



MECKLENBURG COUNTY OFFICE OF THE COUNTY MANAGER

February 11, 2021

Dr. Mandy K. Cohen, MD, MPH
Secretary, NC Department of Health and Human Services
2001 Mail Service Center
Raleigh, NC 27699

Dear Secretary Cohen,

As you are aware, on November 4, 2020, Mecklenburg County's Board of County Commissioners voted unanimously to begin the process of disengagement from Cardinal Innovations Healthcare as outlined in the statutes and administrative code. After careful consideration of all alternatives, we request that a new Local Management Entity/Managed Care Organization (LME/MCO) be established specifically for Mecklenburg County and its population of more than 1.1 million residents. We appreciate how NCDHHS has listened and responded to our concerns during this process. We also appreciate Cardinal's willingness to collaborate on a plan to address our concerns.

The request for a separate LME/MCO is not made lightly. We have experienced significant issues with Cardinal since they first became Mecklenburg County's LME/MCO in April 2014. In our joint letter with Forsyth County to NCDHHS in October 2020, we outlined many of these problems such as fragmented discharge planning from ERs and jails, gaps in service provision for individuals during high-acuity behavioral health situations, delayed treatment authorizations and a restricted provider network for foster children and adult wards, resulting in extended hospitalizations and inappropriate placements for youth.

Along with the problems experienced by Mecklenburg County, community stakeholders have expressed similar concerns for many years. These stakeholders include local behavioral health service providers, Mobile Crisis Services, Medic, District Court Judges, Charlotte's Center for Legal Advocacy, Council for Children's Rights, local hospital systems as well as many advocacy groups and family members of individuals receiving services.

In 2016, as a result of provider network issues which resulted in delays for children transitioning from hospital emergency rooms in need of a therapeutic treatment setting, Mecklenburg County convened a "Community Transitions for Youth Collaborative" that included many of the above-named partners. Although numerous subcommittees worked on and developed plans from the collaborative, we repeatedly returned to the same provider network challenges with Cardinal.

For the last few months, we have been in a process of reviewing and providing feedback to Cardinal's Plan of Action (POA) to address the systemic concerns that have been repeatedly raised. To date, Cardinal's POA has not adequately outlined a clear plan. We continue to ask for clarity on their efforts to improve behavioral health services for youth and adults with justice involvement, adult wards and individuals experiencing homelessness. They have proposed separate work streams to address these concerns, but there is a lack of urgency and thoroughness. We are also concerned that we will face the same problems that have plagued our relationship with Cardinal without constant intervention and monitoring from NCDHHS. These issues should have been addressed years ago, without prompting by local County government.

Across our state, LME/MCOs struggle to address many of the same challenges. And understandably so because of the difficulty in operating with limited resources to serve individuals with the most complex behavioral health needs. However, these problems are exacerbated by Cardinal's historic unwillingness to partner, listen to feedback, and implement sustained changes to meet the needs of the residents living in their catchment area.

Recently, Cardinal provided the County with a reimbursement check of \$1.4 million to cover expenses for an invoice we submitted for youth in County-funded emergency placement during FY19. Although we are pleased that Cardinal resolved the invoice, this still does not address the underlying problem that created the invoice. As of our last report on February 10, 2021, we had at least 11 youth in emergency placement settings (with a range of 28 days to 158 days in these settings) because of Cardinal's difficulty arranging appropriate treatment. This indicates that we continue to experience the same challenges we have elevated to Cardinal's leadership for many years. It is a vicious cycle and the residents of Mecklenburg County who need their services suffer the consequences.

Thank you for considering our request to establish a separate LME/MCO for Mecklenburg County. With a population of more than 1.1 million, we believe our County residents deserve the level of responsiveness that only a dedicated organization can provide. Our staff stand ready to collaborate on development of this tailored LME/MCO to better serve residents of our community.

We look forward to your response and next steps.

Sincerely,



Dena Diorio
Mecklenburg County Manager

CC: George Dunlap, Chair, Board of County
Elaine Powell, Vice Chair, Board of County Commissioners
Leigh Altman, County Commissioner at Large
Pat Cotham, County Commissioner at Large
Ella Scarborough, County Commissioner at Large
Vilma D. Leake, County Commissioner District 2
Mark Jerrell, County Commissioner District 4
Laura Meier, County Commissioner District 5
Susan Rodriguez McDowell, County Commissioner District 6
Dave Richard, Deputy Secretary, NC DHHS
Anthony Trotman, Deputy County Manager
Tyrone Wade, County Attorney
Robert Nesbit, Policy and Operations Manager
Carmen Hooker-Odom, Chair, Cardinal Innovations
Trey Suttan, CEO, Cardinal Innovations