

NC Department of Health and Human Services

Joint DMH/DD/SAS & DHB (NC Medicaid) COVID-19 Update for **NC Providers**



Thursday, Dec. 10, 2020



NCCARE360

A New Tool for a Healthier North Carolina

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Building a Healthier North Carolina

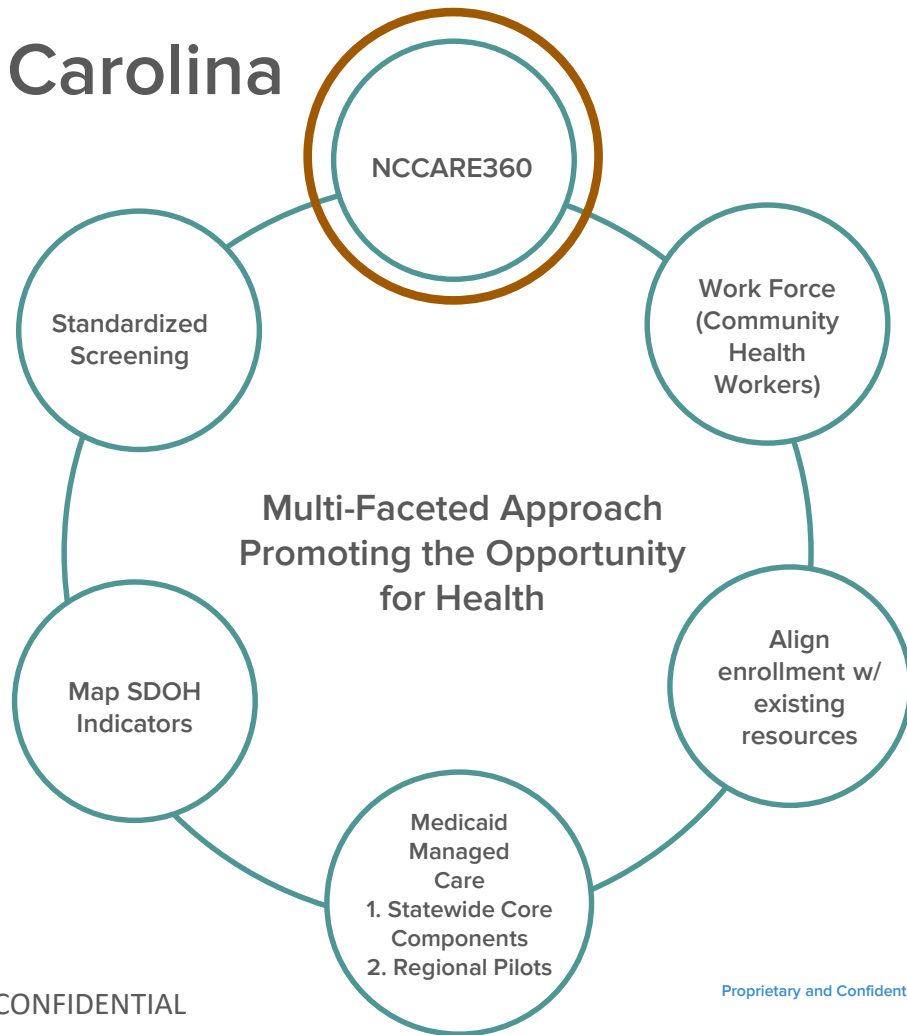
Part of a Broader Statewide Framework

The Problem:

Connecting people to community resources is inconsistent, not coordinated, not secure, and not trackable.

The Solution:

Uniform system for providers, insurers, and community organizations to coordinate care, collaborate, and track progress and outcomes. Tool to make it easier to connect people with the community resources they need to be healthy.



What is NCCARE360?

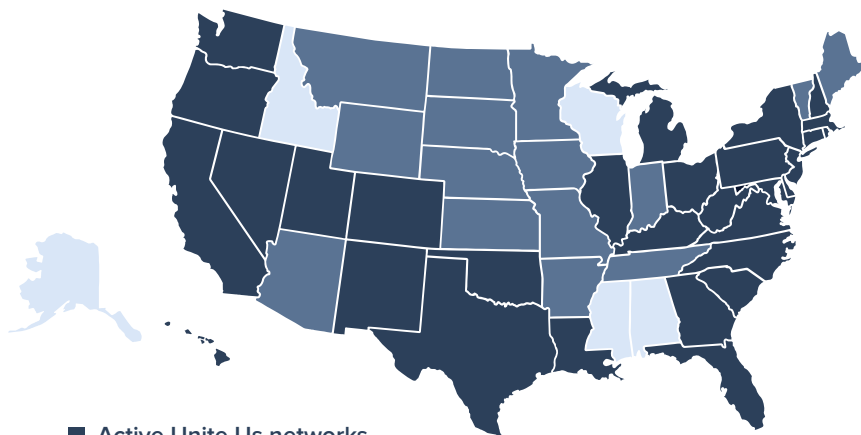
NCCARE360 is the first statewide network that unites health care and human services organizations with a shared technology that enables a coordinated, community-oriented, person-centered approach for delivering care in North Carolina. NCCARE360 helps providers electronically connect those with identified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

