

Timeframes for Implementation

Action	Date
RFP Published	August 9, 2018
RFP Responses Due	October 12, 2018
Contracts Awarded	February 4, 2019
Phase I:	
Open Enrollment Approximate Start	July 19, 2019
Phase I Begins	November 1, 2019
Phase II:	
Open Enrollment Approximate Start	October 19, 2019
Phase II Begins	February 1, 2020
Start of LME/MCOs as BH/IDD Tailored Plans <i>("The Department intends for BH I/DD TPs to be operational at the start of the first State fiscal year that is one (1) year after the implementation of the first contracts for Standard Benefit Plans.")*</i>	July 1, 2021*
Standard Plan Contract Period, 3 years:	
Contract Year 1, Phase 1	November 1, 2019 – June 30, 2020
Contract Year 1, Phase 2	February 1, 2020 – June 30, 2020
Contract Year 2	July 1, 2020 – June 30, 2021
Contract Year 3	July 1, 2021 – June 30, 2022
Start of competitively bid BH/IDD Tailored Plans*	February 2024 or July 1, 2024*

*Under [SL 2018- 48](#), DHHS will consider only LME/MCOs to become BH/IDD Tailored Plan managers. The statute specifies that BH/IDD Tailored Plan contract with those LME/MCOs selected will begin one year after the start date of the Standard Plan and DHHS is choosing to extend this to the start of the next fiscal year, July 1, 2020. The statute also states that four years after the start date of the Standard Plan DHHS may competitively bid the BH/IDD Tailored Plan to non-profits and public managers only, presumably February 2024, which may be July 1, 2024 if DHHS aligns the start with the beginning of a new state fiscal year.

Contingencies to Timeframes

DHHS overcame a large hurdle when the General Assembly passed the two tandem bills on Medicaid Transformation in their 2018 Short Session. There is more to be done before the Transformation can begin, not the least of which is the federal Center for Medicare and Medicaid Services (CMS) approval of the 1115 Medicaid waiver. In addition, there are multiple North Carolina statutory changes that must be made so that legal language aligns with the Medicaid practice. For example, North Carolina General Statutes Chapter 122C governs the MH/I-DD/SUD public system and will necessarily have to be updated to reflect the distinction between the mild-to-moderate and high need BH/IDD population, among other things.