



NC Department of Health and Human Services

Healthy Opportunities

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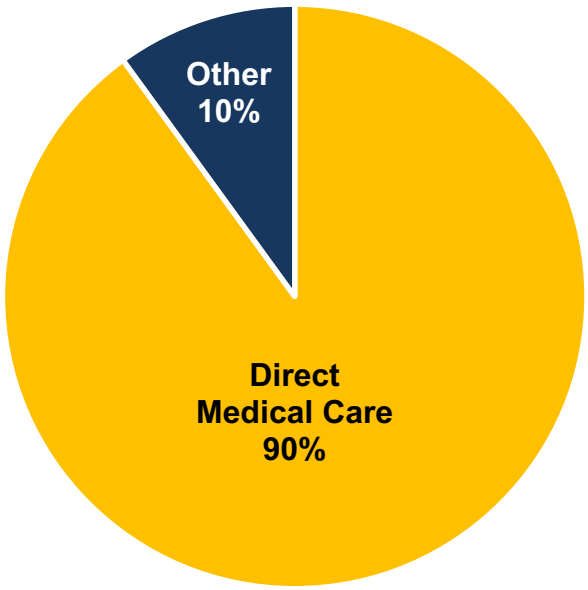
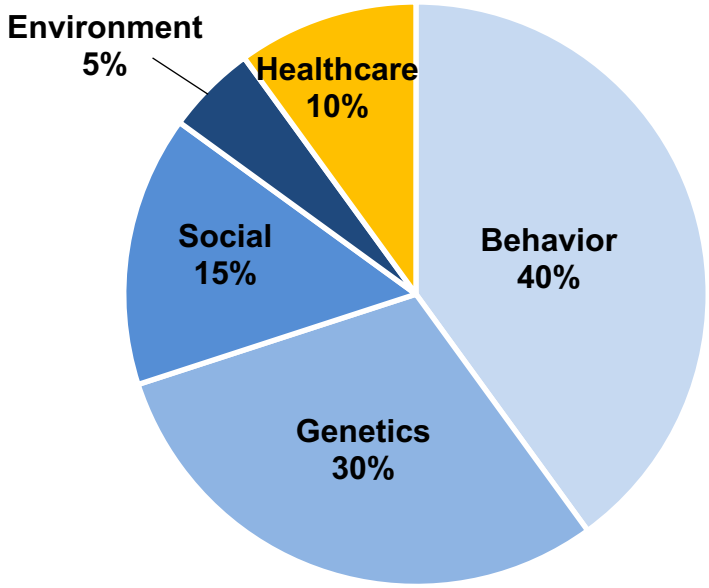
Why Emphasize Non-Medical Drivers of Health?

Mismatch: We are Currently Buying Healthcare, not "Health"

Healthcare Spending



Drivers of Health



The greatest opportunity to improve health lies in addressing a person's **unmet essential needs**.

