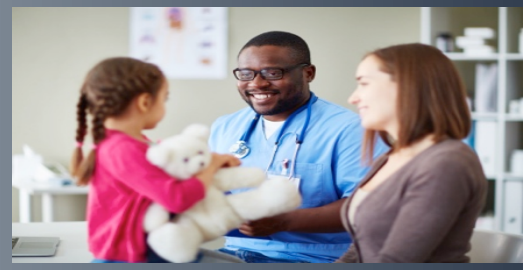
WELCOME TO THE COVID-19 HEALTHCARE COALITION

- **The session will begin at 1pm**
- **Please MUTE your phone and computers once you enter**
- **We will be monitoring the chat for questions and comments – please add content here along with your name and organization**
- **We will be RECORDING the session for later viewing**







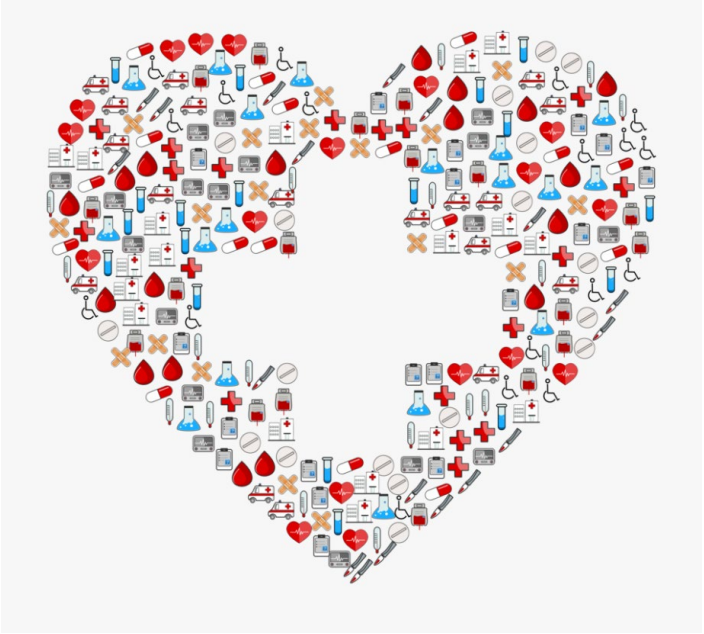
NC Department of Health and Human Services

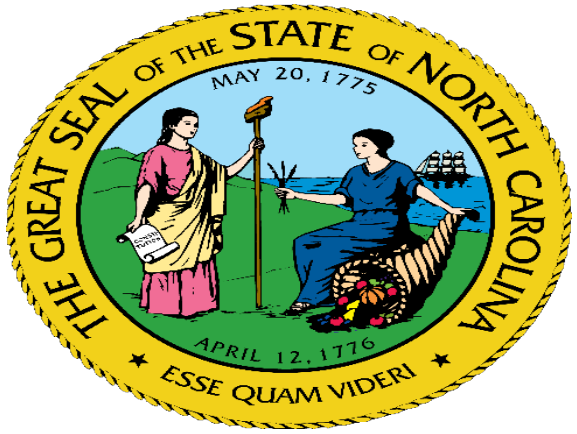
COVID-19 Healthcare Coalition

October 7, 2020

Agenda

- NC DHHS Updates
- Community Health Worker (CHW)
- Support Services
- Uninsured Portal
- Comments/Chat Discussion





Mr. John Resendes

Analytics and Innovations Manager

Office of Rural Health

NC DHHS

Community Health Worker and Support Services Webinar

COVID-19 Response

October 7, 2020

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES



Agenda

1. Welcome and Introduction
2. Quarantine and Isolation Support Overview
3. Community Health Worker Overview
4. Non-Congregate Shelter Overview
5. Support Services Overview
6. Community Partnership with Community Health Worker and Support Services Organizations
7. Next Steps
8. Q&A
9. Appendix

Questions?

Use the Q&A function to submit your question

Quarantine and Isolation Support Overview

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NCDHHS Overall Strategy

Goals

- Protect ourselves, our loved ones, and our neighbors from getting seriously ill
- Restore our economy and get North Carolinians back to work safely
- Get our children back to school so they can learn, play, and thrive
- Address the disproportionate impact of COVID-19 on historically marginalized populations

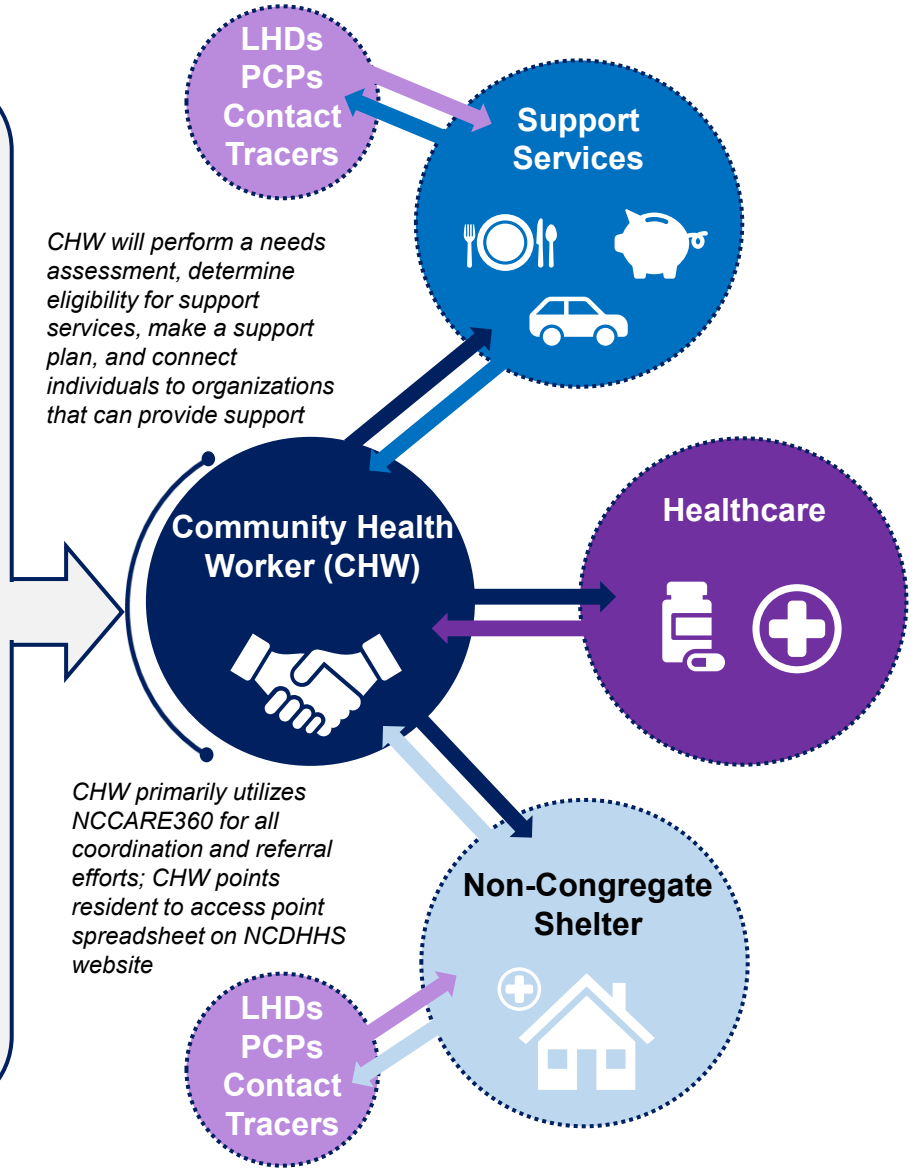
Strategy to Combat COVID-19	What the State is Doing	What the Public Can Do
Slow the Spread: Prevention	• Phase reopening of sectors/activities to minimize spread of COVID-19 • Require face coverings that cover the nose and mouth (indoors and outdoors) when physical distancing of 6 feet is not possible • Promote the 3Ws (Wear, Wait, Wash)	• Practice the 3Ws and encourage friends and family to do the same • Employers should follow NCDHSS guidance for specific settings
Know Who Has COVID-19 and Who Has Been Exposed: Testing and Tracing	• Build a statewide testing and contract tracing infrastructure • Surge resources in hardest hit communities and populations	• Get tested if symptomatic or if you think you are exposed to COVID-19 • Answer the call from the contact tracing team
Support People to Stay Home: Quarantine and Isolation	• Ensure access to non-congregate shelters for people who need to isolate • Enact policies to enable people to stay at home, leverage NCCARE360 to connect to supports	• Stay home when you can, especially when sick • Support employees to stay home when sick to minimize the spread of COVID-19

CHW and Support Services vendors connect the public to vital resources and services helping the state achieve its COVID-19 goals

COVID-19 Quarantine and Isolation Support for NC Residents

Resident need is identified in a variety of ways:

- Resident tests positive for COVID-19 and receives instructions from the testing center
- Resident is contacted by a Contact Tracer about possible COVID-19 exposure/next steps
- Resident reaches out to their Local Health Department about COVID-19 needs
- Resident is referred to Q&I supports by their doctor/nurse
- Resident has recommendation to isolate as a high-risk individual
- Resident is a first-responder or frontline healthcare worker
- Resident sees information online and believes they might qualify for services
- Resident is waiting on test results to come in



Innovative new program to assist individuals in targeted counties who need access to primary medical care and supports such as food or a relief payment to successfully quarantine or isolate due to COVID-19:

1. **Nutrition assistance**, including home-delivered meals and food boxes
2. **A one-time COVID-19 relief payment** to help supplement lost wages or the inability to look for work while in isolation/quarantine and to be used on basic living expenses
3. **Private transportation** provided in a safe manner to/from testing sites, medical visits, and sites to acquire food
4. **Medication delivery**
5. **COVID-related over-the-counter supplies**, such face masks, hand sanitizers, thermometers, and cleaning supplies
6. **Access to primary medical care** to manage COVID recovery will also be provided through telehealth services through Community Health Workers (CHWs).

Collaborative effort between the State, counties and local partners to secure **non-congregate shelter** for individuals with no other safe place to quarantine, isolate, or social distance due to COVID-19.

2 options for reimbursement:

1. Local partners desiring state-centric coverage through NCEM (required MOA)
2. Local partners seeking direct reimbursement from FEMA

Terminology

Isolation

The separation of people who are sick from those who are well. People who have tested positive for COVID-19 in North Carolina should be in isolation.

Quarantine

The separation and restriction of the movement of people who were exposed to a contagious disease, such as COVID-19, to see if they become sick. These people may have been exposed to a disease and do not know it, or they may have the disease but do not show symptoms.

Social Distance

Social distancing, also called “physical distancing,” means keeping a safe space between yourself and other people who are not from your household.

