

# Recovering Stronger

**Kody H. Kinsley**

Secretary

North Carolina Department of Health and Human Services

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# Agenda

- 1. Key Healthcare Challenges in North Carolina**
- 2. NCDHHS Priorities**
- 3. What We're Doing**
- 4. Working Together**

# Key Healthcare Challenges in NC

## *The pandemic exacerbated existing challenges*

Behavioral Health	Children and Families	Workforce
<ul style="list-style-type: none"><li>• Nearly <b>1 in 5</b> North Carolinians have a mental illness.</li><li>• ~ <b>1.2 million</b> adults in NC with substance use disorders</li><li>• During the pandemic, approximately <b>1 in 3</b> North Carolinians reported symptoms of depression and/or anxiety.</li><li>• Alcohol-related ED visits increased <b>13%</b> from 2019 to 2020.</li><li>• Opioid overdose deaths increased <b>40%</b> from July 2019 to July 2020.</li></ul>	<ul style="list-style-type: none"><li>• <b>1 in 6</b> children in NC have a behavioral health disorder and numbers are increasing</li><li>• <b>16%</b> of NC families with children live in poverty</li><li>• <b>Over ~3,600</b> NC children have lost a parent/caregiver to COVID</li><li>• <b>~70%</b> increase in the rate of children discharged from EDs with a behavioral health condition during the pandemic</li><li>• <b>~25%</b> of families missed a child's preventive visit due to the pandemic</li></ul>	<ul style="list-style-type: none"><li>• NC early childhood education staff decreased by <b>~10%</b> between March 2020 and November 2021.</li><li>• NCDHHS vacancy rates <b>nearly doubled</b> between March 2020 and July 2022, from <b>12.75%</b> to <b>23.2%</b></li><li>• Nursing home workforce in NC declined by <b>12.5%</b> since January 2020, more than <b>15,000</b> employees have left facilities.</li><li>• There are 472 people on waitlists to enter state facilities as of September 2022, a <b>164%</b> increase since March 2020</li></ul>

## 2. Department Priorities

*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.

# 3. What We're Doing

*NCDHHS believes that to advance health equity, we must invest in the right social and structural drivers of inequities.*

## **Behavioral Health:**

- Launching new virtual tele-psych sites in rural hospitals
- Support the integration of behavioral health into primary care
- Working to improve reentry services for people with I/DD
- Increase awareness & combat mental illness stigma in minority communities

## **Child & Family Well-Being:**

- Increase Access to Prenatal Care with Rural Providers
- Increase access to children's mental health services
- Working to maintain access to primary care for children and families
- Access to Broadband Infrastructure/Digital Equity

## **Strong & Inclusive Workforce:**

- Increasing number of providers from historically marginalized populations
- Reinforcing the talent pipeline for early educators
- Investing in our direct care workers
- Supporting employment initiatives for people with disabilities

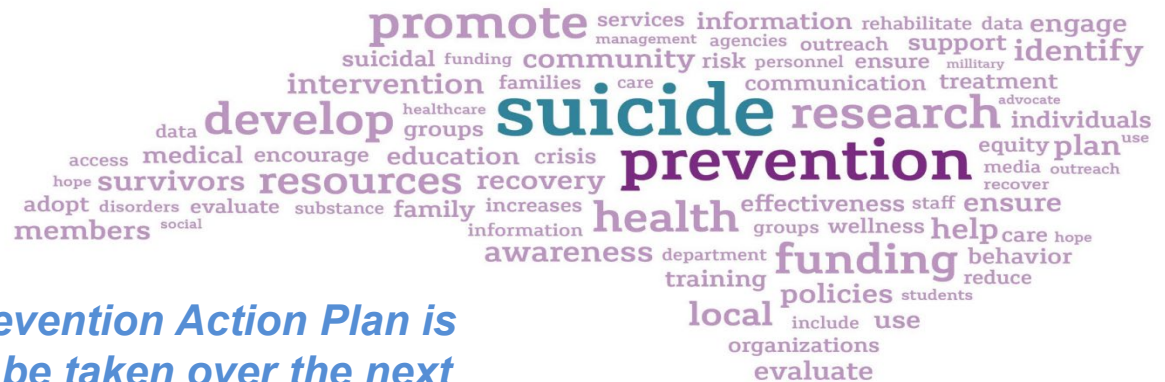
# 3. Working Together

## National Launch of 988 – July 2022



*Anyone can CALL, TEXT OR CHAT “988”  
for immediate access to crisis  
intervention*

