

Veterans Initiative Overview



Preliminary Report/ Preliminary Strategic Plan September 2016

Community Collaborations Department
Smoky Mountain MCO



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Introduction

In 2012 newly elected North Carolina Governor Pat McCrory initiated a new agenda in assisting active duty and reserve Military Members, NC National Guard Members, Veterans and family members. This new agenda included a re-organization of the Division of Veterans Affairs, it also addressed the overall mental health care needs which includes Local Management Entities and Managed Care Organizations as well as their providers. Per NC General Statute all LME's are to provide Behavioral and Mental Health Care needs of this population in addition to providing educational trainings to the community and Veterans stakeholders.

In May 2016 Smoky CEO Brian Ingraham met with Secretary Cornell Wilson (Department of Military and Veterans Affairs) and announced that Smoky plans to fund a new initiative that will address some of the gaps in the mental health field for the Veterans and their family members here in NC, formalizing a partnership with the Department of Military and Veterans Affairs.

Additionally, Smoky Mountain was the first MCO in the State to create a position that will exclusively direct their new Veterans Initiative. On August 1st Smoky welcomed Brandon Wilson to this position.



Cornell Wilson, Major Gen. USMC (ret.), secretary of the N.C. Department of Military and Veterans Affairs and Smoky Mountain MCO CEO Brian Ingraham

Veterans Affairs Specialist

Mr. Brandon Wilson comes to Smoky with a vast experience in Veterans Affairs. Prior to accepting the position with Smoky he was the Deputy Director of Veterans Affairs for the Department of Military of Veterans Affairs, where he held many other positions to include District Service Officer, Regional Trainer and Training Coordinator. He has a complete understanding of project management and is an outside the box thinker when looking at new and efficient ways to manage process within organizations.

He began his career as the Director of Veterans Services in Haywood County as a County Veterans Service Officer. He is a combat US Marine that served in support of Operation Iraqi Freedom from 2006-2013. Brandon has spearheaded many Veteran Initiatives at local, State and Federal levels and remains instrumental in the overall care of Veterans in NC. He Co-Chairs the Blue Ridge Community Veterans Engagement Board and sits on numerous Veteran and State committees to include SAMSHSA, and the NC steering Committee for CCBHC's. He has also sat on several congressional advisory boards and is currently a member of the Governors Working Group for Veterans and Military Members.

He hopes to expand Smokys capabilities to reaching the community needs and to fill the many gaps that other programs are unable to meet for Veterans and their family members. "I am thankful that Smoky is dedicated to care for all the Veterans and their families and is willing to go into territory that is untypical for Managed Care Organizations. I hope that my expertise and knowledge can help Smoky achieve their goals to better care for this population."

Brandon is married to Sara Wilson, one of Smokys Care Coordination Directors and they have two children Daisy (4) and Anna (1) and reside in Waynesville, NC.



NC General Statute

The State of North Carolina mandates that the delivery of mental health, developmental disabilities and substance abuse services to members of the active and reserve military, Veterans and their family members are sufficiently met through General Statute. As an LME, Smoky provides these services through their systems of care; however better tracking and delivery can and will be achieved through this new Veterans Initiative.

NC General Statutes - Chapter 122C

Article 4.

Organization and System for Delivery of Mental Health, Developmental Disabilities, and Substance Abuse Services.

§ 122C-115.4. Functions of local management entities.

(g) The Commission shall adopt rules to ensure that the needs of members of the active and reserve components of the Armed Forces of the United States, veterans, and their family members are met by requiring:

(1) Each LME to have at least one trained care coordination person on staff to serve as the point of contact for TRICARE, the North Carolina National Guard's Integrated Behavioral Health System, the Army Reserve Department of Psychological Health, the United States Department of Veterans Affairs, the Division of Adult Correction, and related organizations to ensure that NC General Statutes - Chapter 122C Article 4 17 members of the active and reserve components of the Armed Forces of the United States, veterans, and their family members have access to State-funded services when they are not eligible for federally funded mental health or substance abuse services.

