

NC Department of Health and Human Services

NC CHW Initiative Update

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September 20, 2019

North Carolina Community Health Center Association

NC Office of Rural Health at a Glance...

- Established in 1973
- First in the Nation
- 47 Employees (SFY 2019)
- Mission: Improve Access to Health Care in Rural and Underserved NC Communities
- Focus:
 - Rural and Underserved Communities
 - Health Care Safety Net
 - Partnerships



Programs at ORH



Placement and HPSA Services

Recruit providers and designates health professional shortage areas



NC Rural Health Centers

Supports state designated rural health centers that serve the entire community



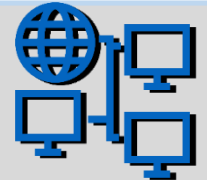
NC Community Health Grants

Supports the primary care safety net system with increasing access to health care for vulnerable populations



NC Farmworker Health Program

Supports medical, dental and educational services for members of the North Carolina agricultural labor force and their families



Rural Health Information Technology Program

Provides technical assistance to improve the use of Electronic Health Record (EHR) Systems and the use of health information exchange



NC Rural Hospital Program

Funds operational improvement projects for the benefit of all critical access hospitals and eligible small rural hospitals



NC Medication Assistance Program

Provides free and low-cost medications donated by pharmaceutical manufacturers to patients who cannot afford them



NC Statewide Telepsychiatry Program

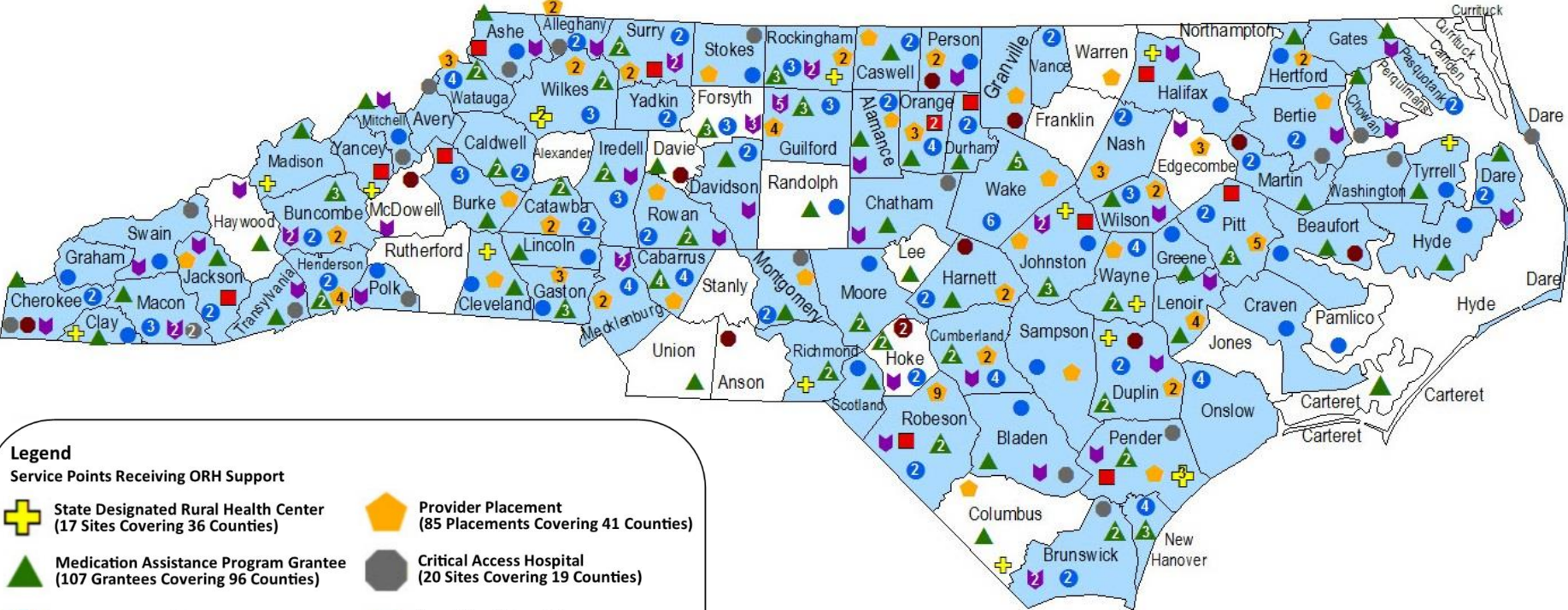
Supports psychiatric evaluation of patients through videoconferencing technology in emergency departments



NC Analytics & Innovations

Support data analytics, shortage designations, and pioneering efforts to improve health