NCCARE360 Partners:



Our Connection to this Work

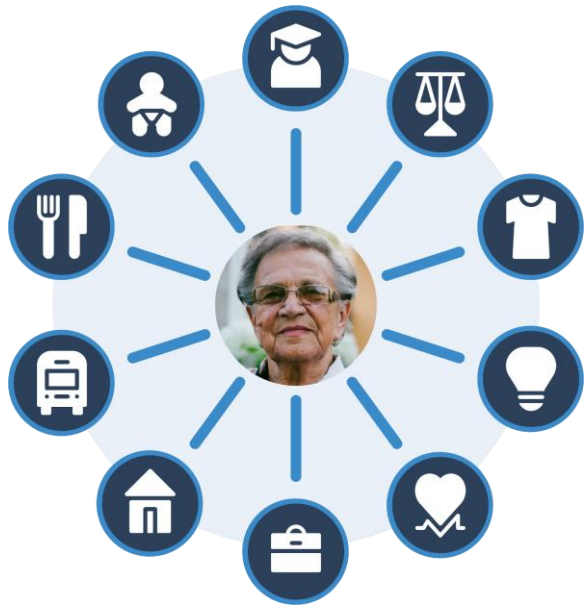
Our digital infrastructure supports individuals seeking services across the nation.



- Active Unite Us networks
- Unite Us networks in progress
- No active networks



Why are we coming together?



To connect people to care they need, faster and with fewer barriers

To strengthen existing partnerships and create change in our community



Who's Involved So Far?

- A **robust statewide resource directory** powered by NC 2-1-1 that will include a call center with dedicated navigators, a data team verifying resources, and text and chat capabilities.
- A **community repository** powered by Expound to integrate multiple resource directories across the state and allow data sharing.
- A **shared technology platform** powered by Unite Us to send and receive electronic referrals, seamlessly communicate in real-time, securely share client information, and track outcomes.
- A **community engagement team** powered by Unite Us to guide change management, workflows and training, and provide ongoing network partner support.



