

Financing that Rewards Better Health and Well-Being

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NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**



All North Carolinians should have the Opportunity for Health

Statewide multi-component shared infrastructure and strategy to bridge health care and human services across diverse populations and geography and “Buy Health.”

Key Healthy Opportunities Initiatives



“Hot Spot” Map



Screening Questions



NCCARE360



Medicaid Transformation & Healthy Opportunities Pilots

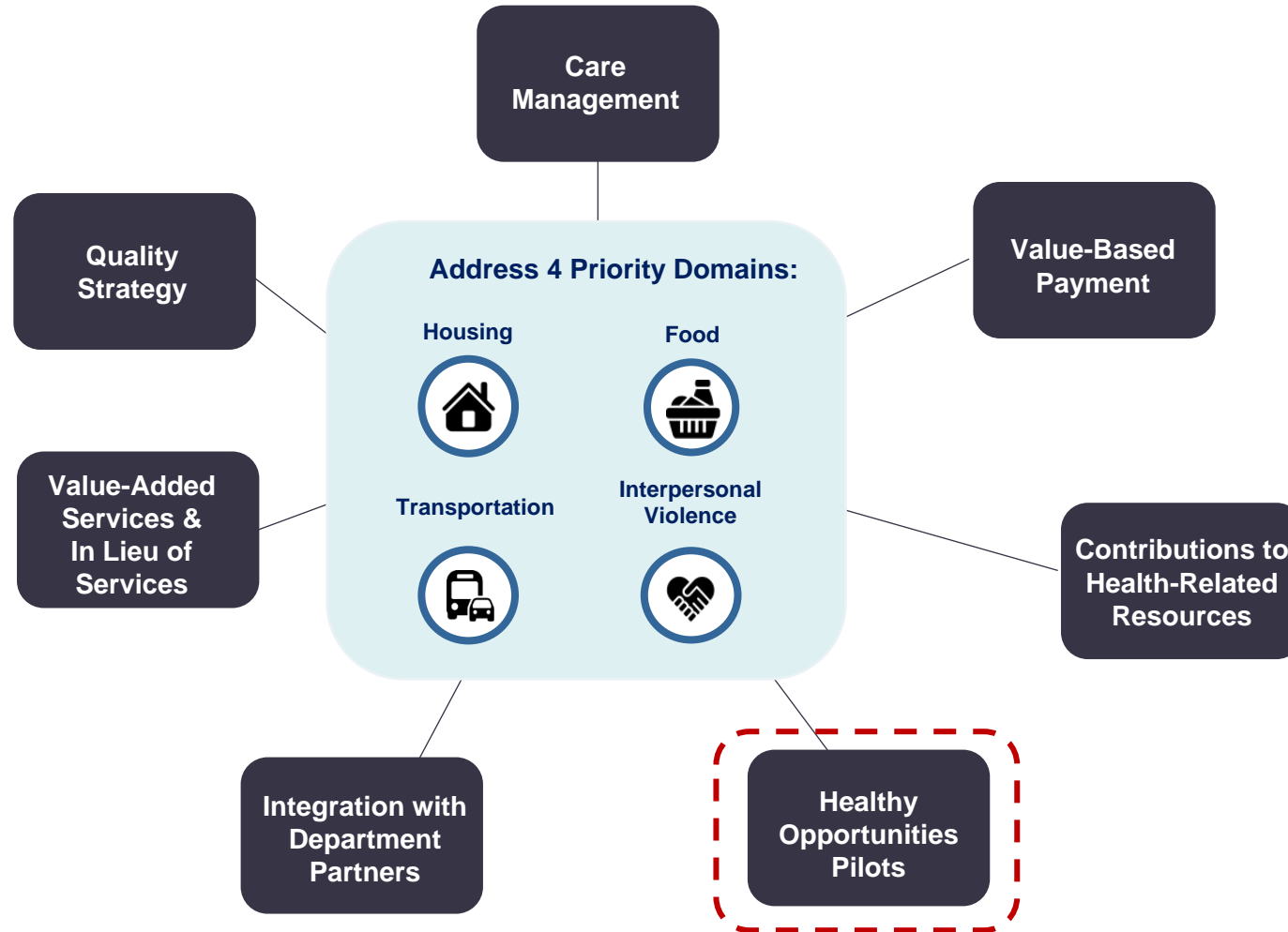


Workforce/Community Health Workers



Connecting Resources

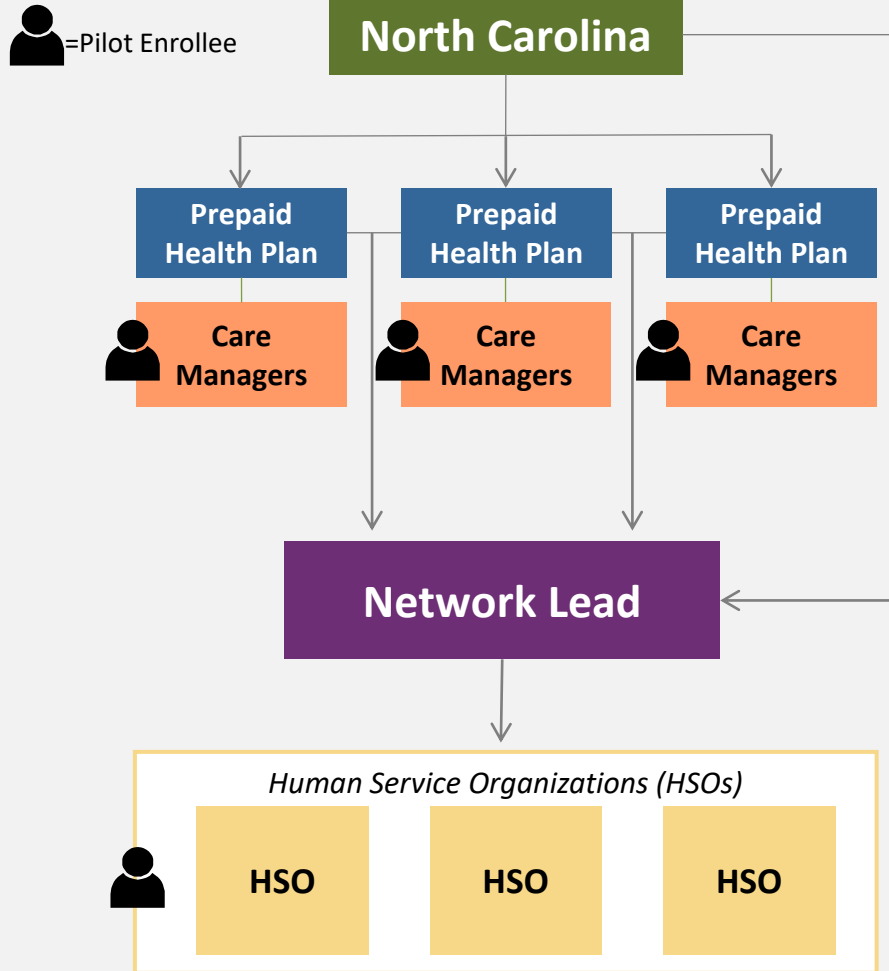
Healthy Opportunities in Medicaid Managed Care



For a subset of Medicaid Managed Care members

Healthy Opportunities Pilots

Sample Regional Pilot



The Pilots allow NCDHHS to provide a select set of non-medical services to higher-risk Medicaid enrollees to evaluate the impact on their health outcomes and health care utilization and costs.

CMS authorized up to \$650 million in state and federal Medicaid funding over a five-year period that will be used to:

- Cover the cost of delivering federally-approved Pilot services
 - NC DHHS has developed service definitions and a fee schedule to reimburse human service organizations (HSOs) that deliver these non-medical services
- Support capacity building to establish Healthy Opportunities Network Leads (NLs) and strengthen the ability of human service organizations (HSOs) to deliver Pilot services
 - NC DHHS procured three Network Leads (one per Pilot region) with deep roots in their communities to facilitate collaboration and build partnerships across healthcare payers and human service providers

What Services Can Members Receive Through the Pilots?