(2) LME staff members who provide screening, triage, or referral services to receive training to enhance the services provided to members of the active or reserve components of the Armed Forces of the United States, veterans, and their families. The training required by this subdivision shall include training on at least all of the following:

- a. The number of persons who serve or who have served in the active or reserve components of the Armed Forces of the United States in the LME's catchment area.
- b. The types of mental health and substance abuse disorders that these service personnel and their families may have experienced, including traumatic brain injury, posttraumatic stress disorder, depression, substance use disorders, potential suicide risks, military sexual trauma, and domestic violence.
- c. Appropriate resources to which these service personnel and their families may be referred as needed. (2006-142, s. 4(d); 2007-323, ss. 10.49(l), (hh); 2007-484, ss. 18, 43.7(a)-(c); 2007-504, s. 1.2; 2008-107, s. 10.15(cc); 2009-186, s. 1; 2009-189, s. 1; 2011-145, s. 19.1(h); 2011-185, s. 6; 2011-291, s. 2.45; 2012-66, s. 2; 2012-83, s. 43.)

NCIOM Task Force Report

*The North Carolina General Assembly directed the North Carolina Institute of Medicine (NCIOM) to study the adequacy of mental health, developmental disabilities, and substance abuse services funded with Medicaid and state funds that are currently available to active and reserve components of the military, veterans, and their families. The NCIOM was also asked to determine any gaps in services. The Task Force focused on examining state services that can help address gaps in behavioral health services available through the military or Veterans Affairs. **In 2011 this final report provided 13 various recommendations to help ensure that the mental health, substance abuse, and brain injury services that are available to active and reserve component members of the military, veterans, and their families are adequate to meet the needs today and in the future.**

Of the 13 Recommendations 4 fell to the Department of Health and Human services and DMH and one directive to Local Management Entities. Although several of these recommendations indirectly involved LME/MCO's 2 of them were Primary recommendations and directly involved the MCO's.

Smoky Mountain has successfully accomplished these 2 Priorities for our Veteran Community, and will continue to enhance these and implement others with the new Veterans Initiative.



PRIORITY Recommendation 6.2: Provide training for crisis workers, veteran service organizations and veteran service officers, professional advocacy and support organizations, and the faith community

The Citizen Soldier Support Program, along with state and federal partners, should provide training for local crisis service providers, veteran service organizations and veteran service officers, professional advocacy and support organizations, and the faith community on behavioral health conditions that affect the military, eligibility for federal programs, and referral resources.



PRIORITY Recommendation 5.7: Improve transition and integration of services between military health, veterans, and state-funded Mental Health, Developmental Disabilities, and Substance Abuse Services systems

The North Carolina Division of Metal Health, Developmental Disabilities, and Substance Abuse Services (DMHDDSAS), and other state and federal partners should improve transition and integration services between military and public systems by continuing the work of the Governor's Focus on Servicemembers, Veterans, and Their Families. DHMDDSAS should continue to ensure that each Local Management Entity (LME) has at least one trained care coordination staff member to serve as the point of contact for military organizations. DMHDDSAS should develop a required training curriculum for LME staff members who provide screening, treatment, and referral services. The training should be available in person and online and should include information about the number of active and reserve component members and veterans in their catchment area, behavioral health needs they may have, and available referral resources.



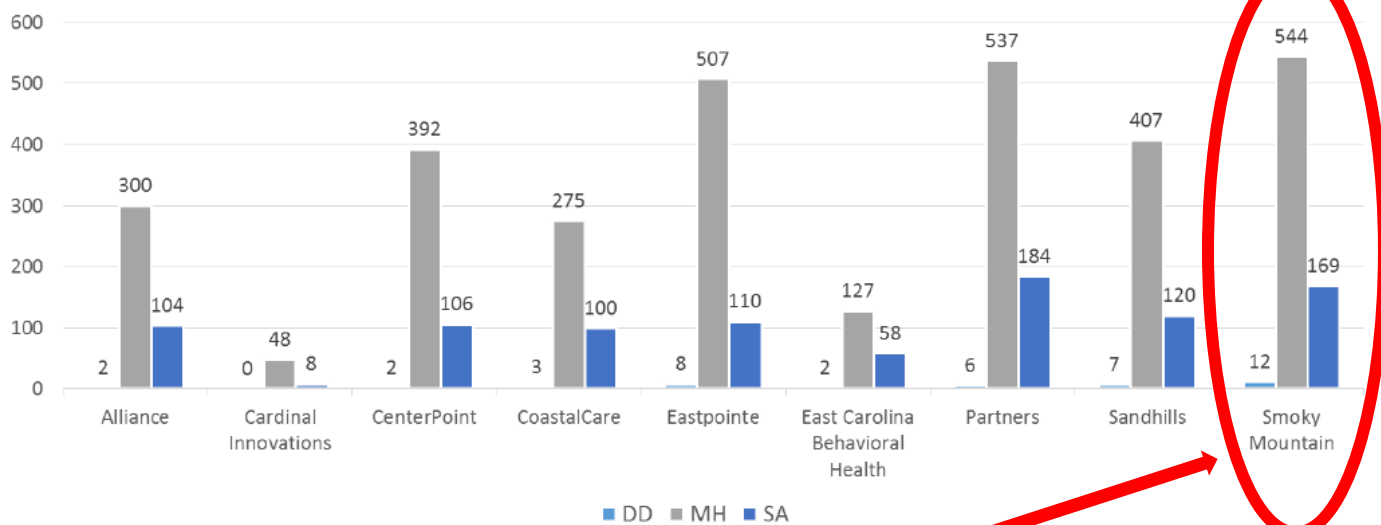
**NCOIM Full Report and Executive Summary*

