## 6 Major Healthcare Changes: How You Can Prepare in a COVID-19 World



# About this Guide



Health care in America is rapidly and dramatically transforming - and the impact of these changes on individuals with limited resources is profound. From understanding how "value-based payment" schemes work to learning about what really impacts health (hint: the answer lies far beyond the walls of a traditional clinic), everything we thought we knew about health care just a few years ago has changed.

We believe there are at least 6 key healthcare shifts fundamentally changing healthcare not only in the Charlotte region, but across the US. These trends create both great challenges and great opportunities. These healthcare shifts have only been accelerated by the introduction of COVID-19.

In the pages that follow, we have identified these 6 huge shifts and their likely impact, and provide practical tips and links to learn even more about how you can prepare for these changes.





Value-Based Care



Partnerships are Essential



Place & Race Matter



Outcomes Start Early



Policy Chaos



The old days of paper records stored in file folders is over - staying 'in your lane' of just providing and tracking health interventions will no longer be sustainable especially with the arrival of COVID-19. In the approaching value-based payment world, all care providers will not only need to participate in new online coordinated care networks, but will need to be able to track and share data on a range of patient outcomes.

Consider North Carolina's recently launched NCCARE360, the first statewide network uniting technology and human service organizations through shared technology. Through the system, providers can electronically connect patients with identified needs to existing community resources. This offers a coordinated, community-based, person-centered approach, connecting North Carolinians to

behavioral health, clinical and social service partners to improve overall health and wellness. NCCARE360 was rolled out to 50 of the 100 NC counties in January 2020 and was implemented across the rest of North Carolina on June 1, 2020. It was originally intended to be implemented in Mecklenburg county by the end of the year but its implementation was accelerated due to COVID-19.

For safety net organizations interested in participating as providers of essential services for people on Medicaid, this means the traditional way of providing services and tracking outcomes is fundamentally changing. Non-clinical providers of human and social services must have the data tracking and data reporting infrastructure in place so that they can partner and share relevant data with other providers and funders. This will also help more accurately calculate the cost of care by looking at the overall utilization of services by clients.

#### **How Can We Prepare in a COVID-19 World?**



Evaluate your current practices against coming changes in technology and electronic records. When North Carolina starts the shift to value-based care through Medicaid Transformation, health care clinics and human service organizations must have data readily accessible as a minimal first step in to participate in upcoming value-based care payment models. The state has now introduced the bill SB808 "Medicaid Transformation Necessities" and if passed will be implemented January 2021.



COVID-19 has changed the way of medicine in NC in just a few months. Telehealth is now being used across North Carolina and it is here to stay. <u>Stay updated</u> on how COVID-19 is impacting telehealth and <u>know your resources</u>.



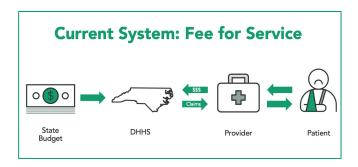
#### Shift to Value-Based Care

Value-based care will soon replace the current fee-for-service model. The healthcare "triple aim" of better care for individuals, better health for populations, and lower per capita costs is driving our health care in the US away from a fee-for-service payment system.

Across the country, states are shifting from a fee-for-service model of care to a system that incentivizes and pays providers based on good health outcomes. This shift is in high gear in the employer-based health insurance market – Blue Cross Blue Shield of North Carolina expects that this year more than half of its beneficiaries will see a provider who is financially responsible for the quality of cost of care – and they expect

this trend toward "value-based care" will accelerate. NC is one of only 10 states not already in a value-based care system for Medicaid. Last year, the state began to transition to a managed-care system, only to have to suspend the change because the legislature failed to pass a budget.

When executed well, value-based care offers a more predictable budget and lower healthcare costs with improved outcomes. Concerns about the change include confusion and more difficult access for beneficiaries. It will be important to advocate and create accountability for positive transformation so that we reap the benefits of lower costs, but in a system that creates better outcomes for everyone.





#### **How Can We Prepare in a COVID-19 World?**

There are a host of commercial products and health care consultants providing guidance on how clinics and health care agencies can prepare for this shift.