SFY 2018 Map of ORH Coverage



Legend

Service Points Receiving ORH Support

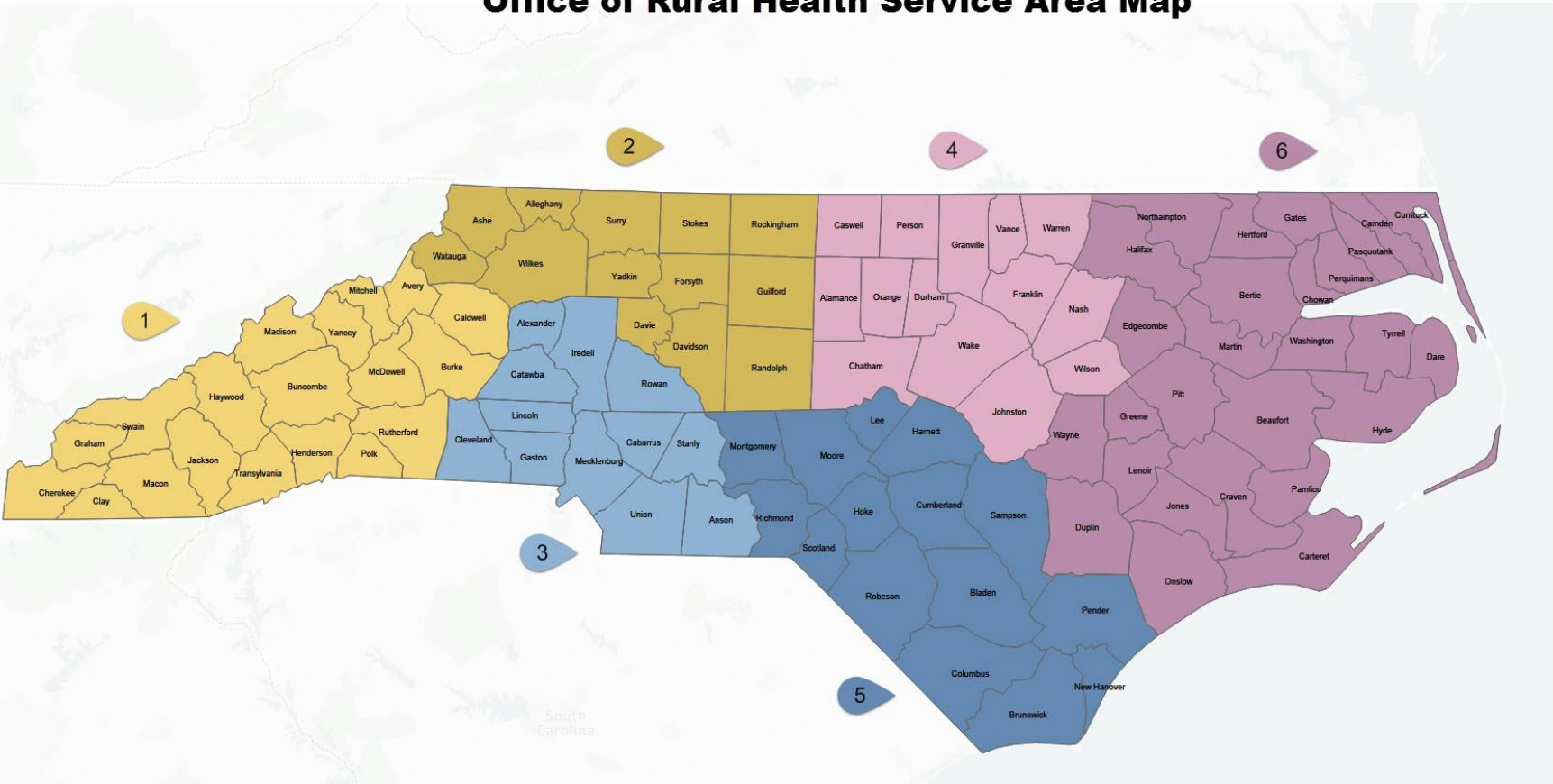
- + State Designated Rural Health Center (17 Sites Covering 36 Counties)
- ▲ Medication Assistance Program Grantee (107 Grantees Covering 96 Counties)
- Community Health Grantee (141 Grantees Covering 97 Counties)
- Farmworker Health Grantee (13 Grantees Covering 63 Counties)
- Health Information Technology Program Electronic Health Record Grantee (77 Counties)
- ◆ Provider Placement (85 Placements Covering 41 Counties)
- Critical Access Hospital (20 Sites Covering 19 Counties)
- Small Rural Hospital (12 Sites Covering 11 Counties)
- M Telepsychiatry Site (54 Sites Covering 41 Counties)

*Numbers inside of symbols indicate number of sites, grantees, or placements, based on symbol

Note: Sites may cover multiple counties in addition to its designated county location

