Partnering in North Carolina to Support Access to Local Services and Resources

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North Carolina At-A-Glance

State Structure

- North Carolina's Department of Health and Human Services (NCDHHS) houses 33 divisions and offices, including both the state public health agency and Medicaid programs.

North Carolina Division of Public Health

- North Carolina Division of Public Health (NCDPH) includes 12 sections or offices providing programming and services to North Carolinians throughout the state.
- NCDPH is decentralized, with 86 local health departments providing services at the county level.

NC Medicaid

- NC Medicaid, which also includes the state's Children's Health Insurance Program, serves nearly 3 million North Carolinians, approximately 25% of the state's population.
- In fiscal year 2021, the agency had a budget of $16.8 billion in state and federal funds, with more than 96,000 enrolled providers.
- In 2018, the Centers for Medicare & Medicaid Services approved North Carolina's Section 1115 demonstration waiver, which includes provisions to allow coverage of non-medical health related services through the Healthy Opportunities Pilots that address health-related social needs.

Cross-Division Alignment and Collaboration

- NCDHHS, including both NCDPH and NC Medicaid, collaborates with private partners on NCCARE360, a statewide network that connects individuals living in the state to medical and non-medical community resources, such as food, transportation, and housing.
- NCCARE360 is the first statewide coordinated care network to electronically connect community members with identified needs to resources through community-based service providers.

Introduction

Since 2015, the North Carolina Department of Health and Human Services (NCDHHS) has prioritized supporting health-related social needs in response to the increasing number of North Carolinians impacted by challenges like housing insecurity, economic hardship, and food insecurity. The COVID-19 pandemic presented additional barriers to delivering and accessing health and social services for residents in need. Through leveraging existing and new partnerships, NCDHHS has made strides in increasing access to healthcare and social services for people in North Carolina, in part by supporting local health departments (LHDs) and community-based organizations (CBOs).

This profile is part of an initiative, led by the Association of State and Territorial Health Officers (ASTHO) and the Center for Health Care Strategies, which aims to better understand how Medicaid and public health agencies collaborate. This profile, informed by interviews with Medicaid and public health officials, describes the collaboration between NCDPH and NC Medicaid with a focus on NCCARE360 and the Healthy Opportunities Pilots (HOP).

NCCARE360, a community referral network, connects North Carolinians to community resources that promote health and well-being, such as non-medical transportation, access to healthy food, and housing referrals. NCCARE360 is a shared technology platform powered by Unite Us that allows healthcare providers, community-based organizations, and LHDs to assess for and identify current gaps to accessing community supports and to manage electronic referrals and track outcomes in real time. NCCARE360 promotes collaboration with local partners and is the result of a public-private partnership between NCDHHS and the Foundation for the Health Leadership and Innovation (FHLI) to better integrate social and medical care and services, particularly for people with high unmet social needs.

Authorized through the state's 2018 section 1115 demonstration waiver, NC Medicaid led HOP development through collaborations across NCDHHS. The pilots were designed to test Medicaid's financing of innovative approaches to support members' health-related social needs. HOP leveraged the existing infrastructure of NCCARE30 as part of the program design and enhanced its functionalities to meet the program requirements. Together, HOP and NCCARE360 have worked to more efficiently expand access to health and social services to North Carolinians.

Public Health's Role in the State Healthcare Safety Net

North Carolina's decentralized public health system aims to encourage frequent communication and foster collaboration between NC Medicaid, NCDPH, NC Division of Child and Family Well-Being (NCDCFW), and LHDs. Medicaid contracts with LHDs, NCDPH, and NCDCFW to support an array of clinical and social services throughout the state, including care coordination, hepatitis C testing, lead poisoning prevention, and newborn screenings. NCDPH, NCDCFW, and LHDs provide services to all state residents, regardless of insurance status, although some of their programs are funded through NC Medicaid and available only to eligible Medicaid beneficiaries. For more information on two of these programs, see a complementary report that highlights the partnership between NC Medicaid, NCDPH, and NCDCFW in operating their Care Management for High-Risk Pregnancies and Care Management for At-Risk Children initiatives.

Partnering with NCDPH, NCDCFW, and LDHs on program development and implementation to improve the healthcare safety net is central to NC Medicaid's work. As one Medicaid official said, "The state and local health departments help care for some of our most at-risk populations. Our care management model has evolved to ensure these critical services are maintained and strengthened." Similarly, when the NCDHHS Office of the Secretary began designing HOP in collaboration with NC Medicaid, they reached out to NCDPH and other NCDHHS colleagues. An official from NCDPH shared, "We were able to provide knowledge of the state's health and social needs to inform our Medicaid colleagues' development of the Healthy Opportunities Pilots."