Community Health Worker Overview

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Community Health Worker Program

Create a robust infrastructure of Community Health Workers (CHWs) that can coordinate and refer social support needs for individuals quarantining and isolating

Overview

- CHWs are frontline public health workers who are trusted members of the community and trained to support disadvantaged individuals
- CHWs are responsible for connecting North Carolinians to medical and social support resources including diagnostics testing, primary care, case management, nutrition assistance, and behavioral health services
- CHWs coordinate with LHDs, contact tracers, and others to leverage NCCARE360 and to identify and connect residents with the services they require through NCCARE360

Partners

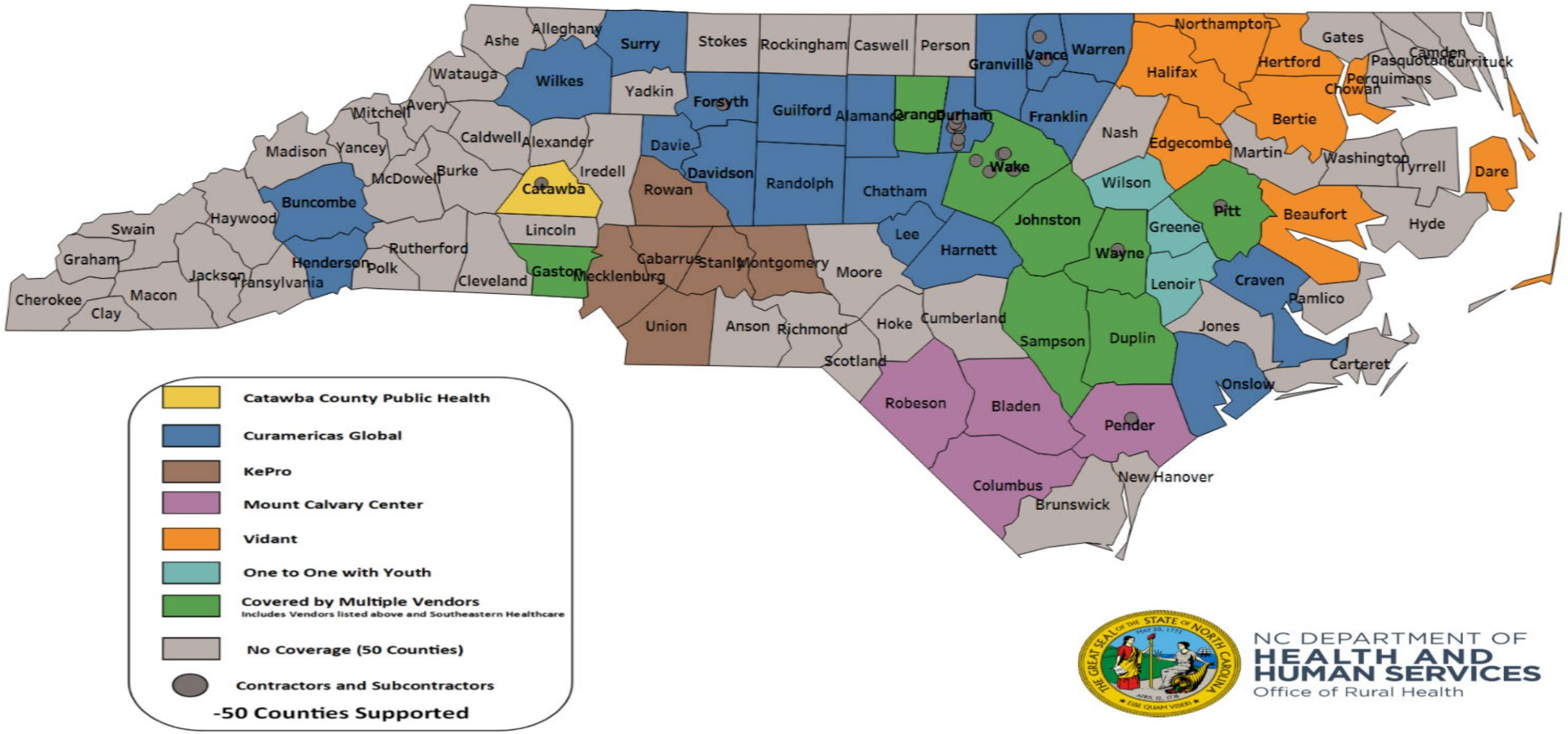
NCDHHS selected seven vendors* (Curamericas Global, Kepro, One to One with Youth, Vidant Health, Mt. Calvary Center for Leadership Development, Catawba County Public Health, Southeastern Healthcare NC) **to recruit, train, and manage Community Health Workers deployed to areas with high COVID-19-related needs**

Process

Community Health Workers will follow this workflow to assist individuals

1. Review notes and triage for high priority cases
2. Engage with patient and ask clarifying questions to patient
3. Identify available patient resources using NCCARE360 and primary care provider list
4. Conduct additional research and advocacy
5. Connect patients to available services
6. Note that needs are met NCCARE360 or hand off to PCP or Resource Navigator or work with LHD/NCCARE360 to address resource deficits

Community Health Worker Vendor Coverage



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of Rural Health

Community Health Worker Vendor Contact Information

Counties	Vendor	Contact	Phone	Email
Catawba	Catawba County Public Health	Honey Estrada	(828) 695-6683	honey@catawbacountync.gov
Alamance, Buncombe, Chatham, Craven, Davidson, Davie, Durham, Forsyth, Franklin, Gaston, Granville, Guilford, Harnett, Henderson, Johnston, Lee, Onslow, Orange, Pitt, Randolph, Surry, Vance, Wake, Warren, Wayne, Wilkes	Curamericas Global	Andrew Herrera	(919) 801-0612	Andrew@Curamericas.org
Cabarrus, Gaston, Mecklenburg, Montgomery, Rowan, Stanly, Union	Keystone Peer Review Organization (KEPRO)	Lisa Bennett	(720) 724-0098	lbennett@Kepro.com
		Renee White	(919) 523-7999	stwhite@Kepro.com
Bladen, Columbus, Duplin, Pender, Robeson, Sampson	Mt. Calvary Center for Leadership Development	Jimmy Tate	(910) 284-9382	tatej99@gmail.com
		Carol Highsmith	(910) 789-1886	ch0917@ec.rr.com
Duplin, Greene, Johnston, Lenoir, Sampson, Wayne, Wilson	One to One with Youth	Danny King	(919) 922-7713	dking@adlainc.org
		Inonda Kind	(919) 987-2798	kone2one@aol.com
Johnston, Orange, Wake	Southeastern Healthcare of NC	Joyce Harper	(919) 987-2798	jharper@sehcnc.com
		Evelyn Sanders	(919) 987-2791	esanders@sehcnc.com
Beaufort, Bertie, Chowan, Dare, Duplin, Edgecombe, Halifax, Hertford, Northampton, Pitt	Vidant Health	Melissa Roupe	(252) 847-9350	myroupe@vidanthealth.com
		Crystal Dempsey	(252) 847-5162	Crystal.Dempsey@vidanthealth.com

Community Health Worker Operations

Responsibilities



Work in coordination with Local Health Departments (LHDs) and contact tracers to identify and connect with individuals who require assistance both virtually and face to face



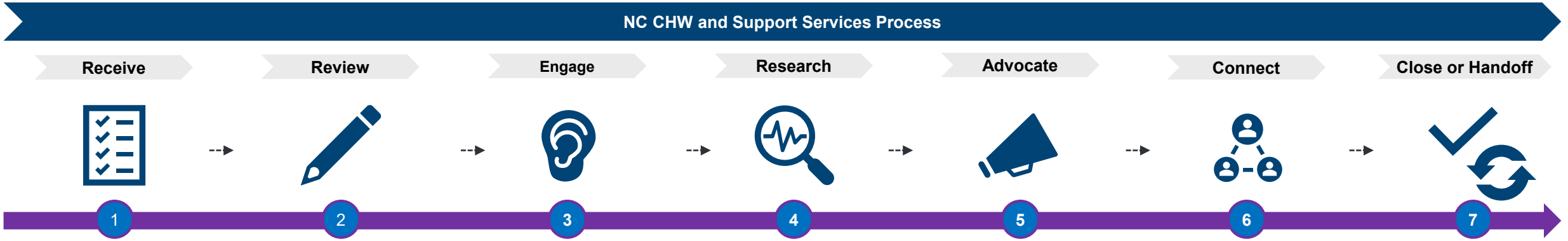
Leverage NCCARE360, the nation's first statewide technology platform uniting traditional healthcare settings and organizations, to address non-medical drivers such as food, housing, transportation, employment, and interpersonal safety



Help individuals connect with community resources for safe housing, culturally competent healthcare (primary care home), and financial assistance

Community Health Worker and Support Services Workflow

Scenario: How an individual who needs to quarantine or isolate gets connected to Support Services through a Community Health Worker



1 – Receive

CHW picks up assigned patients from a variety of channels:

- Testing sites
- Contract tracers
- LHDs
- DSS
- PCPs
- Outreach workers
- CBOs
- Self referrals
- Also receives patient lists from contact tracing tool (CCTO)

2 – Review

CHW performs a needs assessment, determines the person's eligibility for support services through a standardized attestation form, and makes a support plan. The CHW triages high priority cases first.

3 – Engage

Patient Engagement: CHW asks clarifying questions and presents options

4 – Research

CHW researches available resources using NCCARE360 and DHHS sites (Check My Symptoms, Find My Testing Place), and primary care provider list

5 – Advocate

CHW conducts additional research and advocacy

6 – Connect

CHW sends referrals to Support Service Vendors and subcontractors through NCCARE360 or other mechanism and includes the individual's eligibility attestation form.

The CHW continues to be the individuals' point of contact throughout their isolation/quarantine if they need additional supports. CHWs may call vendors on behalf of the patient and continue to communicate directly with the patient.

7 – Close or Handoff

Support Service Vendors deliver services to individuals and note that their needs have been met in NCCARE360 or with CHW.

Support Service Vendors conduct ongoing invoicing, reimbursement, and reporting (to be discussed in more detail).

