Duke University School of Nursing

Responding to – and Recovering from – the COVID-19 Pandemic

NC Department of Health and Human Services

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Secretary

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Agenda

- **COVID-19 update & Lessons learned**

- **Recover Stronger - Our priorities**

- **Medicaid Transformation**

- **Healthy Opportunities**

- **Discussion**

Goals for North Carolina's COVID-19 Pandemic Response

Vaccines

Boosters

Masking

Save Lives

- Widespread Vaccine Access
- Transparent Communications
- Clear Messaging and Guidance
- Treatment Availability
- Convenient Testing
- Access to PPE
- Contact Tracing in High-Risk Settings

Protect Hospital Capacity

- Statewide Patient Coordination
- Regulatory Flexibilities
- Staffing Pool for Health Systems
- Non-Traditional Staffing Resources
- Federal Requests for Support
- Regular Communications
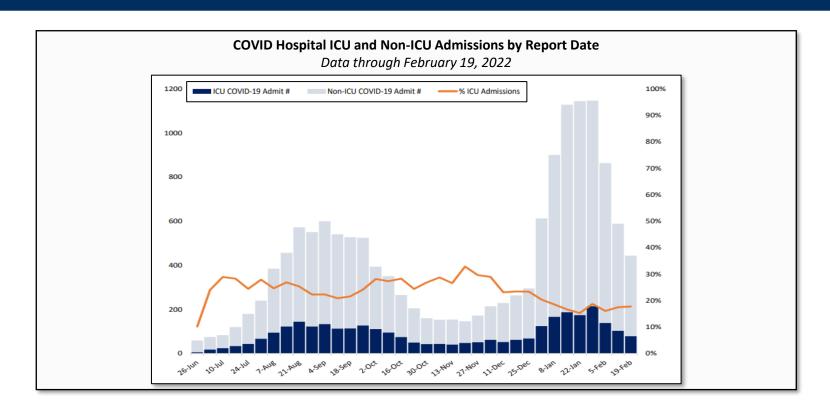- Real-time monitoring of capacity

Keep Kids in the Classroom

- StrongSchoolsNC Toolkit
- COVID-19 Testing Program
- Frequent Communication and Coordination with Schools
- Monthly Meetings w/ State and Local Education Leaders
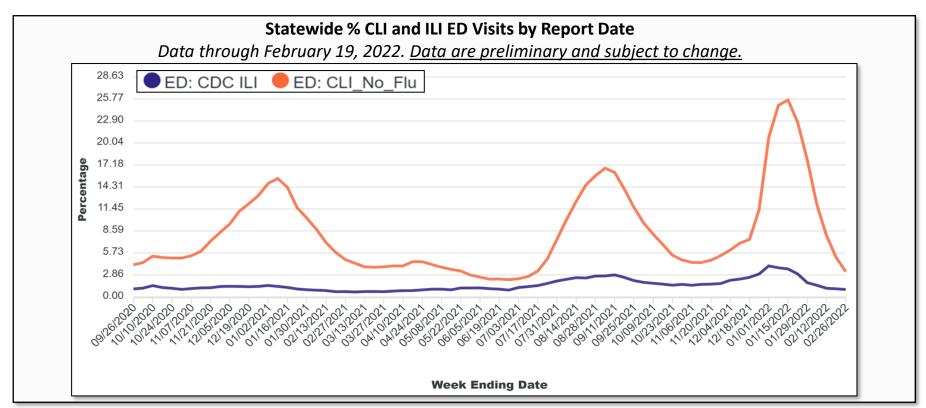- N95 Mask Distribution

Hospital and ICU Trends

**PHE Network hospital and ICU admissions decreased last week,
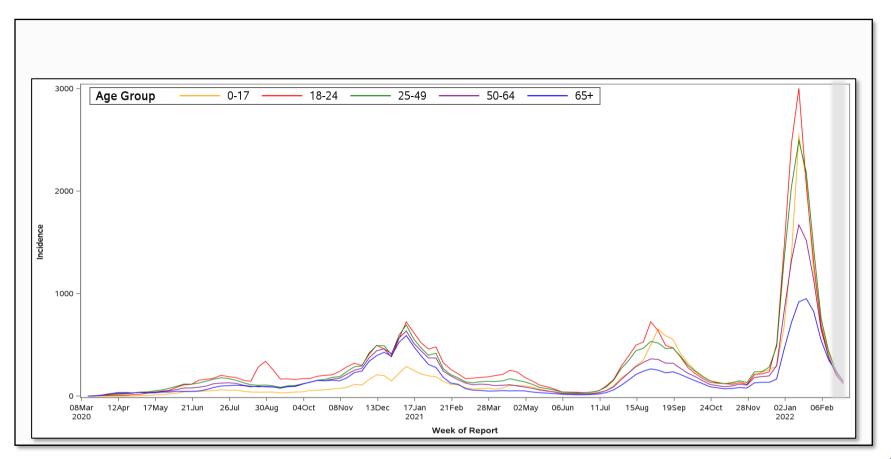while the percentage of patients with COVID-19 requiring ICU level of care remained stable.**