United Way
of North Carolina



Expound

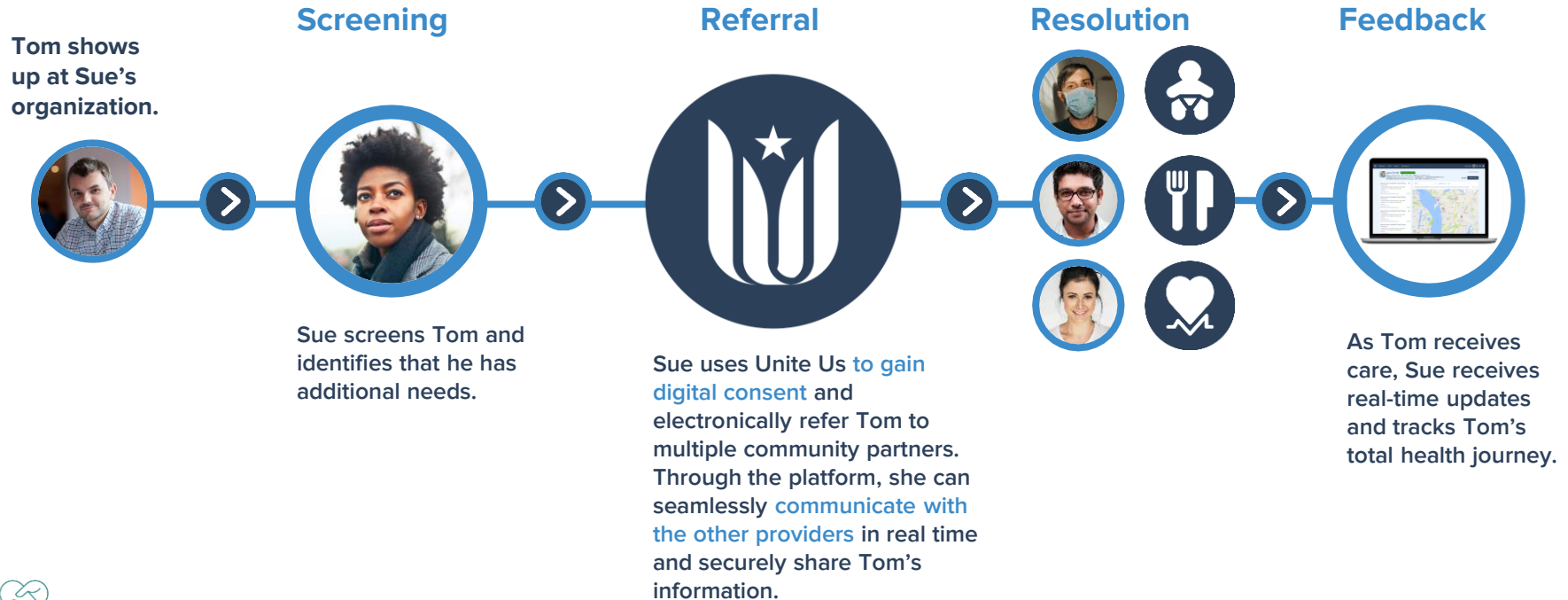


Building our Vision

- North Carolinians are easily connected to the *right* service, quickly and efficiently.
- Service providers can **view, coordinate, and collaborate** on their clients' care beyond the services they provide.
- **Outcomes data is tracked** and leveraged to demonstrate impact, increase visibility of gaps in services, and improve access to services for all.



Connecting People to Care



Why Participate in NCCARE360?

Traditional Referral



- ✘ Providers cannot always exchange PII or PHI securely
- ✘ Limited prescreening for eligibility, capacity, or geography
- ✘ Clients must contact each organization they were referred to
- ✘ Providers have limited insight or feedback loops
- ✘ Client data is siloed and transactional data is not tracked

NCCARE360



- ✓ Information is stored and transferred on Unite Us' HIPAA, FERPA, FIPS, and 42 CFR Part 2-compliant platform
- ✓ Clients are matched with the provider(s) they qualify for
- ✓ Information is captured once and shared on clients' behalf
- ✓ Providers have insight into the entire client journey
- ✓ Longitudinal data is tracked to allow for informed decision-making by community care teams