For a brief summary of some specific areas of opportunity to consider as clinics shift to a value-based payment system start with <u>HealthCatalyst's brief</u> <u>Healthcare Total Cost of Care Analysis: A Vital Tool Executive Summary.</u>

In terms of COVID-19, a managed care system would help improve the treatment of those whom have the Coronavirus due to how a more cohesive care network will exist between healthcare providers and patients. It will also help those who are not sick get care faster. <u>Learn more</u> about COVID-19 and its <u>impact on managed care</u>.



## Partnerships are Essential

Health outcomes are determined by far more than just genetics. Changes such as value-based care and digital changes to healthcare point to a larger conversation about social risk factors. There are a number of drivers that predict health outcomes, including a person's access to housing, food and transportation, or whether that individual is subject to interpersonal violence. These social risk factors are particularly impactful among people with lower resources. Amid COVID-19, these social risk factors are even more on display and people need help now more than ever.

Providers can offer high quality care, but if people don't have access to healthy foods, or there is mold growing in their house or they are struggling with literacy, they are going to experience worse health outcomes than their peers without those challenges.

North Carolina is currently in the process of choosing 2-3 markets to pilot Healthy Opportunities, which will provide up to \$650 million in Medicaid funding pilot services 'that are related to housing, food, transportation and interpersonal safety and directly impact the health outcomes and healthcare costs of enrollees."

To offer whole-person care, it will be essential that healthcare and human service organizations tear down silos and form partnerships that integrate both health and human services. Sharing information, collaborating on projects and pooling resources will no longer be a 'nice to have' but something that is necessary during the COVID-19 pandemic. Partnerships will be a critical driver of success if we hope to achieve a healthier community together.

#### **How Can We Prepare in a COVID-19 World?**



Read this article to better understand how partnerships can positively impact social determinants of health.

Read this article to better understand how COVID-19 will forever upend the healthcare industry.



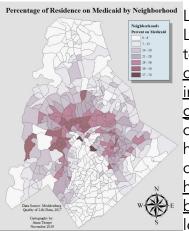
Learn about NC's Healthy
Opportunities pilots to
understand how the state
is tackling community
drivers of health. In terms
of community health, stay
updated on COVID-19 in
Mecklenburg County.



Check out existing
Charlotte-based
collaborations – <u>Village</u>
<u>HeartBEAT</u>, <u>Crossroads:</u>
<u>Grier Heights</u>, <u>One</u>
<u>Charlotte Health Alliance</u>



### Place and Race Must Be Addressed



Location. Location.
Location. Researchers
teach us that your zip
code may be more
important than your
genetic code in
determining your overall
health and wellness. The
city of Charlotte is
heavily segregated by
both race and income
level, creating barriers

that impact access to healthcare, economic opportunity, affordable housing and more. Consider that statewide, the gap between black and white infant deaths was wider in 2018 than it was in 1999, even among women of equal age, income level and risk factors. We see similar disparities in other areas of healthcare.

This map below shows the percentage of residences who receive Medicaid in Charlotte, broken down by neighborhood. This aligns directly with the Leading on Opportunity study's (LINK) focus on the 'crescent' area of our community, which experiences vastly higher levels of poverty with fewer resources and opportunities. Unsurprisingly, these areas also experience lower levels of health and wellness and have a harder time accessing healthcare than other parts of our city.

Amid COVID-19, these disparities are seen even more as place and race plays an even bigger role in those who contract the Coronavirus and die from it. These disparities can be seen in an article from UNC Charlotte's Urban Institute. If we aim to create a city where all of our neighbors experience healthy outcomes, we must address the disparities on a systematic level.

#### **How Can We Prepare in a COVID-19 World?**



Educate yourself on healthcare disparities.
Learn how zip code is related to health outcomes, and how smaller communities are more vulnerable to hospital closings. Read this article on healthcare disparities with COVID-19.



Attend a workshop or watch a documentary. We recommend this documentary to better understand disparities within the Mecklenburg community. Also, check out racial equity guides and workshops. Attend these workshops on COVID-19 awareness and prevention.



Learn about place-based health interventions from groups already working on neighborhood efforts that target disparity, including ONE CLT, UCity Family Zone and Crossroads Charlotte.



