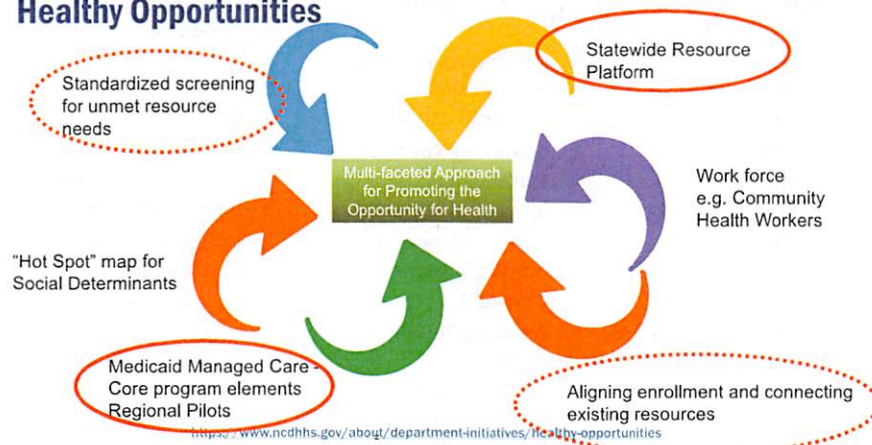


## Healthy Opportunities

- FAQ - Regional SDOH Pilots
- The NC Resource Platform

December 18, 2018

### Creating the Statewide Framework and Infrastructure for Healthy Opportunities



## 3 Specified Roles:

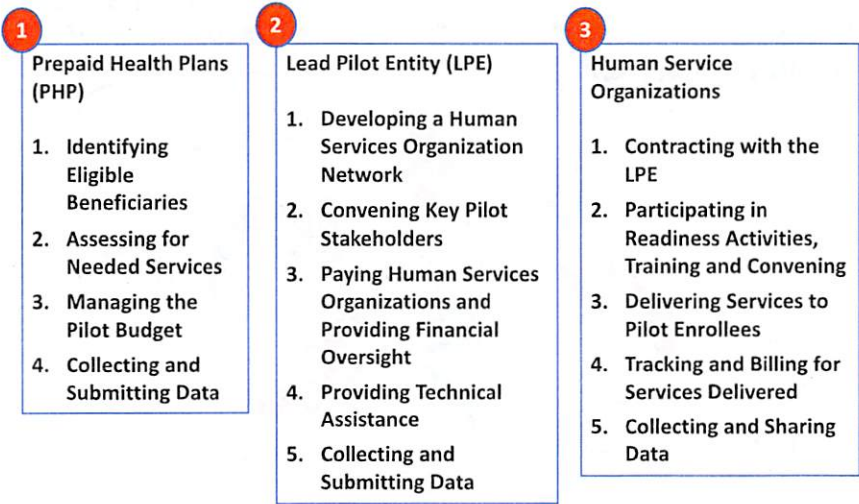
Source:



1. Prepaid Health Plans (PHP)
2. Lead Pilot Entity (LPE)
3. Human Service Organizations



## Key Pilot-Related Responsibilities



**Role #2: LPE Timeline**

**Process/Time Line**

- Early 2019: Request for Information (RFI)
- Mid 2019: Request for Proposals (RFP)
- RFP will determine LPEs/ Pilot Regions
- Late 2019: Award LPEs/ Pilot Regions
- 2020: Full year of capacity building for LPEs and regions
- January 1, 2021: Begin Service Delivery
- October 31, 2024: End Pilots (at end of 1115 waiver)