COVID Hospital ICU and Non-ICU Admissions by Report Date
Data through February 19, 2022

CLI and ILI ED Visits Continue to Decline

The percentage of ED visits for COVID-like illness (CLI) continued to decline sharply, falling from 5.2% to 3.3% over the past week. Influenza-like illness (ILI) remains low at ~1.0%
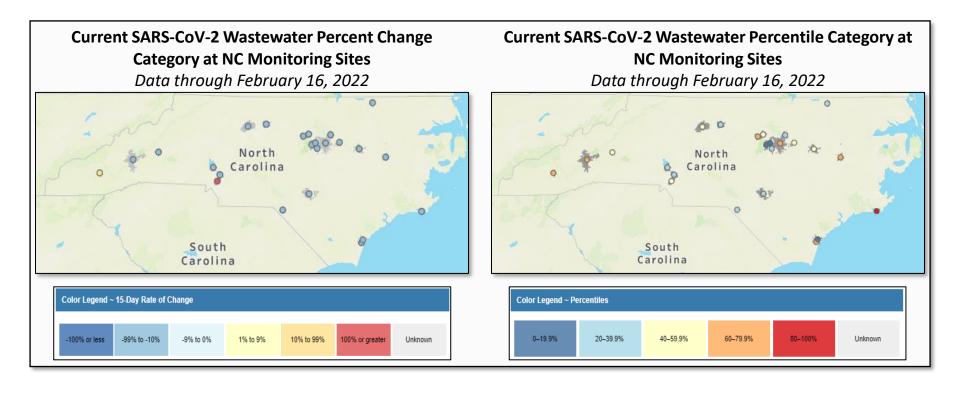
Statewide % CLI and ILI ED Visits by Report Date
Data through February 19, 2022. Data are preliminary and subject to change.

Case Rates Continue to Decline

Case rates continue to converge for all age groups.

Wastewater Data Suggest Declining COVID Transmission

Concentrations of SARS-CoV-2 continue to decrease at most wastewater collection sites and are approximately in line with historical levels.

Current SARS-CoV-2 Wastewater Percent Change Category at NC Monitoring Sites
Data through February 16, 2022

Color Legend ~ 15-Day Rate of Change

| -100% or less | -99% to -10% | -9% to 0% | 1% to 9% | 10% to 99% | 100% or greater | Unknown |

Current SARS-CoV-2 Wastewater Percentile Category at NC Monitoring Sites
Data through February 16, 2022

Color Legend ~ Percentiles

| 0–19.9% | 20–39.9% | 40–59.9% | 60–79.9% | 80–100% | Unknown |

Equity Highlights

Measuring Community Impact (To Date)

1.7M+
Individuals served by Community Health Workers

480K+
NCCARE360 referrals by Community Health Workers

14K+
Individuals vaccinated at Healthier Together events

560K+
N95 masks distributed by Healthier Together

10K+
Food boxes delivered through Support Services Program 2.0

Leading with Equity

Building a Structure that Leads with Equity

- Hired Chief Health Equity Officer to oversee a new Office of Health Equity
- 2021-2023 strategic plan goals designed to advance health equity and reduce health disparities
- Launched Division of Child and Family Well-Being to close equity gaps amongst children and youth

Leveraging Funding to Lead with Equity

- Extending funding for community- and faith-based organizations through Healthier Together
- Offering interpretation/translation services at COVID-19 vaccine events
- Investing in foundational data infrastructure and skills to measure health disparities

Pillars to Build Upon

North Carolina's success has been driven by grounding ourselves in:

1. **Strong Collaborative Partnerships.** North Carolina's progress is the result of the collective efforts of government agencies, elected officials, business leaders from every industry, school officials, entertainment and sports leaders, health care providers, community leaders and individuals.

2. **Robust Data Infrastructure and Accountability.** Data drives an effective response, is essential to making progress on health equity, and relies upon modernizing information systems and data transparency

3. **Transparent Communications Focused on Earning Public Trust.** Communications in a time of crisis require transparency, managing of expectations, clear and understandable messages, actionable guidance, and partnership with trusted messengers.

4. **Adapting to Evolving Science and Research.** North Carolina has evolved its response based on the emerging science and lessons learned, focusing on strategies that are most effective at each stage of the pandemic

Recover Stronger

- **The pandemic exacerbated existing challenges.**

Behavioral Health	Children and Families	Workforce
• Nearly 1 in 5 North Carolinians have a mental illness. • During the pandemic, approximately 1 in 3 surveyed North Carolinians reported symptoms of depression and/or anxiety • Alcohol-related ED visits increased 13% from 2019 to 2020. • Opioid overdose visits to ED increased 40% from July 2019 to July 2020.	• Number of children experiencing food insecurity rose from 1 in 5 pre-pandemic to as high as 1 in 3 children in rural NC • Rate of children in NC discharged from EDs with a behavioral health condition increased by ~70% in the pandemic. • Over 3,600 children in NC have lost a parent or caregiver to COVID-19. • ~25% of families missed a child's preventive visit due to the pandemic	• Number of NC early childhood education staff decreased by ~10% between March 2020 and November of 2021. • Currently, there are over 15,000 nurse vacancies in NC & nationally, nursing turnover rates were 15.8% between August 2020 and 2021 (McKinsey). • In August 2020, 66.2% of public health workers nationwide reported feeling burnout (NIH).

