 25 new referrals to Special Investigations, referred 11 suspected fraud cases to NC Medicaid Office of Compliance and Program Integrity.
- Q1-Q2: Audited over 45,000 claim lines of random adjudicated claims in addition to weekly inpatient, ED and ad hoc audits.
- Q1-Q3: Processed close to 9,000 records requests whereof 500 required a release or other response.

Summary of Goals and Objectives for FY23

- Educate employees on the organization's new Tailored Plan policies and procedures before implementation and go-live in December 2022.
- Develop vendor and function specific tools for ongoing monitoring of performance and compliance, system for tracking, and dashboards for reporting. Coordinate delegation oversight and ensure the program is effective with early detection of potential compliance issues, underperformance, and risk to the organization.
- Enhance the current organization-wide risk management program by selecting and implementing a Risk Management software for a comprehensive approach to managing ongoing and rapidly changing risk.
- Implement the new Fraud Prevention Plan to promote program integrity through training, internal controls, policies, and procedures that are designed to prevent, detect and report known, potential or suspected fraud and abuse activities. This includes expanded audit processes and data analytics designed for physical health fraud detection.

People Operations Development (POD) Division

Brief Description of Department and Units

The primary focus of Alliance's People Operations and Development (POD) Division is its people; recruiting, developing, training and retaining a talented diverse workforce. Our organization is **powered by people** which makes the POD's work an essential component to our sustaining a thriving and evolving workforce. The main areas include Benefits Administration, Employee Relations and Policy Administration, Compensation and Classification, Talent Management, and Organizational Development and Learning (ODL). Together, the POD division staff work collaboratively to address both internal and external customers' needs, often serving as an initial face of Alliance. Organization committees powered by Alliance staff work in tandem with the HR and ODL teams to promote a culture of inclusion, total health and wellness, employee engagement, and staff appreciation, and to move the organization closer to becoming an employer of choice.

Significant Accomplishments for FY22

- Recruited and filled 348 new positions expanding our total workforce to 854 active employees. Strengthened POD staffing by 12 new positions which better equips our division to partner successfully as the organization attained the county expansion and moves into full Tailored Plan operations.
- Developed and implemented 'iALIGN' a more comprehensive New Employee Orientation to introduce new hires to the Alliance culture and establish 'connection' from first day of employment. The 2-day NEO sessions were offered at the Home Office and Mecklenburg Office based on the number of onboarding staff. Recognizing that effective onboarding extends beyond new employee orientation, the 'A Team' was developed and launched to offer additional support and resources for new hires within their respective departments and business units. A total of 65 staff were trained and dispatched as 'A Team' members across the organization.
- Based on employee feedback, an additional medical plan (high deductible plan with employer-paid health savings account) was added to our benefits package providing more options for employees enrolling in benefits. This new medical plan will be effective July 1, 2022.
- All staff can participate in our employee resource groups referred to as Affinity Groups. Approximately 150 staff are actively engaged in one of our 10 affinity groups. This year, staff were introduced to 'Bridges' sessions (Building Relationships across Inclusive Diverse Groups for Everyone's Success). These bi-monthly facilitator-led sessions have been well attended and create a safe space for meaningful conversations around specific topics.
- A learning management system was selected and content is currently being developed for future use by our provider network. Also, a Provider Cultural Competency toolkit containing educational and evidence-based resources/guidelines was created and published to assist our provider network.
- Based on employee feedback, a Tailored Plan Summit was held in September allowing leaders to respond to staff's questions about our organizational transformation and the future impact to their position/department.