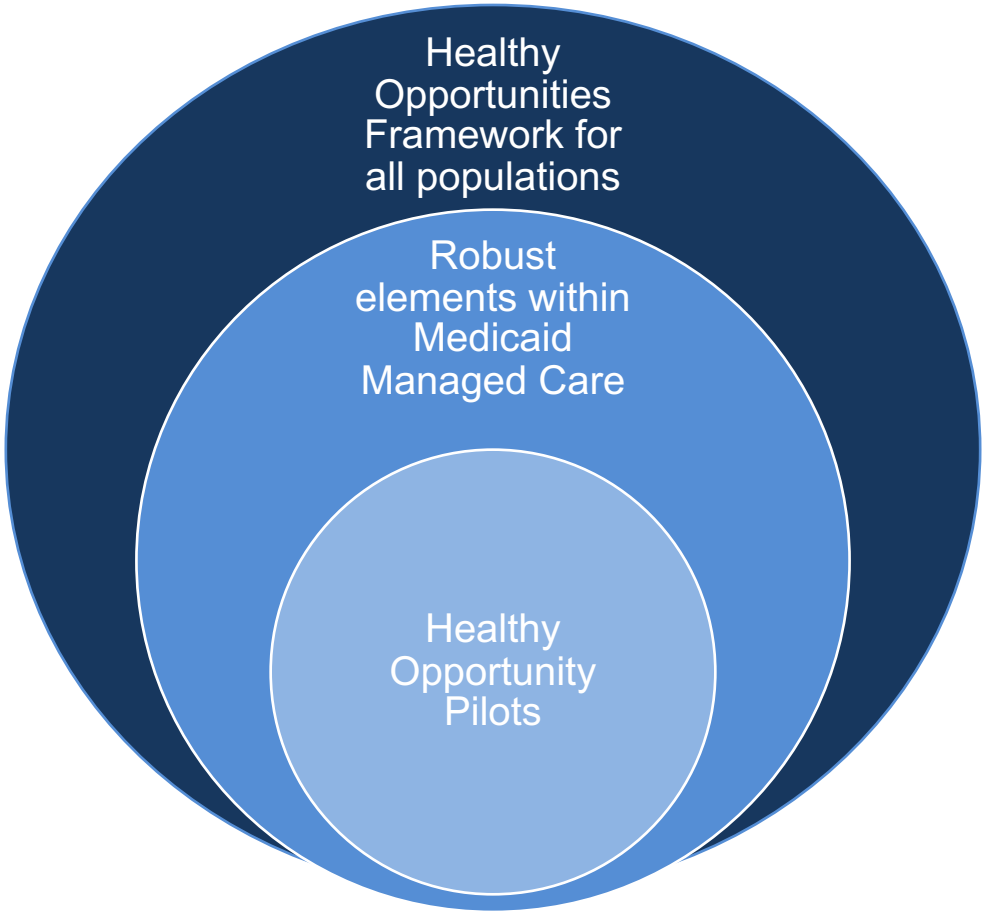
SOURCE: Schroeder SA. N Engl J Med 2007

North Carolina's Vision for Medicaid Managed Care

"To improve the health of North Carolinians through an innovative, whole-person centered, and well-coordinated system of care that addresses both the medical and non-medical drivers of health."

Opportunities for Health

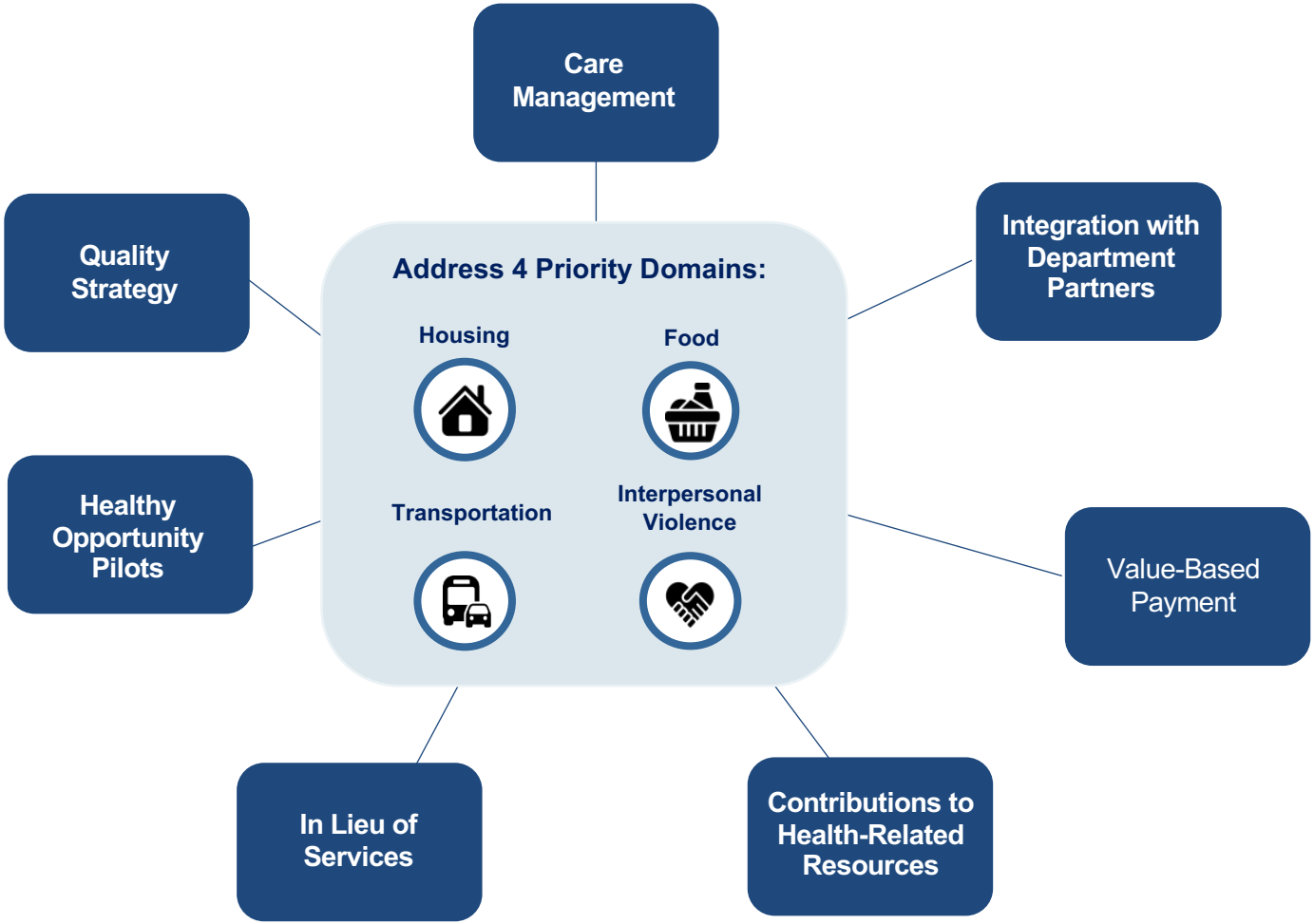
All North Carolinians deserve the opportunity for health. As such, we need to address the medical and non-medical drivers of health.



