



NC Department of Health and Human Services

Healthy Opportunities

Erika Ferguson

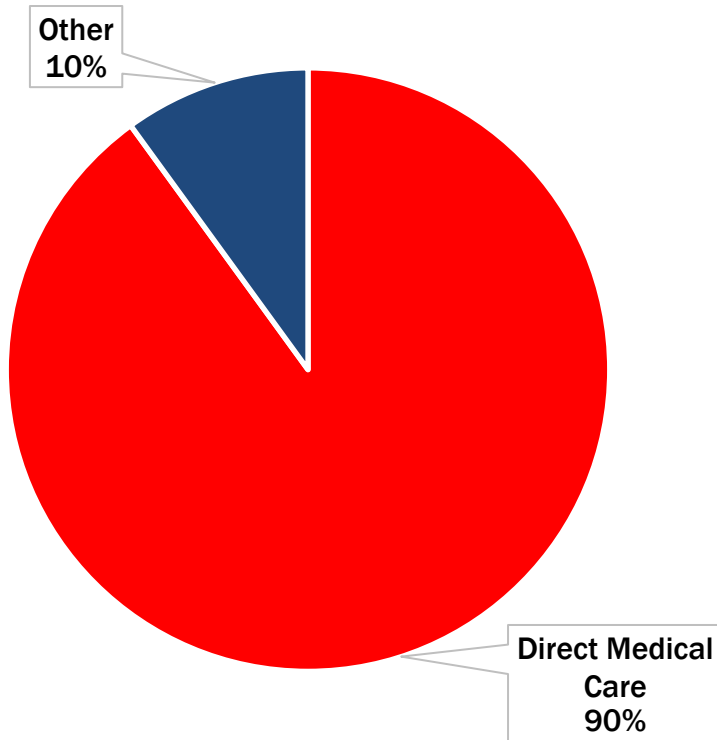
Director, Office of Healthy Opportunities

NCCAA Conference

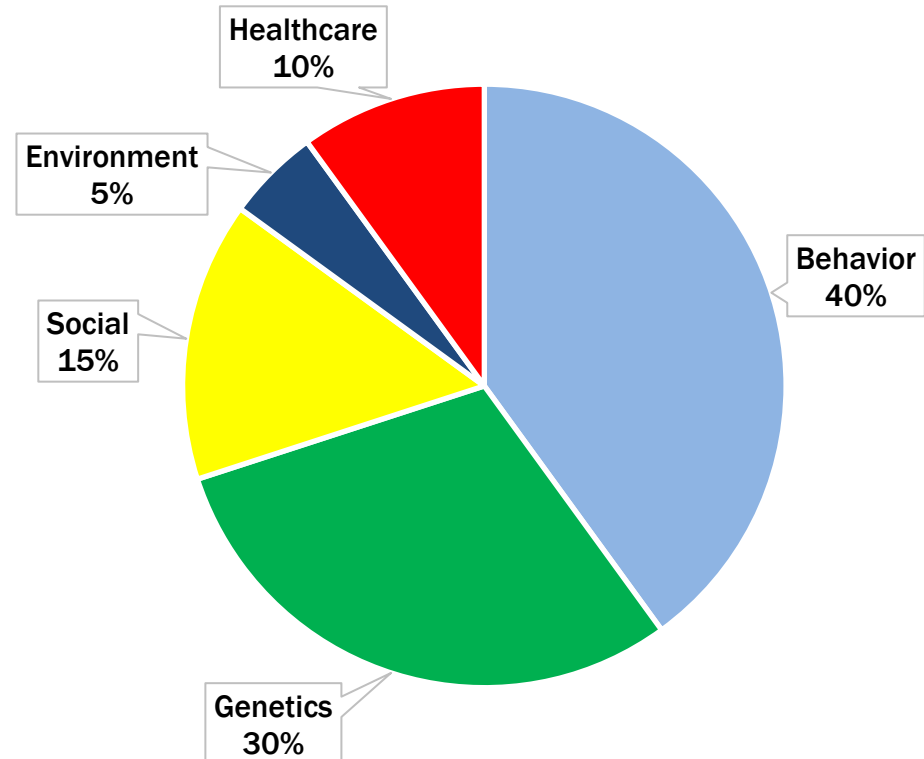
May 15, 2019

Mismatch: We are Buying Healthcare not “Health”