Report Card

The North Carolina Department of Mental Health began publishing an annual report for services provided by all MCO's by state funds in 2015. This report will not only be a source of data, but will act as a measuring tool for the delivery of services, outreach efforts and utilization of funds from each LME/MCO specific to Active/Reserve Members, Veterans and their family members.

However, the documentation of this data must be standardized across the state to prevent inaccuracies. It will be recommended by Smoky Mountain to DMH to provide guidance to each LME on how to record this vital information.

Veterans & Family Member Served by State Funded Services



According to this report Smoky lead the way in 2015 in regards to Veterans that utilized state funds, particularly per capita. Although this data looks good on the surface it could show a great opportunity in savings and fiscal management improvement by implementing an internal 'PARIS Project'.

This data will help identify gaps in system services and delivery methods as well as lead to additional funding for Veterans Services from General Assembly.

*Graphs and Data directly taken from:
DMH/DD/SAS: Veterans and Military Annual Report SFY 2015

State Psychiatric Hospitals

- In SFY15, Central Regional, Cherry and Broughton Hospitals treated 2522 people, 39 were identified as veterans.

ADATCs

- In SFY15, the Alcohol and Drug Addiction Treatment Centers admitted 3554 people, 94 were identified as veterans.

'PARIS' Project

Personnel Assistance Records Information Service (PARIS)

In October 2013 the North Carolina Division of Veterans Affairs (NCDVA), Department of Administration, and the Division of Medical Assistance, Department of Health and Human Services entered into a contract to reduce State Medicaid Cost, as a result of legislation.

On a quarterly basis, the Health Care Authority (HCA) conducts personnel assistant records information service (PARIS) matches of current Medicaid clients and those clients that are receiving VA Income and Military Retirement. The North Carolina Division of Veterans Affairs began reviewing and contacting clients on this list that may be entitled to enhanced VA benefits or entitlement to ChampVA, Tricare, VA Skilled Nursing Facility in order to save State dollars. NCDVA would then provide assistance in applying for pension with aid and attendance, or reduction to \$90, or reinstate full pension if no longer entitled to a reduced Improved Pension (\$90).

This project has proven to be effective in saving the State in Medicaid funds. This data has not yet been released by the Division of Medical Assistance or Department of Health and Human Services, as tracking mechanisms are still being implemented.

- It will become part of the Veterans Strategic Plan and Initiative to develop and implement a similar Project in order to identify those Veterans and family members who receive services, and who receive these services directly through Medicaid or other State funds and work to align services to Federal benefits or other means of support.
 - This will benefit Smoky by:
 - Cost Savings
 - Practicing strong Fiscal management of state funds
 - Potential better services and benefits for members/Veterans
 - Identifying area of improvement and gaps in service delivery
 - Providing inter-departmental transparency
 - Prevent Fraud

- Keeping the person centered approach through the operating model, access to quality care should **NEVER** be jeopardized for the value of savings.



Veterans Affairs Committee

As Smoky leans forward into the future and begins to work more closely with our Veteran population a standing committee will be formalized to ensure inter-departmental transparency and to create a working network. This committee consists of representatives from each department and will work on projects that have overlap in each specific practice of work. They will report to Management Team as well as Executive Leadership when requested and should fall in the hierarchy of other committees and councils within the organization. They will work to help Smoky achieve success in both the Veterans Initiative and overall Mission of Smoky Mountain MCO with a whole person approach.