NC Medicaid Managed Care Regions

Office of Rural Health Service Area Map



Medicaid Region

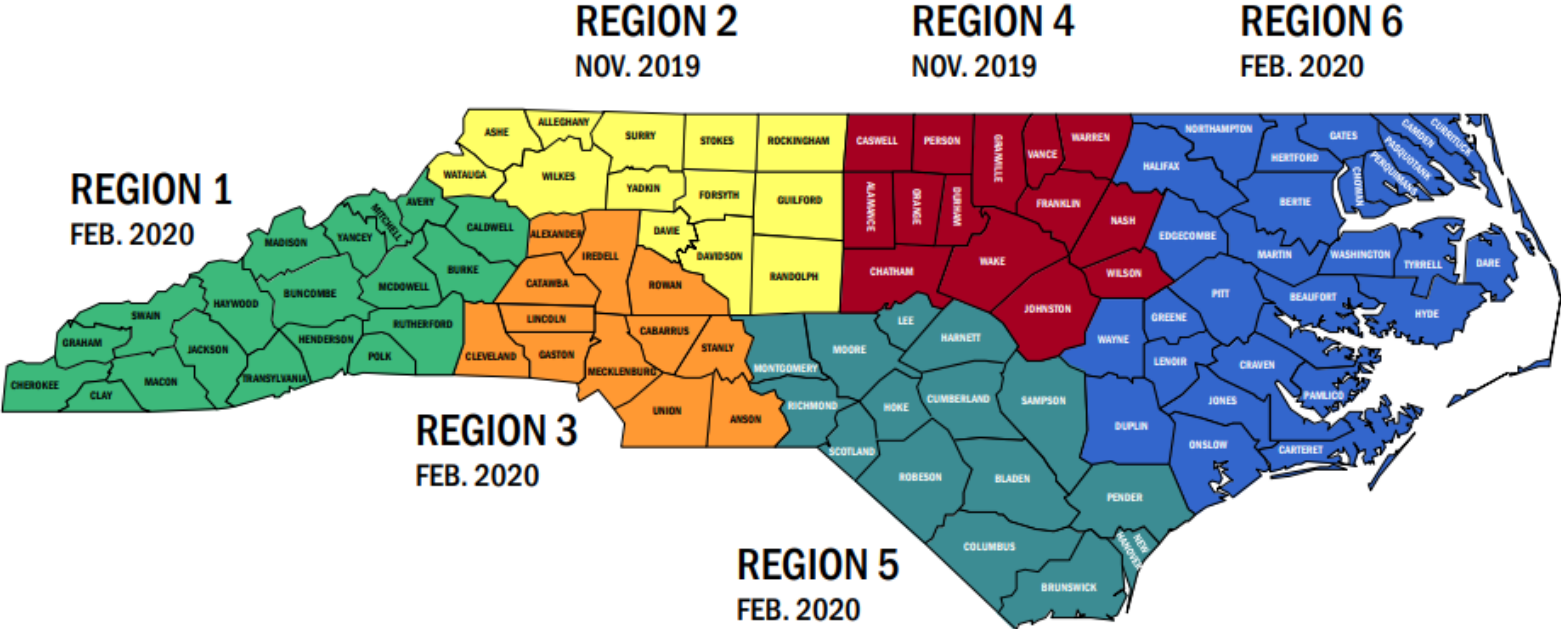
- Region 1
- Region 2
- Region 3
- Region 4
- Region 5
- Region 6

