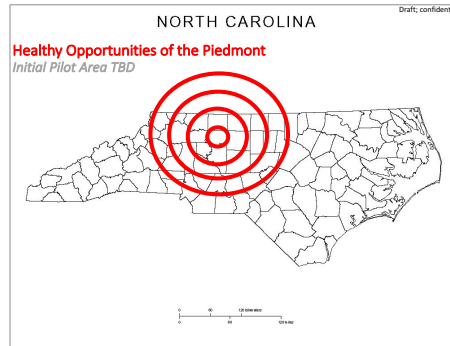


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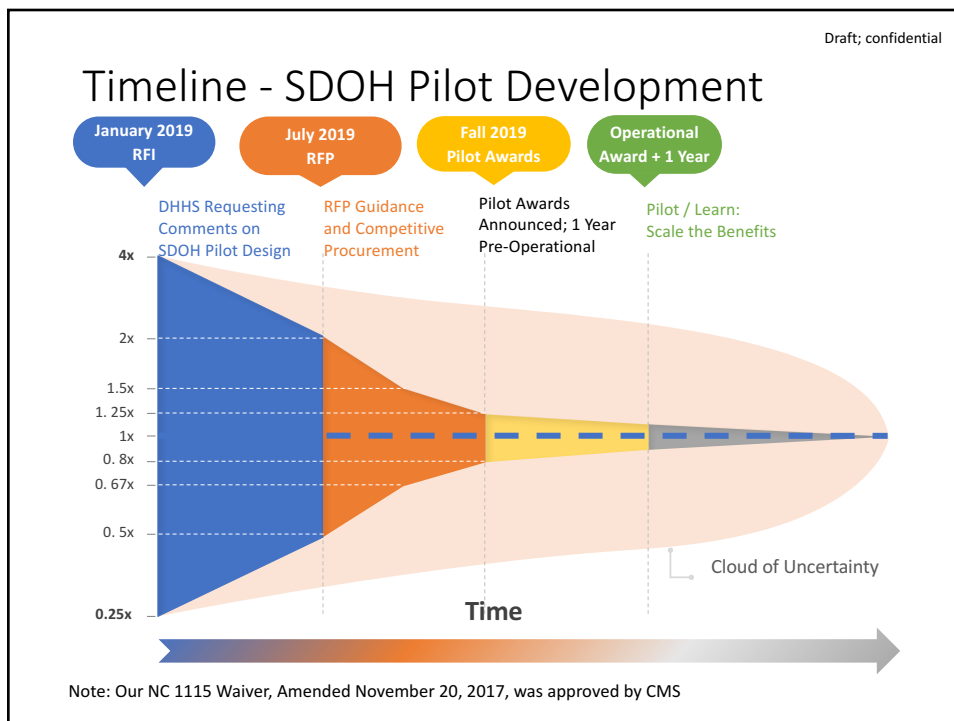
Healthy Opportunities of the Piedmont©

November 1, 2018
Discussion



Meeting Agenda / Objectives

- | | |
|-------------------------------------|--------------|
| 1. Timeline | slide 3 |
| 2. Naming our regional effort | slides 4-9 |
| 3. Determining an initial geography | slides 10-13 |
| 4. Organizing our response | slides 14-16 |
| 5. Governance / Talking about money | Slides 17-18 |



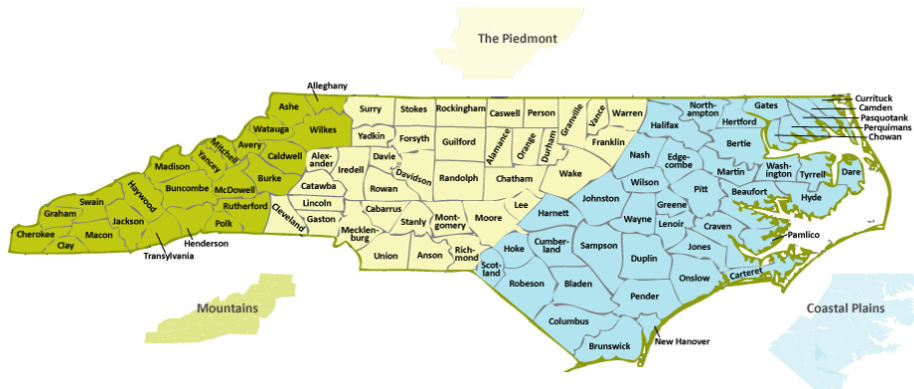
Naming Criteria

Regional SDOH Pilot

1. Describes what we do
2. Provides the audience a clue about the geography being served
3. Regionally inclusive to folks who are not in the initial service
4. Could be a good name when and if the pilot is expanded to cover all of counties that are designated within Medicaid Region 2