Statewide Infrastructure and Elements

Hot Spot Map	• **Interactive GIS map of social determinants of health indicators at neighborhood level statewide**
Screening Questions	• **Statewide standardized screening questions**
NCCARE360	• **Statewide coordinated network with a robust data repository and referral platform with close the loop functionality and outcome reporting**
Workforce Development	• **E.g., Community Health Workers core competencies, curriculum, and training**

Robust Elements in Medicaid Managed Care



Standardized Care Needs Screening Questions

Goals

- Routine identification of unmet health-related resource needs
- Statewide, standardized collection of data for all populations

Development

- Drew from validated tools (e.g. PRAPARE, Hunger Vital Sign, Pregnancy Medical Home) and informed by currently used tools
- Simple & streamlined to be accessible to broadest audience/settings
- Technical Advisory Group
- Released April 2018 for Public Comment
- Field testing in 18 clinical sites

Implementation

- Recommended to be used across settings and populations

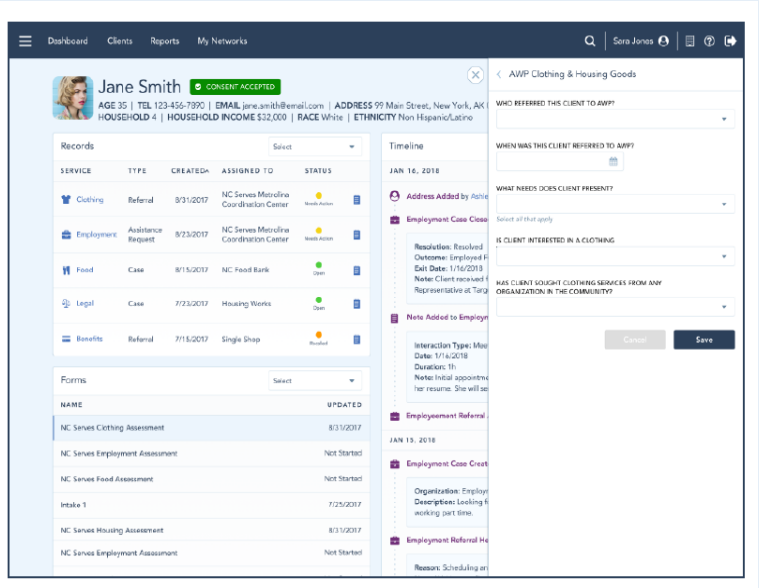
Health Screening

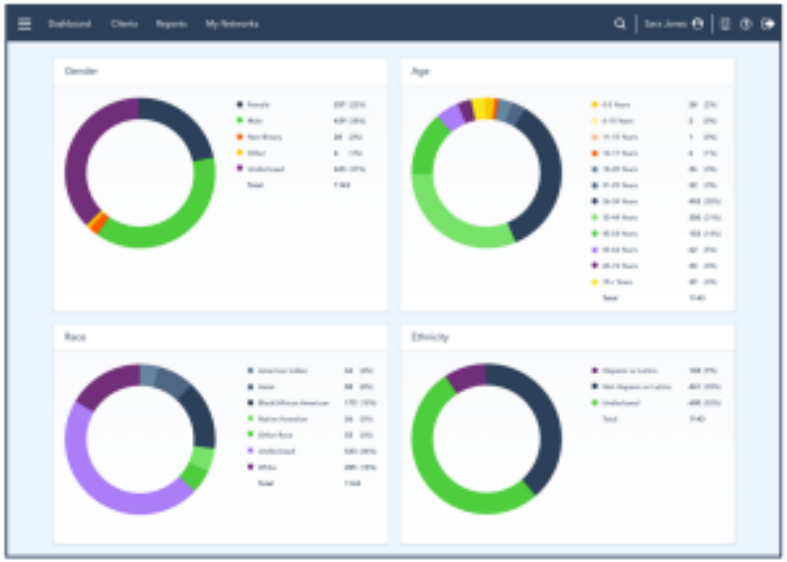
We believe everyone should have the opportunity for health. Some things like not having enough food or reliable transportation or a safe place to live can make it hard to be healthy. Please answer the following questions to help us better understand you and your current situation. We may not be able to find resources for all of your needs, but we will try and help as much as we can.