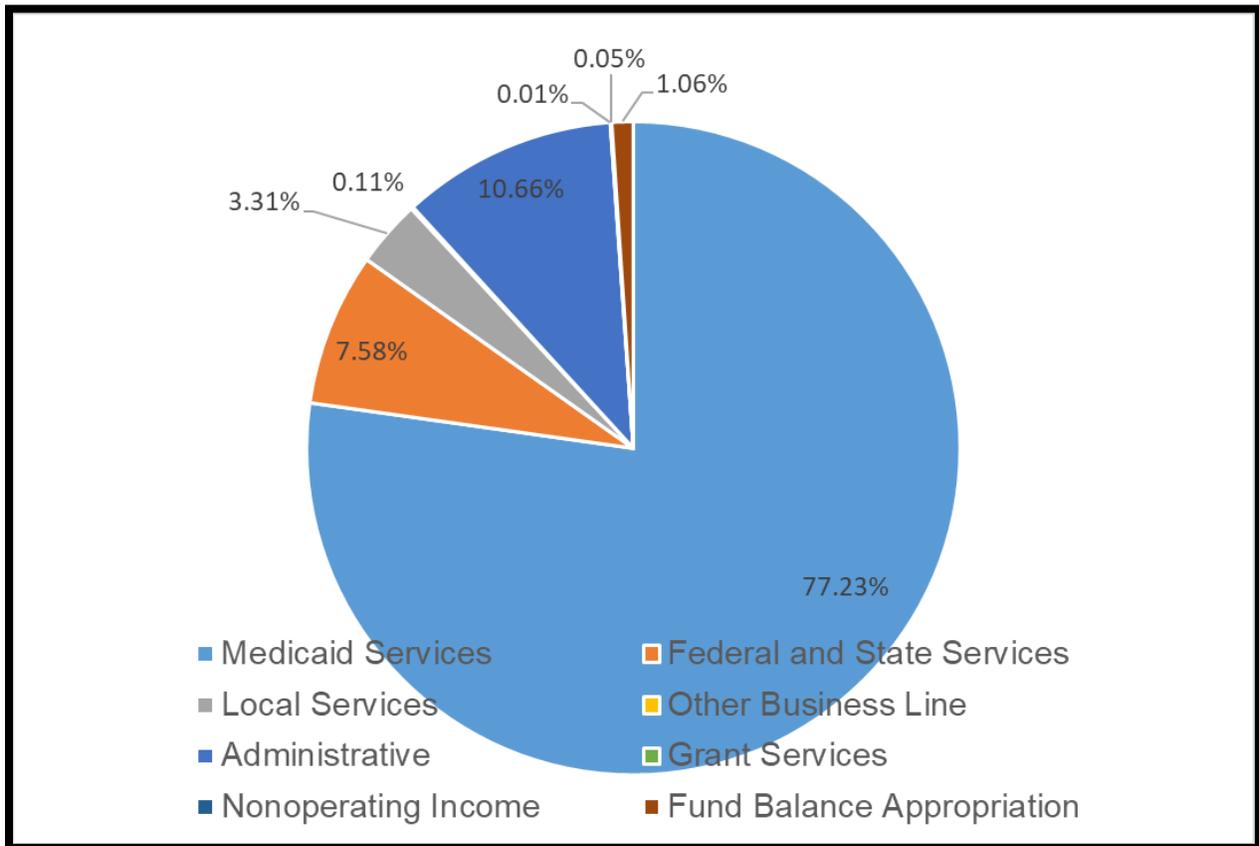
- To support staff with the significant amount of change and growth, our approach to change management was revisited/introduced with the launch of two ADKAR Change Management training sessions; ‘Lite’ as a refresher for prior participants and ‘Foundations’ as an introduction for our new staff.

Summary of Goals and Objectives for FY23

- Launch ‘KnowledgePoint’ our Provider Learning Management System.
- Collaborate with Quality Management and Provider Network staff to establish health equity goals and measures for our members and recipients.
- Launch Alliance University, offering continuous learning programs designed to enhance business practices and improve performance.
- Develop and offer HR training for employees and leaders to assist with better understanding procedures and processes including Family Medical Leave (FML), employee relations, recruiting, etc.
- Expand and engage recruitment sources to ensure diversity within candidate pools and overall workforce.
- Develop framework for position competencies to be used in recruitment, performance management, succession planning, and career development processes. Launch supporting competency learning labs for employees and leaders.
- Engage external consultant to conduct comprehensive market study for organization.
- Determine and implement approaches to maximize efficiencies in HR processes by enhancing technology, streamlining workflows, and reducing turnaround timeframes/cost.