Smoky Mountain MCO Proposed Veterans Affairs Committee

<u>Chair Person</u> Brandon Wilson	Veterans Affairs Specialist	Community Collaborations
Marialena Pyatt	Provider Account Specialist	Provider Network
Rodney Willis	MH/SU Employment Specialist	Provider Network
Celia Szelwach	Project Manager	Quality Operations
Sarah Lancaster	MH/SU Housing Manager	Provider Network
Mary Stuart	Enrollment/Eligibility Manager	Finance Department
Sara Wilson	MH/SU Care Coordination Director	MH/SU Care Coordination

Veterans Population

Smoky Mountain MCO Catchment

Western Region

Cherokee – 2,700
 Graham – 661
 Clay – 1,051
 Swain – 1,244
 Macon – 3,490
 Jackson – 3,075
 Haywood – 6,410
Total – 18,631

Northern Region

Avery – 1,148
 Watauga – 2,555
 Ashe – 1,912
 Alleghany – 910
 Wilkes – 4,173
Total – 10,698

Central Region

McDowell – 3,593
 Caldwell – 6,213
 Alexander – 2,805
Total – 12,611

WHN Legacy Region

Transylvania – 3,482
 Henderson – 11,443
 Buncombe – 19,908
 Madison – 1,379
 Yancey - 1,496
 Mitchell – 1,137
 Polk – 2,018
 Rutherford – 5,508
Total – 46,371

Smoky Mountain MCO Veteran Population – 88,311

*NC Veterans Population – 775,020

*VAMC Unique Patients – 30,870

** 22% of the States Homeless Veterans Population resides in Buncombe County (196 Veterans)



*North Carolina Department of Military and Veterans Affairs 2015 Annual Report

** North Carolina Department of Military and Veterans Affairs Preliminary Report on Status of Veteran Homelessness 2016

Smoky Mountain MCO map – smokymountaincenter.com

Veterans Services

There is an array of services offered to Veterans and their family members in western NC. The Department of Military and Veterans Affairs publishes a nation leading Resource Guide for Veterans that contains many of the services and opportunities for Veterans across the state. This Resource Guide is made available to all of Smoky staff and our providers. Veterans Service Officers are the best resource in each local community and county; working with this resource will be an integral part of success with the Veterans initiative. In addition, developing a working relationship with Veterans Affairs Health Administration will also prove to be beneficial to our effort.

Types of Services Provided for Veterans

- Employment
- Health Care
 - VA Services
 - VET Centers
 - Mental Health
- VA Benefits
 - Disability
 - Pension
 - Aid and Attendance
- Housing
- Personal Services
 - Non-Profits
- Education

North Carolina Ranks

8 Nationally in Veteran Population

4 Nationally in Active Military Population



Map of Basic Services

VA Health Care

Asheville VA Medical Center

1100 Tunnel Rd.
Asheville, NC 28805
828-298-7911

Franklin (CBOC)

647 Wayah St.
Franklin, NC 28734
828-369-1781

Rutherfordton (CBOC)