		Yes	No
Food			
1.	Within the past 12 months, did you worry that your food would run out before you got money to buy more?		
2.	Within the past 12 months, did the food you bought just not last and you didn't have money to get more?		
Housing/ Utilities			
3.	Within the past 12 months, have you ever stayed: outside, in a car, in a tent, in an overnight shelter, or temporarily in someone else's home (i.e. couch-surfing)?		
4.	Are you worried about losing your housing?		
5.	Within the past 12 months, have you been unable to get utilities (heat, electricity) when it was really needed?		
Transportation			
6.	Within the past 12 months, has a lack of transportation kept you from medical appointments or from doing things needed for daily living?		
Interpersonal Safety			
7.	Do you feel physically and emotionally unsafe where you currently live?		
8.	Within the past 12 months, have you been hit, slapped, kicked or otherwise physically hurt by anyone?		
9.	Within the past 12 months, have you been humiliated or emotionally abused by anyone?		
Optional: Immediate Need			
10.	Are any of your needs urgent? For example, you don't have food for tonight, you don't have a place to sleep tonight, you are afraid you will get hurt if you go home today.		
11.	Would you like help with any of the needs that you have identified?		

NCCARE360: A Statewide Resource Platform

NCCARE360 is the first statewide coordinated network that unites healthcare and human services organizations with a shared technology platform allowing for a coordinated, community-oriented, person-centered approach to delivering care in North Carolina.





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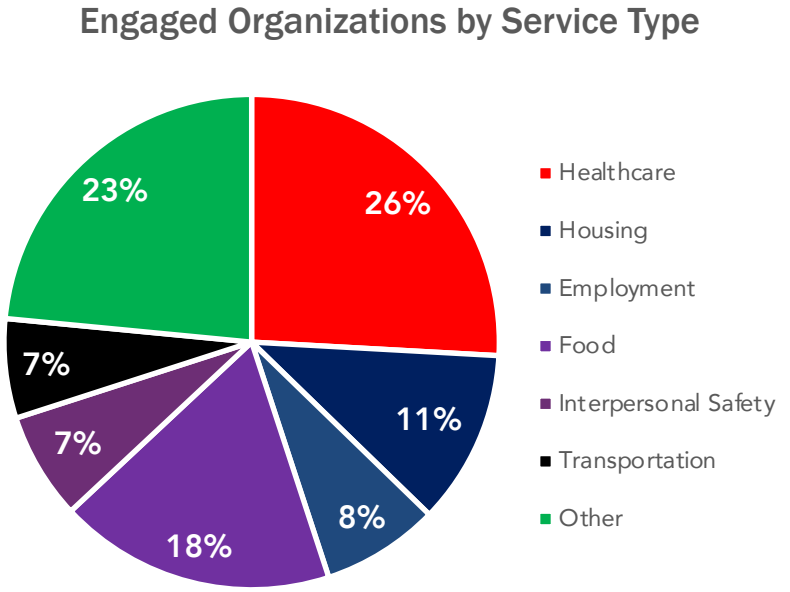
United Way
United Way of North Carolina