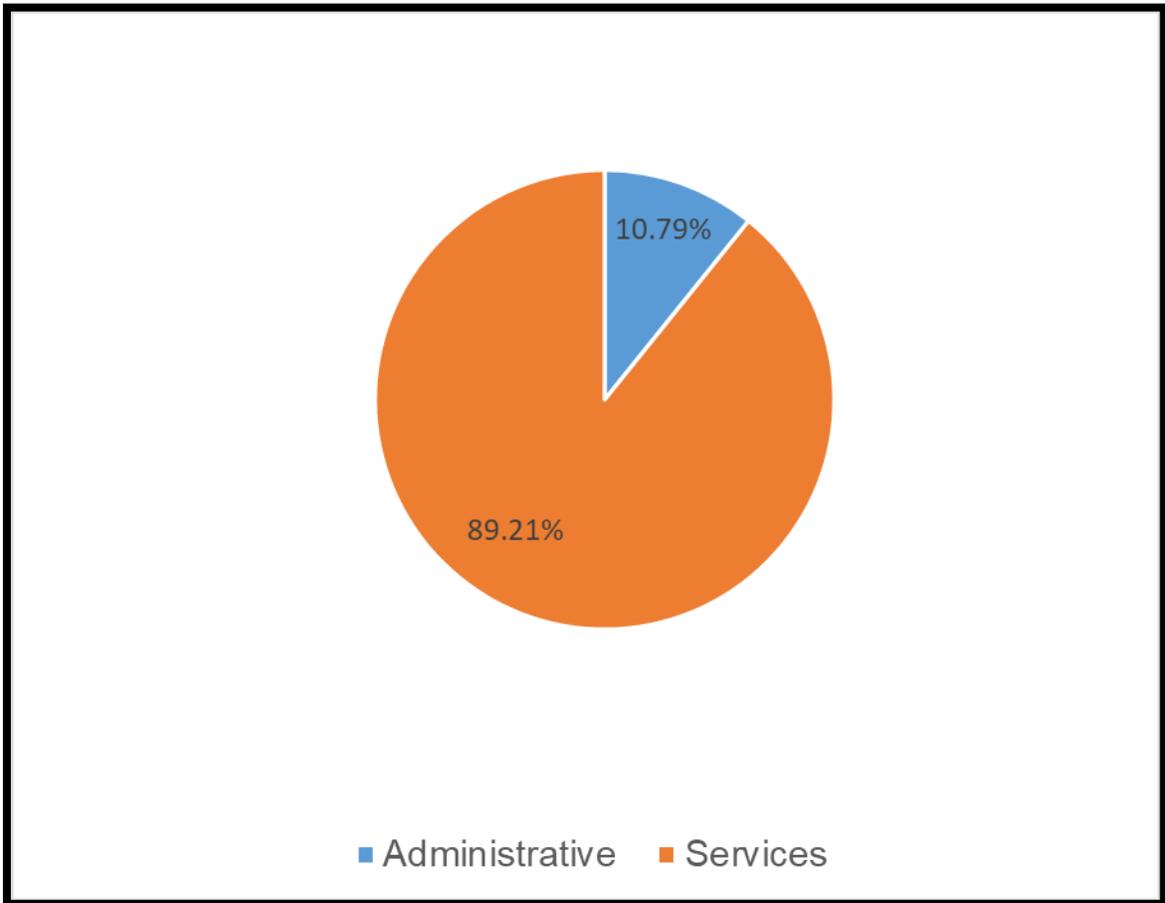
General Fund Revenues
 FY2022-2023 Recommended Budget
Total General Fund Revenues: \$1,370,306,955

Medicaid Services	\$ 1,058,233,945
Federal and State Services	103,836,236
Local Services	45,308,796
Other Business Line	1,455,432
Administrative	146,017,546
Grant Services	190,000
Nonoperating Income	750,000
Fund Balance Appropriation	14,515,000
	\$ 1,370,306,955



General Fund Expenditures
 FY2022-2023 Recommended Budget
Total General Fund Expenditures: \$1,370,306,955

Medicaid Services	\$	1,058,233,945
Federal and State Services		103,836,236
Local Services		45,308,796
Other Business Line		1,455,432
Administrative		160,532,546
Grant Services		190,000
Nonoperating Income		750,000
		\$ 1,370,306,955