North Carolina's 1115 waiver specifies 29 services that can be covered by the Pilot. Examples include:



Housing

- Housing navigation, support and sustaining services
- Inspection for housing safety and quality
- Housing move-in support
- Essential utility set-up
- Home remediation services
- Home accessibility and safety modifications
- Healthy home goods
- One-time payment for security deposit and first month's rent
- Short-term post hospitalization housing



Food

- Food and nutrition access case management
- Evidence-based group nutrition class
- Diabetes Prevention Program
- Fruit and vegetable prescription
- Healthy food box (pick-up or delivered)
- Healthy meal (pick-up or delivered)
- Medically Tailored Home Delivered Meal



Transportation

- Reimbursement for health-related public or private transportation
- Transportation case management



Interpersonal Safety

- Interpersonal safety case management
- Violence intervention services
- Evidence-based parenting curriculum
- Home visiting services
- Dyadic therapy



Cross-Domain

- Holistic high-intensity enhanced case management
- Medical respite
- Linkages to health-related legal supports

Pilot services will be reimbursed through three payment types: (1) Fee for Service (e.g. Healthy Food Box, Parenting Curriculum); (2) PMPM (e.g. Housing Navigation, IPV Case Management); (3) Cost-based reimbursement up to a cap (e.g. Healthy Home Goods; Transportation)

NCCARE360 Overview

NCCARE360 is the first statewide network that unites health care and human services organizations with a shared technology that enables a coordinated, community-oriented, person-centered approach for delivering care in North Carolina. **NCCARE360** helps providers electronically connect those with identified needs to community resources and allow for feedback and follow up.