NCCARE360
A New Tool for a Healthier North Carolina

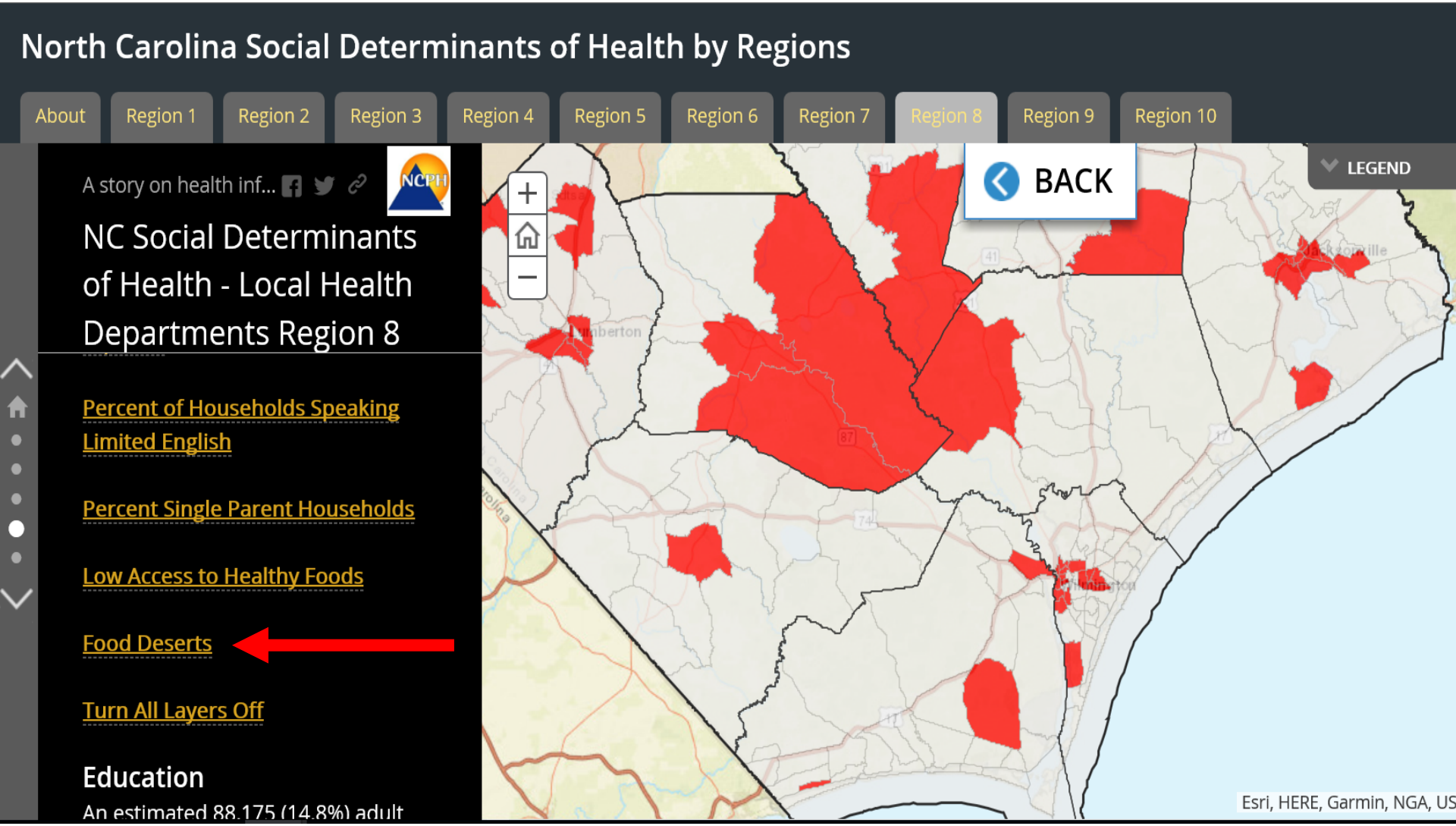
NCCARE360: Status Update

NCCARE360 Status Update	
15	Counties launched
30	Additional counties currently in implementation
1535	Organizations engaged in socialization process
322	Organizations onboarded onto NCCARE360
803	Referrals sent
376	Clients impacted



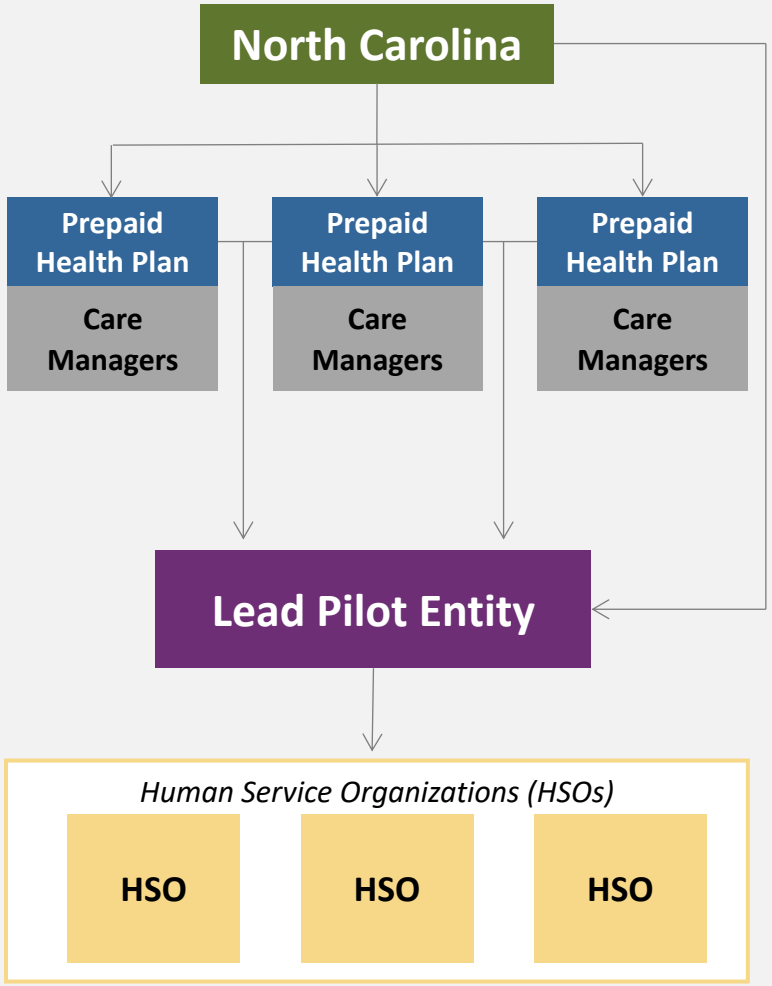
NCCARE360 will be implemented statewide by end of 2020