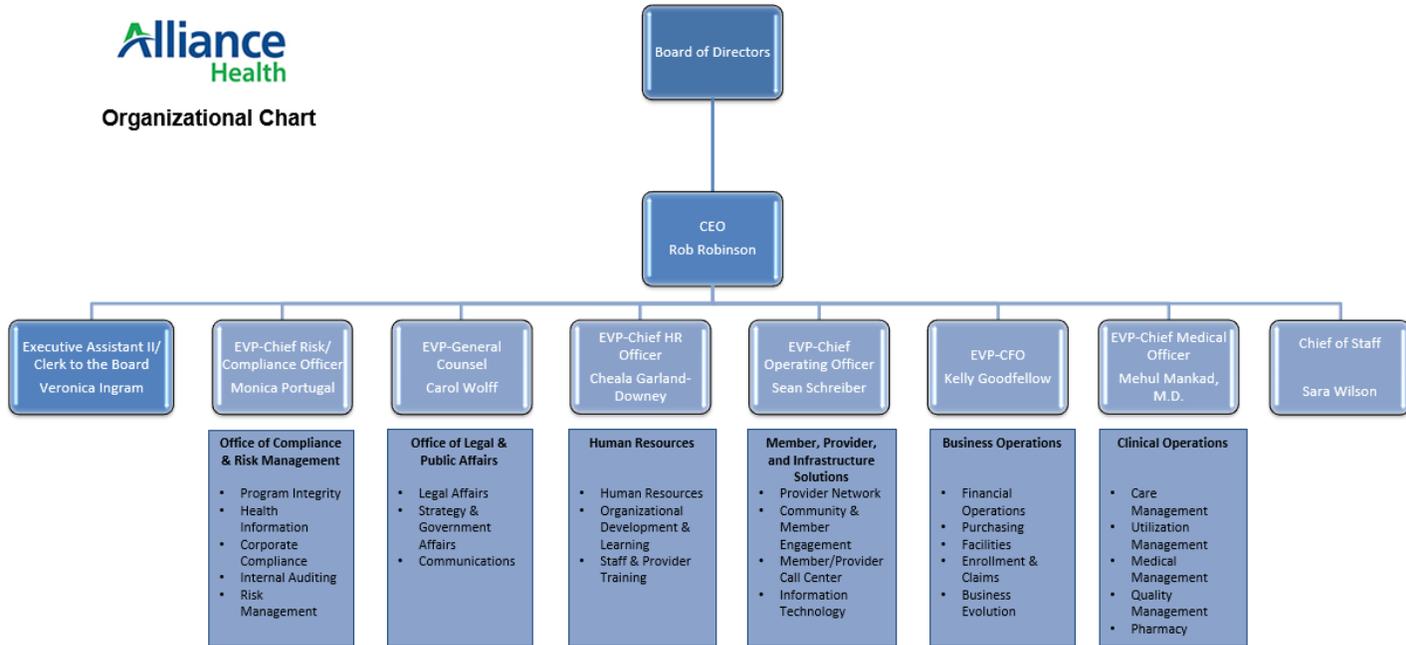


Budget Comparisons

Budgeted Revenue Comparison			
	FY22 Amendment 2		FY23 for Approval
Medicaid Services		\$ 735,194,782	\$ 1,058,233,945
Federal and State Services			
Federal Block Grant Services	31,288,498		19,953,101
State Services	85,271,605		83,883,135
Total Federal and State Services		116,560,103	103,836,236
Local Services			
Cumberland	4,795,000		4,796,000
Durham	6,325,907		6,315,032
Mecklenburg	200,000		966,148
Orange	-		879,455
Wake	30,517,237		32,352,161
Total Local Services		41,838,144	45,308,796
Other Business Line		1,595,432	1,455,432
Administrative		101,624,002	146,017,546
Grant Services		190,000	190,000
Nonoperating Income		38,712,248	750,000
Fund Balance		28,139,790	14,515,000
Total		\$ 1,063,854,501	\$ 1,370,306,955

Budgeted Expenditures Comparison			
	FY22 Amendment 2		FY23 for Approval
Medicaid Services			
Medicaid Services	735,194,782		
Fund Balance Appropriations	6,000,000		
Total Medicaid Services		\$ 741,194,782	\$ 1,058,233,945
Federal and State Services			
Federal and State Services	116,560,103		
Fund Balance Appropriations	351,452		
Total Federal and State Services		116,911,555	103,836,236
Local Services			
Local Services	41,838,144		
Fund Balance Appropriations	3,774,040		
Total Local Services		45,612,184	45,308,796
Other Business Line		1,595,432	1,455,432
Administrative			
Administrative	101,624,002		146,017,546
Fund Balance Appropriations	18,014,298		14,515,000
Total Administrative		119,638,300	160,532,546
Grant Services		190,000	190,000
Nonoperating Income		38,712,248	750,000
Total		\$1,063,854,501	\$ 1,370,306,955