Optimization to Date

Recent Data

Current licensed user count: 7,212

Referrals sent since 1/1/20: 48,965

from Jan 1 - Nov 30 2020, we served 27,699 unique clients

Oct 2020: 9,535

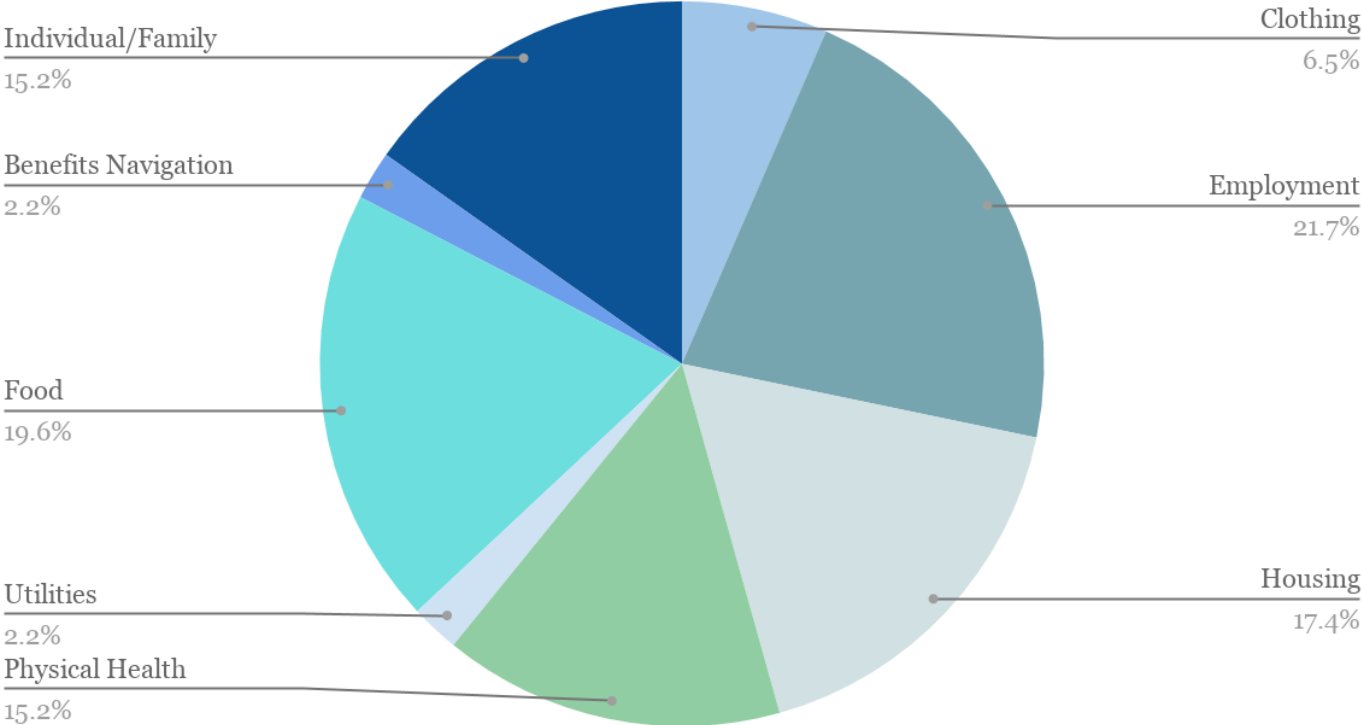
Oct 2020 resolution rate: 82.5%

Nov 2020: 12,614

Nov 2020 resolution rate: 83.2%

Observation on Top Needs

Needs Reflected



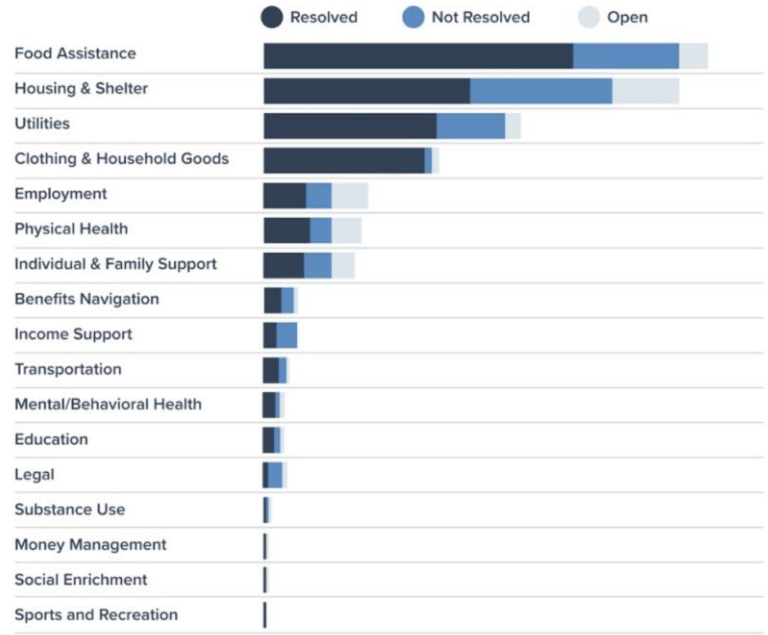
- Employment
- Food Assistance
- Housing

Guiding Community Reinvestment Strategies

How can decision-makers use data to build resilient cities, states, and regions?

The ability to drill down to **service needs** (referrals), **ability to refer** (program status), and **outcomes** (resolved and unresolved cases) across a network makes our platform a dynamic tool in any policy-maker's toolbox.

Case Resolution by Service Type



A woman with curly hair, wearing a brown jacket and glasses, is seated at a table and gesturing with her hands while talking to a man in a dark suit. The man is seated across from her, listening intently. In the background, another man in a light blue suit is walking through a doorway marked with a red "EXIT" sign. The setting is a modern office with large windows and contemporary lighting.

Moving Forward

Getting Involved



Recommend Network Partners

- Email abbie@uniteus.com to refer organizations to the network, or to request a presentation for an existing community group.



Provide Feedback

- Let us know if there's a better way to provide organizational support.