Residents can be referred to CHW organizations via DSS and LHDs or may reach out directly to a CHW organization

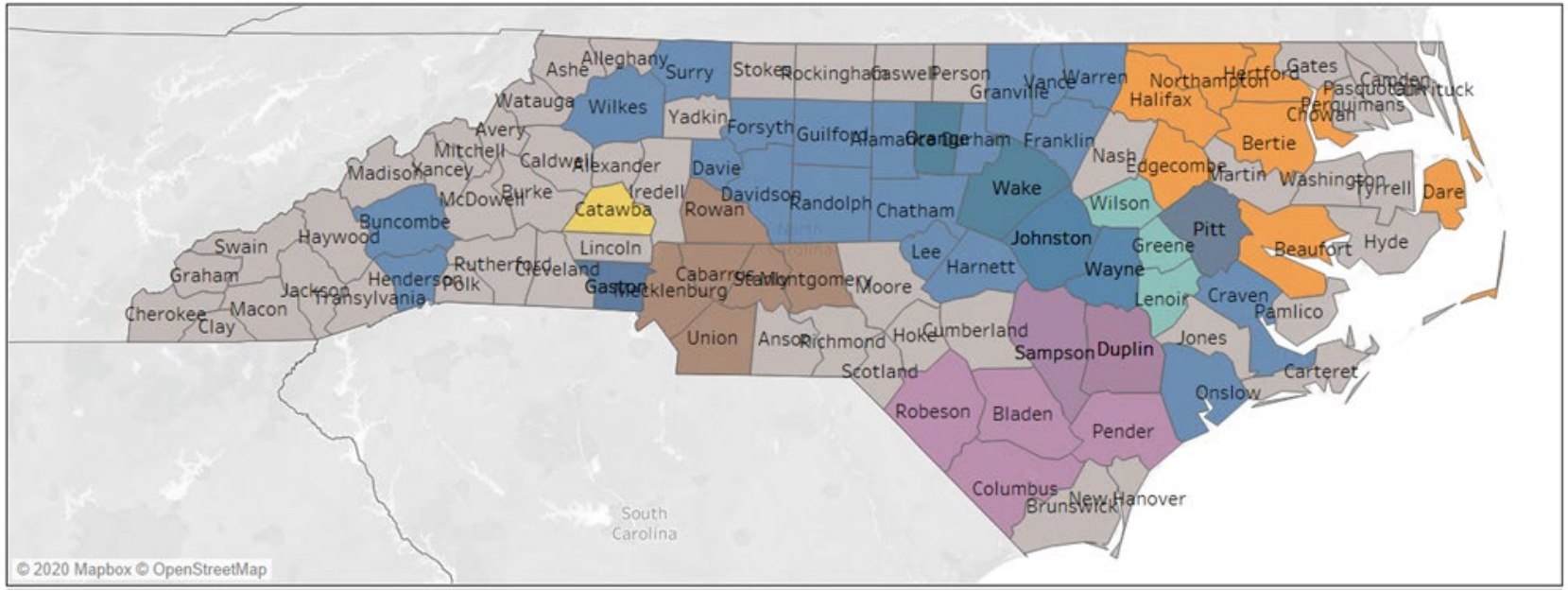
Survey Results

Data as of September 27, 2020

Total CHWs employed	283
Total CHWs deployed	250
Total CHWs who speak Spanish	70

Survey Results (self-reported as of Sept 25)

Number of Patients Served	Number of Referrals	Closed Referrals	Counties Served	% Referrals Closed	Number of Telehealth Encounters
9,202	583	272	54	47%	1,042



Technical assistance: Office of Rural Health (ORH) HIT regional contacts

Office of Rural Health (ORH) – Health Information Technology (HIT)

Primary responsibilities:

- Recruit LHDs currently not in NCCARE360 and connect LHD to NCCARE360 Regional CEM for onboarding.
- Help vendors and CHWs with telehealth and NCCARE360 questions.
- Technical Assistance around Electronic Health Records, Telehealth, and other state supported Health Information Technology.

Contacts:

Lakeisha Moore
Lakeisha.Moore@dhhs.nc.gov

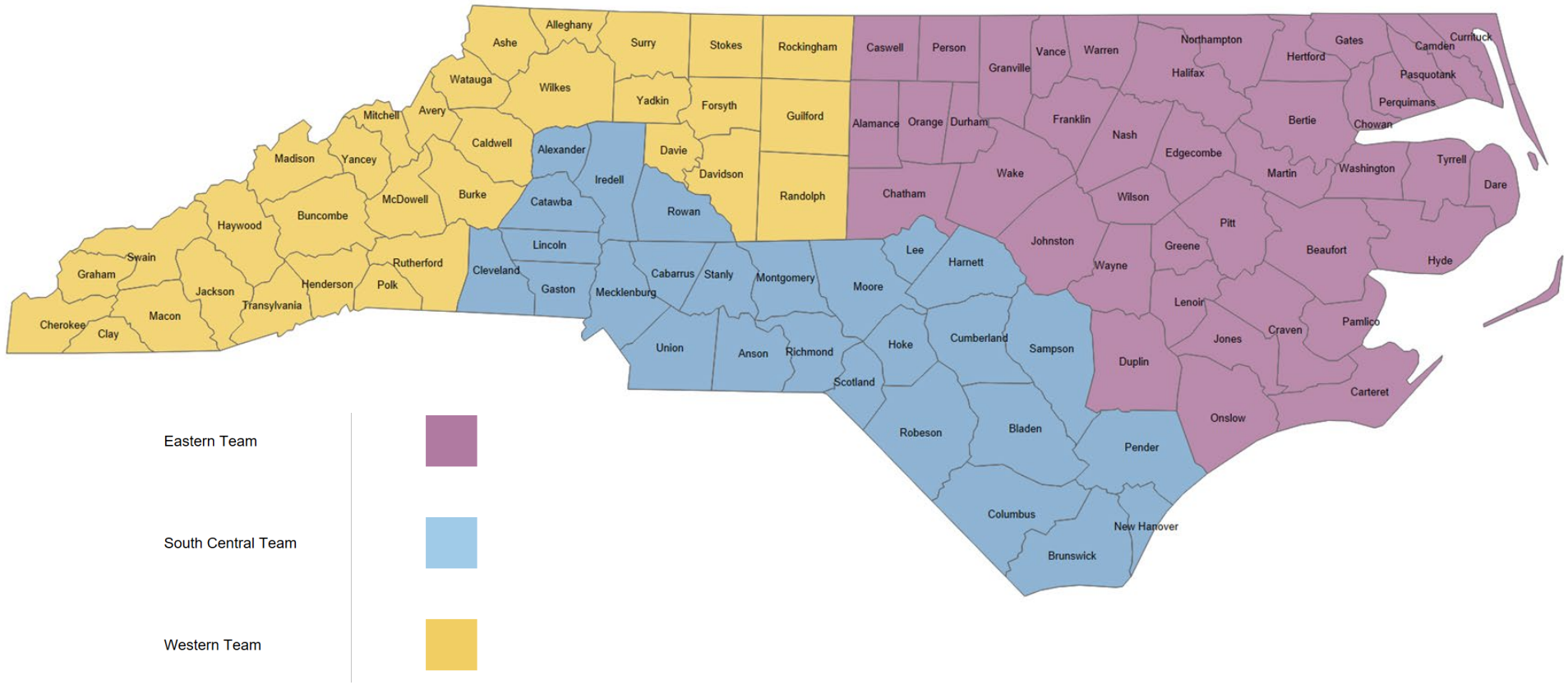
Sebastian Gimenez (East)
Sebastian.Gimenez@dhhs.nc.gov

Adonnica Rowland (South Central)
Adonnica.Rowland@dhhs.nc.gov

Gretchen Ramirez (Western)
Gretchen.Ramirez@dhhs.nc.gov

Robyn McArdle (Telehealth Specialist)
Robyn.McArdle@dhhs.nc.gov

ORH HIT regional contact should be the primary point of contact for counties in the respective region to ask questions about NCCARE360 and telehealth as well as technical assistance on electronic health records (EHR), telehealth, and other state-supported HIT



DRAFT

NCCARE360 Community Engagement Managers can support NCCARE360 efforts

NCCARE360 Community Engagement Managers (CEM)

Primary responsibilities:

- Directly support the community through every step of joining the network
- Regularly review data and network performance, solicit feedback and input on processes, and provide ongoing technical assistance
- Act as the main resources for technical assistance
- Host strategy sessions (variety of audiences, including LHDs)

Contacts:

Regional Field:
Dionne Greenlee-Jones
dionne.greenlee-jones@uniteus.com
Mikayla Gaspary
Mikayla@uniteus.com
Abbie Szymanski
abbie@uniteus.com
Abi Bussone
abi@uniteus.com
See next slide for regions

Network health managers:
Kate Geouge Brown (kate@uniteus.com)
Kristena Armwood (kristena@uniteus.com)



Non-Congregate Shelter Overview

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Non-Congregate Shelter Overview

NC received approval from FEMA to provide housing alternatives, such as hotels, motels, and dormitories, for residents with unstable housing who may need to quarantine, isolate, or social distance in response to COVID-19. FEMA reimbursement is renewed on a monthly basis at 75%/25% FEMA/State match. Covers the cost of shelter plus certain wraparound supports, such as laundry, food, cleaning, and security at the discretion of the County, which operates the program.

Increase coverage of non-congregate shelter (NCS) statewide and particularly within counties that have been identified as needing additional assistance due to high volumes of positive COVID cases

Overview

- A collaborative effort between the State, counties and local partners to secure hotel and motel rooms, as well as essential wrap-around services, for individuals with no other safe place to quarantine, isolate, or social distance due to COVID-19
- Jurisdictions and agencies (Indian Tribal and local governments, non-profits, COC, and homeless shelters) may choose to partner with NC Emergency Management (NCEM) for expedited reimbursement of non-congregate shelter expenses
- All counties or organizations operating non-congregate shelter must complete a report for each operational site every Friday by close of business

Eligibility

Individuals are eligible for non-congregate shelter if they meet these categories:

1. Test positive for COVID-19, do not require hospitalization, but require isolation
2. Exposed to COVID-19, do not require hospitalization, but should be quarantined
3. First responders and healthcare workers who need to avoid direct family contact
4. Are at a high risk for COVID-19 and need services as a precautionary measure

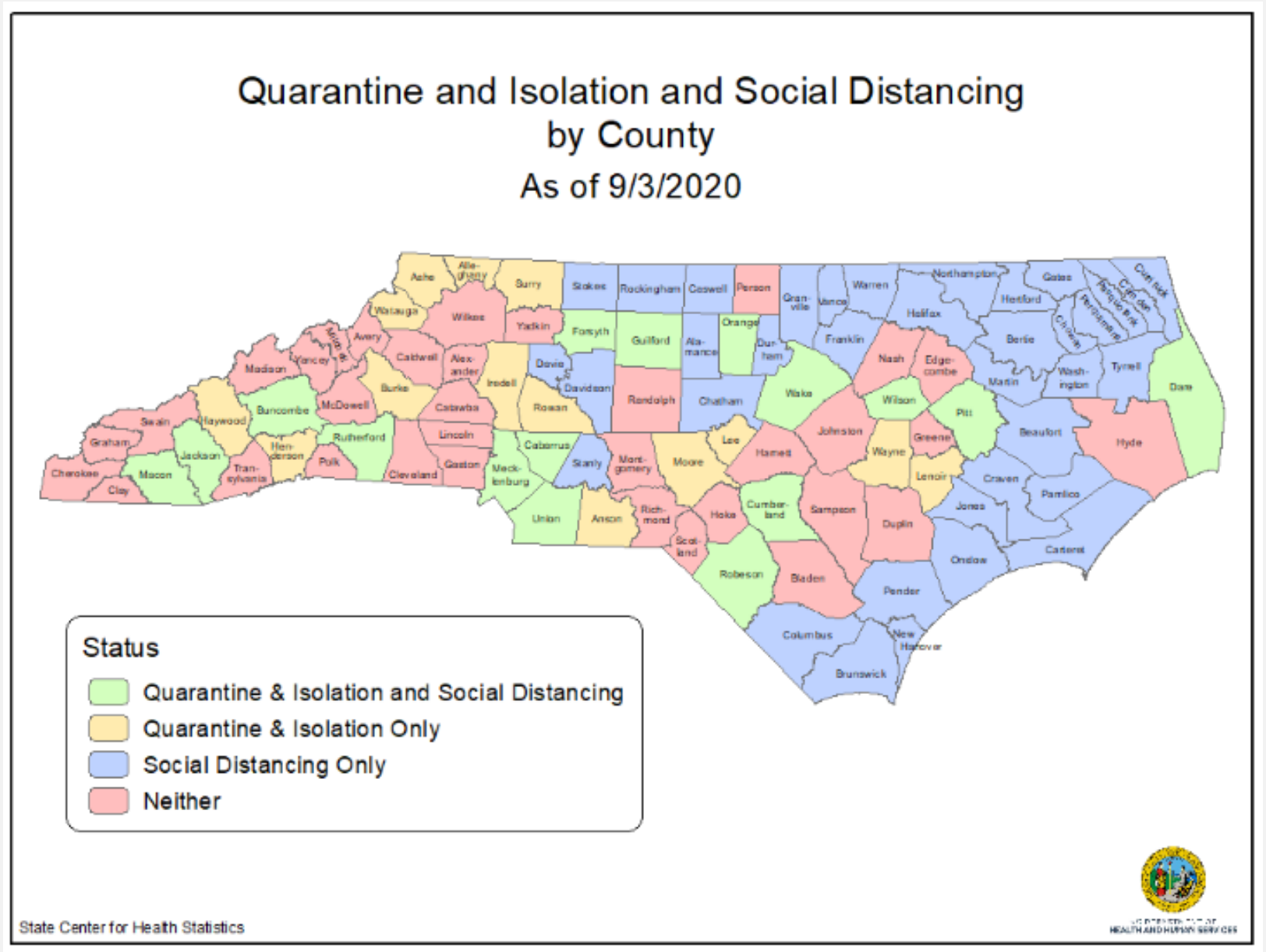
Process

An individual or health worker should follow these steps for non-congregate shelter:

