



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

The Perfect Storm

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with

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The Perfect Storm

1 million+ Uninsured North Carolinians & Existing Unmet Need



**COVID-19
Pandemic**

**Racial
Inequality**

**Social
Injustice**

**Designing &
Operationalizing
the Future State**

**Maintaining
Day-to-Day
Operations**

Hope is on the Horizon

- **COVID-19 Vaccine**
- **Strong & Resilient Provider Community**
- **Medicaid Transformation brings Whole Person Care Management**
- **Levering & building on TCLI to enhance Community Inclusion efforts**
- **New tools to address need – NCCARE360, Healthy Opportunities, Telehealth expansion, Hope4NC, Hope4Healers**
- **Prioritizing Historically Marginalized Populations Improves Outcomes for All Populations**



Pre-Pandemic – Existing (unmet) Need

- LME/MCOs spent **\$359 million** to serve about **101,000 uninsured individuals** in SFY20 – 52,000 uninsured individuals each quarter
 - This works out to an **average spend of \$1424/person** and a **median spend of \$396/person**
- In a given year (2017-2018) more than **1.5 million North Carolinians** over the age of 18 had a **mental illness** – and **1 in 5** of them **did not receive services** at all
- In the given year approximately **578,000 North Carolinians** over the age of 18 had **any substance disorder**, and **8 out of 9 needed but did not receive treatment** at a special facility for substance use
- In 2012 **suicide** became the leading cause of injury death in North Carolina and remained so in subsequent years.
 - For **veterans**, the average suicide rate was 2.4x that of the general population.
 - From 2013-2017, 54% of suicides among the general public in North Carolina involved a **firearm**
 - Among veterans, 74% of suicides involved a firearm

Policy challenges/gaps/priorities

- **Medicaid Expansion**
- **Ensuring access – Parity**
 - NC rates of out-of-network BH care is 5-10 times that of physical health
 - Lower reimbursement for BH vs physical health providers
- **Growing Stronger – Children’s Mental Health**
 - NC is 42nd in youth access to needed behavioral health services
- **Keeping the Opioid Epidemic at Bay**
 - While NC experienced decrease in Emergency Department visits, we saw a 23% increase in opioid overdose ED visits.
- **Investing in True Justice**
 - 60% of jail inmates reported having had symptoms of a mental health disorder in the prior twelve months
- **Reforming Crisis Services**
 - The current crisis system will now need to navigate multiple payers

Awareness, Managing Crisis, Resiliency

- **Hope4NC (1-855-587-3463)**
 - The Hope4NC Helpline connects North Carolinians to mental health and resilience supports
 - Available statewide, 24 hours a day, seven days a week during the COVID-19 crisis
 - Hope4NC includes a Crisis Counseling Program tailored for COVID-19, which will provide immediate crisis counseling services to individuals affected by the ongoing COVID-19 public health crisis.
- **Hope4Healers Helpline (919-226-2002)**
 - Partnership with the North Carolina Psychological Foundation
 - Provides mental health and resilience supports for health care professionals, emergency medical specialists, first responders, other staff who work in health care settings who are experiencing stress from being on the front lines of the state's COVID-19 response
 - Available 24 hours per day, seven days a week, staffed by licensed mental health professional for follow-up
- **Evidence-based Behavioral Health messaging aimed at prevention**



S Stay connected to family and friends.	Social connections build resiliency.
C Compassion for yourself and others.	Self-compassion decreases trauma symptoms and stress.
O Observe your use of substances.	Early intervention can prevent problems.
O Ok to ask for help.	Struggling is normal. Asking for help is empowering.
P Physical activity to improve your mood.	Exercise boosts mood and lowers anxiety.