## NCDHHS Launch of Suicide Prevention Action Plan – September 2022



*This North Carolina Suicide Prevention Action Plan is focused on specific actions to be taken over the next four years to reduce injury and death by suicide.*

2022

# 3. Working Together

## *Federally Qualified Health Centers support Integrated care:*

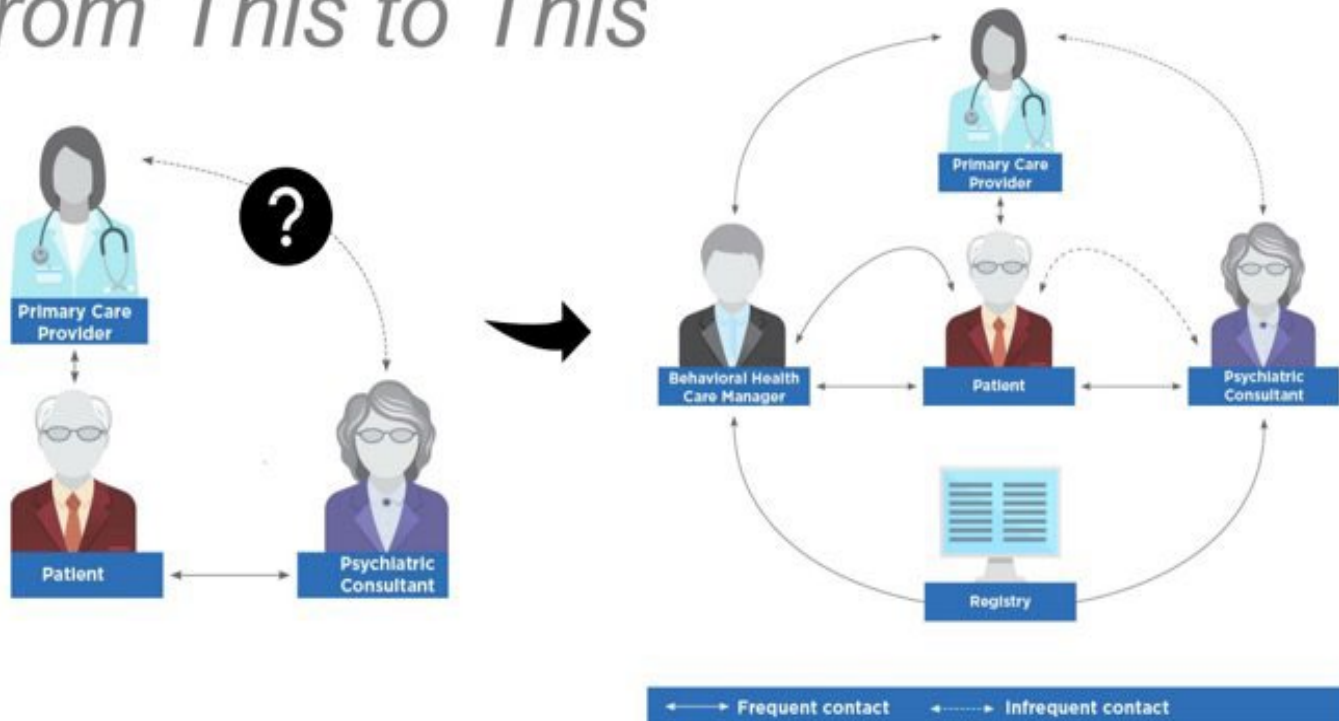
- FQHCs already serve as the integrated care safety net for many NC Medicaid and uninsured members.
- FQHCs have the opportunity to further support DHHS Integrated Care Efforts by:
  - Leaning into the Collaborative Care Model
  - Supporting Tailored Care Management as an Advanced Medical Home +

# 3. Working Together

## Collaborative Care

Collaborative Care Model: A primary care physician treating patients' behavioral health problems leads a team that consists of a behavioral health care manager and psychiatric consultant