1. If an individual meets one of eligibility requirements and has no way to safely distance from others, they or a Community Health Worker should check the list of non-congregate shelter access points across the state
2. Connect with the shelter provider for information about eligibility and location and bed availability
3. If an individual is not eligible for the site, or a county is not listed, contact the county Emergency Management Agency, Local Health Department, or NC 2-1-1 to ask for assistance

A non-congregate shelter program does not currently exist in every county

Current Non-Congregate Shelter Coverage



Support Services Overview

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Support Services Program

An innovative program to provide five key support services in target counties to help people safely quarantine or isolate



Overview

- Innovative new program funded by the CARES Act to assist individuals in targeted counties who need access to primary medical care and support services
- Frontline workers may be unable physically distance or may be unable to take paid sick leave, leading to higher rates of infection
- Targeted service areas are segmented into four regions: Region 1 (Mecklenburg, Gaston), Region 2 (Rowan, Stanly, Montgomery, Randolph, Chatham, Lee), Region 3 (Durham, Granville, Vance), and Region 4 (Robeson, Columbus, Bladen, Sampson, Duplin, Wayne, Johnston, Wilson, Greene)



Eligibility

Individuals must first be identified by a health professional because the individual:

1. Tested positive for COVID-19
2. Is waiting for the results of a COVID-19 test
3. Was exposed to someone who has tested positive for COVID-19
4. Needs to do so as a precautionary measure since they are in a high-risk group

Individuals must also attest to certain criteria, such as needing the services to successfully isolate or quarantine and not having another means to obtain these services.



Process

Individuals who need access to primary medical care and support services to successfully quarantine or isolate due to COVID-19 will follow this process:

1. A health care worker will identify an individual who should quarantine or isolate. If the individual may require support services to do so effectively, the health care worker refers the individual to a Community Health Worker (CHW) or LHD.
2. The CHW or LHD team member will be responsible for supporting the individual through the quarantine or isolation process. The CHW or LHD will perform a needs assessment, determine eligibility for support services, make a support plan, and connect individuals to organizations that can provide support services.
3. The support services vendor will directly provide, or subcontract with local Community Based Organizations (CBOs) to provide, the needed support services.

CHWs will serve as the individual's point of contact throughout isolation or quarantine

Anticipated Performance Period: August 25, 2020 through December 30, 2020

Support Services Vendors

Piedmont Health Services and Sickle Cell Agency

- Mission is to provide outreach, education, screening and case management for people with high-risk health problems; focusing on sickle cell services, HIV/AIDS prevention & wellness.
- Services include: sickle cell services, HIV outreach and education, wellness services, child development programs, etc.

Duke University Health Systems

- A world-class academic and health care system that strives to transform medicine and health locally and globally
- Services include: complete care, COVID-19 testing and treatment, urgent care, etc.

Quality Home Care Services
doing business as
Quality Comprehensive Health Center

- A multi-faceted organization with five locations that has been serving Charlotte, NC, community for over 16 years.
- Services include: primary medical care, counseling, case management, substance abuse treatment, homeless initiatives, telehealth counseling, etc.

ADLA, Inc.

- Mission is to help local youth acquire the needed behavior and employability skills to function in a changing global society, while promoting the understanding and practice of the universal values of honesty, integrity, and respect in all we do.
- Services include: academic enrichment, after school programs, homework assistance, nutrition assistance, etc.

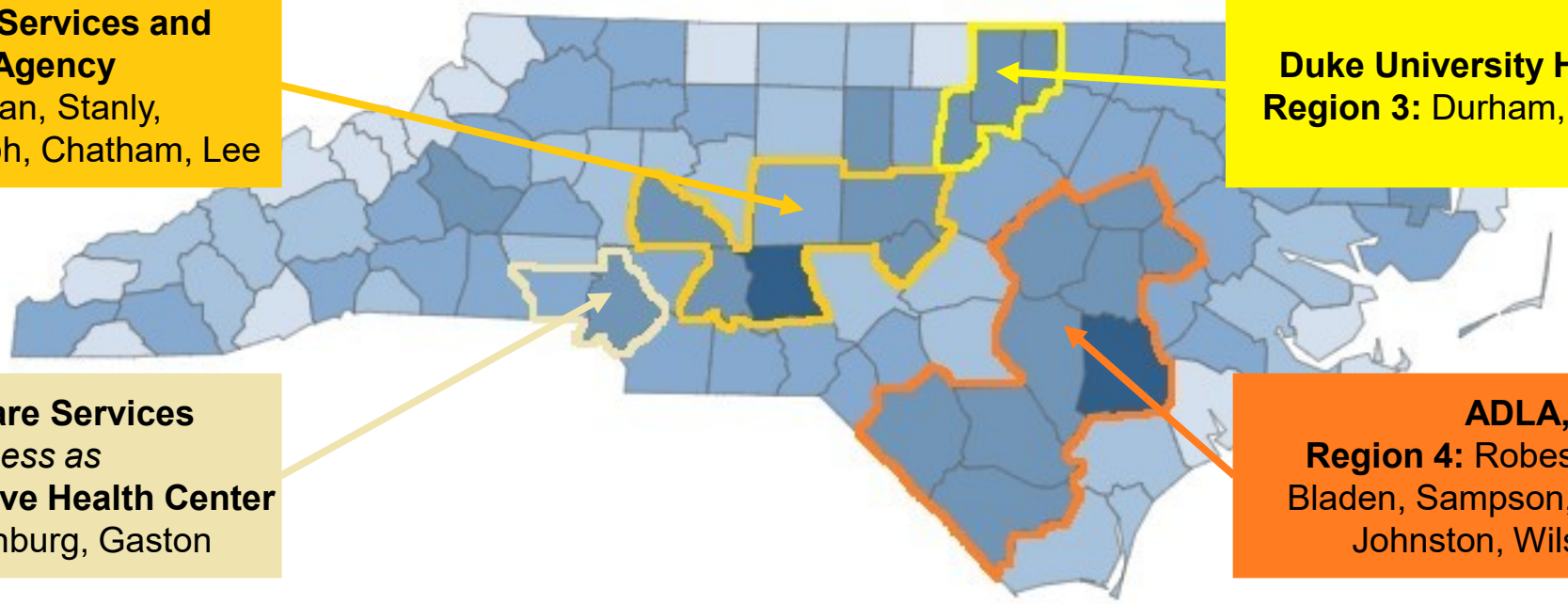
Support Services Vendor Coverage

County Map by Cases per 10,000 residents

As of August 24. 2020

Piedmont Health Services and Sickle Cell Agency
Region 2: Rowan, Stanly, Montgomery, Randolph, Chatham, Lee

Duke University Health Systems
Region 3: Durham, Granville, Vance



Quality Home Care Services
doing business as
Quality Comprehensive Health Center
Region 1: Mecklenburg, Gaston

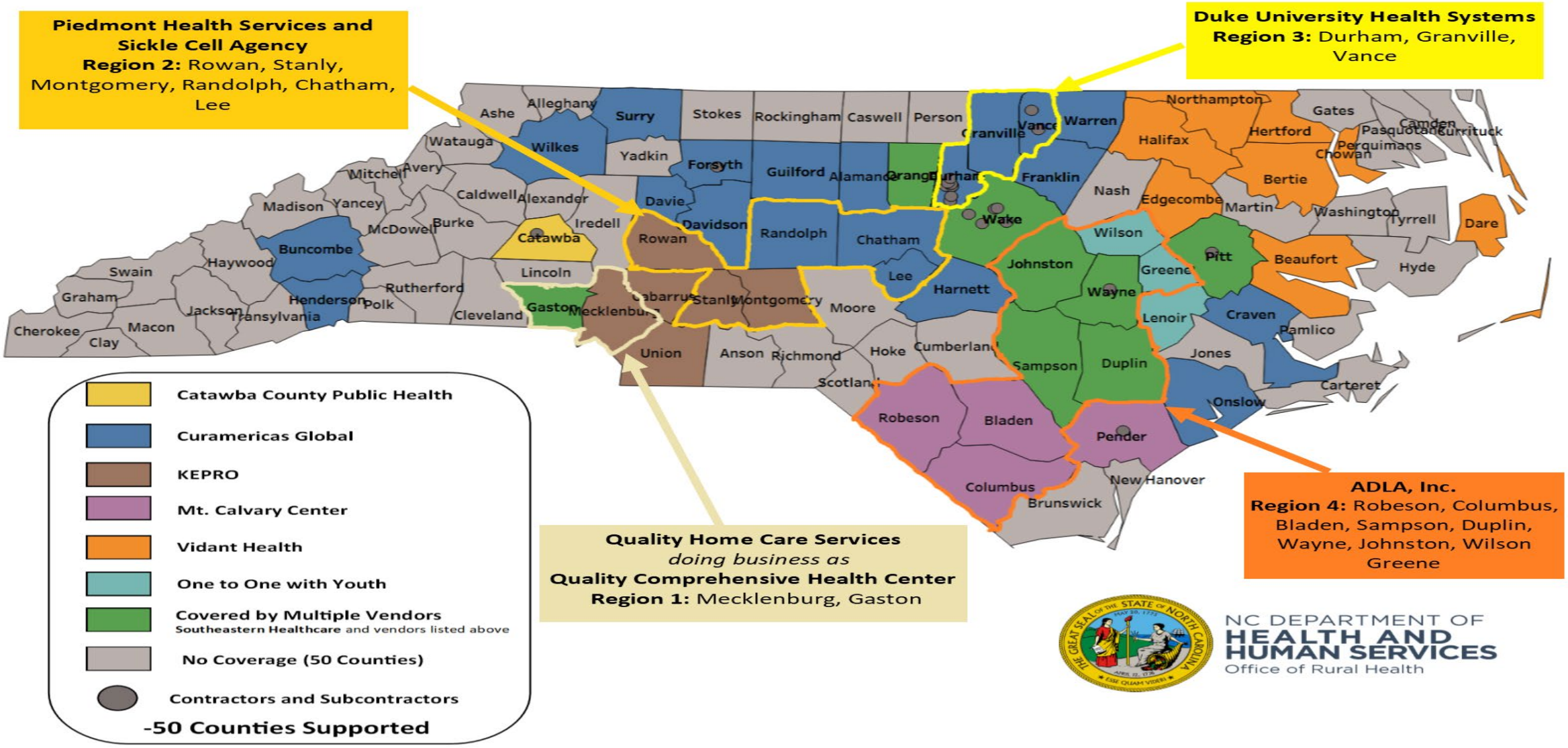
ADLA, Inc.
Region 4: Robeson, Columbus, Bladen, Sampson, Duplin, Wayne, Johnston, Wilson, Greene