Functional Organization Chart



Annual Budget Ordinance
ALLIANCE HEALTH
FY 2022 - 2023

WHEREAS, the proposed budget and budget message for FY 2022 - 2023 was submitted to the Alliance Health Area Board on May 5, 2022 by the Budget Officer; was filed with the Executive Secretary to the Board;

WHEREAS, on June 2, 2022, the Alliance Health Area Board held a public hearing pursuant to NC G.S. 159-12 prior to adopting the proposed budget;

BE IT ORDAINED by the Alliance Health Area Board that for the purpose of financing the operations of Alliance Health, for the fiscal year beginning July 1, 2022 and ending June 30, 2023, there is hereby appropriated funds the following by function:

Section 1: General Fund Appropriations

Medicaid Services	\$ 1,058,233,945
Federal and State Services	\$ 103,836,236
Local Services	\$ 45,308,796
Other Business Line	\$ 1,455,432
Administrative	\$ 160,532,546
Grant Services	\$ 190,000
Nonoperating Income	\$ 750,000
TOTAL	\$ 1,370,306,955

Section 2: General Fund Revenue

Medicaid Services	\$ 1,058,233,945
Federal and State Services	\$ 103,836,236
Local Services	\$ 45,308,796
Other Business Line	\$ 1,455,432
Administrative	\$ 146,017,546
Grant Services	\$ 190,000
Nonoperating Income	\$ 750,000
Fund Balance Appropriations	\$ 14,515,000
TOTAL	\$ 1,370,306,955

Section 3: Authorities

- A. The LME/MCO Board authorizes the Budget Officer to transfer \$25,000 or less between appropriations without prior approval.
- B. Subject to the prior written approval from the Chief Executive Officer, transfers between appropriations of \$25,001 - \$100,000 per transaction, may be made if allowed by the funding source subject to a report to the Board Finance Committee at its next scheduled meeting. The report to the finance committee shall contain the reason and justification for the transfer. Consistent with N.C.G.S. §159-15, the Finance Committee will report these transfers to the Board at its next regular meeting for information and entry into the minutes.
- C. The CEO may enter into the following within budgeted funds:
1. Form and execute grant agreements within budgeted appropriations;
 2. Execute leases for normal and routine business;
 3. Enter into consultant, professional, maintenance, provider, or other service agreements;
 4. Approve renewals for of contracts and leases;
 5. Purchase of apparatus, supplies, materials or equipment and construction or repair work;
 6. Reject any and all bids and re-advertise to receive bids.

Budget and Amendment Process

Overview

The purpose of the budget and amendment process is to ensure that public dollars are spent in the manner as intended and in an effort to meet the needs of the citizens in relation to mental health, intellectual/developmental disabilities, and substance use disorder needs. Through the budget, Alliance Health aims to fulfill its mission as granted by NC G.S. 122-C.

Governing Statutes

Alliance Health abides by the North Carolina Local Government Budget and Fiscal Control Act. It is the legal framework in which all government agencies must conduct their budgetary processes. NC G.S. 159 provides the legislation which includes several key dates such as:

- 159-10 - By April 30, Departments must submit requests to the Budget Officer
- 159-11(b) - By June 1, the Recommended Budget must be submitted the Board
- 159-12(b) - A public hearing must be held
- 159-13(a) - From 10 days after submitting to the Board, but by July 1, a balanced budget must be adopted

Budget Process

FY 2022-2023 is the eleventh recommended budget representing Alliance Health as a multi-county Area Authority. The budget represents services for Cumberland, Durham, Johnston, Mecklenburg, Orange and Wake counties.

The administrative budget for this fiscal year was driven by our Per Member Per Month (PMPM) rate, FY23 projected costs, FTE positions, Department of Health and Human Services contract requirements, and costs related to the operating the Medicaid waiver.

The Medicaid service budget was created based on historical experience and projections into the next fiscal year. Alliance will review the need for a budget amendment if the projection of lives has changed based on payments received.

The State and Local services budget was developed by gathering service information for each area based on the claims trends and information from staff. The FY23 allocations and benefit packages were reviewed and staff worked together to ensure all services were appropriately planned to be consistent with current services.