NC DHHS' "Hot Spot" Map



Healthy Opportunities Pilots

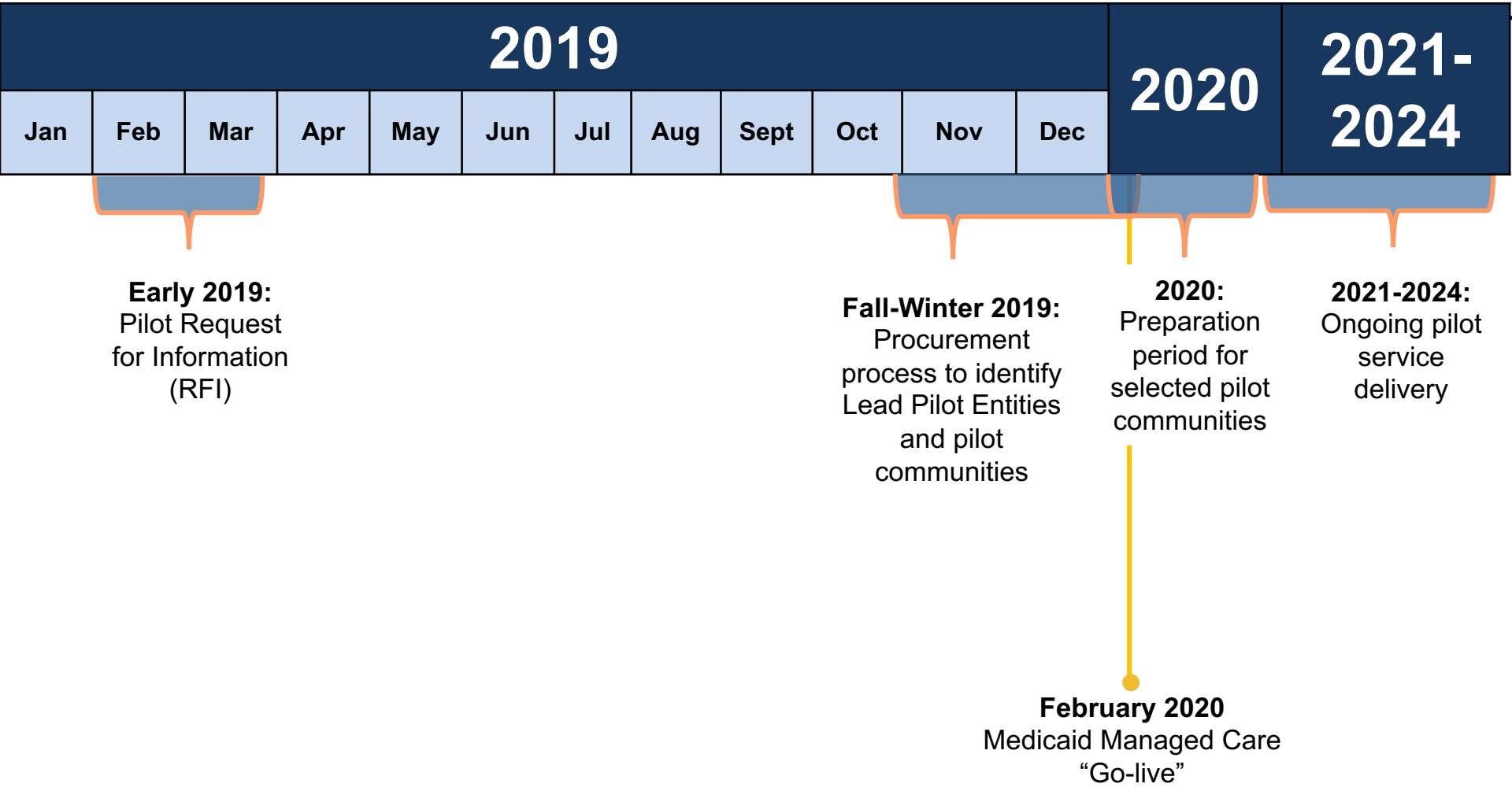
Sample Local Pilot



Pilot Overview

- The Healthy Opportunities Pilots will test the impact of providing selected evidence-based, non-medical services to Medicaid enrollees.
- Over the next five years, the pilots will provide up to $650 million in Medicaid funding for pilot services in two to four areas of the state that are related to housing, food, transportation and interpersonal safety and directly impact the health outcomes and healthcare costs of enrollees. Pilot funding will also support capacity building to establish "Lead Pilot Entities" and strengthen the ability of human service organizations to deliver pilot services.
- Pilots will be evaluated through rapid-cycle assessments and a summative evaluation.

Major Milestones for Healthy Opportunities Pilots



For More Information

- **Healthy Opportunities:** https://www.ncdhhs.gov/about/department-initiatives/healthy-opportunities
- **Healthy Opportunities Pilots:** https://www.ncdhhs.gov/about/department-initiatives/healthy-opportunities/healthy-opportunities-pilots
- **NC Medicaid Transformation:** https://www.ncdhhs.gov/assistance/medicaid-transformation
- **Contact:** amanda.vanvleet@dhhs.nc.gov

Questions/Discussion

Appendix

Healthy Opportunities Pilots

Who Qualifies for Pilot Services?

