



As part of the Community Care network, providers are an important partner in the effort to keep our patients healthy. Improving patient care and leveraging the expertise of North Carolina's providers are the bedrock of CCNC and the reason for our success. We thank you for your part in this important work.

Did You Know?

Every month, CCNC care managers complete approximately 300,000 tasks and interventions, reaching more than 75,000 patients. In the past year CCNC has increased the number of high-risk patients we are able to reach at the time of hospital discharge for transitional care support by 25%. We are providing transitional care to 2,600 Medicaid recipients every month, with proven reductions in subsequent costs by \$2,000 - \$6,000 per patient.

Legislative Update

Last week was "Crossover" – the deadline by which most bills must pass one chamber or the other in order to remain eligible for consideration. Bills that involve raising or spending money (like Medicaid reform) are not subject to crossover. So far, 1,655 bills have been filed this session with 343 bills passing the House and 164 passing the Senate by the crossover deadline.

With the bill filing and crossover deadlines now behind them, the members of the General Assembly will turn their attention to crafting this year's budget. This year, the House starts the process first, after receiving the Governor's proposed spending plan earlier this year. Expect to see a renewed push from both chambers to address Medicaid reform. The NC Medical Society and the Hospital Association continue their efforts to craft a provider-led capitated ACO bill to present to legislative leadership. CCNC will continue to offer feedback and suggestions as appropriate. Look for this provider-led plan to surface this week or, more likely, next, as the House begins its budget efforts in earnest.

In other news, both the Senate and House Health committees heard from both sides of the Certificate of Need debate recently. The House reception was cool; the Senate, though, was much more enthusiastic, with Senate Rules chairman and CON reform bill sponsor Tom Apodaca all but promising that the Senate would not end the session without Medicaid reform and CON reform approved.

Facts on Medicaid Spending

There has been lots of talk in recent months about Medicaid spending and the "broken" Medicaid system. But, the truth is, total state Medicaid spending is flat and predictable. In fact, when state spending is adjusted to account for stimulus money and overrun payments, Medicaid spending has *decreased* 7% from SFY 2010 to SFY 2014. State spending on medical claims has been relatively flat, growing just 1% annually since SFY 2010. The apparent volatility in state Medicaid spending in recent years has resulted from factors unrelated to provider payments.

While enrollment in Medicaid has grown by more than 300,000, per-person Medicaid claims spending has actually declined 2% each year. The General Assembly has improved its budgeting for Medicaid in recent years, and the N.C. Department of Health and Human Services has implemented internal processes to predict future costs. As a result, the likelihood of Medicaid shortfalls is significantly reduced.

Doing What's Right and Doing it Well

CCNC, local DSS agencies and providers are helping foster children get the medical care they need while restraining costs. Read more on our [website](#).