Team Name

- Eastern Team
- South Central Team
- Western Team

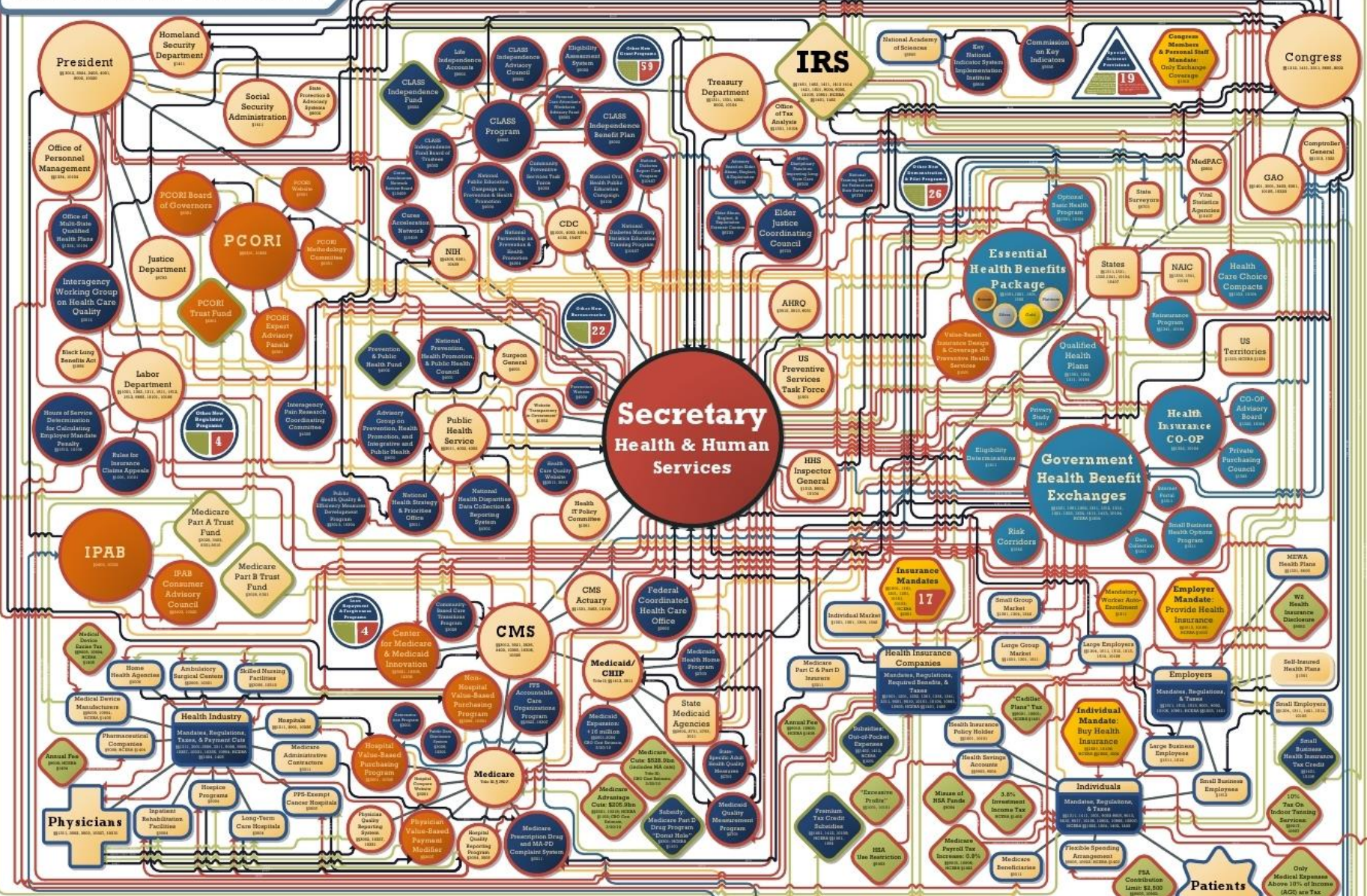
NC Medicaid Managed Care Regions

NC Medicaid Managed Care Regions and Rollout Dates



Rollout Phase 1: Nov. 2019 – Regions 2 and 4
 Rollout Phase 2: Feb. 2020 – Regions 1, 3, 5 and 6

Your New Health Care System



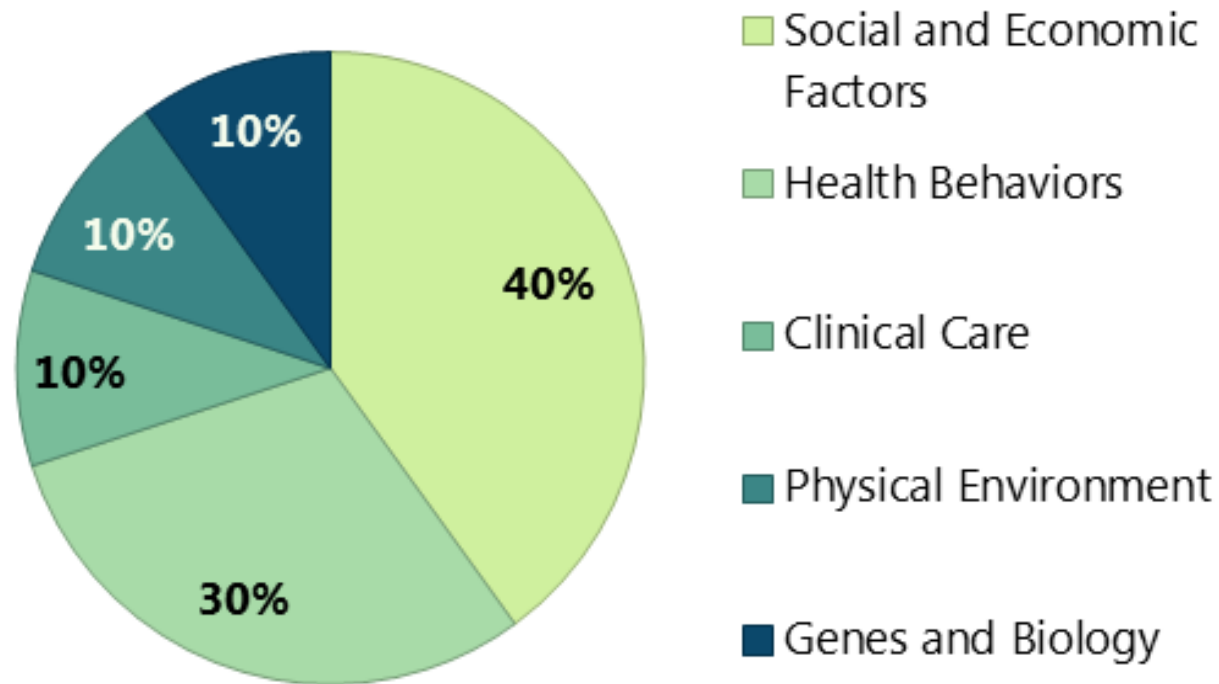
New Government		Expanded Government		Private		New Relationships	
	Rationing Potential		Mandates		Private Entity with New Mandates/Regulations/Responsibilities		Regulations/Requirements/Mandates
	Involvement in Health Insurance Market		Taxes & Monetary Fees/Penalties/Cuts		Government Financial Entity with New Inflows/Outflows		Reporting Requirements
	Other Expansions		Trust Fund (Rationing Potential)		State/Territory with Expanded Authority/Responsibility		Oversight
	Represents Bundles of Additional Entities		Other New Trust Funds/Monetary Benefits		Special Interest Provisions		Money Flows
							Consultation/Advisory/Info Sharing
							Structural Connections (Includes Existing)