374 Charlotte Rd.
Rutherfordton, NC 28139
828-288-2780

Black Mountain

State Veterans Home

62 Lake Eden Rd.
Black Mountain, NC 28711
828-257-6800

Western Carolina

State Veterans Cemetery

962 Old US Hwy. 70
Black Mountain, NC 28711
828-669-0684

ABCCM Veterans Quarters

1329 Tunnel Rd.
Asheville, NC 28805
828-299-8701

Steadfast House

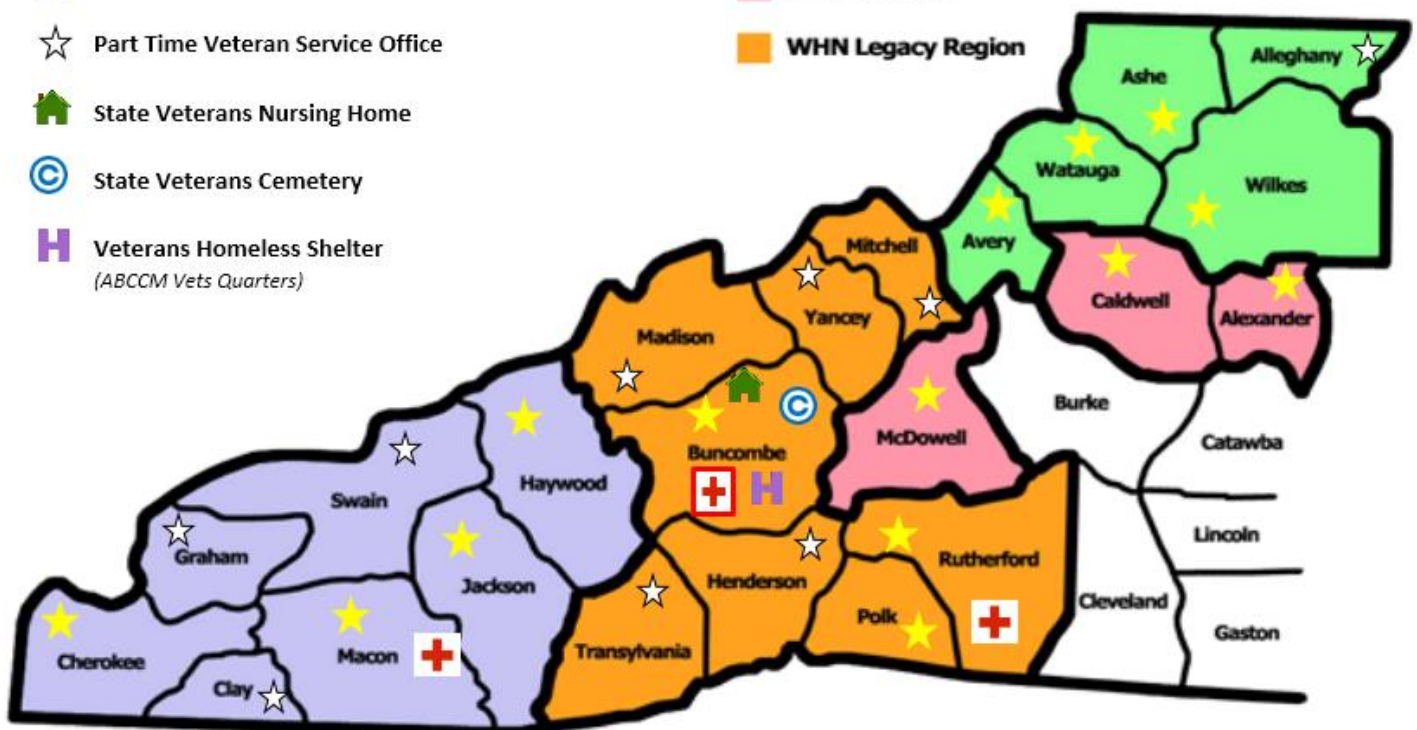
30 Cumberland Dr.
Asheville, NC 28801
828-259-5365

First at Blue Ridge

PO Box 40
Ridgecrest, NC 28770
828-669-0011

-  VA Medical Center
-  VA Community Based Outpatient Clinic
-  Full Time Veteran Service Office
-  Part Time Veteran Service Office
-  State Veterans Nursing Home
-  State Veterans Cemetery
-  Veterans Homeless Shelter
(ABCCM Vets Quarters)

-  Western Region
-  Northern Region
-  Central Region
-  WHN Legacy Region



Veteran Service Officers

Veteran Service Officers are the primary local point for Veterans and their family members, Each County is represented by a Service Officer, whether full-time or part-time. Their primary function is to assist Veterans and their family members to benefits, such as disability compensation, VA health care, education, housing and employment. Recently most VSO's did not even know what an MCO was much less what services they provide. In short partnering with county and state service officers, gives us another avenue for assistance for our members as well as offering assistance for many Veterans that are unable to get services due to gaps in the systems.

Western Region

Cherokee – Jan Griggs, Sarah Jenkins
75 Peachtree St.
Murphy, NC 28906
828-835-8663

Graham – NCDVA**
12 N. Main St.
Robbinsville, NC 28771
828-479-6208

Clay – Larry Sams
54 Church St.
Hayesville, NC 28904
828-389-3355

Swain – NCDVA**
101 Mitchell St.
Bryson City, NC 28713
828-488-9273 ext. 2205

Macon – Leigh Tabor, Christi Black
104 E. Main St. Suite 5
Franklin, NC 28734
828-349-2151

Jackson – David Plaster, Sheila Setzer
100 County services Park
Sylva, NC 28779
828-631-2231

Haywood – Stephen Allred, Debbie Caldwell
215 N. Main St.
Waynesville, NC 28786
828-452-6634

Northern Region

Avery – Georgia Henry
175 Linville St
Newland, NC 28657
828-733-8211

Watauga – April Pope, Karen Jones
331 Queen St. Suite C
Boone, NC 28607
828-28607

Ashe – Daryl Vaughn
150 Government Circle Suite 1200
Jefferson, NC 28640
336-846-5575

Alleghany – Kenneth Vaughn
115 D Atwood St.
Sparta, NC 28675
336-372-9675

Wilkes – Ralph Broyhill
108 North St.
Wilkesboro, NC 28697
336-651-7327

***Note – North Carolina Division of Veteran Affairs (NCDVA) Service officer cares for these counties who do not have a county Veterans Service Officer.*