COMMUNITY SUPPORTS AND SERVICES PROVIDED IN PARTNERSHIP BETWEEN NORTH CAROLINA AGENCIES

Launched in 2022, HOP operates in select regions of the state—eastern, western, and northeastern North Carolina—with three organizations serving as network leads: Access East, Inc, Community Care of the Lower Cape Fear, and Impact Health. These network leads support HOP participants in accessing Medicaid-covered non-medical services in their communities and manage a collection of human service organizations that can provide those services. Network leads coordinate with prepaid health plans (managed care plans) and care management teams (including LHDs). By implementing the pilot program, HOP aims to provide opportunities to expand resources through NCDHHS, close gaps between LHDs and NC Medicaid, and ultimately promote cross-agency partnerships between both organizations.

HOP is available to high-need Medicaid beneficiaries who have at least one social risk factor identified as well as an eligible physical or behavioral health diagnosis. While HOP is ambitious in scope, the pilots are estimated to only impact 4-6% of Medicaid enrollees in HOP regions.

When designing HOP, NCDHHS worked collaboratively across the department to identify high-impact housing, transportation, food, and interpersonal safety/toxic stress services. More information on this collaboration can be found in a complementary report from ASTHO and CHCS, and details on services covered through HOP can be found through the NC Medicaid Managed Care HOP Fee Schedule. Table 1 includes a description of some of the HOP services administered or overseen through the partnership between NCDPH, NCDCFW, NC Medicaid, and LHDs. The table is not intended to be exhaustive, and the breadth of services provided in collaboration between NCDHHS, LHDs, and community organizations extends beyond the table. Additional information about HOP services is available through the HOP website. Further details on what LHD clinical services are covered by NC Medicaid can be found through the Local Health Department Fee Schedules Archive.

Table 1: Community Resources and Services Provided in Partnership Between NCDPH, LHDs, and NC Medicaid through the Healthy Opportunities Pilots Program

PROGRAM	SERVICES	FUNDING SOURCE	MEDICAID PARTNERSHIPS AND FINANCING
Housing Services	Provides housing services to address housing insecurity, including safety inspections and improvement, a one-time payment for security deposit and first month`s rent, short-term post-hospitalization housing, healthy home goods, and move-in services with essential utility set-up.	Funded by Medicaid as part of HOP.	Administered by NCDHHS, Medicaid health plans, care management entities (including LHDs), network leads, and human service organizations, and available to eligible Medicaid beneficiaries. Managed care plans contract directly with care management entities (including LHDs) and network leads.
Transportation Services	Provides transportation services, including reimbursement for health-related public or private transportation, and transportation for case management services.	Funded by Medicaid as part of HOP.	Administered by NCDHHS, Medicaid health plans, care management entities (including LHDs), network leads, and human service organizations, and available to eligible Medicaid beneficiaries. Managed care plans contract directly with care management entities (including LHDs) and network leads.
Food Services	Provides resources to address food insecurity and promote nutrition through nutrition classes, healthy food boxes (pick-up and delivery), home delivered meals, fruit and vegetable prescriptions, and medically tailored meals.	Funded by Medicaid as part of HOP.	Administered by LHDs and available to eligible Medicaid beneficiaries. Managed care plans contract directly with LHDs.
Interpersonal Violence/Toxic Stress Services	Provides resources to promote overall well-being, reduce toxic stress, and enhance interpersonal safety. Services include holistic high-intensity case management, interventions for interpersonal safety or toxic stress, and health-related legal support.	Funded by Medicaid as part of HOP.	Administered by LHDs and available to eligible Medicaid beneficiaries. Managed care plans contract directly with LHDs.

Facilitating Easier Access to Community Resources and Referrals

In 2019, a public-private partnership of NCDHHS and FHLI launched NCCARE360, a statewide community resource and referral system. NCCCARE360's implementation partners are NC 211, Unite Us, and Expound Decision Systems. NCCARE360 allows health and social service organizations to communicate with and connect North Carolinians to local services and resources. The platform supports providers in making electronic referrals, communicating with clients in real time, sharing client information, tracking client outcomes, and ensuring accountability with community partners for service delivery. NCCARE360 launched in 2019 and expanded statewide to all 100 counties during the COVID-19 pandemic to allow for quicker pandemic emergency response.

As part of NCDHHS, NCDPH and NC Medicaid work with FHLI and NCCARE360 to ensure that the directory of resources is comprehensive and that relevant state-funded public health programs are onboarded to the platform. The NCCARE360 network includes community-based organizations, managed care organizations, LHDs, and healthcare providers of all sizes. Within the network, participants have access to community engagement teams, a resource directory, a closed looped referral system, and a call center that can serve residents throughout the state. As part of its administration of NCCARE360, FHLI also oversees grants to support the network, including providing financial support for selected CBOs, which has enabled CBOs to expand services and resources to meet the needs of more North Carolinians.

