Building Our Partnership: What’s Ahead for DHHS and Counties

Department of Heath and Human Services
Secretary Mandy Cohen, M.D.

September 17, 2019
Welcome

Our Goals for Quarterly Webcasts

• Share information about priorities
• Address how state activities impact local work
• Share resources to support local work
• Answer questions
• Get feedback on how we can continue to strengthen our partnership
Our Shared Purpose

Our Vision: Advancing innovative solutions that improve health, promote well-being and foster independence for all North Carolinians.

Our Mission: In collaboration with our partners, DHHS provides essential services to improve the health, safety and well-being of all North Carolinians.
Our Priorities

• Build an innovative, coordinated, and whole-person centered health system
• Turn the tide on the opioid epidemic
• Ensure that all North Carolina children get a healthy start and develop to their full potential
Agenda

• Hot Topics
• NC Opioid Epidemic Response
• Resources for Counties
• Questions
Hot Topics
Medicaid Transformation Update

• DHHS is extending the period for open enrollment for counties in Phase 1.
• DHHS will move from rolling out managed care in two phases to one statewide transition.
• The target date of February 1, 2020 for statewide implementation remains unchanged.
# Medicaid Transformation Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Regions 2, 4</th>
<th>Regions 1, 3, 5, 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrollment Packets Mailed</td>
<td>6/28/2019</td>
<td>10/1/2019</td>
</tr>
<tr>
<td>Open Enrollment Begins</td>
<td>7/15/2019</td>
<td>10/14/2019</td>
</tr>
<tr>
<td>Open Enrollment Ends</td>
<td></td>
<td>12/13/19</td>
</tr>
<tr>
<td>Auto-Assignment</td>
<td></td>
<td>12/16/19</td>
</tr>
<tr>
<td>Health Plan Effective Date</td>
<td></td>
<td>2/1/2020</td>
</tr>
</tbody>
</table>

Dates are approximate and subject to change.
Moving toward Statewide Go-Live 2/1/20

• Encourage beneficiaries to choose a health plan and primary care provider.
  – NC Medicaid Managed Care call center at 833-870-5500
  – NC Medicaid Managed Care website, ncmedicaidplans.gov

• Finalize contracts between doctors and health systems and managed care companies.
Resources to Support You

• Provider Playbook: https://medicaid.ncdhhs.gov/providers/provider-playbook-medicaid-managed-care

• County Playbook: https://medicaid.ncdhhs.gov/counties/county-playbook-medicaid-managed-care

• Targeted Medicaid bulletins

• Meet and Greets with Health Plans

• AHEC-supported training

• Face-to-face events /Webinars

• Virtual office hours /FAQs
Managing Change - Contact Us

• We want to hear from you. What is working? What is not?

• START HERE FIRST
  – Providers: NCTracks: 800-688-6696
  – Beneficiaries: Medicaid Contact Center: 833-870-5500
  – Counties: NC FAST: 919-813-5400

• Staff can escalate issues to internal SWAT team focused on problem identification and resolution

• When needed, issues can be escalated to our SWAT team by calling (919) 527-7460 or emailing MedicaidSWAT@dhhs.nc.gov
Polling Question

Have you used the NC Opioid Data Dashboard to review data for your county?

- Yes
- No

Scale of Opioid Epidemic

70,237 people died from drug overdoses in the U.S. in 2017

Peak car crash deaths (1972)
Peak H.I.V. deaths (1995)
Peak gun deaths (1993)

28,466 deaths involved fentanyl or a similar drug

Drug overdose deaths, 1980 to 2017

Source nytimes.com
Opioid Epidemic in NC

• North Carolina’s Opioid Action Plan lays out specific, actionable strategies to respond to the epidemic

• Since launching in June 2017 we have:
  • Funded treatment for over 12,000 people without insurance
  • Trained over 3,000 clinicians on topics related to the opioid epidemic
  • Launched a medical residency training project to provide addiction training to the next generation of doctors
  • Provided direct funding over 34 counties through two RFAs to implement strategies from the Opioid Action Plan
  • Launched the NC Opioid Data Dashboard with metrics on the county level
  • Produced quarterly county slide decks with county specific information on the epidemic

• $75 million in total federal funds raised to combat the opioid epidemic
Since the Launch of the Action Plan