Veteran Service Officers

Central Region

McDowell – Doug Gouge

100 Spaulding Rd.
Marion, NC 28752
828-659-0821

Caldwell – Kathy Hutchings, Regina Goforth

905 West Avenue NW
Lenoir, NC 28645
828-757-1345

Alexander –

621 Liledoun Rd.
Taylorsville, NC 28681
828-632-5211

North Carolina Division of Veterans Affairs- State Offices

Canton VSC –

Ellen White, Jeremy Hughes, Vicky Putnam
120 Main St.
Canton, NC 28716
828-646-6937

Morganton VSC –

Valerie Keffer, Teresa Hildebran
301 East Meeting St.
Morganton, NC 28655
828-430-7136

Hickory VSC-

Bob Medlin, Martha Roark, Alice Wrenn
1985 Tate Blvd. SE Suite 113
Hickory, NC 28602
828-322-6616

WHN Legacy Region

Transylvania – Frank Pearsall

203 E. Morgan St. Room 237
Brevard, NC 28712
828-884-3276

Henderson – Mike Murdock

1200 Spartanburg Hwy. Suite 200
Hendersonville, NC 28792
828-697-4817

Buncombe – Walt Ward, Ric Jones, Heather Mallory,

199 College St. Sherry Manning
Asheville, NC 28802
828-250-5726

Madison – Matthew McClellan

4646 US Hwy 25-70
Marshall, NC 28753
828-782-2634

Yancey – Larry Allen

110 Town Square Dr. Room 12
Burnsville, NC 28714
828-682-1514

Mitchell – Eddie Williams

130 Forest service Dr. Suite C
Bakersville, NC 28705
828-688-2200

Polk – Darrell Moore

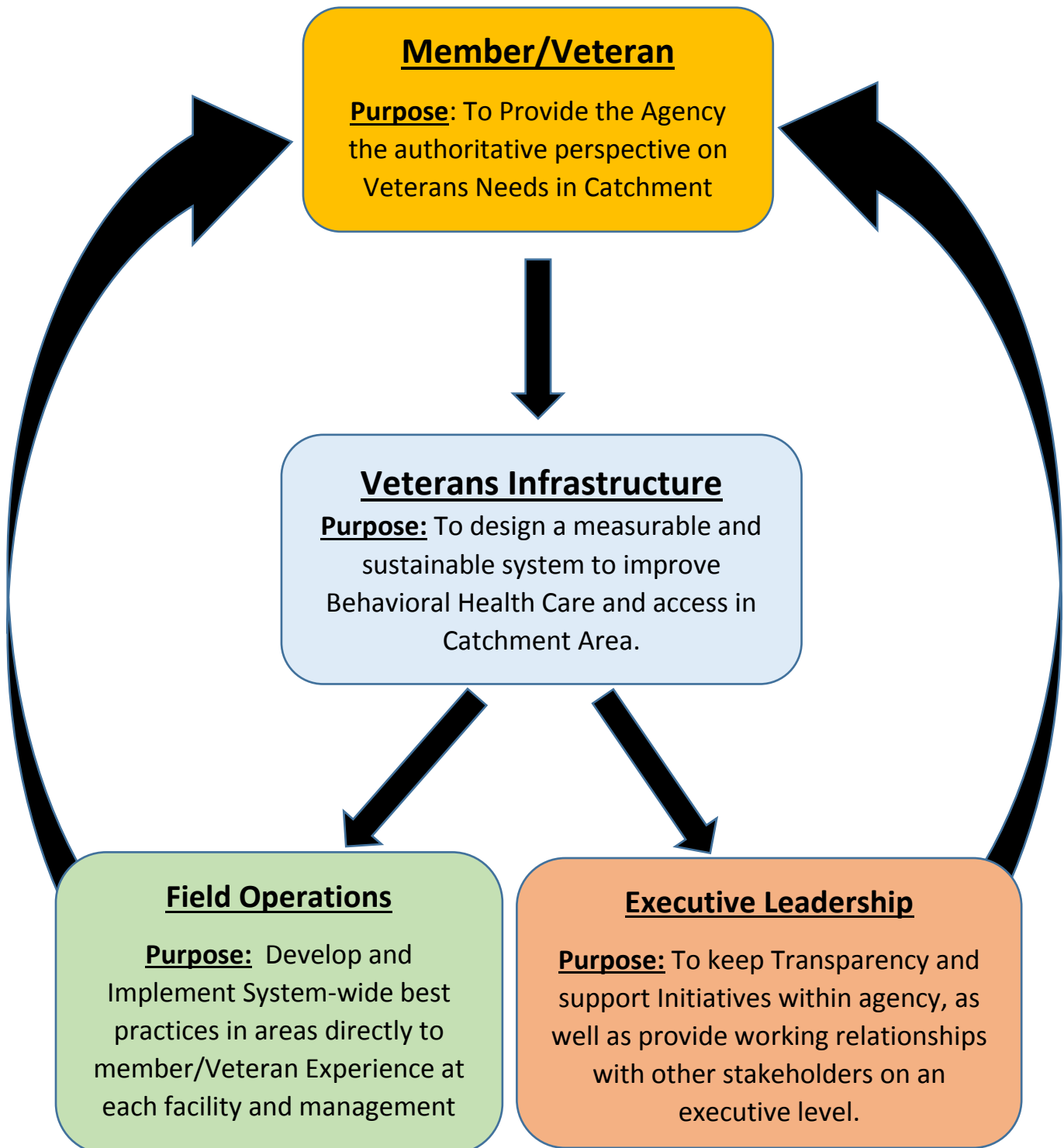
75 Carmel Lane
Columbus, NC 28722
828-894-0003