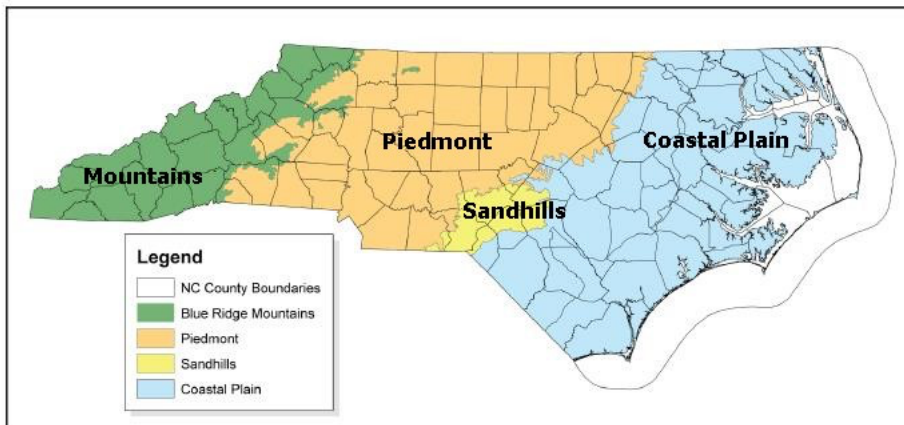
Our State Geography in a Snap: Three Regions Overview

Reprinted with permission from the [North Carolina Department of Public Instruction](http://www.ncpedia.org/geography/regions) website.



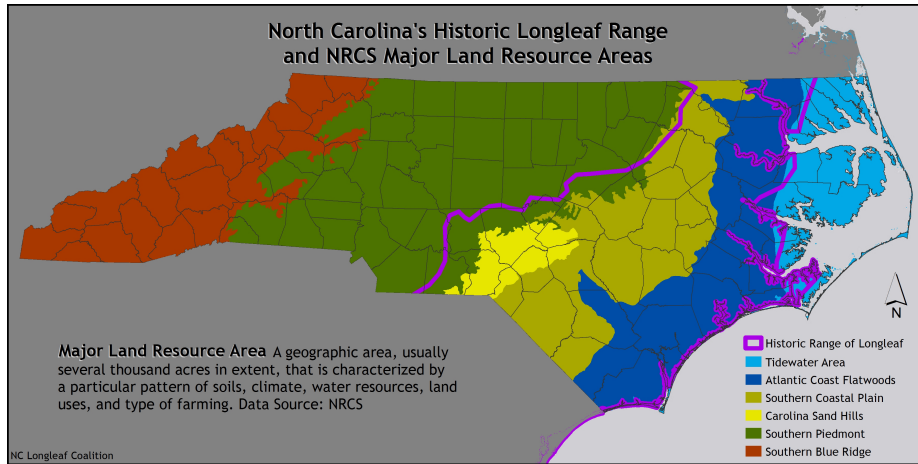
Source: <https://www.ncpedia.org/geography/regions>

Ecoregions As Landscape Boundaries



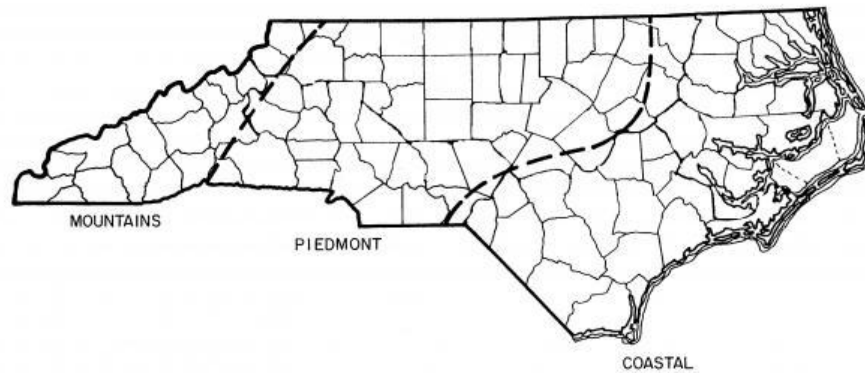
Source: <https://www.ncwildlife.org/Learning/Habitats>