Source: SDOH Pilots - NCIOM ACC 10-18-18

**Role #1: PHP Determines Pilot Eligibility**

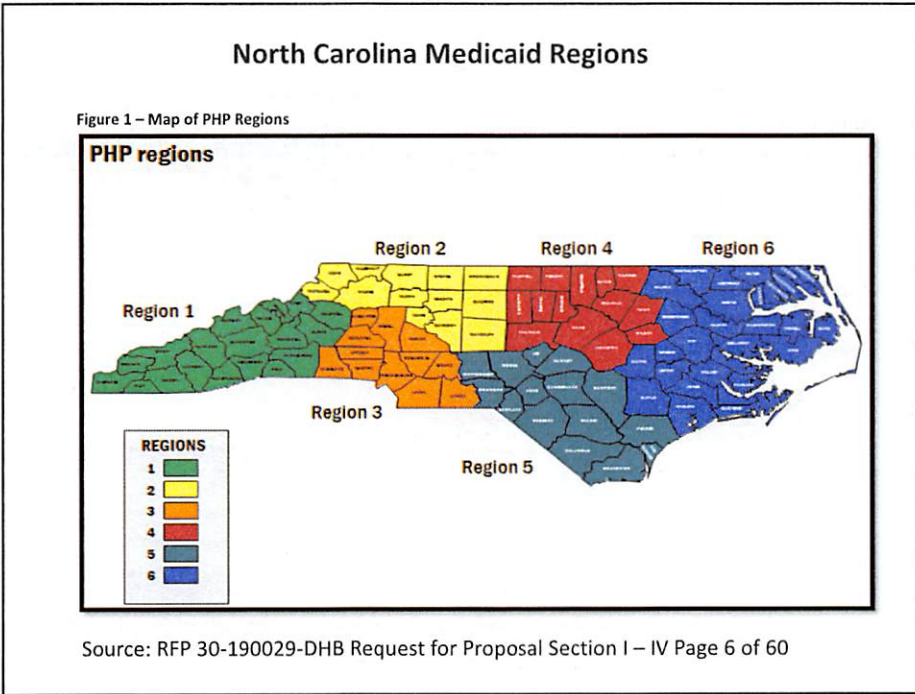
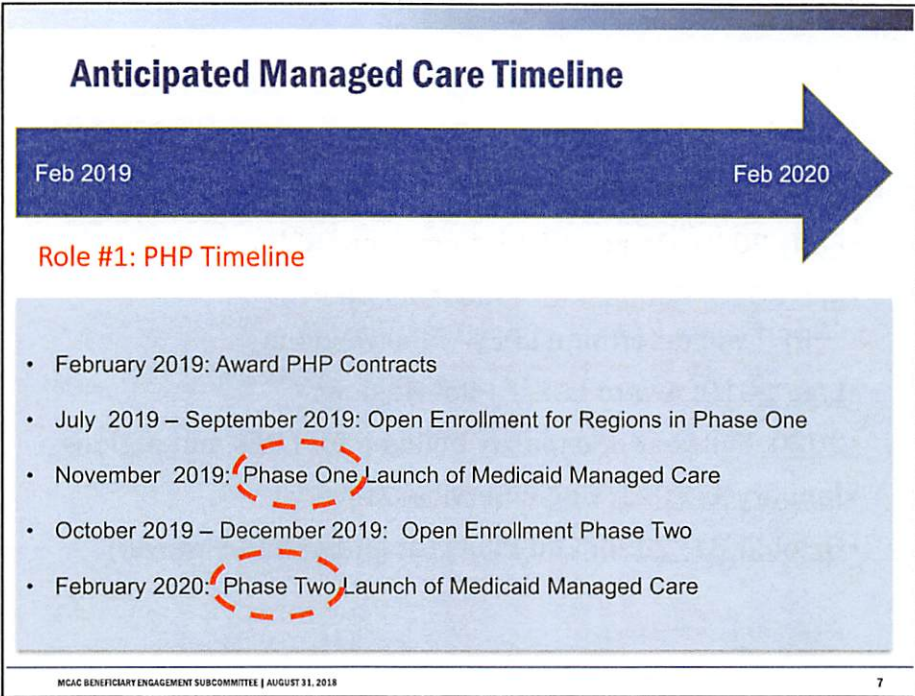
Beneficiaries eligible for enhanced case management pilot services are enrolled in a PHP (either in a standard plan, BH I/DD tailored plan, or specialized plan) and must also meet at least one needs-based criteria (as described in Table 1) and at least one risk factor (as described in Table 2).

Table 1: Needs-Based Criteria


Eligibility Category	Age	Needs-Based Criteria (at least one, per eligibility category)
Adults	22+	<ul style="list-style-type: none"> <li>• 2 or more chronic conditions. Chronic conditions that qualify an individual for pilot enrollment include: BMI over 25, blindness, chronic cardiovascular disease, chronic pulmonary disease, congenital anomalies, chronic disease of the alimentary system, substance use disorder, chronic endocrine and cognitive conditions, chronic musculoskeletal conditions, chronic neurological disease and chronic renal failure, in accordance with Social Security Act section 1945(h)(2)</li> <li>• Repeated incidents of emergency department use (defined as more than four visits per year) or hospital admissions.</li> </ul>
Pregnant Women	n/a	<ul style="list-style-type: none"> <li>• Multifetal gestation</li> <li>• Chronic condition likely to complicate pregnancy, including hypertension and mental illness</li> <li>• Current or recent (month prior to learning of pregnancy) use of drugs</li> </ul>