Rutherford – Susan Hall, Beverly Welborn

303 Fairground Rd.
Spindale, NC 28160
828-287-6185

Operating Model

“Putting our Veterans Needs First”



Strategy – 3 Prong

By Utilizing a 3 prong strategy, Smoky will be able to build a strong Veterans program from within our own agency and develop lasting working relationships with partners in the community from non-profits, state and federal stakeholders.

1

INTRA-agency:

Developing and Implementing Veterans Initiatives and system wide best practices. Creating a more Veteran friendly mind state throughout all of Smoky Mountain Staff.

2

INTER-agency:

Developing strong working partnerships with other stakeholders in community. County Veterans Offices, VAMC, NCDMV, NCDHHS, NC Serves, local non-profits, Veteran Organizations and National Guard.

3

Communications Plan:

Internal marketing and awareness campaign, external campaign with Sponsors. Positive Public Relations, Outreach efforts, local resource guide and Annual Report.

Changing the mindset and overall thinking of Smoky staff to insure that members/Veterans and their experience are above average and their goals are met with extreme urgency and efficiency of systems in place. Implementing best practices every time, we connect with a Veteran or a family member.

“Looking at ourselves First”

Internal Education-

- Training Smoky staff as well as Providers on Service Members Veterans terminology, military culture, benefits and eligibility.
- Routine Reports at appropriate cross-functional teams. Service Management and Clinical Practices.
- Evaluation of Intake/ Screening sheets.
- Tracking and Data.
- Screening Measures.
- Increase Staff Education (ie, QPR, MH First Aid, Community and Trauma Resiliency, CIT)
- Enhance and Implement Community Education Modules that are Veteran Specific

‘Operation Recognition’ –

- Recognize all Smoky Staff that served in US Military.
- Recognize all members that served in US Military that receive care from Smoky.
(Ongoing Newsletter article for recognition)

Re-Initiate Veterans Committee –

- Assuring that each Department is represented on committee that has vested interest in Veterans Initiative or project overlap.

Executing awareness Campaigns -

- Become a Vietnam 50th Anniversary Partner
- 22 a Day Pushup Challenge

Inter-Agency

2

Partner with local, state and federal agencies to build a better network of cross functional teams that support entire mission of Veterans care. Team with non-profit organizations to help bridge gaps in services where processes are slowed or non-existent.

“Partnerships”

Veterans Initiative – Community Re-Investment Funds for Veterans Projects to develop a sustainable Infrastructure to support both the CCBHC plan, NC Serves and implementation of education to community and stakeholders in order to better serve Veterans and family members in catchment area.

Veteran Support Specialist Project (VSS) - Sustainability of new program designed by NC Department of Military and Veteran Affairs and Duke University (EPIC). *In partnership with NCDHHS.*

Veterans Administration – Implement open communication between VA Health Care Staff and Smoky Mountain Provider Network in order to better serve this population and to build lasting relationships with community stakeholders. This will include a more efficient referral system and potential for Smoky to provide MH/SU care under the Non-VA care program as well as the VA Choice Care Act

Veterans Treatment Court – Strong Involvement with Buncombe County Veterans Treatment Court.

Community Education – Enhance and implement Veteran Specific Education to community members, Veterans, Family Members, Universities/Colleges Staff on specific issues regarding our Veteran Population.