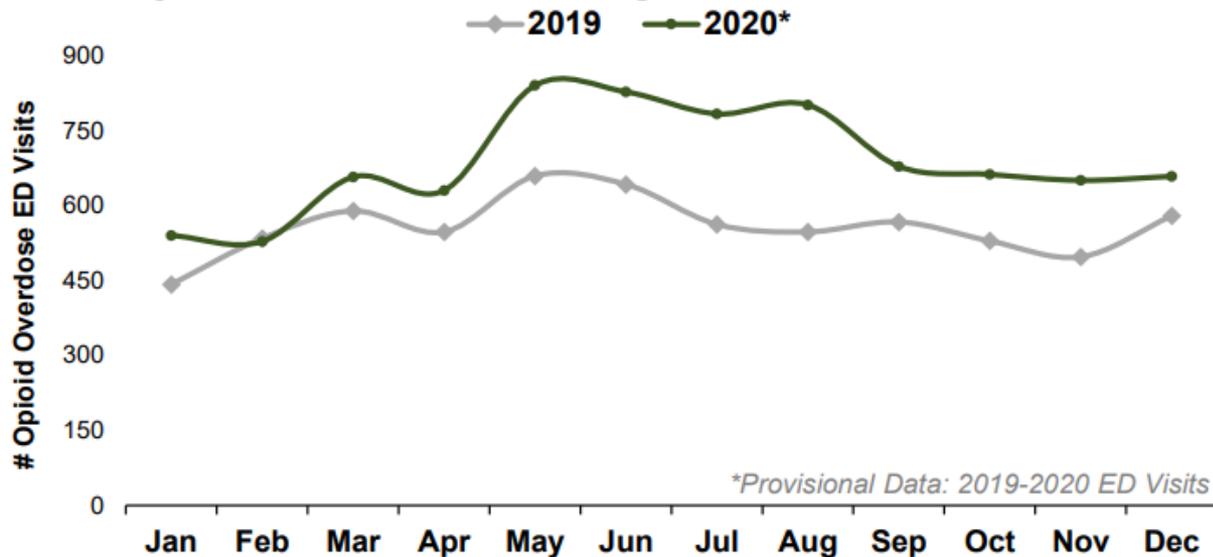
HOPE  4 NC HELPLINE 1-855-587-3463

Questions/Discussion

Behavioral Health & IDD: ***Impacts of COVID-19***

Indicators of System Performance

Opioid Overdose ED Visits by Month: 2019-2020*



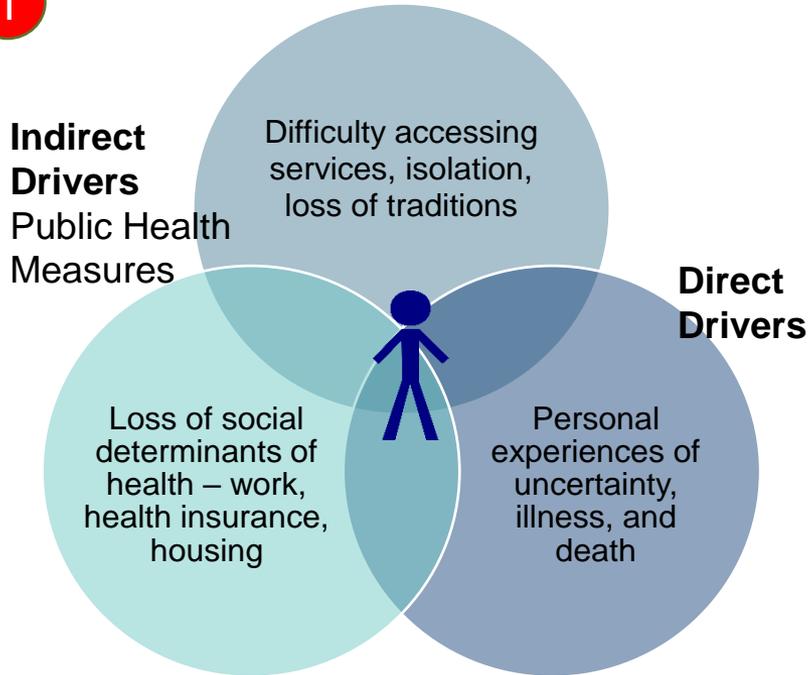
While NC experienced a decrease in overall Emergency Department visits through August, we saw a 23% increase in opioid overdose ED visits.

Though, opioid overdoses declined and plateaued in the Fall following interventions.

