



North Carolina Integrated Health Care Delivery Systems

Phone: 919.527.6440 • Fax: 919-733-8300

2015 Profile

<http://www.ncdhhs.gov/divisions/orh>

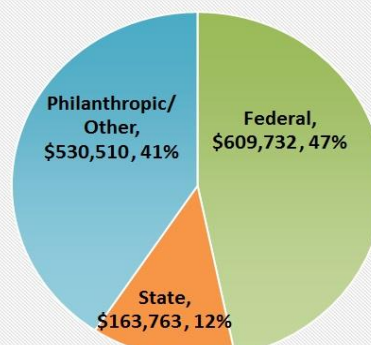
Project Lazarus: Chronic Pain Initiative (CPI)

- The use of opioids for pain treatment and the potential diversion and misuse of opioids has risen 160% in the US in the last ten years. This is reflected in the deaths of 11.4 per 100,000 North Carolina residents, ranking the state No. 22 in deaths by unintentional poisonings.
- During 2013, there were 3,120 visits to NC emergency departments (EDs) with a primary diagnosis of opioid poisoning or overdose at an estimated cost of \$10.1 million.
- CPI is a multi-year statewide substance abuse initiative designed to address this problem. Training is made available to primary care providers, pharmacists, ED staff, Community Care of North Carolina (CCNC) care managers and public health departments to address drug-seeking behavior, opioid abuse and safe prescribing practices. Pain specialist physicians provide consultation.
- Naloxone, an opioid antagonist medication, is distributed to help prevent overdose deaths.
- CPI is operated by CCNC with funding from the Kate B. Reynolds Charitable Trust and a Medicaid matching grant through the ORH. The IHCD team provides contract monitoring and technical assistance in collaboration with the NC Foundation for Advanced Health Programs.
- For more information on CPI, go to <https://www.communitycarenc.org/population-management/chronic-pain-project>.

Perinatal Quality Collaborative of North Carolina (PQCNC):

- PQCNC is a multi-year statewide initiative focused on improving maternal hospital care and reducing avoidable, high-cost inpatient services. Most of the improvements occur in 55 hospitals affiliated with NC BCBS.
- Many PQCNC projects have advanced Medicaid's Obstetrical Medical Home Model objectives.
- The avoidance of 4,669 Cesarean section births over the past five years has resulted in an estimated cost savings of \$18.6 million for hospital charges.
- During 2013, the average hospital length of stay for infants with Neonatal Abstinence Syndrome was reduced by 33.3%, from 21 to 14 days, with no increase in readmissions. As the majority of these stays are in Neonatal Intensive Care Units (NICUs), Medicaid will likely realize an ongoing \$7.2 million annual savings in avoidable hospital costs (9,996 NICU days at \$720 per day).
- The PQCNC initiative is led by the University of North Carolina at Chapel Hill with funding from the Blue Cross Blue Shield and Medicaid and is administered by the IHCD team.
- For information on all of the PQCNC projects, go to <http://www.pqcnc.org>.

**Integrated Health Care Delivery Systems
Funding Sources for SFY 2014-2015**





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Fostering Health NC (FHNC)

- The Center for Health Care strategies estimates that the health care costs for the foster care population are 3 times higher, and children in foster care experience higher rates of physical, dental, and mental health problems than any other group of children.
- To address these disparities, The Duke Endowment and Medicaid have funded FHNC. ORH administers this initiative in partnership with the NC Pediatric Society. FHNC is a statewide expansion of an existing initiative to enhance care coordination of children in NC's Medicaid supported foster care program.
- **FHNC focuses on four areas to improve care coordination to children in foster care**
 - Leveraging technology: FHNC partners with Community Care of NC (CCNC) to make the Informatics Center Provider Portal available to local Department of Social Services (DSS) offices/agencies through care coordination agreements.
 - Training Personnel: FHNC provides training to providers, DSS staff, CCNC network staff, care managers, and parents (foster and biological) on a wide array of topics including: American Academy of Pediatrics standards of care, medication management, and more.
 - Changing Process: FHNC provides technical assistance and consultation to medical networks and practices, and local departments of social services to train on sharing health information, changes in work flow and processes, and improving communication.
 - Informing Policy: FHNC provides education and discussion opportunities to stakeholders and pediatric practice managers regarding policies affecting the foster care population, including juvenile justice.

Technical Assistance in Graham County and Western Region:

- Provides technical assistance for communities and safety net providers seeking to improve access for vulnerable populations through integrated systems of care and innovative, strategic planning.
- Partnered with Graham County government in exploring opportunities to expand medical services in the community, such as HealthNet grants supporting a school based health center and small free clinic through the Graham County Health Department.
- Over the past three years, the IHCDs team provided technical assistance in the form of grant writing, research and analysis, and budget administration in support of Cherokee, Swain, Graham, and Clay counties' efforts to plan for a multi-site free care event, with clinical providers and equipment supplied by the US Department of Defense and NC National Guard as part of an Innovative Readiness Training (IRT) mission.

The 'Appalachian Care' Medical Mission was held in Murphy and Bryson City over 11 days in June 2014, and **leveraged more than \$1.5 million** in primary care, dentistry, optometry, and behavioral health services for 8,069 individuals from 9 states, as well as, 9,850 veterinary procedures for 2,653 dogs and cats. As a result of successful first Appalachian Care Medical Mission in 2014, ORH was enlisted in 2015 by Swain County and Clay County to assist with planning and submission of a second IRT application to the Department of Defense for 2016.

If you have further questions, please contact:

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