0	126-175
26-75	176-250
76-125	251+

Support Services Vendor Contact Information

Counties	Vendor	Contact	Phone	Email
Robeson, Columbus, Bladen, Sampson, Duplin, Wayne, Johnston, Wilson, Greene	ADLA, Inc.	Danny King	919-922-7713	dking@adlainc.org
Rowan, Stanly, Montgomery, Randolph, Chatham, Lee	Piedmont Health Services and Sickle Cell	Kathy Norcott	336-274-1507 336-886-2437	knorcott@piedmonthealthservices.org
Durham, Granville, Vance	Duke University Health System	Michelle Lyn	919-971-6336	michelle.lyn@duke.edu
Mecklenburg, Gaston	Quality Comprehensive Health Center	Lisa Wigfall	704-394-8968 x 104 (Office) 980-721-1573 (Mobile)	lwigfall@qchealth.org

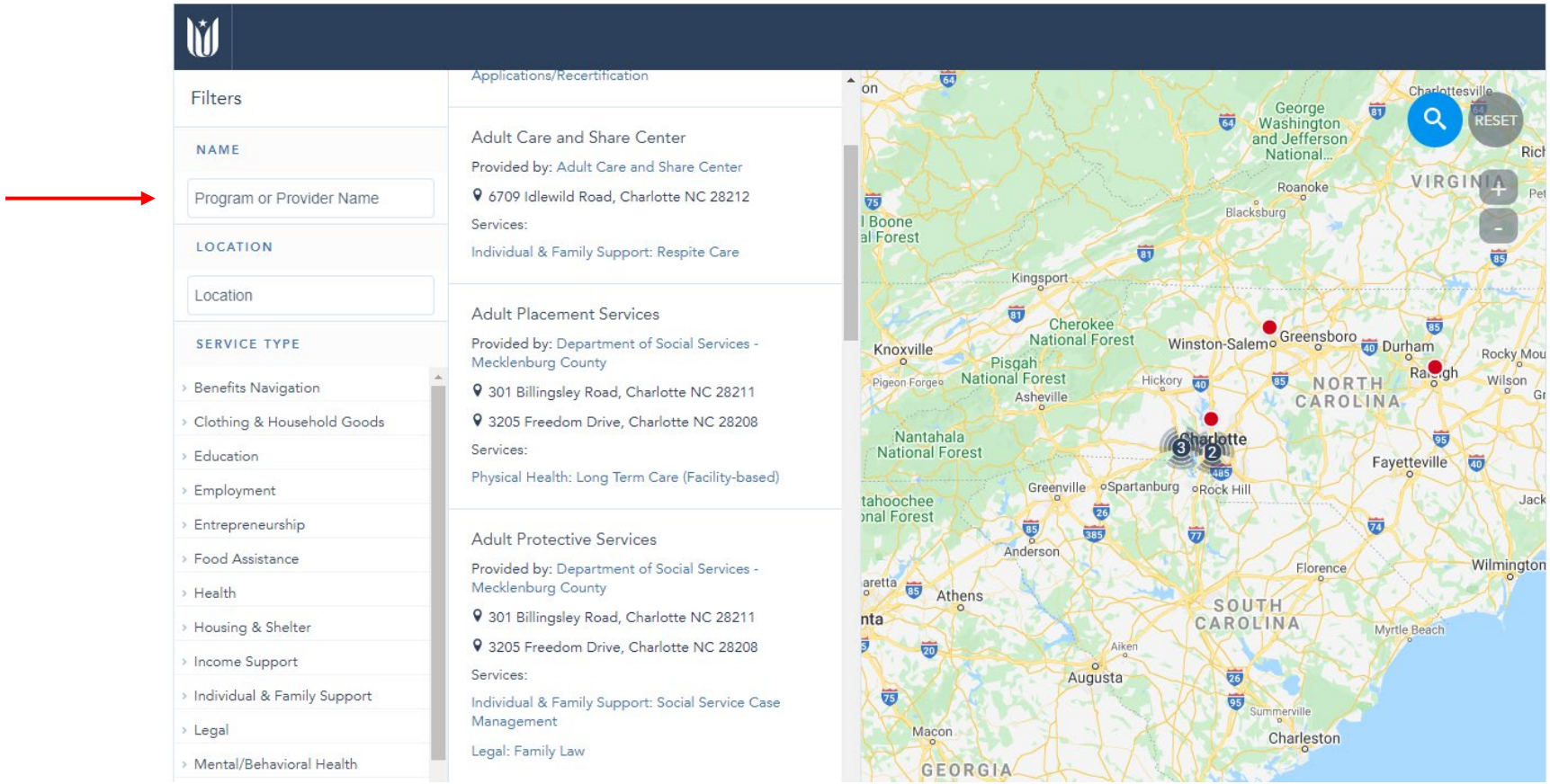
CHWs are vital to the Support Services Program - all Support Services counties must overlap with CHW counties



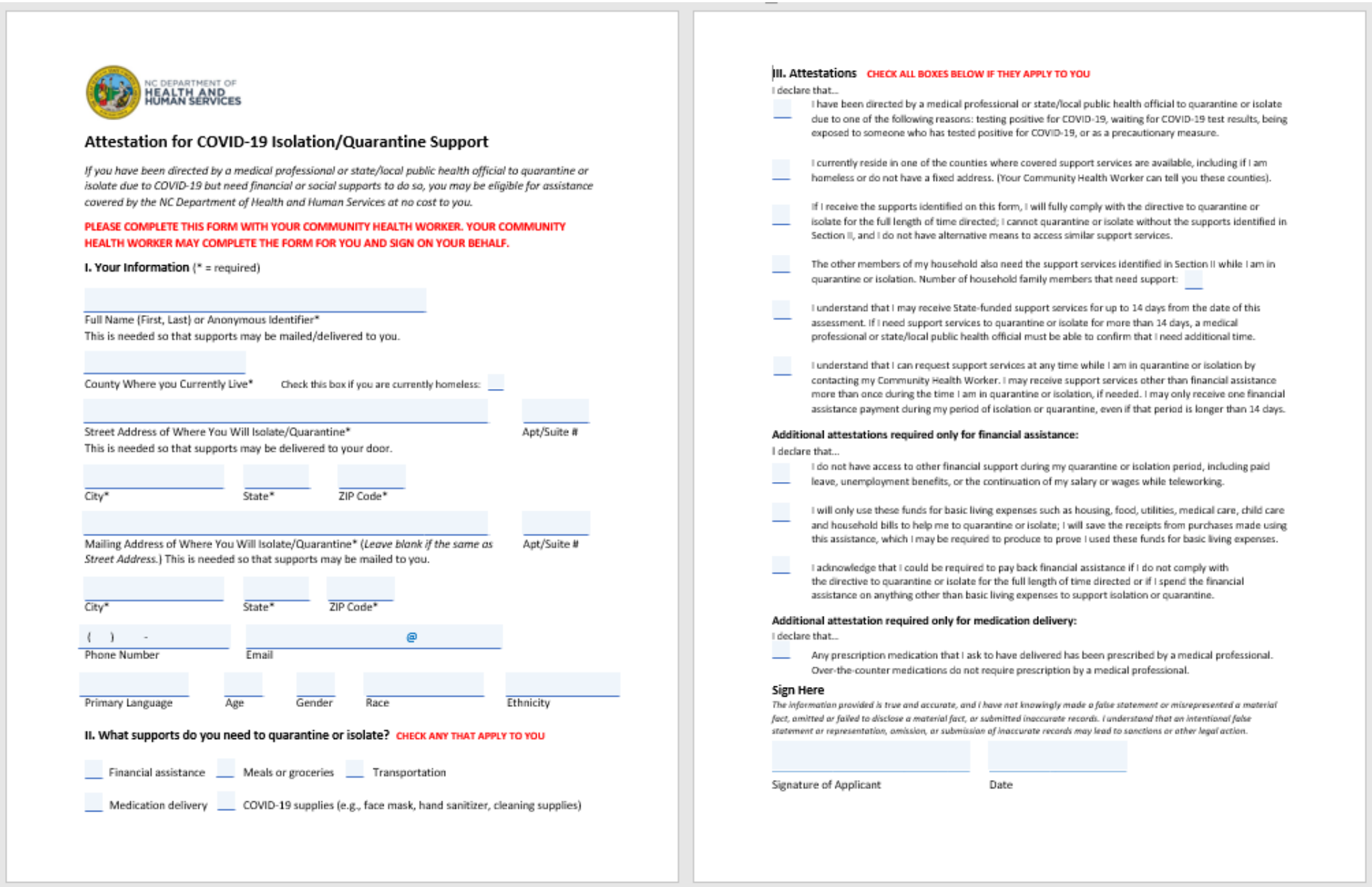
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of Rural Health

How a CHW Identifies a Support Services Vendor or Subcontractor in NCCARE360

- All Support Service Vendors and their subcontractors will be included in NCCARE360 and able to accept electronic referrals
- All Support Service Vendors and subcontractors will be identified in NCCARE360 as “COVID Support Services: [ORGANIZATION NAME].”
  - CHWs can search for “COVID Support Services” in the “Provider Name” field in NCCARE360 and a list of organizations delivering these particular, federally-funded services will appear. CHWs must refer individuals to these **particular organizations** in order for the support services to be provided at no cost to the individual and their family



Attestation Form: Deep Dive



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

Attestation for COVID-19 Isolation/Quarantine Support

If you have been directed by a medical professional or state/local public health official to quarantine or isolate due to COVID-19 but need financial or social supports to do so, you may be eligible for assistance covered by the NC Department of Health and Human Services at no cost to you.

PLEASE COMPLETE THIS FORM WITH YOUR COMMUNITY HEALTH WORKER. YOUR COMMUNITY HEALTH WORKER MAY COMPLETE THE FORM FOR YOU AND SIGN ON YOUR BEHALF.

I. Your Information (* = required)

Full Name (First, Last) or Anonymous Identifier*
This is needed so that supports may be mailed/delivered to you.

County Where you Currently Live* Check this box if you are currently homeless: ___

Street Address of Where You Will Isolate/Quarantine* Apt/Suite #
This is needed so that supports may be delivered to your door.

