Financing that Rewards Better Health and Well-Being

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All North Carolinians should have the Opportunity for Health

Statewide multi-component shared infrastructure and strategy to bridge health care and human services across diverse populations and geography and “Buy Health.”

Key Healthy Opportunities Initiatives

- “Hot Spot” Map
- Screening Questions
- NCCARE360
- Medicaid Transformation & Healthy Opportunities Pilots
- Workforce/Community Health Workers
- Connecting Resources
Healthy Opportunities in Medicaid Managed Care

Address 4 Priority Domains:
- Housing
- Food
- Transportation
- Interpersonal Violence

- Care Management
- Quality Strategy
- Value-Added Services & In Lieu of Services
- Integration with Department Partners
- Value-Based Payment
- Contributions to Health-Related Resources
- Healthy Opportunities Pilots

For a subset of Medicaid Managed Care members
The Pilots allow NCDHHS to provide a select set of non-medical services to higher-risk Medicaid enrollees to evaluate the impact on their health outcomes and health care utilization and costs.

CMS authorized up to $650 million in state and federal Medicaid funding over a five-year period that will be used to:

- Cover the cost of delivering federally-approved Pilot services
  - NC DHHS has developed service definitions and a fee schedule to reimburse human service organizations (HSOs) that deliver these non-medical services
- Support capacity building to establish Healthy Opportunities Network Leads (NLs) and strengthen the ability of human service organizations (HSOs) to deliver Pilot services
  - NC DHHS procured three Network Leads (one per Pilot region) with deep roots in their communities to facilitate collaboration and build partnerships across healthcare payers and human service providers
## What Services Can Members Receive Through the Pilots?

North Carolina’s 1115 waiver specifies 29 services that can be covered by the Pilot. Examples include:

### Housing
- Housing navigation, support and sustaining services
- Inspection for housing safety and quality
- Housing move-in support
- Essential utility set-up
- Home remediation services
- Home accessibility and safety modifications
- Healthy home goods
- One-time payment for security deposit and first month’s rent
- Short-term post hospitalization housing

### Food
- Food and nutrition access case management
- Evidence-based group nutrition class
- Diabetes Prevention Program
- Fruit and vegetable prescription
- Healthy food box (pick-up or delivered)
- Healthy meal (pick-up or delivered)
- Medically Tailored Home Delivered Meal

### Transportation
- Reimbursement for health-related public or private transportation
- Transportation case management

### Interpersonal Safety
- Interpersonal safety case management
- Violence intervention services
- Evidence-based parenting curriculum
- Home visiting services
- Dyadic therapy

### Cross-Domain
- Holistic high-intensity enhanced case management
- Medical respite
- Linkages to health-related legal supports

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Pilot services will be reimbursed through three payment types: (1) Fee for Service (e.g. Healthy Food Box, Parenting Curriculum); (2) PMPM (e.g. Housing Navigation, IPV Case Management); (3) Cost-based reimbursement up to a cap (e.g. Healthy Home Goods; Transportation)
NCCARE360 Overview

NCCARE360 is the first statewide network that unites health care and human services organizations with a shared technology that enables a coordinated, community-oriented, person-centered approach for delivering care in North Carolina. NCCARE360 helps providers electronically connect those with identified needs to community resources and allow for feedback and follow up.

NCCARE360 Partners:

- NCCARE360 is fully statewide as of June 2020
- NCCARE360 Network:
  - Over 2,500 community-based organizations with over 4,600 programs in the NCCARE360 network.
  - NC Health Systems on NCCARE360: Cone Health, WakeMed, Vidant, UNC Health, Duke Health
  - All Medicaid Pre-Paid Health Plans and LME-MCOs on NCCARE360
- Client Served (as of October 2021)
  - Over 76,500 people served through NCCARE360
  - Over 202,810 referrals or cases created in NCCARE360
  - 74% of service episodes in NCCARE360 resolved
COVID-19 Quarantine and Isolation Supports

Support Services Program (29 counties): Innovative new program to assist individuals in targeted counties who need access to primary medical care and supports such as food or a relief payment to successfully quarantine or isolate due to COVID-19:

1. **Nutrition assistance**, including home-delivered meals and food boxes
2. **A one-time COVID-19 relief payment** to help supplement lost wages or the inability to look for work while in isolation/quarantine and to be used on basic living expenses
3. **Private transportation** provided in a safe manner to/from testing sites, medical visits, and sites to acquire food
4. **Medication delivery**
5. **COVID-related over-the-counter supplies**, such as face masks, hand sanitizers, thermometers, and cleaning supplies
6. **Access to primary medical care** to manage COVID recovery will also be provided through telehealth services through Community Health Workers (CHWs).

Non-Congregate Shelter Program (statewide): Collaborative effort between the State, counties and local partners to secure non-congregate shelter for individuals with no other safe place to quarantine, isolate, or social distance due to COVID-19.

2 options for reimbursement:
1. Local partners desiring state-centric coverage through NCEM (required MOA)
2. Local partners seeking direct reimbursement from FEMA

Braided various sources of federal CARES Act funding, State Medicaid dollars, & FEMA reimbursement
Key Lessons Learned from COVID-19 Quarantine & Isolation Supports Program

• **Capacity of vendors is extremely important**
  - Cash reserves and need for up-front funding
  - Staff capacity or partnerships
  - Experience with technology, data monitoring, and reporting

• **Relationships with community members and organizations is key**
  - Trusted members of the community and trusted local organizations were vital in reaching NC residents
  - Existing partnerships enabled the program to launch and scale quickly

• **Need for technical assistance and learning collaboratives**
  - High need for in-depth, one-on-one technical assistance and training as well as collaborative forums for vendors to share experiences, issues, and lessons learned

• **Need for the Department to be nimble, iterative, and collaborative**
  - Focus on speed and simplicity
  - Iterated regularly in response to real-time learnings
  - Cross-divisional effort (Division of Social Services, Medicaid, Office of Rural Health, Office of Healthy Opportunities)

• **Early Results**
  - Early results show that the combined presence of Support Service and CHW programs was associated with a 1.2-1.5 percentage point lower COVID-19 positivity rate at the county level. This represents a 12-15% decrease in positivity rates relative to control counties.
  - Over 70% of support services were delivered to historically marginalized populations.