NCCARE360 Partners:



FOUNDATION FOR HEALTH
LEADERSHIP & INNOVATION



NCDHHS



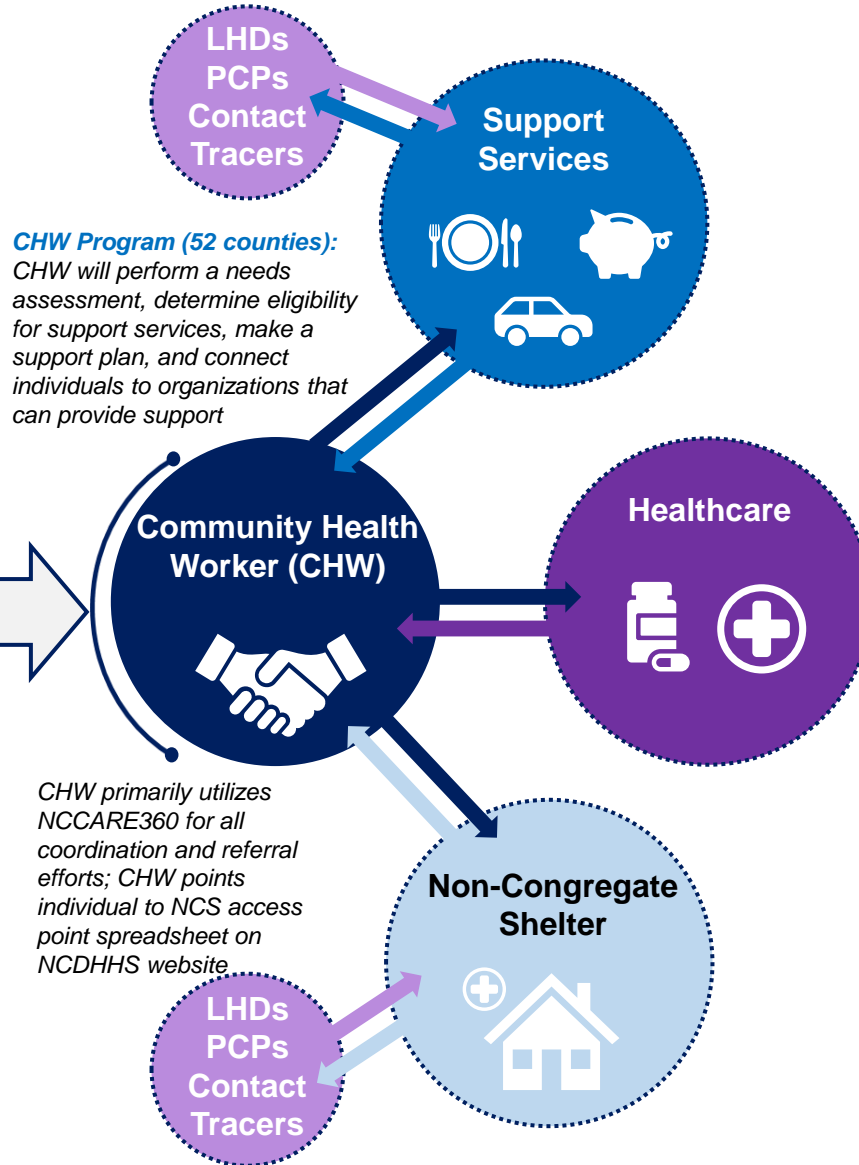
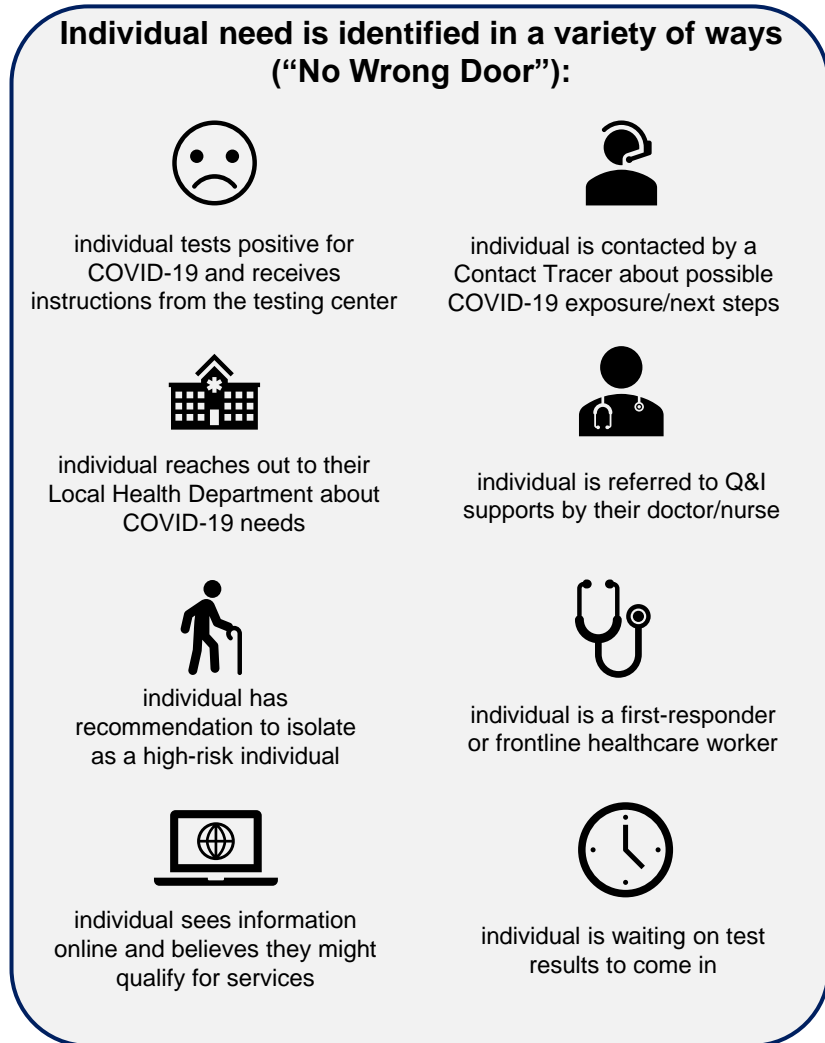
UNITE US