City* State* ZIP Code*

Mailing Address of Where You Will Isolate/Quarantine* (*Leave blank if the same as Street Address.*) This is needed so that supports may be mailed to you. Apt/Suite #

City* State* ZIP Code*

( ) - Phone Number Email @

Primary Language Age Gender Race Ethnicity

II. What supports do you need to quarantine or isolate? CHECK ANY THAT APPLY TO YOU

___ Financial assistance ___ Meals or groceries ___ Transportation

___ Medication delivery ___ COVID-19 supplies (e.g., face mask, hand sanitizer, cleaning supplies)

III. Attestations CHECK ALL BOXES BELOW IF THEY APPLY TO YOU

I declare that...

___ I have been directed by a medical professional or state/local public health official to quarantine or isolate due to one of the following reasons: testing positive for COVID-19, waiting for COVID-19 test results, being exposed to someone who has tested positive for COVID-19, or as a precautionary measure.

___ I currently reside in one of the counties where covered support services are available, including if I am homeless or do not have a fixed address. (Your Community Health Worker can tell you these counties).

___ If I receive the supports identified on this form, I will fully comply with the directive to quarantine or isolate for the full length of time directed; I cannot quarantine or isolate without the supports identified in Section II, and I do not have alternative means to access similar support services.

___ The other members of my household also need the support services identified in Section II while I am in quarantine or isolation. Number of household family members that need support: ___

___ I understand that I may receive State-funded support services for up to 14 days from the date of this assessment. If I need support services to quarantine or isolate for more than 14 days, a medical professional or state/local public health official must be able to confirm that I need additional time.

___ I understand that I can request support services at any time while I am in quarantine or isolation by contacting my Community Health Worker. I may receive support services other than financial assistance more than once during the time I am in quarantine or isolation, if needed. I may only receive one financial assistance payment during my period of isolation or quarantine, even if that period is longer than 14 days.

Additional attestations required only for financial assistance:

I declare that...

___ I do not have access to other financial support during my quarantine or isolation period, including paid leave, unemployment benefits, or the continuation of my salary or wages while teleworking.

___ I will only use these funds for basic living expenses such as housing, food, utilities, medical care, child care and household bills to help me to quarantine or isolate; I will save the receipts from purchases made using this assistance, which I may be required to produce to prove I used these funds for basic living expenses.

___ I acknowledge that I could be required to pay back financial assistance if I do not comply with the directive to quarantine or isolate for the full length of time directed or if I spend the financial assistance on anything other than basic living expenses to support isolation or quarantine.

Additional attestation required only for medication delivery:

I declare that...

___ Any prescription medication that I ask to have delivered has been prescribed by a medical professional. Over-the-counter medications do not require prescription by a medical professional.

Sign Here

The information provided is true and accurate, and I have not knowingly made a false statement or misrepresented a material fact, omitted or failed to disclose a material fact, or submitted inaccurate records. I understand that an intentional false statement or representation, omission, or submission of inaccurate records may lead to sanctions or other legal action.

Signature of Applicant Date

Resident Eligibility for Support Services

Eligibility Criteria



An individual should isolate or quarantine because the individual:

- Tested positive for COVID-19, or
- Is waiting the results of a COVID-19 test, or
- Was exposed to someone who has tested positive for COVID-19, or
- Needs to do so as a precautionary measure because the individual is in a high-risk group

- Lives in the Target Service Area
- Has been directed by a health care professional to quarantine or isolate
- Will only be able to safely and effectively quarantine or isolate with one or more of the Support Services
- Does not have alternative means of accessing the Support Services
- Agrees to remain in quarantine or isolation for the entire length of time he or she is directed to do so

- *COVID relief payment:* the individual does not have access to financial support during the quarantine or isolation period
- *COVID relief payment*: the individual will use the funds for basic living expenses and will keep receipts
- *COVID relief payment*: the individual could be required to pay back the payment if they do not comply with quarantine or isolation requirements
- *Medication delivery*: the individual must attest that any medication to be delivered has been authorized by a medical professional
- *Support services at the Family-Level*: the individual must attest that they live in the same household with family members who require support

- Individuals may receive Support Services for up to 14 days beginning the day of their needs assessment or longer if approved by a HCP
- If an individual originally attested that they do not need a Support Service but later requests it, that individual is eligible for that Support Service
- Individuals may receive Support Services other than a COVID relief payment more than once if needed during their quarantine or isolation period
- If an individual lives in the Target Service Area but chooses to isolate in a county that is not part of the Target Service Area, they remain eligible

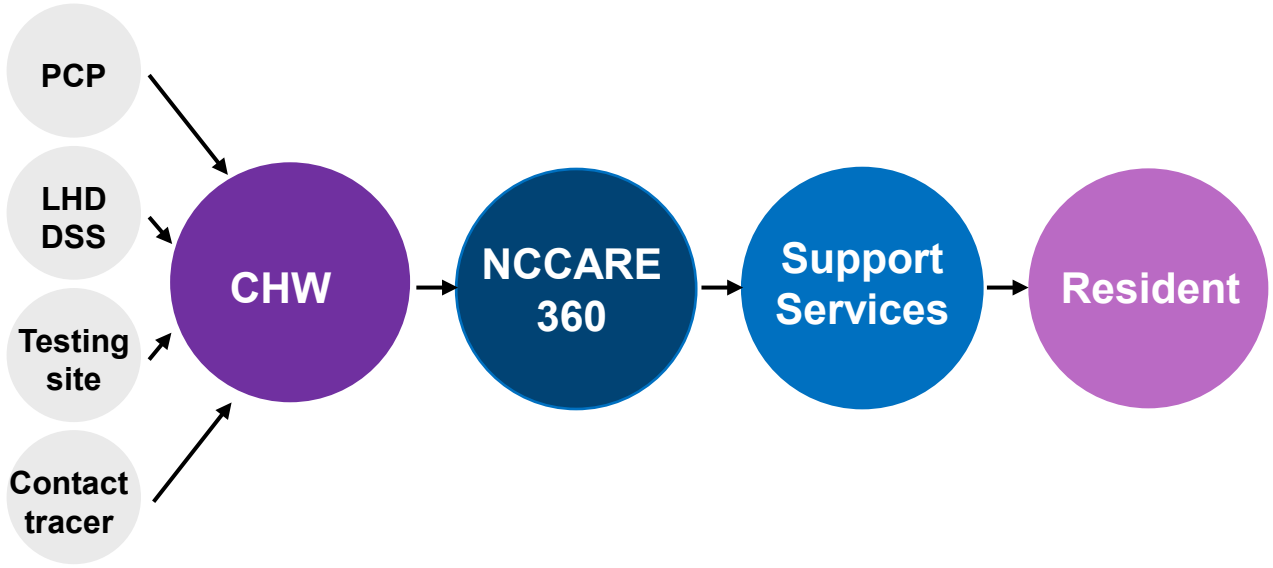
Support Services

Note: HCP: Health Care Professional

Referrals to Support Services Vendors

NCCARE360

- NCCARE360 is the first statewide network that unites health care and human services organizations via a shared technology platform that enables a coordinated, community-oriented, person-centered approach for delivering care in North Carolina
- NCCARE360 helps health and community-based organizations in all 100 North Carolina counties make electronic referrals, communicate in real time, securely share client information, and track outcomes together
- NCCARE360 has a community engagement team located across the state working with community-based organizations, health plans, health systems, and government agencies to create a statewide coordinated network and to train and onboard partners
- **Anyone in North Carolina can request services and be connected to community resources**



Referral Process

- The Support Services Vendor and its subcontractors are strongly encouraged to use NCCARE360 to accept electronic referrals;
- If the Support Services Vendor/subcontractor does not have the capability to accept electronic referrals in NCCARE360, it can accept referrals through another method such as telephone or secure e-messaging system
- The Support Services Vendor/subcontractor must be able to receive and use information in the referral to provide the appropriate service, including knowing which Support Service to provide, whether at an Individual-Level or Family-Level and to whom at what location

Overview of Support Services Offerings and Availability

• What support services will be available?

The Department has identified five categories of support services to cover based on identified need, including:

- Nutrition assistance, including home-delivered meals and food boxes;
- A one-time COVID-19 relief payment, provided in response to the federally-declared COVID-19 public health emergency, to assist the individual and his or her family in meeting basic living expenses such as housing, food, utilities, medical costs, child care costs, and household bills while in isolation or quarantine;
- Private transportation provided in a safe manner to/from testing sites, non-congregate shelter, medical visits, and sites to acquire food (if delivery is not feasible);
- Medication delivery; and
- COVID-related over-the-counter supplies, such as a face mask, hand sanitizer, thermometer, and cleaning supplies.

• Where will support services be available?

Support services will be provided in areas of the state with the highest rates of COVID-19 cases, preferable in target service areas of contiguous counties to scale available resources. The Department reserves the right to amend the service areas over time.

• When will support services be available?

The Department expects support services to be available beginning in early September. Support services are expected to be available until late 2020, depending on when funds are exhausted.

The RFA, which includes more information about the Support Services Program, is available on the DHHS website at https://www.ncdhhs.gov/about/grant-opportunities.

Covered Services

The Contractor will either directly provide, or subcontract with Community Based Organizations (CBOs) to provide, all of the Support Services described in the RFA to eligible individuals and their families, if applicable, *except that the Contractor may not sub-contract for the delivery of the COVID relief payment Support Service*

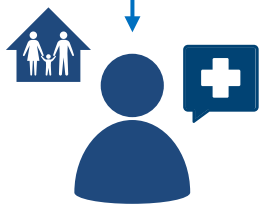
Covered Services Scenarios



Individual Eligible for Support Services

Individual-Level Services

- Nutrition Assistance:
  - Health Food Box – Delivered
  - Healthy Meal – Delivered
  - Medically Tailored Meal – Delivered
- COVID Relief Payment
- Private Transportation
- Medication Delivery
- COVID-Related Supplies



Individual Eligible with Family Members in Need

Family-Level Services

- Nutrition Assistance: Healthy Food Box – Delivered
  - Larger food boxes for either a family of up to 2 members or a family of 3+ members
- COVID Relief Payment ($800/family vs. $400/individual)
- Private Transportation
- COVID Related Supplies



Family Members Eligible for Support Services

- If multiple family members in the same household are eligible for Support Services, the Contractor may provide only one family member with **Family-Level Services**
- The Contractor must provide all other family members eligible for Support Services with **Individual-Level Services**

ALL support services must be offered in ALL counties.

Priority counties may change over time as the COVID-19 pandemic and areas of North Carolina with high case rates change.