Longleaf Pine Interactive Decision Support Tool on NC Forest Atlas

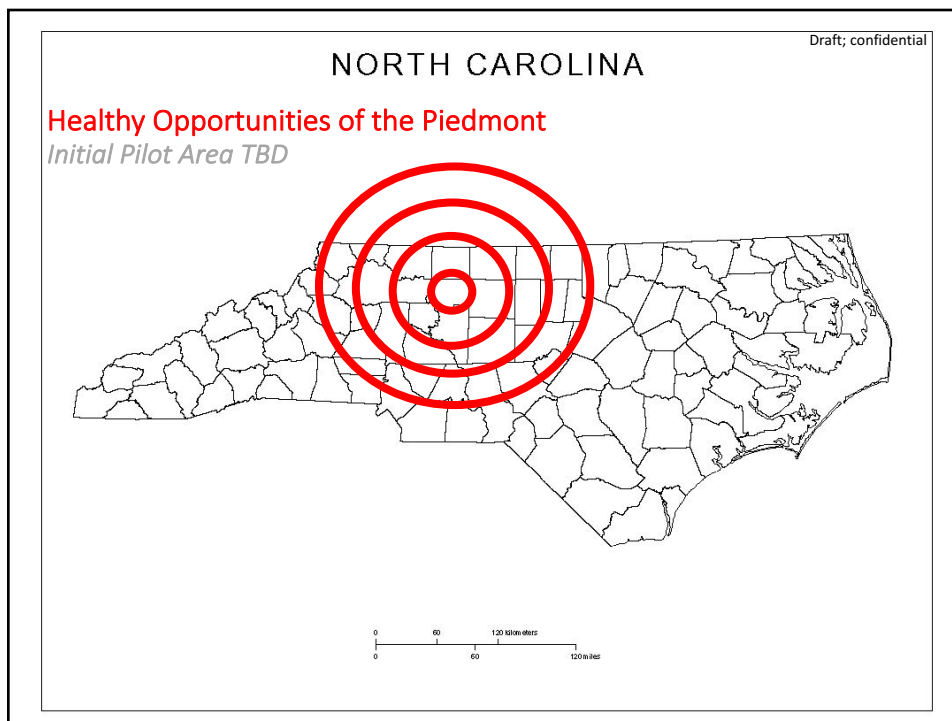


Source: http://www.nclongleaf.org/img/nc_mlra_nclc_website.jpg

What to Plant?



Source: <https://content.ces.ncsu.edu/extension-gardener-handbook/9-lawns>



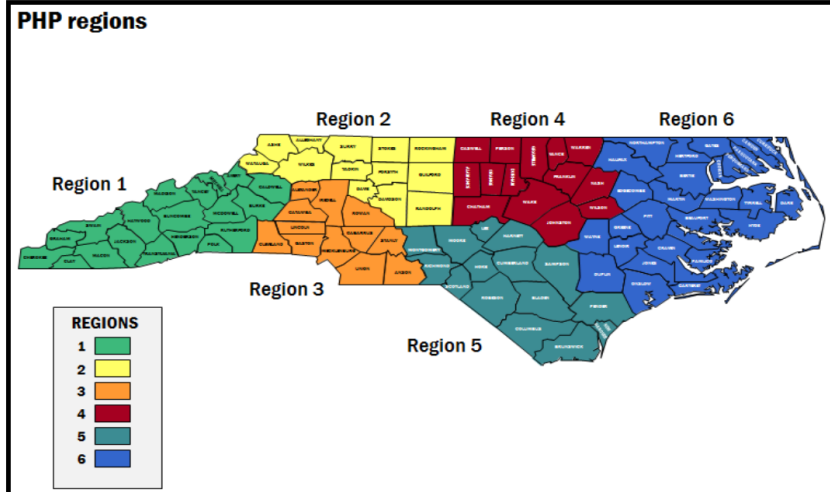
Initial Service Area Criteria

Regional SDOH Pilot

1. Contains 2-3 Counties
2. Provides both Urban and Rural settings and/or counties
3. Includes both Forsyth and Guilford along with others
4. Demonstrates existing capabilities within the SDOH framework that should be expanded, called out as best practice, and/or potentially replicated elsewhere

North Carolina Medicaid Regions

Figure 1 – Map of PHP Regions



Source: RFP 30-190029-DHB Request for Proposal Section I – IV Page 6 of 60

Welcome to the Piedmont Triad Region of NC !

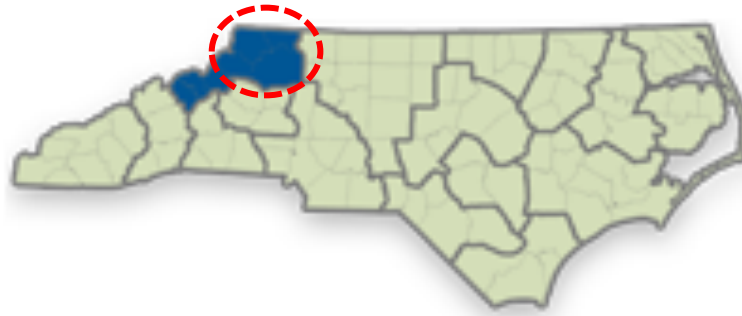
The Piedmont Triad is located in the southeastern US, in the central part of North Carolina. We are located halfway between New York and Florida and halfway between Washington DC and Atlanta GA . We are a 12 county region serving 1.6 million people. Twelve counties and 62 municipalities comprise the Piedmont Triad Regional Council.