To qualify for pilot services, Medicaid managed care enrollees must have:

✓ At least one Needs-Based Criteria:

Physical/behavioral health condition criteria vary by population:

- Adults (e.g., 2 or more chronic conditions)
- Pregnant Women (e.g., multifetal gestation)
- Children, ages 0-3 (e.g., Neonatal intensive care unit graduate)
- Children 0-21 (e.g., Experiencing three or more categories of adverse childhood experiences)

+

✓ At least one Social Risk Factor:

- Homeless and/or housing insecure
- Food insecure
- Transportation insecure
- At risk of, witnessing or experiencing interpersonal violence

See appendix for full list of eligibility criteria.

Healthy Opportunities Pilots

What Services Can Enrollees Receive Through the Pilots?

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

Housing

- Tenancy support and sustaining services
- Housing quality and safety improvements
- One-time securing house payments (e.g., first month's rent and security deposit)

Food

- Linkages to community-based food services (e.g., SNAP/WIC application support)
- Nutrition and cooking coaching/counseling
- Healthy food boxes
- Medically tailored meal delivery

Transportation

- Linkages to existing public transit
- Payment for transit to support access to pilot services, including:
  - Public transit
  - Taxis, in areas with limited public transit infrastructure

Interpersonal Violence (IPV)

- Linkages to legal services for IPV related issues
- Evidence-based parenting support programs
- Evidence-based home visiting services

**See appendix for full list of approved pilot services.*

Deeper Dive: Key Entities' Roles in the Pilots

PHPs

- Contract with any LPE operating within the PHP's region and participate in pilots operating in its region
- Manage a Pilot budget
- Approve which enrollees qualify for Pilot services and which services they qualify to receive
- Ensure the provision of integrated care management to Pilot enrollees

Care Managers

- Frontline service providers predominantly located at Tier 3 AMHs and LHDs interacting with beneficiaries
- Assess beneficiary need for Pilot services and manage coordination of pilot services, in addition to managing physical and behavioral health needs
- Track enrollee progress over time

Lead Pilot Entities

- Serve as the essential connection between PHPs and HSOs.
- Two to four LPEs will be competitively procured by DHHS in 2019
- Develop, manage, pay and oversee a network of HSOs
- Provide support and technical assistance for HSO network
- Convene Pilot entities to share best practices

Human Service Organizations

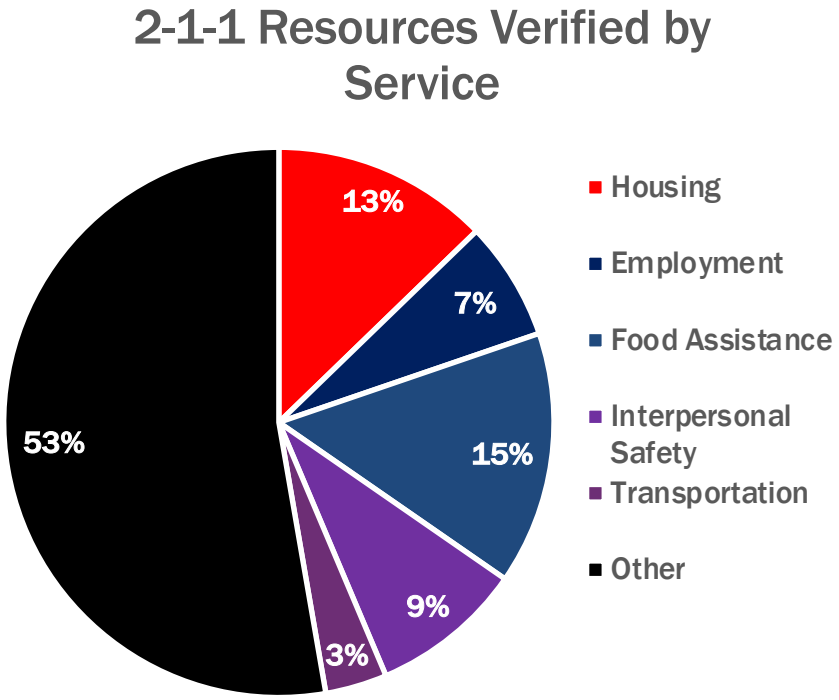
- Frontline social service providers that contract with the LPE to deliver authorized, cost-effective, evidence based Pilot services to Pilot enrollees
- Participate in the healthcare delivery system, including submitting invoices and receiving reimbursement for services delivered