### The Collaborative Care Model in Primary Care *From This to This*

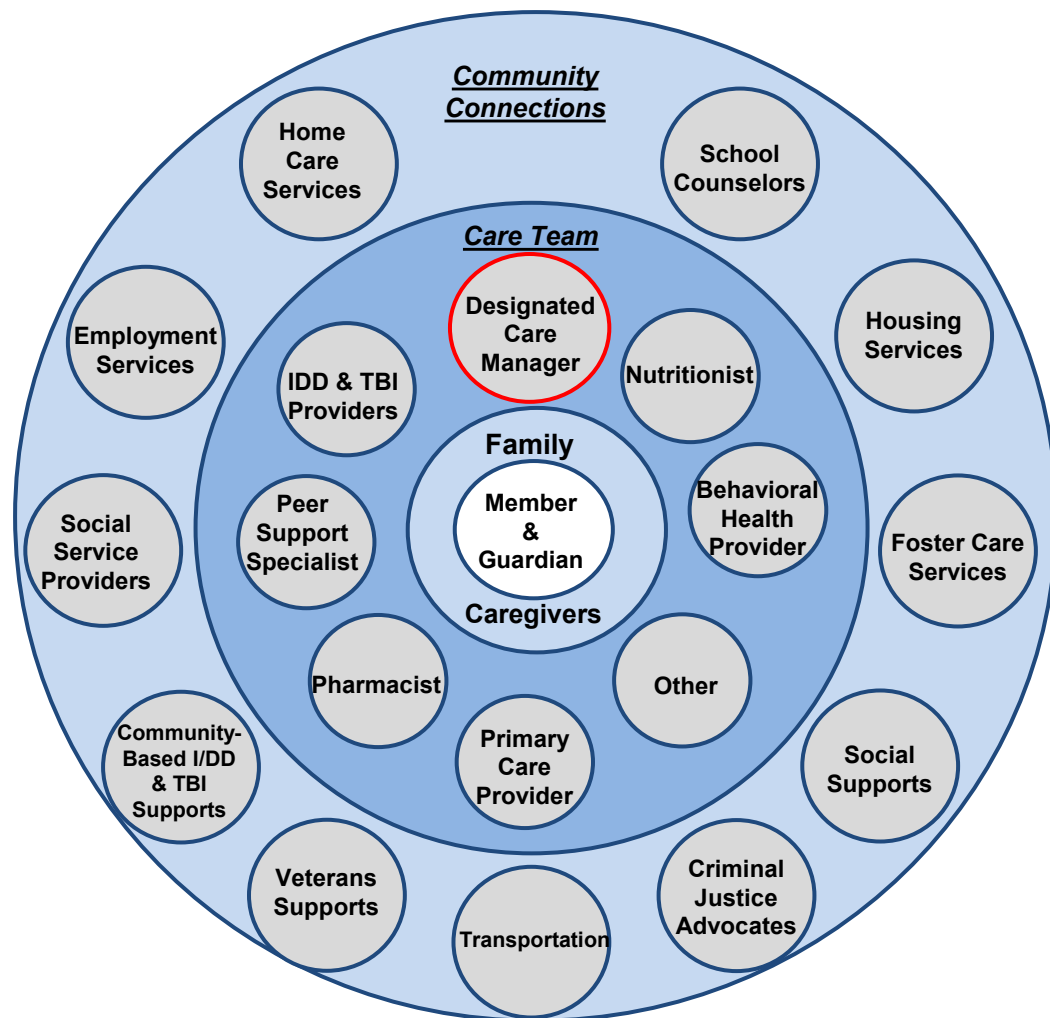




# 3. Working Together

## Tailored Care Management

Under Tailored Care Management, members will have a single care manager who will be equipped to manage all of members' needs including physical health, behavioral health, I/DD, TBI, pharmacy, LTSS, and unmet health-related resource needs.



# 3. Working Together

## *Medicaid Expansion*

- Expands coverage to more than **600,000** North Carolinians – at **zero** cost to the State
- **\$4.9 billion** in federal dollars to the state annually
- Save state funds
- **\$1.5 billion** “signing bonus”
- Every month we delay, we miss out on **\$521 million** federal dollars
- If we expanded Medicaid, there would be **\$430 - \$480 million per year** in additional funding for behavioral health services