Support Services Vendor Service Delivery Responsibilities

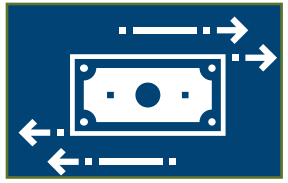
Responsibilities



Deliver services to eligible individuals and their families, if applicable, based on referrals from CHWs/LHD team members within fourteen (14) calendar days of contract award



Deliver services based on guidelines in the COVID-19 Quarantine and Isolation Support Services Reimbursement Rates (refer to appendix)



Provide the COVID relief payment as defined in the COVID-19 Quarantine and Isolation Support Services Reimbursement Rates (refer to appendix) and not subcontract for this service



Make every effort to provide the recommended Support Service(s) to the individual and family, if applicable, within 24 hours of receiving a referral, but must provide the service(s) within 72 hours of receiving a referral



Be intentional in providing Support Services in a culturally and linguistically appropriate manner to those disproportionately impacted by COVID-19, such as African American/Black, LatinX/Hispanic, Native American/American Indian, Immigrant, and Refugee populations

Support Services Vendor Communication and Collaboration Responsibilities

	Responsibilities
	Demonstrate understanding of the local community and the needs of its populations
	Provide culturally and linguistically appropriate services to individuals (e.g. interpreters or technology-assisted interpreter solution; sign language services).
	Ensure all personnel are comprehensively trained to perform their duties in accordance with the RFA, including but not limited to cultural sensitivity
	Prioritize creating a representative staff of the communities being served
	Collaborate with organizations, including CHW organizations and LHDs, that employ individuals who are assigned to support and coordinate referrals for individuals who are quarantining and isolating.
	Develop and distribute communications to key stakeholders, including CHW organizations and LHDs regarding which CBOs in addition to itself it has selected to provide Support Services and other updates
	Send all materials to NCDHHS for review and guidance prior to use

Community Partnership with CHW and Support Services Organizations

1. Welcome and Introduction
2. Quarantine and Isolation Support Overview
3. Community Health Worker Overview
4. Non-Congregate Shelter Overview
5. Support Services Overview
6. Community Partnership with Community Health Worker and Support Services Organizations
7. Next Steps
8. Q&A
9. Appendix

Questions?

Use the Q&A function to submit your question

Community Staff Should Refer Individuals with COVID-19 Related Needs to a CHW Vendor

Community Health Worker and Support Services programs are specialized programs aimed to serve and support North Carolina residents who need assistance quarantining and isolating successfully. Vendors managing the programs are intended to **alleviate DSS' and LHD's staff and resources,** so they can be allocated to other pressing areas. CHW vendors will connect individuals with COVID-19 related needs to supports to help them isolate or quarantine.

Communication



DSS and LHDs can communicate directly with the CHW operating in their counties to ensure referrals are made



DSS and LHDs can communicate with NCDHHS regarding vendors to provide feedback on the referral process

Collaboration



DSS and LHDs should understand CHW and Support Services programs and eligibility to be able to inform residents



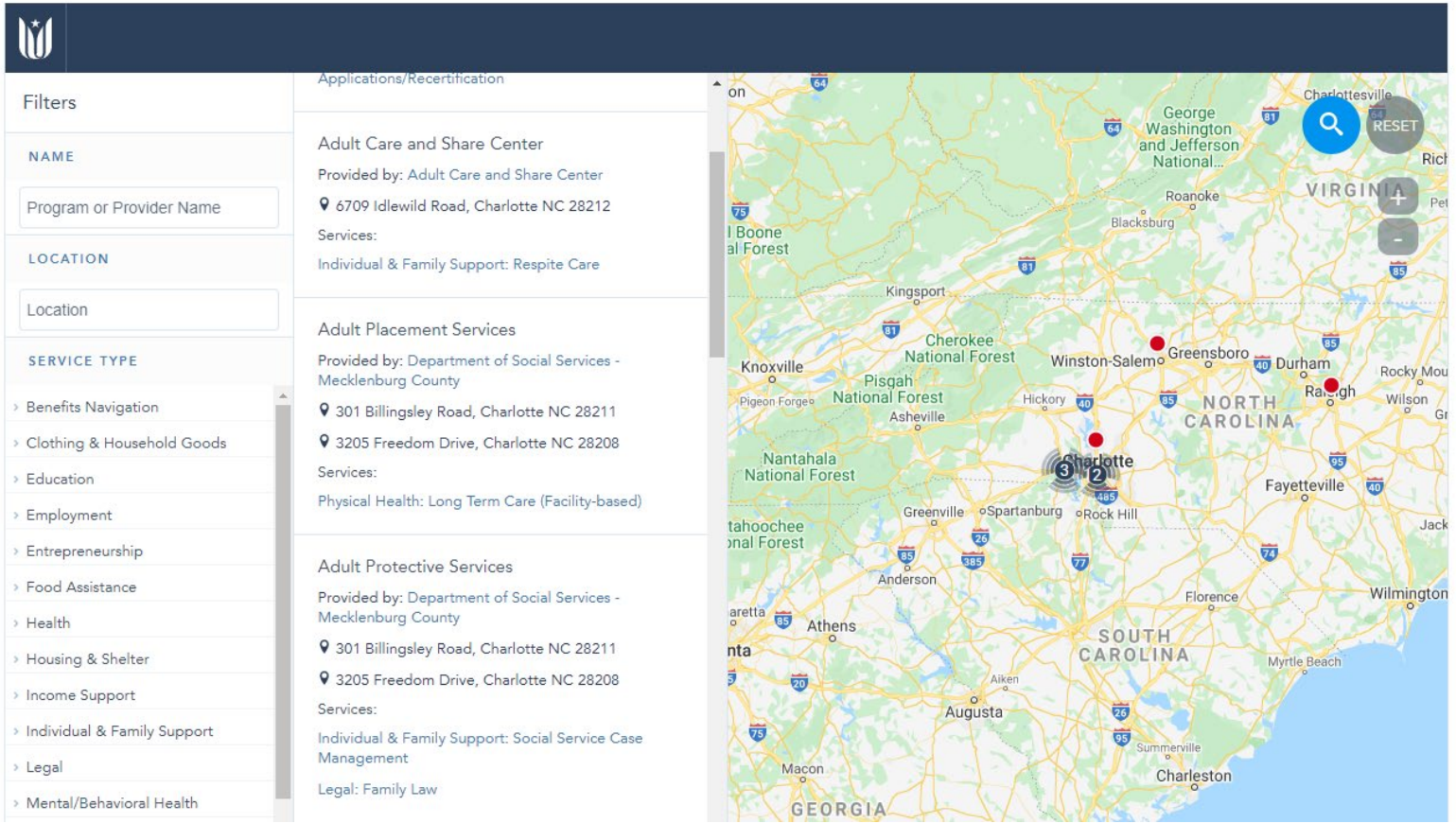
DSS and LHDs should refer residents to CHW organizations through NCCARE360 if they are onboarded to the platform or connect resident directly via email/phone

How to Identify a CHW Vendor in NCCARE360

Search for the CHW Vendor name in the “Provider Name” field.

LHD and DSS staff can search for CHW vendors in the “Provider Name” field in NCCARE360. A list of CHW vendors can be found in the appendix of this slide deck.

The CHW Vendor contact will connect the individual to COVID-19 related resources, including federally-funded Support Services to help the individual isolate or quarantine.



A Note for DSS Staff on COVID Relief Payments

One federally-funded Support Service that NC residents may be eligible for is a **one-time COVID-19 relief payment,** provided in response to the federally-declared COVID-19 public health emergency. This payment is meant to assist the individual and his or her family in meeting basic living expenses such as housing, food, utilities, medical costs, childcare costs, and household bills to help them isolate or quarantine.

The individual in isolation or quarantine may receive $400 and if that individual has a family that also needs financial assistance, the family may receive $800.

This one-time COVID-19 relief payment should NOT be counted toward taxable income in determining the individual or family's eligibility for public programs, such as Medicaid, SNAP, or WIC.

Playbook scenarios

Overview

Summary: CHW receives resident case and coordinates referral to support services

Identify

Scenario 1: LHD receives case and refers resident to CHW to receive support services

Scenario 2: Contact tracer/case investigator refers a resident to a CHW to receive support services

Scenario 3: CHW performs needs assessment, obtains attestation and refers resident to eligible services

Refer

Scenario 4: Support service vendor receives referral and delivers services to resident

Deliver

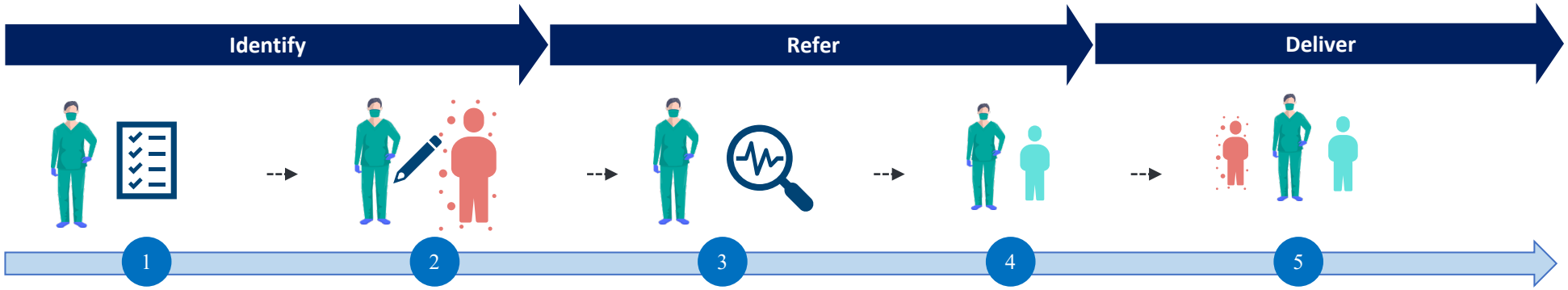
Scenario 5: CHW and support service vendor confirm service delivery to resident

SS CHW

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Overview: CHW receives resident case and coordinates referral to support services

How does an individual who needs to quarantine/isolate gets connected to Support Services via a CHW?



CHW receives resident cases from many channels:

- Testing sites
- Contract tracers/Case investigators
- LHDs
- PCPs
- Outreach workers
- CBOs
- Self referrals

Scenario 1

Scenario 2

Once the CHW enters the patient into NCCARE360 the CHW then completes an attestation form with the individual to see if they are eligible for federally-funded Support Services.

The CHW then assesses if the individual needs any additional supports outside of these federally-funded services through the needs assessment in NCCARE360.

**CHW provides resident with their contact information during initial interaction so that the resident may reach out to the CHW if new needs arise.*

Scenario 3

CHW identifies Support Service Vendors and subcontractors in NCCARE360 and submits referrals for federally-funded Support Services to these organizations. The CHW attaches the completed attestation form to the referral in NCCARE360.

The CHW submits referrals for any other services needed to any organizations identified in NCCARE360 based on the additional needs of the client outside of the Support Services referrals.

The CHW continues to be the resident's point of contact throughout the isolation/quarantine period if they need additional support.

Scenario 4

Support service vendor receives referral through NCCARE360 with attached attestation document.

Support service vendors deliver services to residents. Once complete, the vendor closes the referral in NCCARE360.

Support service vendors conduct invoicing, reimbursement and reporting.