<p>AGI: Adjusted Gross Income</p> <p>AHRQ: Agency for Healthcare Research and Quality</p> <p>CDC: Centers for Disease Control & Prevention</p> <p>CHIP: Children's Health Insurance Program</p> <p>CLASS: Community Living Assistance Services & Supports</p> <p>CMS: Centers for Medicare & Medicaid Services</p> <p>CO-OP: Consumer Operated & Oriented Program</p> <p>FFS: Fee-for-Service</p> <p>FSA: Flexible Spending Arrangement</p> <p>GAO: Government Accountability Office</p> <p>HHSR: Health & Human Services Reconciliation Act</p> <p>IRS: Health & Human Services Department</p>	<p>HSA: Health Savings Account</p> <p>IPAB: Independent Payment Advisory Board</p> <p>IEI: Internal Revenue Service</p> <p>MA-PD: Medicare Advantage Prescription Drug</p> <p>MAPAC: Medicare Payment Advisory Commission</p> <p>MEED: Medical Early Risk Detection</p> <p>CO-OP: Executive Auxiliary Linked Office Regional Systems</p> <p>MEWA: Multiple Employer Welfare Arrangement</p> <p>NAIC: National Association of Insurance Commissioners</p> <p>NIH: National Institutes of Health</p> <p>PCORI: Patient-Centered Outcomes Research Institute</p> <p>FPS: Prospective Payment System</p>
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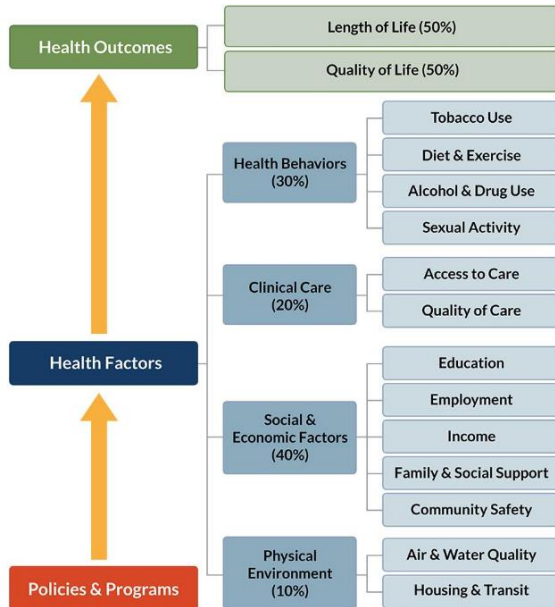
Patient Protection & Affordable Care Act, P.L. 111-149;
 Health Care & Education Reconciliation Act, P.L. 111-354
 Prepared by: Joint Economic Committee, Republican Staff
 Congressman Kevin Brady, Senator Murray, Republican
 Senator Sam Brownback, Ranking Member

What Determines Health?

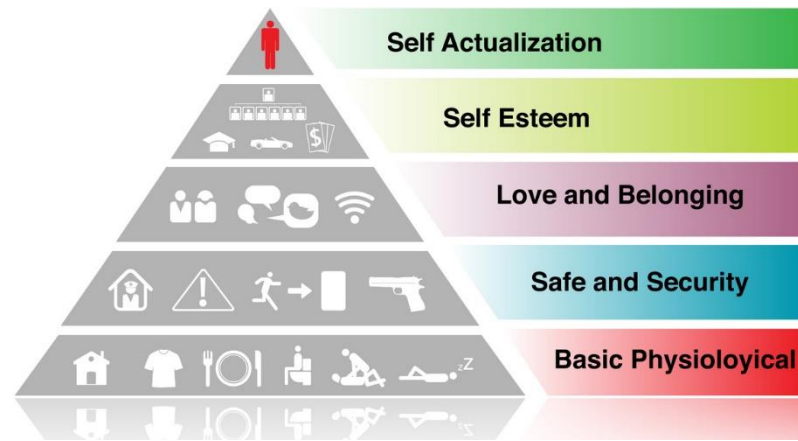
Factors Influencing Health and Well-Being



