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

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

January 30, 2020
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
• NCCARE360 Overview
• Implementation in Counties
• Questions
Hot Topics
Medicaid Transformation Update

• Managed Care remains suspended indefinitely
• DHHS does not have a new date for managed care implementation
• Medicaid spending/budget under Continuing Resolution
• Beneficiaries should continue to access services as they do now
DHHS Priorities During Suspension

• Ensure beneficiaries have a clear message on what to do now and what to do when managed care restarts
• Continue provider engagement, training and contracting
• Continue to hear from and share information with beneficiaries, providers, county partners and stakeholders
• Continue PHPs testing and readiness assessments to a place of logical pause or conclusion
• Move forward with managed care related procurements
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
Other Updates

• State Budget

• NCFAST Impacts

• New Federal Funding for Early Childhood

• County Data Measures
NCCARE360
Building the Infrastructure to “Buy Health”

- Standardized Screening Tool
- NCCARE360
- Healthy Opportunities Pilots
- Community Health Workers
NCCARE360 is the first statewide coordinated network that unites health care and human services organizations with a shared technology platform allowing for a coordinated, community-oriented, person-centered approach to delivering care in North Carolina.
## NCCARE360 Functionalities

<table>
<thead>
<tr>
<th>Functionality</th>
<th>Partner</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Resource Directory &amp; Call Center</strong></td>
<td><img src="image" alt="North Carolina 211" /></td>
<td>Phased update 2019 – Spring 2020  * Currently has verified resources across all counties and all domains</td>
</tr>
<tr>
<td><strong>Resource Repository</strong></td>
<td><img src="image" alt="Expound" /></td>
<td>Phased Approach</td>
</tr>
<tr>
<td><strong>Referral &amp; Outcomes Platform</strong></td>
<td><img src="image" alt="UNITE US" /></td>
<td>Rolled out by county January 2019 – December 2020</td>
</tr>
</tbody>
</table>

Hands on, in-person technical assistance and training to on-board providers and community organizations.
A coordinated network connects providers (such as health care providers, insurers, or community organizations) through a shared technology platform to:

• Screen for unmet resource needs
• Communicate in real-time
• Make electronic referrals
• Securely share client information
• Track outcomes together
Coordination Platform at Work
Improving coordination efficiency and accuracy

Traditional Referral

Client ➔ Healthcare Provider ➔ Housing Provider

✗ Service provider cannot always exchange PII or PHI via a secure method
✗ Limited prescreening for eligibility, capacity, or geography
✗ Onus is usually on the client to reach the organization to which he/she was referred
✗ Service providers have limited insight or feedback loop
✗ Client data is siloed & transactional data is not tracked

Through NCCARE360

Client ➔ Healthcare Provider ➔ Housing Provider

 ✓ All information is stored and transferred on HIPAA compliant platform
 ✓ Client is matched with the provider for which he/she qualifies
 ✓ Client’s information is captured once and shared on his/her behalf
 ✓ Service providers have insight into the entire client journey
 ✓ Longitudinal data is tracked to allow for informed decision making by community care teams
No Wrong Door Approach
Configurable & Structured Data
Real-time reporting of outcomes, performance & efficiency
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Real-time reporting of outcomes, performance & efficiency

Patient Level Coordination & Tracking
Patient Demographics, Access Points, Service Delivery History, Outcomes

Network Level Transparency & Accountability
Service Episode history, Referrals Created, Structured Patient Outcomes
Status Update (as of 1/28/20)

<table>
<thead>
<tr>
<th>NCCARE360 Implementation Status Update</th>
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<tr>
<td>Counties launched</td>
<td>50</td>
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<tr>
<td>Counties started on implementation</td>
<td>25</td>
</tr>
<tr>
<td>Organizations with NCCARE360 licenses</td>
<td>711</td>
</tr>
<tr>
<td>Active Users</td>
<td>2473</td>
</tr>
<tr>
<td>Referrals Sent</td>
<td>2259</td>
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</table>

<table>
<thead>
<tr>
<th>NCCARE360 Resource Repository</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizations verified</td>
<td>3047</td>
</tr>
<tr>
<td>Programs verified</td>
<td>9465</td>
</tr>
</tbody>
</table>

Engaged Organizations by Service Type

- Healthcare: 26%
- Housing: 18%
- Employment: 11%
- Food: 7%
- Interpersonal Safety: 11%
- Safety: 8%
- Transportation: 7%
- Other: 7%

NCCARE360 will be implemented statewide by end of 2020
State Coverage
Began rollout January 2019, statewide by December 2020
Customizable to Meet Organization Needs

- **Available to all organizations statewide**
  - Value add to assist individuals and families in community (screening, referrals and outcomes)
  - Licenses offered at no cost to CBOs, health departments, social service agencies and other community partners
  - Working with DSS Directors Association workgroup on guidance, workflows and privacy/security
  - NCCARE360 for LHD Guidelines: “Maximizing the NCCARE360 Network to Advance the Public’s Health: A Guide for NC Local Health Departments”

- **NCCARE360 can be customized to meet needs and workflows**
  - Organizations can be referral receivers and/or senders
  - Organizations do not have to roll out NCCARE360 across all lines of business at once

- **Privacy and Security is top priority**
  - NCCARE360 ensures security and privacy in many ways and can be customizable based on the needs of different organizations
  - HIPAA, FERPA, FIPS compliant
  - Solutions to maintain confidentiality of referring agency
NCCARE360 Opportunities and Lessons Learned

Stacie Saunders, Health Director, Alamance County Health Department
Questions
Appendix
NCCARE360’s 1000th referral was a Piedmont resident referred to social services case management by a local health department’s WIC & Nutrition Services. As a result of the referral, the resident received diapers, bedding, and other necessities for the resident’s home.
Health Care

Referral for Dental Care. Client had never been to a dentist, so this would be their very first visit. It was accepted the next day. Case closed 3 days later with the client having had their first dentist appointment.

Interpersonal Violence

Referral for employment services. A woman was fleeing domestic violence and came to a church in the Triangle region for safety and refuge. She needed employment assistance and the church submitted an employment assistance referral through NCCARE360 and, within hours, the resident was contacted by an employment agency.

Transportation

Referral for Transportation. Patient with multiple chronic medical conditions who kept missing appointments at the local free clinic. The closest bus stop was 1 mile away and she could not walk there with her medical conditions. Referral made to local LINC transportation service who arranged pick up at her house. Was able to start making her outpatient appointments again.