Be a Champion

- Utilize the platform and help cheerlead the use.
- Distribute network marketing materials with your community partners; Send us examples of successes; offer guidance on specific service areas (i.e. Housing/CoC). Share [NCCARE360.org](https://www.nccare360.org) with your community and co-workers.
- Host a Community Strategy Session



Next Steps



Create Momentum

- *Schedule a standing meeting and identify a workgroup*
- *Identify key staff for input to the project*
- *Identify internal project management or change management resources*
- *Identifying bandwidth*



Learn how to use Unite Us platform

- *Attend a live remote training*
- *Complete a self guided training*



Get in Touch



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NC Department of Health and Human Services

Electronic Visit Verification (EVV) Presentation – LME/MCOs

Kenneth Bausell
IDD Manager

December 10, 2020

Agenda

- **Welcome**
 - **EVV Overview**
 - **LME/MCO**
 - **Timeline**
 - **Q&A**
 - **Next Steps**
-

Welcome

EVV Overview – 21st Century CURES Act

- The CURES Act is designed to improve the quality of care provided to individuals through further research, enhancing quality control, and strengthening mental health parity.
- Section 12006 of the CURES Act requires states to implement an electronic visit verification (EVV) system for Personal Care Services (PCS) by Jan. 1, 2020 and for Home Health Care Services (HHCS) by Jan. 1, 2023.
- CMS allowed states to request a Good Faith Effort Exemption (GFE) Request to delay implementation by 1 year. CMS approved North Carolina's GFE on 11/21/19 delaying implementation until 1/1/2021

EVV Overview

- Electronic Visit Verification (EVV) is a method used to verify visit activity for services delivered as a part of Home and Community Based Services (HCBS) programs.
- EVV offers a measure of accountability to help ensure that individuals who are authorized to receive services, receive them.

EVV Overview

Services Included – specific to NC Medicaid

- **Phase 1—Target Jan. 1, 2021**
 - 1905(a)(24) State Plan Personal Care Services benefit
 - 1915(c) HCBS Waivers
 - Community Alternatives Programs for Children (CAP/C)
 - Community Alternatives Programs for Disabled Adults (CAP/DA)
- **LME/MCO Applicable Services – Currently delayed – Timeline is being updated**
 - NC Innovations
 - Traumatic Brain Injury Waiver
 - (b)(3) Services

EVV Technology

- Telephony
- Mobile APP Beacon/Fob technology Fixed Visit Verification Devices

LME/MCO Applicable Services Timeline

- **EVV implementation of the Innovations Waiver, the TBI Waiver and the (b)(3) services is currently delayed.**
-

EWV Must Verify:

Date of Service

Location of Service

Beneficiary
Receiving Service

Person
Providing Service

Type of Service Rendered

Time the service begins
and ends



EVV and Innovations, TBI, (b)(3) Overview

- **The EVV system utilized by the PIHP shall have the ability to collect and verify the following data (the “EVV Data”) from any Network Provider for Personal Care Services prior to the PIHP releasing payment for such services:**
 - **Type of service performed;**
 - **Beneficiary receiving the service**
 - **Date of service**
 - **Location of service delivery**
 - **Name of the individual providing the service; and**
 - **The time the service begins and ends.**

- **The PIHP shall require any Provider providing “Personal Care Services” to utilize an Electronic Visit Verification system to collect and remit the EVV Data to the PIHP.**

EVV and Managed Care Overview

- The PIHP shall have the capacity to collect, validate, and deliver EVV Data to the Department for Personal Care Services or services that provide support with activities of daily living in an Enrollee's home.

LME/MCOs

- Providers serving Innovations, (b)(3), and TBI beneficiaries will work with the LME/MCOs system.

What LME/ MCO services are subject to EVV?

(b)(3)	
T1019 U4	Personal Care/Individual Support
H2022 U4	Transitional Living Skills
T2013 U4	In Home Skill Building
T2013 TF HQ U4	Community Living and Supports - Group
T2013 TF U4	Community Living and Supports
T2033 U1	Supported Living – Periodic

Innovations	
T2013 TF HQ	Community Living and Support Group
T2013 TF	Community Living and Supports
T2033 U1	Supported Living – Periodic
TBI	
S5125	Personal Care
T1015	In Home Intensive
T2013	Life Skills Training - Individual and Group



Stakeholder Feedback and Questions

Medicaid.EVV@dhhs.nc.gov

Questions and Answers



For more information visit our website:

<https://covid19.ncdhhs.gov>

Comments, questions and feedback are welcome at:

- www.ncdhhs.gov/divisions/mhddsas
- BHIDD.COVID.Qs@dhhs.nc.gov
- Medicaid.COVID19@dhhs.nc.gov

Awareness, Managing Crisis, Resiliency

- Hope4NC Helpline (1-855-587-3463)
 - Hope4Healers Helpline (919-226-2002)
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