

April 18, 2016

Rick Brajer, Secretary  
North Carolina Department of Health and Human Services  
c/o Division of Health Benefits  
2501 Mail Service Center  
Raleigh, NC 27699-2501

Dear Secretary Brajer:

On behalf of thousands of North Carolinians living with a mental health condition, we want to thank you, Secretary Brajer, and the NC Department of Health and Human Services (DHHS), for the opportunity to comment on the draft Medicaid reform waiver application for the Medicaid and NC Health Choice plans (Social Security Act Section 1115 Demonstration). We applaud the state of North Carolina's goal of achieving the Quadruple Aim: improving the patient experience of care, improving the health of populations, containing the per capita cost of health care, and improve provider engagement and support.

The North Carolina Mental Health America/Association/Associates (MHA) Collaborative is a coalition of local area organizations that advocate for individuals who are affected by mental illness, provide mental health education for the community, and raise mental health awareness.

The chief priority of the NC MHA Collaborative is to ensure that every North Carolinian has access to a broad scope of medically appropriate, evidence-based behavioral health services in full parity with other conditions. For many people in recovery, accessing appropriate-level care at the right time can be difficult. Moreover, low Medicaid reimbursement rates coupled with the heavy administrative requirements hinders providers from easily accepting individuals who have Medicaid as their primary health insurance. The NC MHA Collaborative encourages raising Medicaid reimbursement rates and streamlining administrative requirements in order to enable more providers to accept individuals who have Medicaid coverage. Regardless of the Medicaid delivery model that North Carolina adopts, every individual should be able to easily navigate the public mental health system, and access appropriate-level services for his or her current condition.

The NC MHA Collaborative also promotes access to affordable services that prevent the onset of mental health and substance use conditions. As with physical health, preventative mental health care and early identification of symptoms are more cost-effective and yield better community outcomes than waiting to treat individuals until their symptoms have progressed<sup>i</sup>.

Further, the NC MHA Collaborative supports incorporating principles of recovery-based care into the North Carolina Medicaid and NC Health Choice Programs. Adopting a value-based payment model, like the Medicaid capitated managed care model outlined in the draft Medicaid reform waiver, is a critical step toward promoting healthy communities. As North Carolina transitions to this new payment model, it is paramount that we base our payment model on recovery, facilitated by measurement-based care. Recovery refers to the process in which people are able to improve their health and wellness, live self-directed lives, and strive to reach their full potential. Individuals in recovery for their mental health conditions need continued access to appropriate-level care that, when provided at the *right* time, helps restore their health, prevent deterioration, and use of costly services. The NC MHA Collaborative promotes rewarding LMEs/MCOs for quality outcomes such as decreases in hospital visits and the use of crisis based services, in order to foster recovery for individuals. The NC MHA Collaborative is

committed to the principle that every individual with a mental health or substance use condition can enjoy recovery and wellness.

The NC MHA Collaborative continues to promote the aim of supporting providers through engagement and innovations. In that vein, we encourage DHHS to develop an avenue for individuals to offer meaningful and continued input for Prepaid Health Plans (PHP) in order to continue to improve services. When we ensure that people have meaningful involvement in the planning, delivery, and evaluation of mental health service systems, we support a recovery-based system as outlined by the National Consensus Conference on Mental Health Recovery and Mental Health Systems Transformation<sup>ii</sup>. To that end, information on the successes and challenges of the system in meeting outcomes should be made available to the public as much as possible.

As an essential step in conjunction with the 1115 waiver, the NC MHA Collaborative encourages the state of North Carolina to expand its current Medicaid program in order to serve North Carolinians who earn up to 133 percent of the Federal Poverty Level (FPL). Nearly one in five North Carolinians under 65 are uninsured, thereby only seeking care, usually via visits to the emergency department, when they are injured or sick. Expansion of the NC Medicaid program could enable more than 300,000 low-income adults to gain health coverage, allowing them to get timely, affordable health care, including preventive and primary care that can help keep them healthy<sup>iii</sup>. Expanding NC Medicaid could mean cost savings for the state by offsetting the cost of expansion with both Federal funds and decreases in uncompensated hospital visits.

Again, we thank you for your efforts and for your consideration of our comments as we look forward to moving toward the Medicaid and NC Health Choice plans' Quadruple Aim.

Sincerely,

The North Carolina MHA Collaborative

*Janelle Clevinger, Executive Director, Mental Health Association in Wilson County*

*Ellen Cochran, Executive Director, Mental Health Associates of the Triad*

*Ellis Fields, Executive Director, Mental Health America of Central Carolinas*

*Andy Hagler, Executive Director, Mental Health Association in Forsyth County*

*Marci White, MSW, Executive Director, Mental Health America of the Triangle*

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<sup>i</sup> [https://www.aacap.org/App\\_Themes/AACAP/docs/Advocacy/policy\\_resources/Cost\\_Effectiveness\\_Fact\\_Sheet\\_2011.pdf](https://www.aacap.org/App_Themes/AACAP/docs/Advocacy/policy_resources/Cost_Effectiveness_Fact_Sheet_2011.pdf)

<sup>ii</sup> <http://store.samhsa.gov/shin/content/SMA05-4129/SMA05-4129.pdf>

<sup>iii</sup> <http://www.conehealthfoundation.com/app/files/public/4202/The-Economic-and-Employment-Costs-of-Not-Expanding-Medicaid-in-North-Carolina.pdf>