Healthcare Spending



Drivers of Health



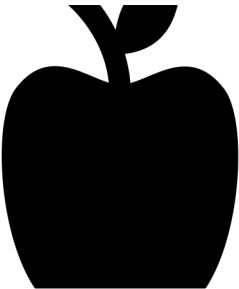
The greatest opportunity to improve health lies in addressing a person's unmet essential needs.

SOURCE: Schroeder SA. N Engl J Med 2007

Healthy Opportunities Strategy

- 1. “Hot Spot” Map**
- 2. Screening Questions**
- 3. NCCARE360**
- 4. Medicaid Transformation & Pilots**
- 5. Workforce**
- 6. Connecting Resources**

Initial Domains



Food Security



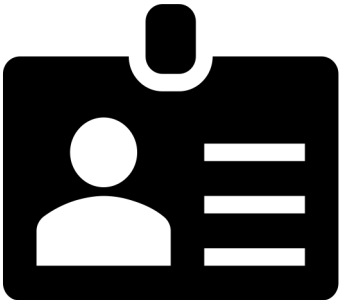
Housing Stability



Transportation



Interpersonal Safety



Employment

Screening Questions

- **Goals**
 - Routine identification of unmet health-related resource needs
 - Statewide collection of data
- **Development**
 - Technical Advisory Group
 - Released April 2018 for Public Comment
 - Field tested in 18 clinical sites
- **Implementation**
 - Recommended to be used across settings and populations
 - Launch of Managed Care: PHPs Required to Include in Care Needs Assessment

Health Screening

We believe everyone should have the opportunity for health. Some things like not having enough food or reliable transportation or a safe place to live can make it hard to be healthy. Please answer the following questions to help us better understand you and your current situation. We may not be able to find resources for all of your needs, but we will try and help as much as we can.

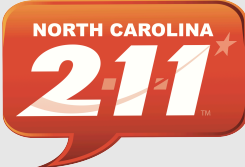


	Yes	No
Food		
1. Within the past 12 months, did you worry that your food would run out before you got money to buy more?		
2. Within the past 12 months, did the food you bought just not last and you didn't have money to get more?		
Housing/ Utilities		
3. Within the past 12 months, have you ever stayed: outside, in a car, in a tent, in an overnight shelter, or temporarily in someone else's home (i.e. couch-surfing)?		
4. Are you worried about losing your housing?		
5. Within the past 12 months, have you been unable to get utilities (heat, electricity) when it was really needed?		
Transportation		
6. Within the past 12 months, has a lack of transportation kept you from medical appointments or from doing things needed for daily living?		
Interpersonal Safety		
7. Do you feel physically or emotionally unsafe where you currently live?		
8. Within the past 12 months, have you been hit, slapped, kicked or otherwise physically hurt by anyone?		
9. Within the past 12 months, have you been humiliated or emotionally abused by anyone?		
Optional: Immediate Need		
10. Are any of your needs urgent? For example, you don't have food for tonight, you don't have a place to sleep tonight, you are afraid you will get hurt if you go home today.		
11. Would you like help with any of the needs that you have identified?		

NCCARE360

NCCARE360 is the first statewide coordinated network that unites healthcare and human services organizations with a shared technology platform allowing for a coordinated, community-oriented, person-centered approach to delivering care in North Carolina.