## **Health Outcomes Begin Early**

Recent research from Harvard's Center on the Developing Child examines the impact of toxic stress in childhood. This research shows that traumatic experiences early in life create a lifelong biological response. This same center has provided resources on how COVID-19 is impacting childhood development. More and more, we understand that factors contributing to long-term health begin far earlier than we previously thought.

With COVID-19, it is now more important than ever to monitor childhood development and assist children. Families are facing more financial burdens, losing access to basic necessities, and not having places to take their children when they have to work. Building childhood interventions is essential during this time to ensure proper childhood development.

In Charlotte, the Leading on Opportunity Task Force report galvanized our region to prioritize economic mobility for all. Leading on Opportunity recognized the power of <u>early care and education</u> as a key driver impacting economic mobility and overall quality of life.

The Leading on Opportunity report described research revealing how a baby's brain architecture develops even before birth, and then accelerates in the first years of life. Today there is substantial evidence of the long-term benefit to children *and* to society of investing in high-quality early childhood programs.

Our agency, Care Ring, has experience implementing and administering for nearly a decade an evidence-based home visiting program known as <a href="Nurse-Family Partnership">Nurse-Family Partnership</a>. NFP is one of a number of programs that public health leaders across North Carolina and in the Greater Charlotte region are investing in to improve long-term health outcomes for all. NFP is adapting in face of COVID-19 by using telehealth to connect nurses with first-time mothers.

As healthcare continues to transform, it will be critical to understand how policy makers are directing their attention and limited public resources toward expanding proven early childhood interventions especially with the added stress COVID-19 has placed on families and children.

#### **How Can We Prepare in a COVID-19 World?**



Read the research.
Understand how ACE's impact your clients and our community members.

<u>Look at resources</u> for those involved in childhood development amid COVID-19.



Watch a documentary. Several local organizations, including the Charlotte Resilience Project, are hosting screenings of the Resilience film, which examines ACE's, resilience, and 'how the body remembers.'

<u>Listen to this podcast</u> on childhood development amid a pandemic.



Learn more about the "return-on-investment" of early childhood interventions. Dozens of recent research papers reveal many of these positive returns as well as information on children amid COVID-19.



## **Policy Chaos**



Changes in state government, arguments over the budget and an upcoming election mean

one thing - the shifting of state healthcare policy isn't changing anytime soon. This is the wild card, a cross-cutting factor for every impending change above. Also, with COVID-19 in play, this matter becomes even more chaotic.

Healthcare is transforming, but the timeline and manner of the changes will be heavily impacted by policy decisions at the state and federal level and the only constant in recent years is that nothing is constant.

Upcoming changes to watch for include potential changes to the Affordable Care Act, new <u>faith-based health cooperatives</u>, federal block grants for Medicaid and Medicaid Expansion in North Carolina. Also, it is important to continue to look at what is going to happen with SB808 bill <u>"Medicaid</u> Transformation Necessities".

It would be short-sighted to stall our own changes based on policy shifts and the COVID-19 pandemic. While change is the only constant in healthcare right now, transformation will happen and these trends are here to stay.

#### **How Can We Prepare in a COVID-19 World?**



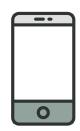
Continue preparing for change. Policy will always impact our experience, but transformation is here to stay even amid a pandemic.

Look into changes in Medicaid Transformation amid COVID-19.



Keep an eye on the General Assembly. You'll find the latest healthcare updates from the state <u>here</u>.

Click here COVID-19 questions and answers from NCDHHS.

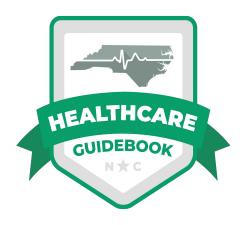


Stay updated on new trends and changes.

<u>Listen to the Seeking the Heart podcast</u> to hear interviews with healthcare leaders across the state.

Listen to this Care Ring podcast on the impact of COVID-19.

#### About the NC Healthcare Guidebook:



Led by Care Ring, The NC Health Guidebook is a partnership between healthcare agencies and advocacy groups in the Charlotte-Mecklenburg region. The NC Health Guidebook is designed to provide the most current updates that help the Charlotte community understand and prepare for the complex issues around healthcare transformation in a COVID-19 world. nchealthguide.org