Amendment Process

The budget ordinance is approved at a function/appropriation level. The Budget Officer is authorized to transfer budget amounts \$25,000 or less between appropriations without prior approval. Subject to the prior written approval from the Chief Executive Officer (CEO), transfers between appropriations of \$25,001 - \$100,000 per transaction, may be made if allowed by the funding source subject to a report to the Board Finance Committee at its next scheduled meeting. The CEO may enter into the following within budgeted funds:

1. Form and execute grant agreements within budgeted appropriations;
2. Execute leases for normal and routine business;
3. Enter into consultant, professional, maintenance, provider, or other service agreements;

4. Approve renewals for contracts and leases;
5. Purchase of apparatus, supplies, materials or equipment and construction or repair work;
6. Reject any and all bids and re-advertise to receive bids.

Per G.S. 159-15, the governing board may amend the budget ordinance at any time after the ordinance's adoption in any manner, so long as the ordinance, as amended, continues to satisfy the requirements of G.S. 159-8 and 159-13.

Budget Calendar

By Thursday, May 5, 2022	FY 2022-2023 recommended budget presented at LME/MCO Board meeting
By Friday, May 13, 2022	Notice of June 2, 2022 Public Hearing published
By Thursday, June 2, 2022	Public Hearing
By Thursday, June 30, 2022	LME/MCO Board adoption of FY 2022-2023 Budget Ordinance
By Friday, July 1, 2022	Budget is available in the financial system

Glossary of Terms

LME	Per G.S. 122C-3(20b), Local Management Entity or LME means an area authority, county program, or consolidated human services agency. It is a collective term that refers to functional responsibilities rather than governance structure.
MCO	Managed Care Organization; LMEs that have adopted the financial risk and service review functions of the 1915(b) and 1915(c) waivers. LME-MCOs carry out the function of an LME and also act as health plans that provide health care in return for a predetermined monthly fee and coordinate care through a defined network of providers, physicians and hospitals.
Medicaid Waiver	States can submit applications to the federal Centers for Medicare and Medicaid Services, asking to be exempt from certain requirements. If granted a “1915(b)” waiver, a state can limit the number of providers allowed to serve consumers, easing the state’s administrative burden and saving money. If granted a “1915(c)” waiver, a state can offer more services focused on helping an intellectually or developmentally disabled consumer continue living in his or her home, rather than a group home.



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Election of FY23 (Fiscal Year 2022-2023) Board Officers

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: As stated in Article II, Section D of the By-Laws, at each final regular Board meeting of the fiscal year, the officers of the Board of Directors shall be elected for a one-year term to begin July 1. The Officers of the Board of Directors include Chairperson and Vice-Chairperson. No officer shall serve in a particular office for more than two consecutive terms. Each Board member, other than County Commissioners, shall be eligible to serve as an officer. Duties of officers shall be as follows:

- Chairperson – this officer shall preside at all meetings and generally perform the duties of a presiding officer. The Chairperson shall appoint all Board of Directors committees.
- Vice Chairperson – this officer shall be familiar with the duties of the Chairperson and be prepared to serve or preside at any meeting on any occasion where the Chairperson is unable to perform his/her duties.

Nominations will be presented and Board members will elect officers at the June 2, 2022, meeting.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): N/A

REQUEST FOR AREA BOARD ACTION: Elect FY23 Chairperson and Vice-Chairperson.

CEO RECOMMENDATION: Elect FY23 Chairperson and Vice-Chairperson.

RESOURCE PERSON(S): Robert Robinson, Chief Executive Officer

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**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Special Presentation/Update: Service Expansion Update, Part One

DATE OF BOARD MEETING: June 2, 2022

BACKGROUND: This is part one of a two-part presentation highlighting the goals and process for accessing and developing the Alliance provider network. The presentation will include a brief history of the evolution of the Alliance network, information on the network adequacy and network development plan, review of data and process used for determining expansion activities, and an overview of recent network expansion and development activities.

SPECIFIC INFORMATION FOR BOARD REVIEW (if applicable/available): N/A

REQUEST FOR AREA BOARD ACTION: Accept the presentation.

CEO RECOMMENDATION: Accept the presentation.

RESOURCE PERSON(S): Mehul Mankad, MD, Chief Medical Officer; and Sean Schreiber, Executive Vice-President/Chief Operating Officer

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