Description	Ineligible Counties
Counties within PTRC that are Ineligible because they are outside Medicaid Region 2	Montgomery
Additional Counties within Medicaid Region 2 outside PTRC Service Area	Alleghany, Ashe, Watauga, and Wilkes

The **High Country Council of Governments** Also Serves Medicaid Region 2

High Country Council of Governments is the multi-county planning and development agency for the seven northwestern North Carolina counties of **Alleghany, Ashe**, Avery, Mitchell, **Watauga, Wilkes**, and Yancey. The High Country region is a voluntary association of towns and counties located in the northern mountains of North Carolina. The Council is one of 16 multi-county planning regions in the state and serves as a cooperative extension of local governments. The agency was established in 1974 by the member governments as provided for in NC General Statutes.



Organizing Our Response

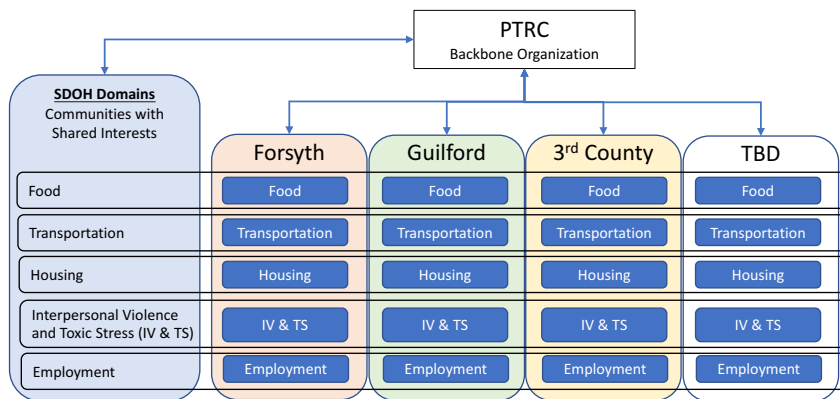
Regional SDOH Pilot

1. Be able to clearly articulate what we are already doing in our service area around the State's targeted areas of
 - a. FOOD,
 - b. TRANSPORTATION,
 - c. HOUSING,
 - d. INTERPERSONAL VIOLENCE, and
 - e. EMPLOYMENT
2. Determine how our Backbone Organization (PTRC) may best enable the most complete regional response possible
3. Create some type of working group/sub-committee structure to organize the required work efforts around both county specific and targeted SDOH domains

Draft; confidential

Governance - Example

How Should We Organize Our Regional Pilot Application/Efforts



What regional structures, alliances, and working groups already exist to accelerate our pilot specific efforts along geographic (vertical) and SDOH specific domains (horizontal)?

Draft; confidential

Inventory via a Common Resource Platform

Geography is another dimension to organize around

A "wicked problem" is a problem that is difficult or impossible to solve because of incomplete, contradictory, and changing requirements that are often difficult to recognize

Community Based Organization (CBO)	Food	Housing / Utilities	Transportation	Interpersonal Violence	Employment	Other Resources
AAA CBO	X		X		X	X
BBB CBO		X				X
CCC CBO	X				X	X
DDD CBO		X		X	X	X
EEE CBO	X	X	X	X	X	X
Etc.						

Do we organize around these specific domains?

How are we / can we be facilitating resource referrals via a common shared resource platform?

What is our present caring capacity in the county/region?
Some people are looking to answer this question quickly absent conducting an inventory and/or standardizing processes for measurement.

What efficiencies are potentially available as we work more closely together? As we begin to invite partners to fund additional capacity, can human service community based organizations also get better outcomes from fewer inputs?

Governance / Talking About Money

Regional SDOH Pilot

1. DHHS has indicated that the monies for Regional SDOH Pilots will be included in the premium dollars that PHPs receive for their Medicaid covered lives.
2. How are individual PHPs going to pass their premium dollars onto the Lead Pilot Entity (LPE)?
3. How does the LPE ensure that funds received from PHPs are equitably allocated to the community-based organizations doing the actual SDOH interventions and shared services?
4. How do we draw it out and describe our vision of how CBOs are involved in the governance of the pilot?

Page 17

How does the money gets shared among the CBOs?

RFI expected in January 2019 – what are our recommendations?