Expound

- NCCARE360 is fully statewide as of June 2020
- NCCARE360 Network:
 - Over 2,500 community-based organizations with over 4,600 programs in the NCCARE360 network.
 - NC Health Systems on NCCARE360: Cone Health, WakeMed, Vidant, UNC Health, Duke Health
 - All Medicaid Pre-Paid Health Plans and LME-MCOs on NCCARE360
- Client Served (as of October 2021)
 - Over **76,500** people served through NCCARE360
 - Over **202,810** referrals or cases created in NCCARE360
 - 74% of service episodes in NCCARE360 resolved

COVID-19 Quarantine and Isolation Supports



Support Services Program (29 counties): Innovative new program to assist individuals in targeted counties who need access to primary medical care and supports such as food or a relief payment to successfully quarantine or isolate due to COVID-19:

1. **Nutrition assistance**, including home-delivered meals and food boxes
2. **A one-time COVID-19 relief payment** to help supplement lost wages or the inability to look for work while in isolation/quarantine and to be used on basic living expenses
3. **Private transportation** provided in a safe manner to/from testing sites, medical visits, and sites to acquire food
4. **Medication delivery**
5. **COVID-related over-the-counter supplies**, such as face masks, hand sanitizers, thermometers, and cleaning supplies
6. **Access to primary medical care** to manage COVID recovery will also be provided through telehealth services through Community Health Workers (CHWs).

Non-Congregate Shelter Program (statewide): Collaborative effort between the State, counties and local partners to secure **non-congregate shelter** for individuals with no other safe place to quarantine, isolate, or social distance due to COVID-19.

2 options for reimbursement:

1. Local partners desiring state-centric coverage through NCEM (required MOA)
2. Local partners seeking direct reimbursement from FEMA

Braided various sources of federal CARES Act funding, State Medicaid dollars, & FEMA reimbursement

Key Lessons Learned from COVID-19 Quarantine & Isolation Supports Program

- **Capacity of vendors is extremely important**
 - Cash reserves and need for up-front funding
 - Staff capacity or partnerships
 - Experience with technology, data monitoring, and reporting
- **Relationships with community members and organizations is key**
 - Trusted members of the community and trusted local organizations were vital in reaching NC residents
 - Existing partnerships enabled the program to launch and scale quickly
- **Need for technical assistance and learning collaboratives**
 - High need for in-depth, one-on-one technical assistance and training as well as collaborative forums for vendors to share experiences, issues, and lessons learned
- **Need for the Department to be nimble, iterative, and collaborative**
 - Focus on speed and simplicity
 - Iterated regularly in response to real-time learnings
 - Cross-divisional effort (Division of Social Services, Medicaid, Office of Rural Health, Office of Healthy Opportunities)
- **Early Results**
 - Early results show that the combined presence of Support Service and CHW programs was associated with a 1.2-1.5 percentage point lower COVID-19 positivity rate at the county level. This represents a 12-15% decrease in positivity rates relative to control counties.
 - Over 70% of support services were delivered to historically marginalized populations.