**Alliance – Trillium – Vaya Coalition**

**What is the purpose of the coalition?**

Coming together as a coalition will enhance our ability to respond to the challenges and opportunities of Medicaid reform, demonstrating to NC DHHS, the General Assembly, and potential commercial healthcare partners that MCOs are able to:

- Work together successfully, leveraging their strengths, experience and expertise, and utilize best practices to increase efficiencies
- Implement Medicaid Transformation in a way that advances high-quality care, improves population health, engages and supports providers, and establishes a sustainable program with predictable costs
- Support both Standard and Tailored Plan concepts to offer a proven, North Carolina-based solution that meets statewide and regional needs for MH/DD/SUD and other complex care populations.

**What does the formation of this coalition mean for the way Alliance, Trillium and Vaya currently operate?**

Each of these MCOs will continue to operate in the North Carolina counties they serve just as they have been – they will keep their same names, leadership, Board structure and staffing – in addition to working together as part of a coalition to leverage their resources, experience and expertise on a statewide level.

**Is this a merger?**

No, this is not a merger or a mandated consolidation. It is a proactive, cooperative effort initiated by three high-performing MCOs to unite their efforts to address significant, statewide health policy issues that impact all members across the state, such as emergency department boarding, the opioid crisis, and the IDD wait list. The coalition is in full alignment with the Medicaid Reform plan proposed by the NC Department of Health and Human Services.

**What value does the coalition bring to people who receive services managed by Alliance, Trillium and Vaya?**

As a coalition our MCOs will have a stronger voice in preserving the role of the public behavioral healthcare system in Medicaid Transformation, helping ensure continued stability and continuity of care for the people we serve. The potential to create a combined statewide provider network that will result from the coalition will enhance access to a diverse range of services and supports for people in both urban and rural areas of the state. We’ll be able to leverage the strength of our combined provider networks to better promote the use of evidenced-based practices to ensure high-quality consumer care.

**How will the coalition improve the experience for members of the provider network?**

As the coalition evolves, we understand the importance of exploring ways to streamline processes and create system efficiencies to reduce the administrative burden on providers. In addition, the coalition supports the opportunity to create a local, regional and statewide provider network which can provide the opportunity for network members to expand their reach across the state and into integrated care.

**Will other LME/MCOs and other organizations be able join the coalition?**

There could be opportunity for other MCOs to partner once the coalition has a clear understanding of its business relationships with Prepaid Health Plans (PHPs) or Provider Led Entities (PLEs). At that point we’ll assess gaps and identify strengths of other potential partners for the Tailored and Special Plans. If gaps exist, we’ll explore partnerships with other entities, including MCOs, to fill those gaps.