While all North Carolinians can use NCCARE360 regardless of insurance status, the referral platform has become a highly valuable tool for HOP providers and participants. HOP uses a "no wrong door" referral process to support local health service organizations and LHDs in connecting eligible Medicaid enrollees with services like food, housing, and transportation. This approach allows for multiple points of entry into HOP, with providers accountable for making referrals to other resources. To better ensure that participants are successfully connected to needed resources and services, HOP providers use the NCCARE360 platform to determine whether a referral was completed.

FACTORS FOR SUCCESSFUL CROSS-AGENCY COORDINATION

Both NC Medicaid and NCDPH mentioned the strong relationship between their divisions as critical to administering and providing input on programs like HOP and NCCARE360. Officials looking to strengthen Medicaid-public health collaboration can implement the following practices in their own states.

- **Embrace LHDs as partners in program implementation.** North Carolina's decentralized public health system emphasizes LHDs as key players in increasing access to care and resources across the state. NCDPH and NC Medicaid both shared that LHDs are critical stakeholders in program design and implementation, including programs related to the state's 1115 demonstration waiver. In reflecting on this model, one NC Medicaid official said, "Even as NC Medicaid transitioned to managed care, we knew we wanted to keep local health departments as a central partner."

- **Invest in technical assistance to support LHDs with Medicaid billing:** NC Medicaid and NCDPH recognize the importance of providing training and technical assistance to support local partners as service providers. As NC Medicaid embraces LHDs as partners in care management, NCDPH operates an internal team that provides dedicated technical assistance to help LHDs navigate Medicaid billing processes and communicates any barriers back to NC Medicaid. This team has improved communication across the divisions, resulting in stronger collaboration between state and local health departments.

- **Devote time and staff for training to support LHDs:** As NCDHHS began rolling out NCCARE360, they worked with NCDPH to recruit and support LHDs' engagement with the platform. In reflecting on NCCARE360, one public health official stated, "In order to do the screenings and closed loop referrals that NC Medicaid needed for the Healthy Opportunities Pilots, we needed a statewide tool. NCDHHS worked to ensure that our local health departments and CBOs were trained on NCCARE360 and felt supported making and managing referrals in their communities."

- **Connect with other state agencies as partners to improve access to healthcare.** Both Medicaid and public health officials also shared that their collaboration extends to other divisions as well, including the state's Division of Mental Health, Developmental Disabilities, and Substance Use Services and the Office of Rural Health. These kinds of partnerships allow NC Medicaid and NCDPH to better understand the full scope of governmental services Medicaid beneficiaries are accessing. One public health official stated, "We try to be in constant communication with Medicaid and other divisions as we all work to improve health initiatives, especially those related to our secretary's priorities, grounded in whole-person health and driven by equity."

OUTCOMES

Since launching in 2019, NCCARE360 has referred more than 100,000 people to critical health and social services across the state. The program's focus on closed-loop referrals has been successful; more than 90% of referrals made for those enrolled in HOP were accepted within three days of initiation, and more than 80% of referrals for all other participants were accepted within four days. The top five service referral needs made through NCCARE360 were food assistance, housing support, individual and family support, income support, and utility bill payment assistance. The NCCARE360 network also continues to expand across the state and currently includes more than 3,000 CBOs and 7,500 active programs.

As of July 2023, 12,876 Medicaid beneficiaries have received more than 76,582 services as varied as essential utility setup and access to fresh and healthy food through HOP. Additionally, as part of the Centers for Medicare & Medicaid Services requirements for section 1115 demonstration waivers, HOP will have publicly available data and is undergoing a comprehensive evaluation by researchers at the University of North Carolina. The evaluation will focus on understanding the effectiveness of covering non-medical services on improving health outcomes and state health expenditures. The results of the evaluation will be publicly available. States interested in learning more can monitor HOP-related outcomes through the NC Medicaid website as well as via Medicaid.gov.

OPPORTUNITY FOR GROWTH

Although NCCARE360 has successfully helped more North Carolinians access needed health and social services, health official interviewees shared that barriers to care persist in rural counties. More than 4.6 million North Carolinians live in rural communities, making up more than 30% of the state's total population, and access to health and social services in these rural communities remains difficult. As one NC Medicaid official shared, "Improving access to care and resources for people in rural areas is an important challenge for the state." NCCARE360 could serve as a critical connector to needed resources for those communities. As NCCARE360 continues to recruit more organizations and programs to join the network, they're focused on targeted outreach to partners, including LHDs, that serve rural communities to better address these barriers.

Looking Ahead

The strong collaboration between NC Medicaid and NCDPH has increased access to health and social services for thousands of individuals and families living in the state. Implementing NCCARE360 has improved communication between CBOs, LHDs, and state agencies; streamlined service delivery for individuals and families, particularly those living with low incomes; and helped bolster NC Medicaid's HOP program. By embracing and investing in support for local partners as well as collaborating across state agencies, North Carolina is a strong example for other states looking to better support access to health and social services statewide.