- Opioid dispensing has decreased by 24%
- Buprenorphine dispensing has increased 15%
- Uninsured and Medicaid beneficiaries that have received opioid use disorder treatment has increased by 20%
Preliminary Data
Opioid Overdose Deaths Declined in 2018

Unintentional Opioid Overdose Deaths, N.C. Residents

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Deaths</th>
<th>Percentage Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>717</td>
<td>-10%</td>
</tr>
<tr>
<td>2010</td>
<td>648 (-10%)</td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td>713 (10%)</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>731 (3%)</td>
<td></td>
</tr>
<tr>
<td>2013</td>
<td>721 (-1%)</td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>853 (18%)</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>1,057 (24%)</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>1,407 (33%)</td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td>1,884 (34%)</td>
<td></td>
</tr>
<tr>
<td>2018</td>
<td>1,785 (-5%)</td>
<td></td>
</tr>
</tbody>
</table>

*Data are preliminary and subject to change*
Source: NC State Center for Health Statistics, Vital Statistics-Deaths, ICD10 coded data, includes NC Resident deaths occurring out of state, 1999-2018 Q2
Detailed technical notes on all metrics available from NCDHHS; Updated October 2018
NC Opioid Action Plan 2.0

- Launched June 2019 at the Statewide Opioid Summit
- Identifies new opportunities and responds to the shifting epidemic

What’s New?
- Actions focused on youth to move to prevention upstream
- Inclusion of non-medical drivers of health
- New harm reduction actions
- New focus on special populations, including justice-involved persons
Opioid Epidemic Response Act (HB 325)

- Signed into law July 2019
  - Removes duplicative requirement that office-based opioid treatment providers register with state
  - Decriminalizes drug testing equipment, such as fentanyl test strips, to enable people to check drugs for contaminants
  - Removes ban on state funds to purchase syringes, hypodermic needles, and injection supplies for syringe exchange programs

Contact SyringeExchangeNC@dhhs.nc.gov for more information on syringe exchange programs and harm reduction strategies.
Medicaid Expansion
Proven Strategy to Impact Opioid Epidemic

• People with health insurance are twice as likely to seek treatment as those without.

• The uninsured rate for opioid-related hospitalizations in expansion states plummeted by 79%, from 13.4% in 2013 to 2.9% in 2015.

• Dayton, OH saw opioid deaths decline by more than 50% after expansion.

<table>
<thead>
<tr>
<th>Insurance Coverage: 2019 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private insurance</td>
</tr>
<tr>
<td>Medicaid or Medicare</td>
</tr>
<tr>
<td>Uninsured</td>
</tr>
<tr>
<td>Other/Unknown</td>
</tr>
</tbody>
</table>

Opioid Overdose ED Visits by Insurance Status: 2019 Jan
Our System Faces Key Challenges

• Chronically underfunded mental healthcare system
  • Over 1 million people are uninsured
  • Half of the opioid overdoses presenting in EDs are uninsured
  • 56% of adults with mental illness don’t receive treatment

• Stigma

• Bifurcated payment systems

• Imbalance of community-based services relative to inpatient and residential care
  • ED boarding
  • Insufficient community-based resources

• NC ranks 30th in US in ACEs prevalence

• Opioid Crisis – straining an already stretched behavioral health system
Year 2 Cumulative STR and SOR Grant Expenditures Statewide

- **MAT**: $6,649,757; 45%
- **Group Living**: $1,817,469; 12%
- **Inpatient**: $294,169; 2%
- **E&M CPT**: $969,064; 7%
- **Comm Supp Tm**: $6,319; 0.04%
- **Basic Outpt**: $988,817; 7%
- **Other**: $9,164; 0.1%
- **Assess Eval**: $426,583; 3%
- **SA COT**: $507,491; 3%
- **Peer/Engagement**: $105,325; 0.7%
- **SA Halfway House**: $20,989; 0.1%
- **SA TOP**: $3,015,286; 20%

NCDHHS | County Webinar | Sept 17, 2019
Expanded Treatment Access is Needed to Curb the Epidemic

• **Treatment is life-saving** and is an evidence-based path by which individuals with Opioid Use Disorder stabilize into recovery and regain their footing in the employment market.

• Recognizing the criticality of treatment, the state has allocated more than 60% of these federal grants directly to claims-based support of treatment for those without health insurance, through our public behavioral health safety net system.