Recover Stronger

*These priorities and our work across the department are grounded in **whole-person health**, driven by **equity**, and responsive to the lessons learned responding to the greatest health crisis in more than a generation.*

Behavioral Health & Resilience

We need to offer services further upstream to build resiliency, invest in coordinated systems of care that **make mental health services easy to access** when and where they are needed and **reduce the stigma** around accessing these services.

Child & Family Wellbeing

We will work to ensure that North Carolina's children grow up safe, healthy and thriving in nurturing and resilient families and communities. **Investing in families and children's healthy development builds more resilient families, better educational outcomes and, in the long term, a stronger society**.

Strong & Inclusive Workforce

We will work to strengthen the **workforce that supports early learning, health and wellness by delivering services to** North Carolina. And we will take action to be an equitable workplace that lives its values and ensure that all people have the opportunity to be fully included members of their communities.

The health insurance coverage gap coupled with insufficient access to affordable care disproportionately impacts Historically Marginalized Populations who have also experienced worse outcomes than others under COVID-19. Medicaid expansion would help close the health insurance coverage gap.

NC Medicaid Managed Care

Vision

"To improve the health of North Carolinians through an innovative, whole-person centered, and well-coordinated system of care that addresses both the medical and non-medical drivers of health."

Day 1 Priorities

Individuals get the care they need, and providers get paid

Transition to Managed Care

- **NCGA & DHHS working on managed care since 2015**

- **Leverage 1115 waiver flexibility and innovation**

- **Key legislation passed in each session 2015-2021**

  - **SL 2020-88 required capitated contracts begin no later than July 1, 2021**

- **Single statewide rollout of Medicaid Managed Care occurred on July 1, 2021**

Transition to Managed Care Standard Plans

- **About 1.7 million Medicaid beneficiaries enrolled in five plans**

- **Over 4,000 individuals enrolled with EBCI Tribal Option**

Behavioral Health/IDD Tailored Plans

Regional Behavioral Health and Intellectual/Developmental Disability Tailored Plans - Projected County Alignments at Tailored Plan Launch for December 1, 2022

LME/MCO Name
- Alliance Health
- Eastpointe
- Partners Health Management
- Sandhills Center
- Trillium Health Resources
- Vaya Health

This map shows projected county assignments based on disengagements/transitions completed or approved as of 12/1/21.

- **Serve individuals with significant mental health and substance use disorders, Intellectual and Developmental Disabilities (I/DDs) and traumatic brain injury (TBI), as well as people using state-funded and waiver services**

  ~175,000 individuals

- **Fully integrated, whole person, physical and behavioral health care**

- **Same services as Standard Plans plus more**

Healthy Opportunities Pilots: Vision and Goals

Pilot Goals:

- Integrate **evidence-based, non-medical services into the Medicaid** program to:

  - **Improve health outcomes** for Medicaid members

  - **Promote health equity** in the communities served by the Pilots

  - **Reduce costs** in North Carolina's Medicaid program

- Evaluate and identify which services are highest value and impact for which populations

- Create accountable infrastructure, sustainable partnerships and payment vehicles that support integrating highest value non-medical services into the Medicaid program sustainably at scale.

Healthy Opportunities Pilot

- **Phased Launch**

  - **Food Services going live on March 15th**

  - **Housing and Transportation on May 1st**

  - **Interpersonal Violence on June 15th**

- **Begin evaluation and reporting on the pilot services and their impact to beneficiary health outcomes**

- **Leverage PHP capabilities and expand features of statewide human services resource platform (NCCARE360) to increase automation and streamline workflows**

- **Engage with the Tailored Plans and EBCI Tribal Option to begin development for addition of their members to the Healthy Opportunities Pilot**

A Strong and Inclusive Workforce

Employment is a leading driver of health and healthcare access. Health is a key enabler of productivity which means investments in employment first efforts, work as, health-care, direct-care, and nursing home workforce.

Draft Key Strategies	HNC 2030 Indicator	
	Current	Target
	Primary Care Clinicians	
Lead, with other stakeholders, development of long-term solutions to healthcare workforce challenges with a particular emphasis on increasing the number of North Carolina health care providers from historically marginalized populations.	62 (provers per population)	25% decrease for counties above 1:1,500 providers to population
Reinforce the talent pipeline for early educators by increasing compensation through dedicated funding, ensuring pay parity, and sustaining investments in training and professional development.		
Invest in our direct care workforce – including raising pay.		
	Individuals below 200% FPL	
	36.8%	27%
	Unemployment	
Support people with disabilities and those in recovery to live their lives as fully included members of the community by implementing key employment initiatives like Competitive Integrated Employment and Employment First.	7.2% (2013-17)	Reduce unemployoment disparity ratio between white and other populations to 1.7 or lower
Strengthen North Carolina's Public Health workforce and infrastructure through reforms designed to meet consistent community needs and future public health emergencies.		