Source: Minnesota Department of Health



County Health Rankings model © 2016 UWPHI



Whole Person Health

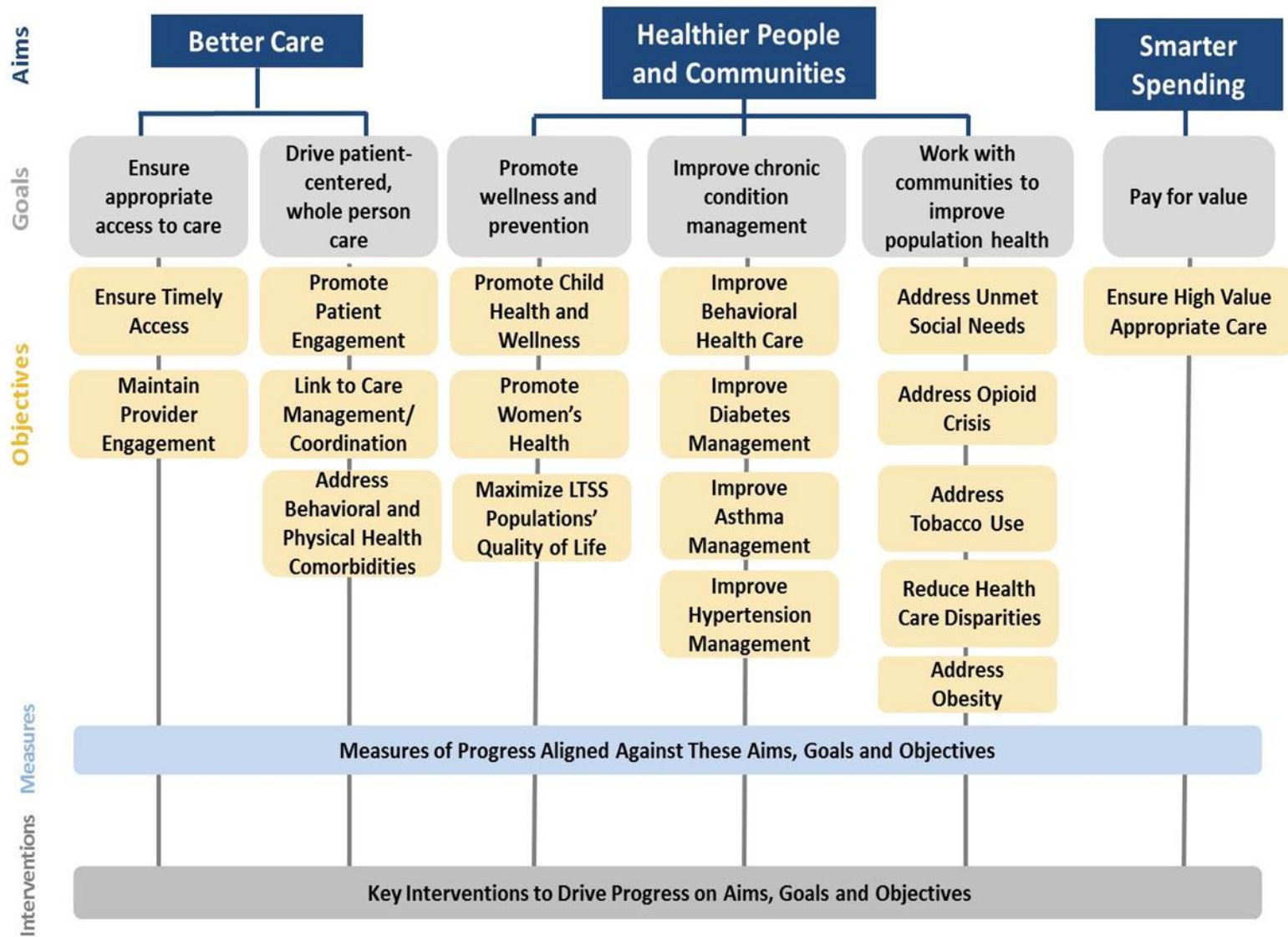
North Carolina DHHS Priorities

Opioid Crisis

Early Childhood

Medicaid Transformation

Social Determinants of Health



The Department's Quality Strategy details Medicaid Managed Care aims, goals and objectives for quality management and improvement and details specific quality improvement (QI) initiatives that are priorities for the Department.

Workforce Needs to Address Health

- **Develop, train and strengthen workforce needed to support SDoH/Trauma Informed Care**
- **Case Managers**
- **Staff of Advanced Medical Homes (Care Coordinators, Nutritionists, Health Coaches, Pharmacists, Advanced Practice Nurses, Social Workers)**
- **Community Health Workers**



AMERICAN PUBLIC HEALTH ASSOCIATION

For science. For action. For health.

A “frontline public health worker who is a **trusted member** of and/or has an **unusually close understanding of the community served**. This trusting relationship enables the CHW to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A CHW also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy.

NC CHW Initiative a Brief History...

Date	Activity
October 2014	NC Department of Health and Human Services (DHHS) team began exploring opportunities for a statewide CHW initiative
January 2015	DHHS team conducted CHW Program Inventory
April 2015	Statewide stakeholder meeting held to share results of Inventory and gather input on how to develop sustainable infrastructure for CHWs
June 2015	Assessment conducted on CHW initiatives in southeastern US states
December 2015	Second stakeholder meeting held to create plan for moving forward
February – September 2016	Workgroups formed to draft recommendations for core competencies, training and certification
November 2016	NC Community Health Worker Summit
April – June 2017	Regional Listening Sessions
June 2017	NC CHW Workforce Survey
May 2018	NC CHW Mission, Goals, Final Report and Recommendations
October 2019	Train the Trainer – Standardized CHW Core Competencies
January 2020	Testing Standardized CHW Core Competency Training

Mission

Establish a sustainable infrastructure that acknowledges the value of CHWs, supports their professional identity, and integrates their role in the healthcare team.

Goals

- Identify core competencies for NC CHWs**
- Recommend model training curriculum**
- Develop model certification process**
- Develop model program credentialing process**
- Devise strategies for reimbursement of services**

NC DHHS– Healthy Opportunities

- Updated Standardized Screening Questions for Health-related Resource Needs - July 9, 2018.

Please use with "Using Standardized Social of Health Screening (paper released April above.

Healthy Opportunities ... because the opportunity for health begins where we live, learn, work and play.