Specific Modules/Trainings:

- *Mental Health First Aid*
- *Crisis Intervention Training*
- *Trauma Resiliency*
- *Community Resiliency*

Direct services – Provide Supportive Group Counseling for Spouses and Caregivers of Veterans who suffer from Mental Health illness.

Grant Opportunities – Identify and apply for many grants offered to organizations that can continue to build on this initiative.

NC SERVES – Work to Partner with NC Serves in future to be an integral part of the nationwide network of public, private and non-profit organizations that work together to serve Veterans and their families.

- Become Main Hub
- Integrate Call Center
- Partner with other large stakeholders



Duke Evidence-based Practice Implementation Center
Duke University School of Medicine



Internal marketing and awareness campaign, external campaign with Partners and Sponsors. Positive Public Relations, Outreach efforts, Branding and Events. Telling our story and mission to our Nations heroes.

“Telling Our Story”

Product Launches or Enhancements

- Website – Enhance access to service links via website (*complete overhaul*)
- Newsletter- Develop section of Newsletter that highlights Smokys Veterans services news and ‘Operation Recognition’
- Work to highlight efforts in other newsletters (ie, VISN 6 and NC4VETS)
- Brochure of Veterans Programs and services through Community Collaborations Department
- Branding – Work to develop Smokys own brand for Veteran services that aligns with agency mission and vision.
- Annual Report to showcase re-investment to community for all efforts as well as showing great fiscal management.

Outreach

- Events:
 - Women’s Veterans Expo
 - Training Seminars/conferences
 - Memorial Day/Veterans Day
 - Mental Health Summits
 - Veterans Courts
 - Benefits Action Centers
- Active in local, state and federal advisory boards on Veterans issues and Mental Health.
 - CCBHC Steering Committee
 - NC SAMSHA Board
 - Veterans Community Engagement Board
 - Ending Veterans Homelessness Coalition
 - Etc.....

Executing Awareness Campaigns

- Become a Vietnam 50th Anniversary Partner
- 22 a day pushup Challenge
- Etc.....

Comprehensive Care Model

North Carolina consistently looks to improve both services and access to care for all citizens with MH/SU/IDD needs, Smoky's new Veterans Initiative will specifically address these needs for Veterans and their family members. As the Comprehensive Care Model is being developed within Provider Network, Veterans access to care needs will be addressed with this Initiative and will meet all NC standards.

Outpatient clinics primary care screening and monitoring of key health indicators and health risk will be critical in this type of model. Examples of other services that will be initiated in the Comprehensive Model are:

- Crisis mental health services, including 24-hour mobile crisis teams, emergency crisis intervention services and crisis stabilization
- Patient-centered treatment planning, including risk assessment and crisis planning
- Outpatient mental health and substance use services
- Targeted case management
- Psychiatric rehabilitation services
- Peer support and counselor services and family supports
- Intensive, community-based mental health care for members of the armed forces and veterans

This new Veterans Initiative will work with all providers to ensure that the Veterans needs are addressed and will implement specific Veterans services at a high standard of care.

In addition, Smoky is currently working to ensure that all Veterans' needs are addressed in the North Carolina Certified Community Behavioral Health Clinic Project currently in development, as well as being an overall contributor to the success of this Model.

NC Serves

Background:

AmericanServes is spearheading the nationwide effort to assist transitioning service members and Veterans in the navigation of the resources available to them in each local community. The Robin Hood Foundation employed the Institute for Veterans and Military Families (IVMF) to develop a way to connect public private and non-profit resources in an efficient manner.

- NC Serves is an extension of this effort and has already established main hubs in Charlotte and Raleigh with 3 more on the horizon. Asheville will be a location for a hub and is anticipated for the summer of 2017.
- Currently NC Serves has partnered with Unite US.
Unite US is a web and software platform connecting current military service members, veterans and their families to local resources and opportunities in their communities. As the technology provider for AmericaServes, ***Unite US offers HIPAA compliant Care Coordination and CRM software to coordinate service requests and referrals, while safely collecting key information that helps the community assess the services and resources that are most in demand***

A future partnership with NC Serves could prove to be beneficial to Smoky by:

- Offering a Nation/State wide coordination effort for Veterans and Family members
- Access and support for new state of the art CRM software, that could migrate to Smokys current system
- Become the platform used in whole health integrated care with Overall Health care system to include Mission Hospital
- Partnerships with Veteran as well as Private Health Care Stakeholders for a better whole health integrated system that promotes community collaborations.