• However, **addiction is a chronic disease** that requires stable medical care. $21 M in Cures/STR allocated to treatment provided treatment to 10,000 unique people. **An estimated 450,000 North Carolinians misuse opioids.**
Poll Question

How is your county’s opioid epidemic response coordinated? (check all that apply)

☐ I’m not sure
☐ There’s a designated point person
☐ It’s coordinated by the county government/local health department
☐ There a county coalition that coordinates work
☐ There is not a coordinated infrastructure in our county
Local Actions to Prevent Overdose

• Created out of the NC Opioid Action Plan update process
• Identifies impactful, feasible strategies for counties
• Supports two goals of the Opioid Action Plan:
  1. Reduce opioid overdose deaths
  2. Build a more resilient infrastructure for the next wave of the epidemic

Local Actions to Prevent Overdose

- Develop a Coordinated Infrastructure
- Improve Naloxone Access
- Support Syringe Exchange Programs
- Develop Post-Overdose Response Teams
- Engage Law-Enforcement
- Support Justice Involved Populations
- Support Impacted Families
- Map Treatment Resources
- Provide Transportation
- Develop Supportive Housing
- Expand Employment
- Expand Drug Takeback
- Promote Public Education
- Engage Youth In Primary Prevention
Local Actions to Prevent Overdose

- Develop a Coordinated Infrastructure
- Improve Naloxone Access
- Support Syringe Exchange Programs
- Develop Post-Overdose Response Teams
- Engage Law-Enforcement
- Support Justice Involved Populations
- Promote Public Education
- Map Treatment Resources
- Provide Transportation
- Develop Supportive Housing
- Expand Employment
- Expand Drug Takeback
- Support Impacted Families
- Engage Youth In Primary Prevention
Spotlight: Improve Naloxone Access

• Work with local pharmacies to make sure they’re distributing naloxone under the statewide standing order

• Implement a local standing order in the local health department and community-based organizations and distribute naloxone through them

• Educate communities about the importance of naloxone

• Visit NaloxoneSaves.org for NC specific information and educational materials
Spotlight: Support Justice Involved Persons

• People released from prison are 40 times more likely to **die** of an overdose in the first 2 weeks

• Medication Assisted Treatment (MAT) is the **gold standard** treatment for opioid use disorder

• Jail-based medication assisted treatment programs continue or induct individuals and connect them to care upon release

• Four counties currently operating or in planning

• **National Sheriffs Association**: Jail-Based MAT programs can reduce recidivism, connect people to care, and reduce jail system costs.
Using Medication-Assisted Treatment In Jails: A NORTH CAROLINA FOCUS

The NC Department of Health and Human Services will facilitate a conference on the use of Medication-Assisted Treatment (MAT) in jails on Friday, December 13, 2019 from 9 a.m. to 12:30 p.m., at the McKimmon Center in Raleigh. There is no cost to attend the conference. Please contact Margaret Bordeaux at Margaret.Bordeaux@dhhs.nc.gov if you would like to register to attend this conference.
Spotlight: Support Impacted Families

• Work with local DSS to establish and support case management and links to medication assisted treatment

• The START model places a peer support specialist with local DSS to provide additional support, case management, and connections to treatment

The epidemic is part of an intergenerational cycle of trauma and harm.
Polling Question

I want to learn more about:

- Developing a Coordinated Infrastructure
- Improving Naloxone Access
- Supporting Syringe Exchange Programs
- Developing Post-Overdose Response Teams
- Engaging Law-Enforcement
- Supporting Justice Involved Populations
- Supporting Impacted Families
- Mapping Treatment Resources
- Providing Transportation
- Developing Supportive Housing
- Expanding Employment
- Expanding Drug Takeback
- Promoting Public Education
- Engaging Youth In Primary Prevention
Additional Resources

• New round of funding to Local Health Departments: Community Linkages to Care for Overdose Prevention and Response (CLC) Request for Applications will be released at the end of September

• Year 1 awarded 22 local health departments who worked closely with county government and community partners

• Will support core strategies from the Menu of Local Options:
  • Syringe Exchange Programs
  • Justice Involved Persons
  • Post-Overdose Response teams
  • Small amount for innovative pilot projects

• Contact beinjuryfreenc@dhhs.nc.gov for additional information
Additional Resources

North Carolina Opioid Dashboard provides county specific data for 13 metrics

https://injuryfreenc.shinyapps.io/OpioidActionPlan/
Questions