- **Regional Pilots**

Some Multi-Sector Commonalities

- **Community leaders engaged in health initiatives**
- **Cross-sector collaboration**
- **Resource sharing**
 - **Transportation**
 - **Food**
 - **Shelter**
- **Local healthcare providers committed to public health**
- **Active faith community**
- **Initiatives to combat substance abuse**

Four Roles

**Nine
Competencies**

**Standardized
Training**

**Certification
Processes**



**COMMUNITY HEALTH WORKERS
IN NORTH CAROLINA:
CREATING AN INFRASTRUCTURE
FOR SUSTAINABILITY**

**Final Report and Stakeholder Recommendations of the
North Carolina Community Health Worker Initiative**

Community Health Worker Roles

Cultural Liaisons

Health Navigators

Health and Wellness Promoters

Advocates



9 Core Competencies

Communication Skills

Interpersonal Skills

Service Coordination Skills

Capacity Building Skills

Advocacy Skills

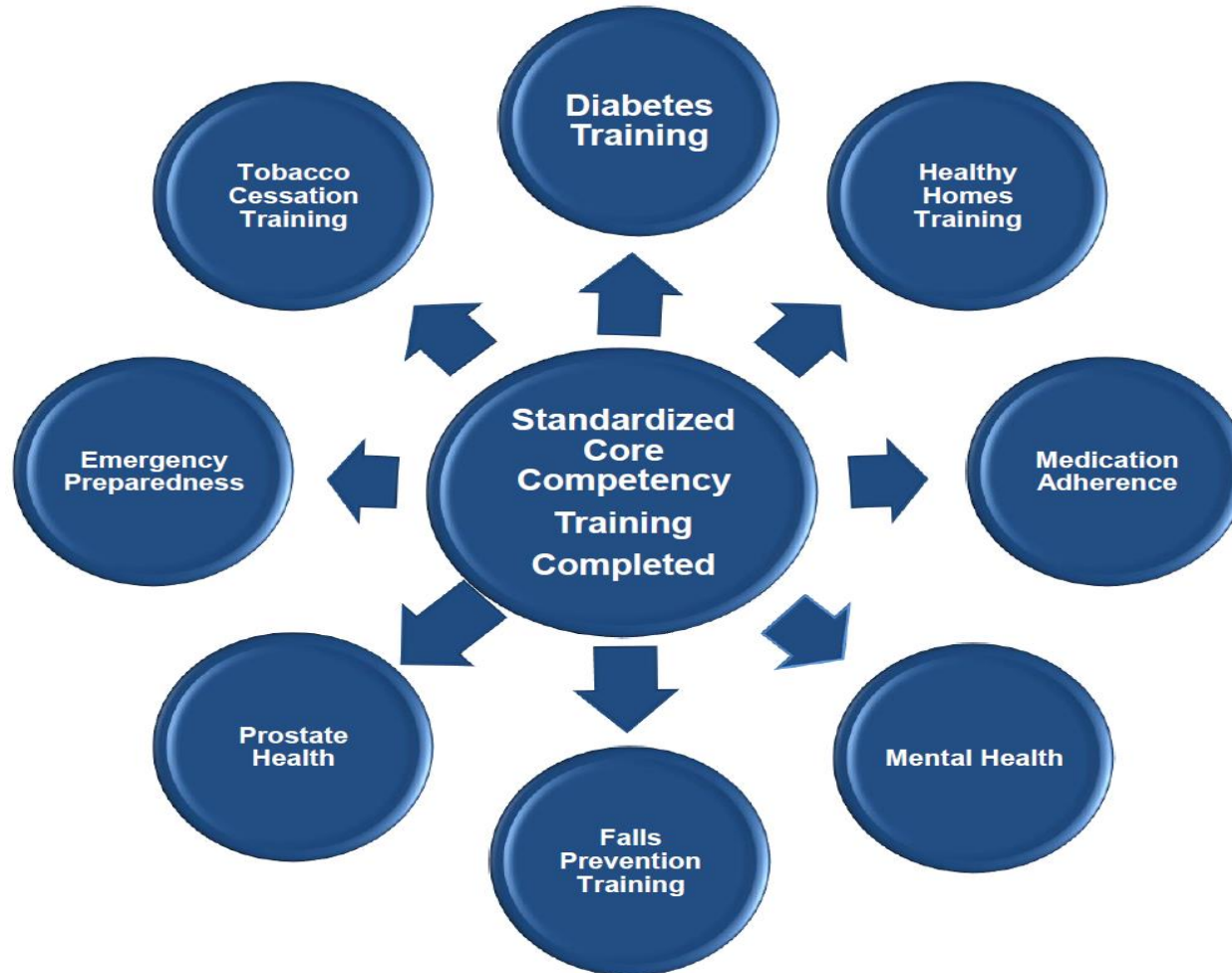
Education and Facilitation Skills

Outreach Skills

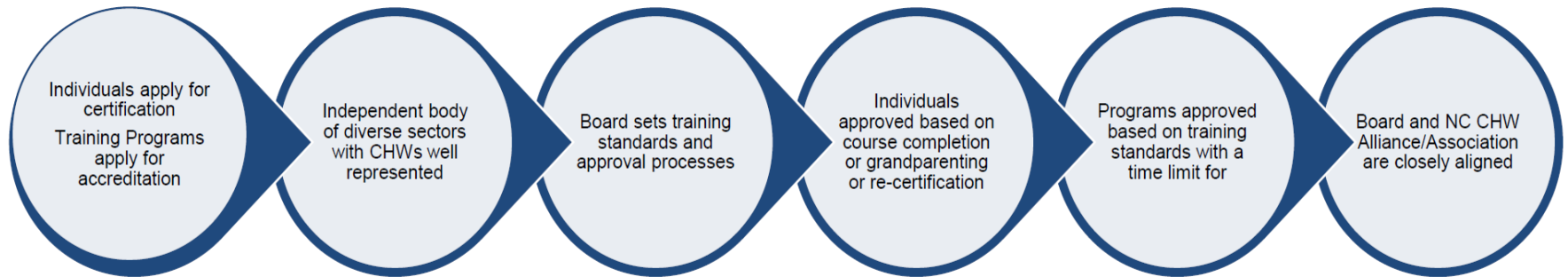
Knowledge Base

Personal Skills and Development

Vision for a Certified Community Health Worker



Vision for the NC CHW Certification and Accreditation Board



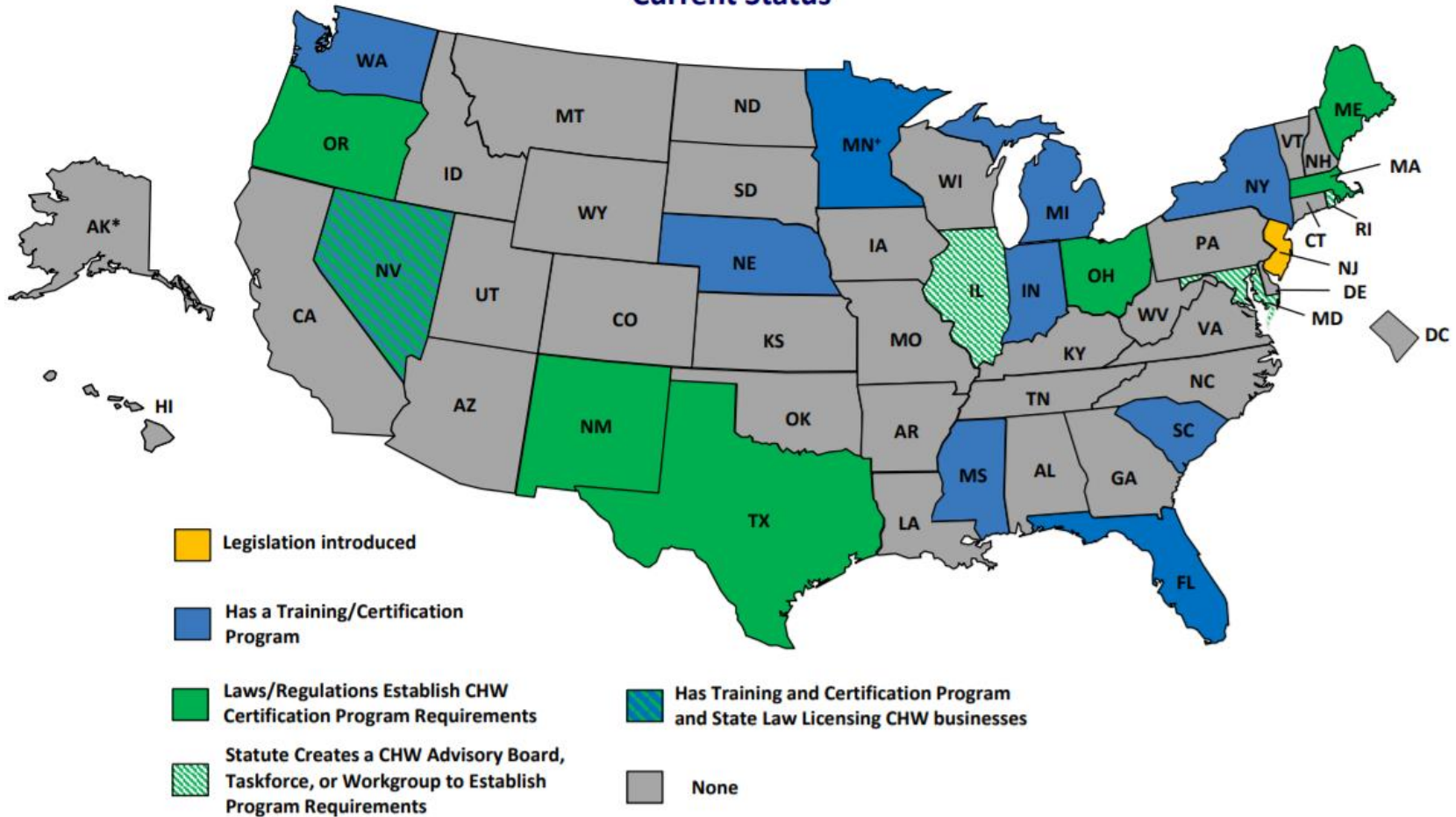
Building a Standardized CHW Core Competency Curriculum

- **Convene Work Group**
 - Universities, health care providers, government, philanthropy
- **Test**
 - 6 community colleges across the state
- **Review and Tweak**
 - Workgroup, community colleges, AHEC, CHWs
- **Expand**
 - Community colleges statewide
- **Certify**
 - Certification and accreditation board



Community Health Workers (CHWs) Training/Certification Standards

Current Status



*AK does not have a state-run CHW training program, but statutorily provides community health aide grants for third-parties to train community health aides.

+MN also allows Medicaid payments for certified CHW services

Last updated: 1/17/2017

Summary






- **Healthcare delivery is changing in NC and across the nation**
- **Resources are available to improve health, not just healthcare**
- **Communities provide valuable information to help direct resources and efforts**
- **Team-based approaches to patient care can greatly improve overall health**

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North Carolina Department
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Services Website

North Carolina Office of
Rural Health Website

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