NCCARE360 Functionalities

Functionality	Partner	Timeline
<p>Resource Directory</p> <p>Directory of statewide resources that will include a call center with dedicated navigators, a data team verifying resources, and text and chat capabilities.</p>		<p>Phased update 2019 - 2020</p>
<p>Data Repository</p> <p>APIs integrate resource directories across the state to share resource data.</p>	 <p>Expound</p>	<p>Phased Approach</p>
<p>Referral & Outcomes Platform</p> <p>An intake and referral platform to connect people to community resources and allow for a feedback loop.</p>		<p>Rolled out by county January 2019 - December 2020</p>

Hands on, in-person technical assistance and training to on-board providers and community organizations.

No Wrong Door Approach



Status Update

NCCARE360 Status Update

5 Counties launched

9 Additional counties currently in implementation

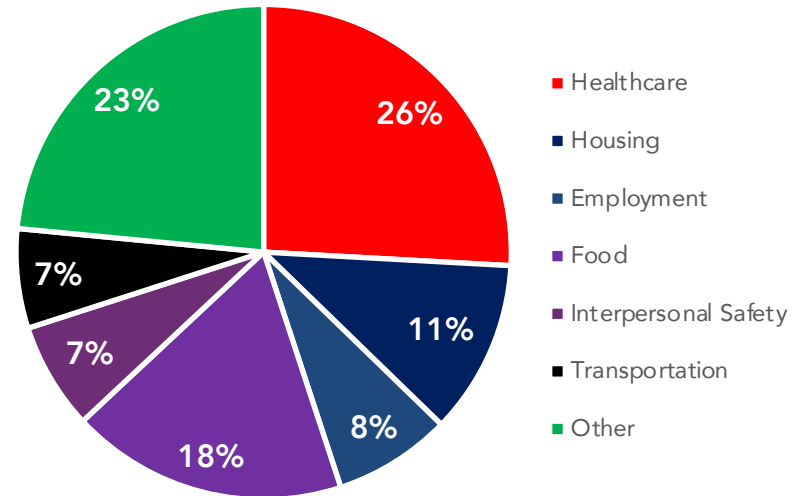
1095 Organizations engaged in socialization process

193 Organizations onboarded onto NCCARE360

846 Users onboarded

69 Referrals sent

Engaged Organizations by Service Type



NCCARE360 will be implemented statewide by end of 2020

What Are the Healthy Opportunities Pilots?

The federal government authorized up to \$650 million in state and federal Medicaid funding to test evidence-based, non-medical interventions designed to improve health outcomes and reduce healthcare costs for a subset of Medicaid enrollees.

Pilot funds will be used to:

- Cover the cost of federally-approved Pilot services
 - *DHHS is developing a fee schedule to reimburse entities that deliver these non-clinical services*
- Support capacity building to establish “Lead Pilot Entities” that will develop and manage a network of human service organizations (HSOs), and strengthen the ability of HSOs to deliver Pilot services
 - *DHHS will procure Lead Pilot Entities with deep roots in their community that can facilitate collaboration across the healthcare and human service providers through building partnerships.*