- During the pandemic, there has been a **three-fold increase in reported symptoms of depression and/or anxiety disorders** – 1 in 3, up from 1 in 9 in 2019.
- On average for State Psychiatric Hospitals, **admission delays** for people who are referred from Emergency Departments have **increased from an average of 145 hours in FY20 to an average of 185 hours** in the First Quarter of FY21.
- In the last decade, there's been a **91% increase** in the use of **involuntary commitment (IVC)** in North Carolina.

COVID-19 Drivers, Outcomes, and Mitigations

1



3

Mitigation strategies include sustaining services, normalizing and managing crisis, and targeted interventions

Policy modification, telehealth, provider guidance, and funding to support services

Increased awareness, normalization, access to crisis services, resiliency

Specific interventions for disproportionately impacted communities and outcomes

2

Individual's genetics, experiences, and coping mechanisms result in **varied outcomes**

Wellness Spectrum

Increased frequency and intensity

Anger and Hostility

Excessive Use or Misuse

Persistent Depression

Violence towards self/others

Situational loneliness, anxiety

Withdrawal from community

Inability to Cope

Extreme Mood Changes

Altered Perception

Chronic and Persistent Illness

The NC Behavioral Health Impacts of COVID-19

1. Enhanced health risks in congregate care settings

- People with IDD are 4 times as likely to contract COVID-19 and 2 times as likely to die from COVID-19, compared to the general population.
- 2,550 individuals with serious mental illness transitioned to community living in permanent supportive housing.

2. Behavioral Health Issues and Indicators

• Anxiety & Depression

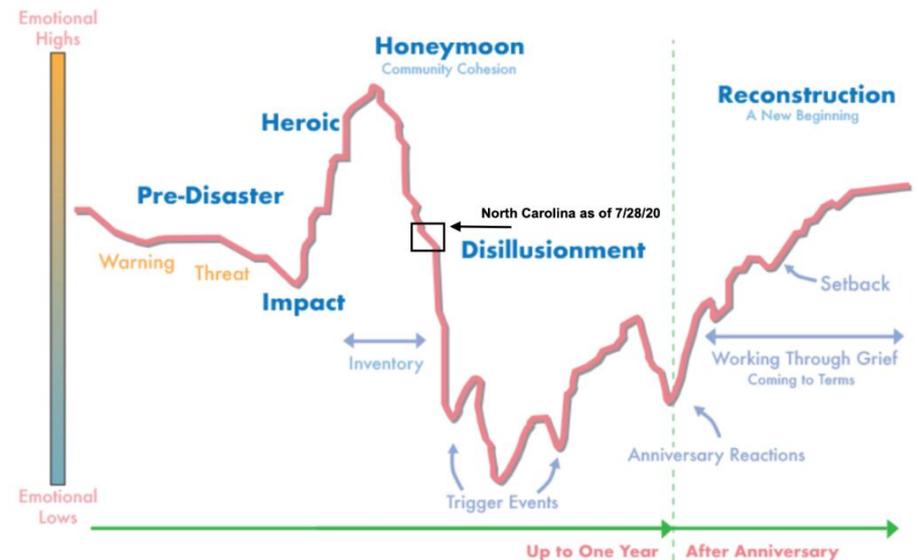
- Three-fold increase in reported symptoms of depression and/or anxiety disorders – 1 in 3, up from 1 in 9 in 2019.
- Younger cohorts (18-29) report higher prevalence of anxiety and depression, while prevalence among racial groups is relatively consistent.

• Substance Use – Alcohol & Opioids

- Liquor sales in North Carolina increased 12% in State Fiscal Year 2019-20
- Recent nationwide survey found that 1 in 4 respondents reported binge drinking at least once (up from 1 in 6 in 2019).
- In 2020, while NC has experienced a decrease in overall Emergency Department visits, we have seen a 23% increase in Medical/Drug Overdose ED visits – largely driven by a 24% increase in opioid overdose ED visits.

• Suicide

- For every five-percentage point increase in the rate of unemployment, an additional 304 North Carolinians would be expected to die each year from suicide (126) and drug overdose (178).