Evaluation - Rapid Cycle/Summative

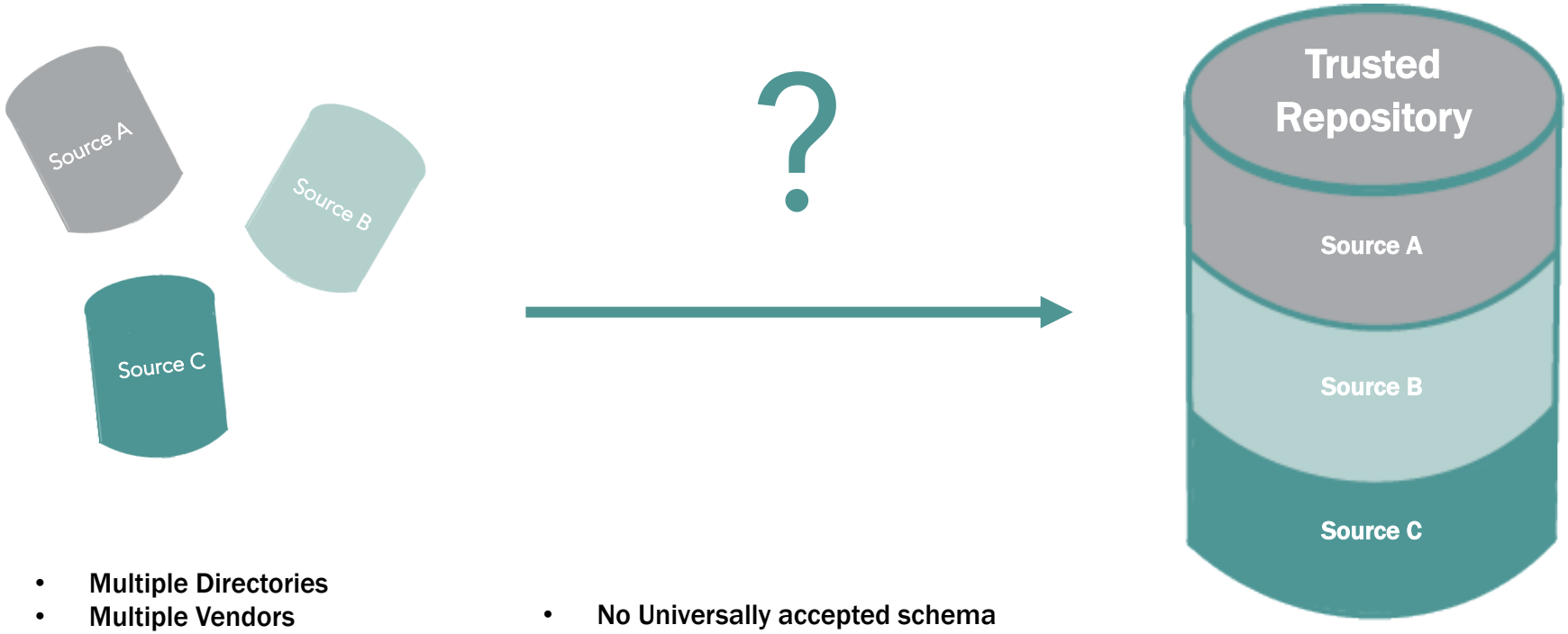
- Evaluation core component of design; Learnings from pilot are fundamental purpose
- Rapid cycle assessments
  - Evaluation throughout pilots to learn in real time and make adjustments
  - Evolving metrics - Operational readiness, service delivery, resource needs met, self-reported quality of life, health outcomes, utilization, cost
- Summative evaluation
  - Health, utilization, and cost savings overall and by sub-groups
  - Determine cost-neutrality and cost-effectiveness of interventions by sub-group
  - Implementation science
  - Learn how to scale interventions that worked into Medicaid statewide

Resource Directory

- Building on NC 2-1-1 strengths
  - Robust 18,000 organization directory, call centers
- Growing Capacity
  - Additional data coordination staff: Updating all listings in current 2-1-1 directory
  - Additional call center staff: navigators at scale
- Progress
  - 1468 Organizations verified
  - 3857 programs verified



Community Resource Repository



- Multiple Directories
- Multiple Vendors
- Proprietary Formats
- Non-Standardized content
- Unique ways to transmit data
- Hard to keep updated

- No Universally accepted schema
- No authoritative “aggregator”
- Industry incentivized to disaggregate
- No easy way for users to consume data
- Current way: technically complex & costly

Building a Coordinated Network

Out of Network

Organizations that have not been onboarded to the platform

- Searchable and Identifiable as part of Resource Directory/Data Repository
- Not part of the NCCARE360 platform yet
- Do not report outcomes

In Coordinated Network

Organizations onboarded to the platform – Coordinated Network

- Agree to NCCARE360 platform requirements
- Have completed training and on-boarding
- Responsibility to report outcomes

NCCARE360 creates a coordinated network that connects providers (e.g. health care providers, insurers, or CBOs) through a shared technology platform to:

- Communicate in real time
- Make electronic referrals
- Securely share client information
- Track outcomes together