NC’s priority “Healthy Opportunities” domains

Housing



Food



Transportation



Interpersonal
Violence



Questions

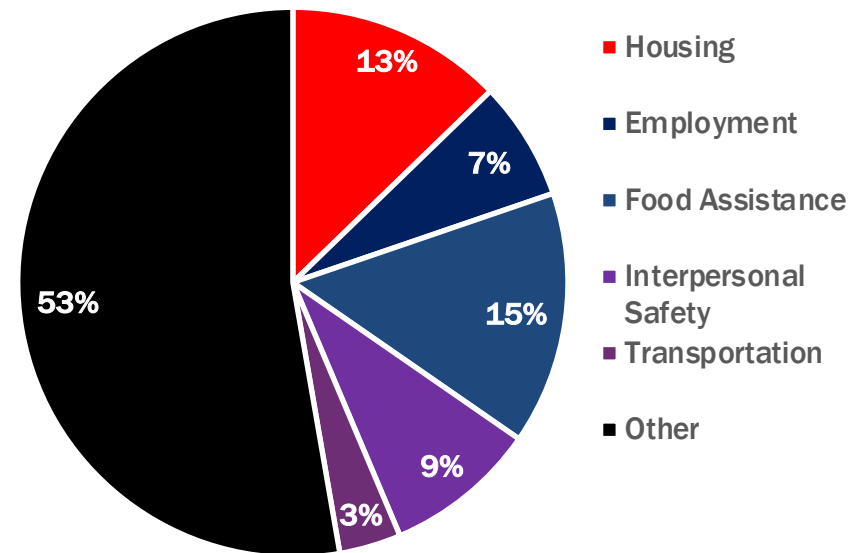
Erika.Ferguson@dhhs.nc.gov

Appendix

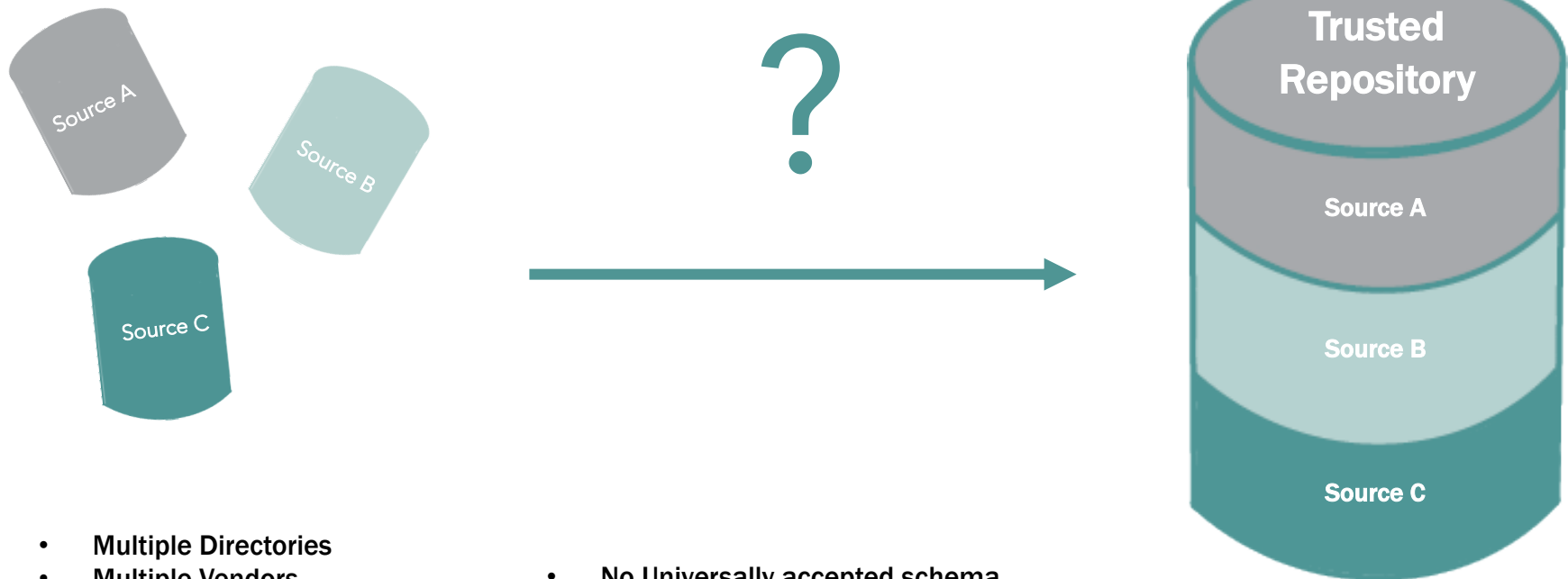
Resource Directory

- Building on NC 2-1-1 strengths
 - Robust 18,000 organization directory, call centers
- Growing Capacity
 - Additional data coordination staff: Updating all listings in current 2-1-1 directory
 - Additional call center staff: navigators at scale
- Progress
 - 1468 Organizations verified
 - 3857 programs verified