Behavioral Health & IDD: *Key Strategic Initiatives*

Ensuring Access – Parity

- **Mental illness** is experienced by nearly **1 in 5 adults in North Carolina**
 - 1 in 5 do not receive needed services*
 - 1 in 7 are uninsured*

*Prior to the COVID-19 pandemic



- There are **significant disparities** in the provision of behavioral healthcare and medical/surgical healthcare
 - Patients utilize out-of-network services at a much higher rate for behavioral healthcare
 - In 2017 in North Carolina, as compared to the corresponding rate for medical/surgical services, the rate of out-of-network...
 - **behavioral health inpatient facility services** was **9.2x higher**
 - **behavioral health outpatient facility services** was **6.9x higher**
 - **behavioral health office visit services** was **7.6x higher**

Growing Stronger – Children’s Mental Health

- Addressing **Access**
 - North Carolina is **42nd** in the country in youth access to needed **behavioral health services**
 - North Carolina has seen an almost **25% increase** in the number of **uninsured children** from 2016 to 2019
 - **142,000 North Carolina children** were **uninsured** in 2019
 - **90 of the 100 counties** in NC faces a **severe shortage of child Psychiatrists**. 64 counties have no child Psychiatrists.
- Addressing **Siloed Systems**
 - **Over 11,600 youth** in foster care, up **35%** since July 2012
- Addressing **Mental Health in Schools**
 - Of the **1.5 million children** in NC public schools, **up to 300,000 – 1 in 5** will experience a **mental health disorder** in a given year.
 - Only 75,000 will receive treatment

True Justice – Justice-Involved Populations

- **Serious mental illness** affects an estimated **14.5% of men** and **31% of women** in **jails**
- **60% of jail inmates** reported having had **symptoms of a mental health disorder** in the prior twelve months
- **83% of jail inmates** with mental illness did not receive mental health care after admission
- **68% of people in jail** have a **history of drug use and/or misuse of alcohol**
- Compared to other North Carolinians, within the first 2 weeks post incarceration, formerly incarcerated people are...
 - **40 times** more likely to die from an opioid overdose
 - **74 times** more likely to die from a heroin overdose
- Juvenile Justice
 - **Over half of youth** in the justice system have a diagnosed behavioral health issue
 - **Two-thirds of youth** in justice facilities have a diagnosable mental health disorder compared to only 9 to 22% of general adolescent population

True Justice – Tackling the ‘Twindemic’

- **\$10.6 Million RFA** to fund community-based projects to **prevent opioid overdoses** for people who are involved in the **justice system**
- Community-based organizations, local law enforcement agencies, substance use disorder treatment providers, and others may apply for grants of up to \$350,000 per year for two years to:
 - Create and expand **pre- and post-arrest programs** to divert people with substance use disorders from jail to appropriate treatment options,
 - Create **re-entry programs** that help connect people to care upon release from incarceration

But wait, there’s more!

- A **second RFA** funded through Bureau of Justice Assistance’s Comprehensive Opioid Abuse Program (COAP) grant will be released in early February 2021 to support:
 - **Pre-arrest or pre-conviction diversion** programs
 - Comprehensive **jail-based medication assisted treatment (MAT) programs**
 - **Overdose prevention** education and **naloxone distribution** programs

Three Continuing Broad Areas of Focus

1. Crisis Services & Response: **Address** lasting increases of need, loss of insurance, desire to keep pressure off emergency departments, and existing fragmented crisis system **With** prevention, awareness of crisis services, enhanced coordination, and movement toward statewide line integrated to other services and the national suicide lifeline.

2. Mental Health for a Generation of Children: **Address** the experience of personal and family trauma from COVID-19, loss of family income, and isolation and disruption due to remote schooling. **With** evidence-based interventions that train teachers, provide healthy coping mechanisms, stabilize children in crisis, and build resiliency in the generation.

3. Keeping the Epidemic at bay during the Pandemic: **Address** the opioid epidemic and evolving substance use disorders intensified by COVID-19 and already depleted federal funding **With** increasing focus on prevention and innovative induction and treatment strategies ripe for this moment of increased flexibility and need.

Questions/Discussion