Table 2: Risk Factors

Risk Factor	Definition
Housing insecurity	Housing insecurity, as defined in 42 C.F.R. § 254(b)(5)(A), and housing insecurity in the Accountable Health Communities Health Related Screening Tool. <sup>12</sup>
Food insecurity	As defined by the US Department of Agriculture commissioned report on Food Insecurity in America: <sup>13</sup> <ul style="list-style-type: none"> <li>• Low Food Security: reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake.</li> <li>• Very low food security: Reports of multiple indications of disrupted eating patterns and reduced food intake</li> </ul>
Transportation insecurity	Defined based on questions used to establish transportation insecurities in the Accountable Health Communities Health Related Screening Tool. <sup>14</sup>
At risk of, witnessing, or experiencing interpersonal violence	Defined based on questions used to establish interpersonal violence in the Accountable Health Communities Health Related Screening Tool. <sup>15</sup>



**Role #1: PHP**



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

Division of Health Benefits | NC Medicaid

RFP #30-190029-DHB Bid Opening  
Prepaid Health Plans  
October 19, 2018 at 2:00 PM

Bids were received from eight offerors.

OFFEROR NAME
Aetna
AmeriHealth Caritas North Carolina
BCBSNC – Healthy Blue
Carolina Complete Health
My Health by Health Providers
Optima Health
United Health Care
WellCare Health Plans

Four (4) of the Eight (8) will be selected as statewide MCOs ... and potentially 1-2 PLE awards will be made per Region

**Role #2: Lead Pilot Entity (LPE)**

**Lead Pilot Entity**

- LPEs will:
  - Develop, manage, and oversee network of community-based organizations and social service agencies that will provide pilot services
  - Assist care managers with connecting beneficiaries to the right resources
  - Facilitate payments to CBOs and data collection
- LPEs must have:
  - Strong connections to community resources
  - Strong financial and data management abilities
- LPEs will have access to capacity building funding to gain the necessary infrastructure
- NC Resource Platform – NC Care 360 can be part of infrastructure

Source: SDOH Pilots - NCIOM ACC 10-18-18

### Role #3: Human Services Organizations

Service Sub-Category	Example of Services allowed for Medicaid dollars
Housing	Tenancy Support and Sustaining Services Housing Quality and Safety Improvement Services Legal Assistance One time payments for security deposit and first month's rent Short-Term housing post-Hospitalization
Food	Food Support Services Meal Delivery Service
Transportation	Non-emergency health-related transportation
Interpersonal Violence (IPV)/Toxic Stress	Interpersonal Violence-Related Transportation IPV and Parenting Support Resources Legal Assistance Child-Parent Support

Source: SDOH Pilots - NCIOM ACC 10-18-18

### Other Time Sensitive Elements

#### XIII. SCHEDULE OF DELIVERABLES FOR THE DEMONSTRATION

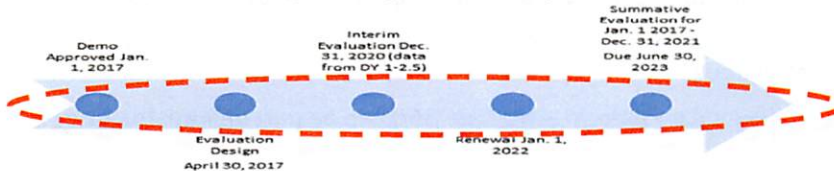
#### A. - Payment Rates

July 1, 2019	Enhanced Case Management and Other Services Service Reimbursement: Fee For Service Schedule/Cost-Based Reimbursement Sets
	Enhanced Case Management and Other Services Service Reimbursement: Bundled Payments

#### B. - Evaluation Design and Reports:

##### Submission Timelines

There is a specified timeline for the state's submission of Evaluation Design and Reports. (The graphic below depicts an example of this timeline). In addition, the state should be aware that section 1115 evaluation documents are public records. The state is required to publish the Evaluation Design to the state's website within thirty (30) days of CMS approval, as per 42 CFR 431.424(e). CMS will also publish a copy to the Medicaid.gov website.



Source: pages 48-50, CMS Authorization Letter dated October 19, 2018