2-1-1 Resources Verified by Service



Community Resource Repository



- Multiple Directories
- Multiple Vendors
- Proprietary Formats
- Non-Standardized content
- Unique ways to transmit data
- Hard to keep updated

- No Universally accepted schema
- No authoritative “aggregator”
- Industry incentivized to disaggregate
- No easy way for users to consume data
- Current way: technically complex & costly

Building a Coordinated Network

Out of Network

Organizations that have not been onboarded to the platform

- Searchable and Identifiable as part of Resource Directory/Data Repository
- Not part of the NCCARE360 platform yet
- Do not report outcomes



In Coordinated Network

Organizations onboarded to the platform – Coordinated Network

- Agree to NCCARE360 platform requirements
- Have completed training and onboarding
- Responsibility to report outcomes

NCCARE360 creates a **coordinated network** that connects providers (e.g. health care providers, insurers, or CBOs) through a shared technology platform to:

- **Communicate** in real time
- Make **electronic referrals**
- **Securely share** client information
- Track **outcomes together**

Who Qualifies for Pilot Services?

To qualify for pilot services, Medicaid managed care enrollees must have:



At least one Needs-Based Criteria:

Physical/behavioral health condition criteria vary by population:

- Adults (e.g., 2 or more chronic conditions)
- Pregnant Women (e.g., multifetal gestation)
- Children, ages 0-3 (e.g., Neonatal intensive care unit graduate)
- Children 0-21 (e.g., Experiencing three or more categories of adverse childhood experiences)



At least one Social Risk Factor:

- Homeless and/or housing insecure
- Food insecure
- Transportation insecure
- At risk of, witnessing or experiencing interpersonal violence

What Services Can Enrollees Receive Through the Pilots?

North Carolina's 1115 waiver specifies services that can be covered by the Pilot.



Housing

- Tenancy support and sustaining services
- Housing quality and safety improvements
- One-time securing house payments (e.g., first month's rent and security deposit)



Food

- Linkages to community-based food services (e.g., SNAP/WIC application support)
- Nutrition and cooking coaching/counseling
- Healthy food boxes
- Medically tailored meal delivery



Transportation

- Linkages to existing public transit
- Payment for transit to support access to pilot services, including:
 - Public transit
 - Taxis, in areas with limited public transit infrastructure

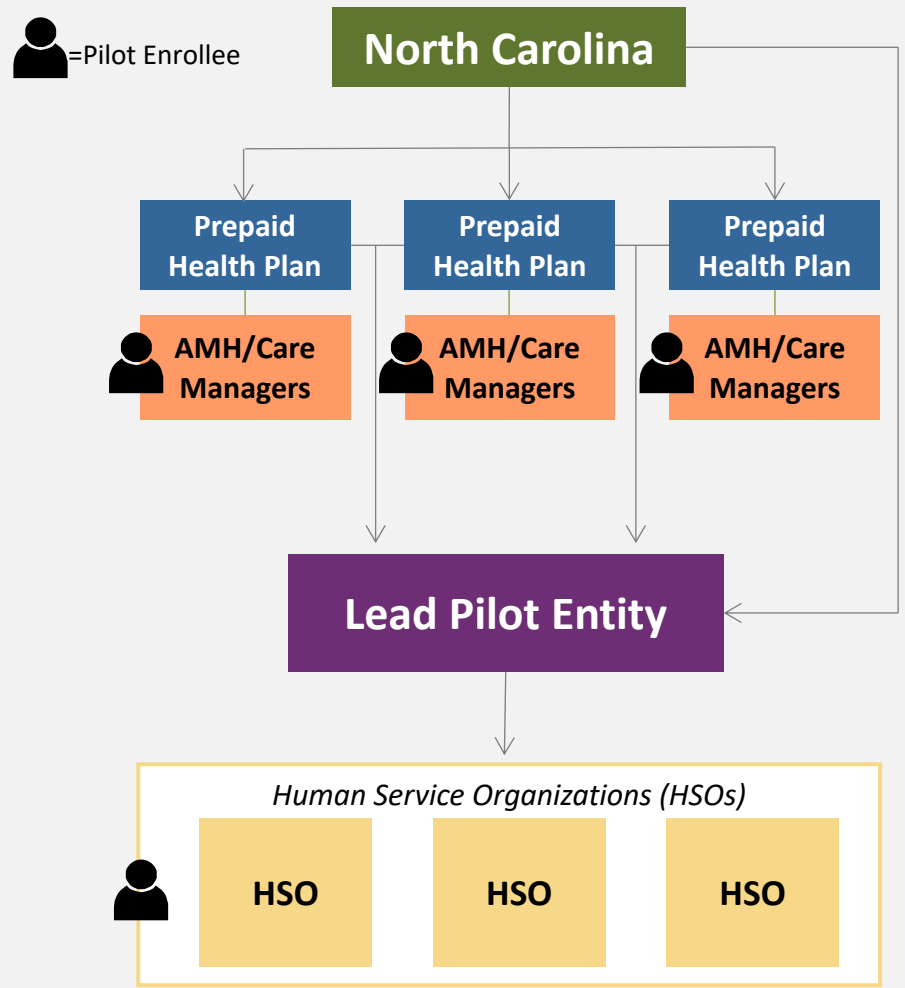


Interpersonal Violence (IPV)

- Linkages to legal services for IPV related issues
- Evidence-based parenting support programs
- Evidence-based home visiting services

What Entities Are Involved in the Pilots?

Sample Regional Pilot



Pilot Entities: Overview

- Key pilot entities include:
 - Healthy Opportunities Pilot Enrollees
 - North Carolina DHHS
 - Prepaid Health Plans (PHPs)
 - Care Managers (*predominantly located at Tier 3 AMHs and LHDs*)
 - Lead Pilot Entities (LPEs)
 - Human Service Organizations (HSOs)

Process/ Timeline

- Early 2019: Request for Information (RFI)
- Mid 2019: Request for Proposals (RFP)
 - RFP will determine LPEs/ Pilot Regions
- Late 2019: Award LPEs/ Pilot Regions
- 2020: Full year of capacity building for LPEs and regions
- January 1, 2021: Begin Service Delivery
- October 31, 2024: End Pilots (at end of 1115 waiver)



DRIVERS OF HEALTH: AN INSURER'S RESPONSE

Sophie McMillian

Program Manager, Community and Diversity Engagement
Blue Cross and Blue Shield of North Carolina

WHERE YOU'RE BORN MATTERS

350,000

NC households with extremely low income (National Low Income Housing Coalition, 2018)

33

North Carolina counties with more opioid prescriptions than people (NCDHHS, 2018)

70

Percent of health outcomes that are influenced by social factors (Kaiser Family Foundation, 2018)



ADDRESSING DRIVERS OF HEALTH



Cross-functional Approach

- + Healthcare
- + Policy
- + Customer Service
- + Data & Analytics
- + Community Investments

INVESTING IN OUR COMMUNITIES



Blue Cross NC Foundation

- + Access to nutritious foods
- + Promoting NC food systems

Community Investments

- + Opioid epidemic
- + Early childhood development
- + Food insecurity
- + Access to primary care
- + Safe Housing

SAFE HOUSING: NCCAA Healthy Home Initiative



\$2 million dollar, 2 year investment

- + Impacting less urban areas
- + Serving 56 of 100 NC counties
- + Focus on providing repairs to increase the quality, safety, and health of homes
- + Targeting 700 homes repaired across the state
- + Intentionally flexible in design to pair with other funding sources