Scenario 5

More details provided in subsequent scenarios

Refer to slide **15** for how to identify Support Service Vendors in NCCARE360

Refer to slide **14** for Attestation Form

Resident

SS Vendor

CHW

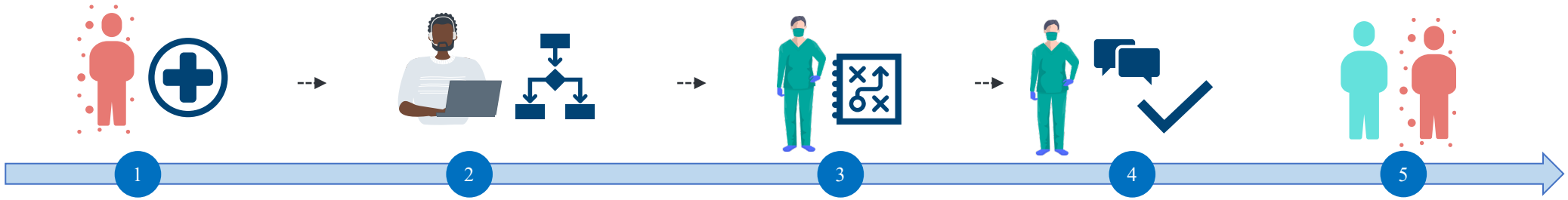
SS

CHW

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Scenario #1: LHD receives case and refers resident to CHW to receive support services

If a resident in need of support services has been connected to their LHD, how does the LHD refer the resident to a CHW to coordinate support services delivery?



1

The resident is in contact with the LHD and has expressed a need for support services to help quarantine or isolate safely.

Resident should be in quarantine or isolation because he/she:

- Tested positive for COVID-19
- Is waiting on test results
- Has been exposed to COVID-19
- Is a member of a high-risk group

2

The LHD may choose to fulfill the request internally or refer the request to a CHW vendor.*

If LHD can meet the requested Q&I need:
The LHD completes the attestation form on behalf of the resident to determine if the individual is eligible for DHHS-funded support services.

- If yes, the LHD searches for a Support Services Vendor in NCCARE360. The LHD creates a referral in NCCARE360 and attaches the resident's attestation form to the referral. If the resident has needs in *addition* to DHHS-funded support services, the LHD submits referrals for any other services needed to any organizations identified in NCCARE360, based on the resident's needs.
- If no, the LHD submits referrals for any services needed to any organizations identified in NCCARE360 based on the resident's needs.

If LHD cannot meet the requested need:
LHD enters referral to CHW in NCCARE360 or calls the CHW agency to initiate a referral.

3

CHW agency obtains referral from NCCARE360 or directly from LHD.

CHW agency assigns the work to a CHW who will follow up with resident and complete the attestation form for the resident and determine resident's needs.

After completing the attestation form, if the resident is not eligible for Support Services:
The CHW searches other services the resident may be eligible for.

If the resident is eligible for Support Services:
The CHW continues to step 4.

4

CHW connects resident to found resources via NCCARE360 or direct referral.

5

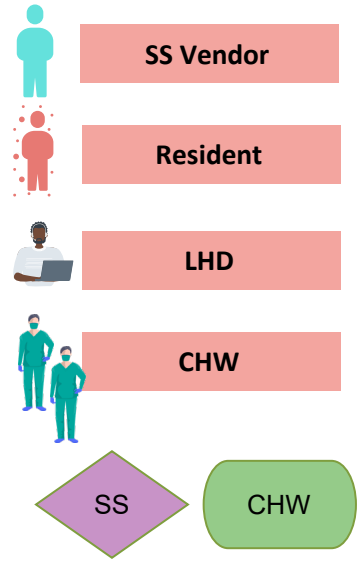
Scenario #4: Support service vendor receives referral and delivers services to resident.

Refer to slide **14** for Attestation Form

Refer to slide **15** for how to search for a Support Service Vendor in NCCARE360

Refer to slide **34** for how to search for a CHW vendor in NCCARE360

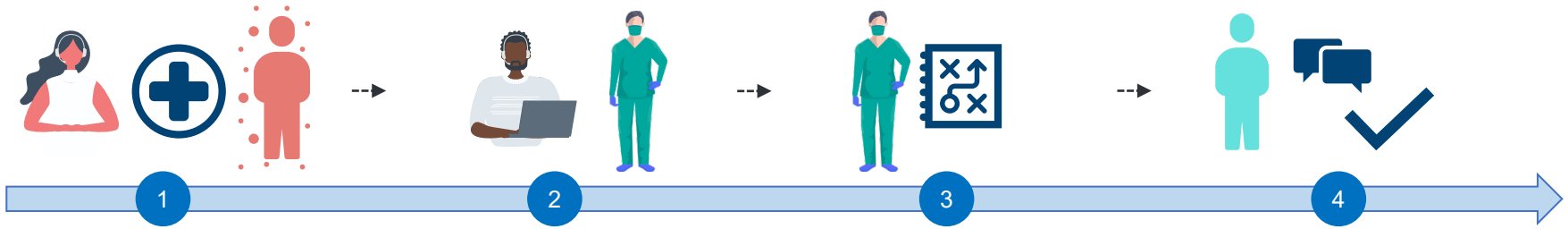
Refer to slide **48** for CHW vendor contact information



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Scenario #2: Contact tracer (CT)/ Case investigator (CI) refers a resident to a CHW to receive support services

How does a CT/CI refer a resident who has expressed a need for support services to a CHW?



A CI/CT identifies an individual who has isolation or quarantine support needs through the interview process or if the resident self-reports needs in the daily survey.

If CT/CI contacts LHD in the resident county:
If the CI/CT contacts the LHD, the LHD will process and fulfill the request **OR** the LHD will contact the CHW vendor to process the request via NCCARE360 or call/email (slide 38, step 2).

If CT/CI contacts CHW in the resident county:
If the CI/CT contacts the CHW vendor, the CHW vendor completes the attestation form with the resident and enters the referral in NCCARE360 (slide 40).

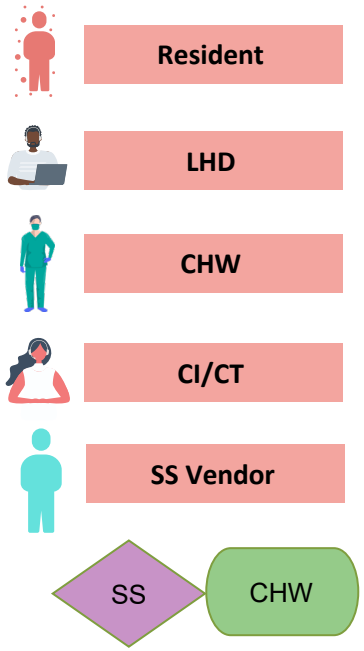
The CHW will create referrals to services in NCCARE360 based on the attestation form and needs assessment.

Support vendors will receive the referral, determine if they can accept the request, and fulfill the need.

Refer to slide **14** for Attestation Form

Refer to slide **38** for how an LHD refers a resident to a CHW or Support Service Vendor

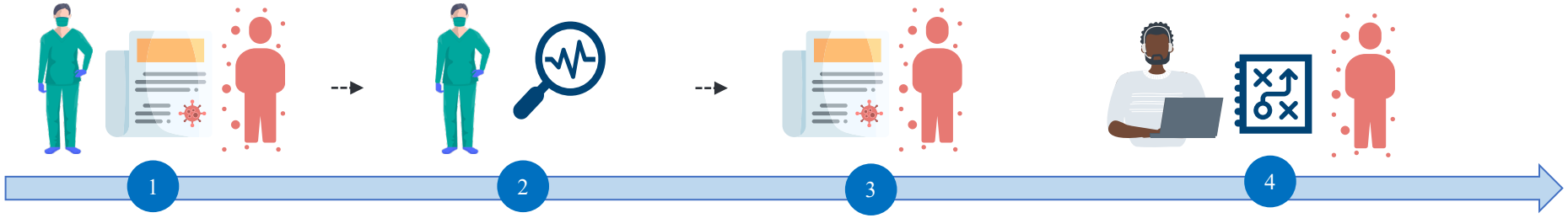
Refer to slide **40** for how a CHW connects a resident to services



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Scenario #3: CHW obtains attestation, performs needs assessment, and refers resident to eligible services

How does a CHW complete the attestation form and needs assessment to connect the resident to support services?



1

CHW completes the attestation form (offline, available electronically) with the individual to determine if they are eligible for DHHS-funded Support Services.

The CHW then assesses if the individual needs any additional supports outside of these DHHS-funded services by completing a needs assessment in NCCARE360.

2

CHW determines if resident is eligible for support resources.

If resident is eligible for Support Services:
CHW identifies vendors in NCCARE360.

If resident is not eligible for Support Services:
The CHW searches other services the resident may be eligible for outside of the Support Services vendors.

3

CHW attaches completed attestation form to a referral to Support Service Vendors in NCCARE360.

CHW makes referrals to any other vendors in NCCARE360 based on the resident's need.

To be eligible for support services, the resident must attest that they:

1. Live in target service area
2. Have been asked by a health care professional to quarantine or isolate
3. Will only be able to safely and effectively quarantine or isolate with one or more of the support services
4. Do not have alternative means of accessing the support services
5. Agree to remain in quarantine or isolation for the entire length of time they are directed to do so

*There are also additional attestation requirements for COVID-19 relief payment and medication delivery.

4

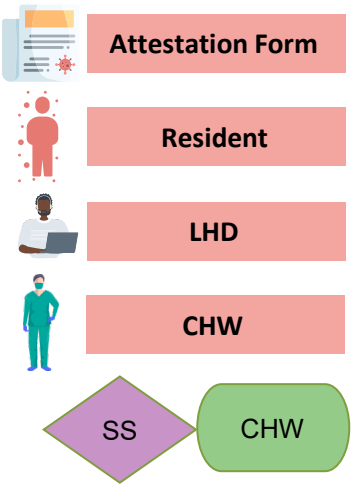
Vendor receives request in NCCARE360.

If vendor does not accept referral:
CHW is alerted and should identify a new vendor to route the referral.

If vendor accepts referral:
Vendor delivers support service to resident. Vendor closes referral in NCCARE360 (if applicable); if referral is out-of-network, vendor contacts CHW to close the loop. No further action is needed.

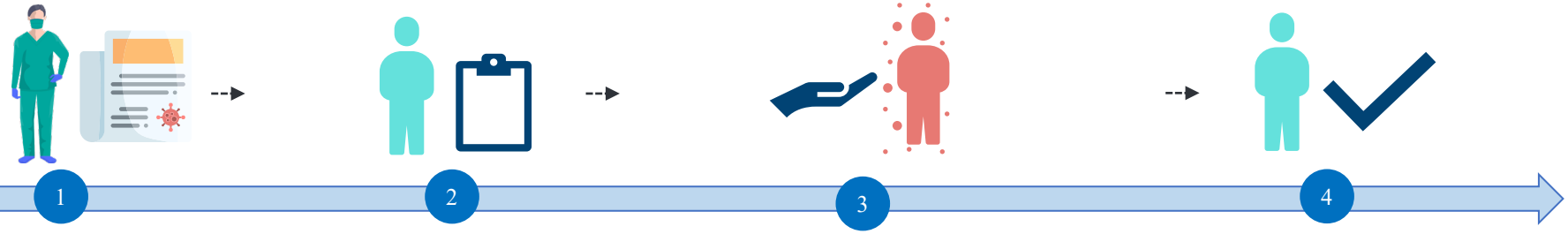
Refer to slide **14** for Attestation Form

Refer to slide **15** for how to search for a Support Service Vendor in NCCARE360



Scenario #4: Support service vendor receives referral and delivers services to resident

How does a support service vendor receive a referral and deliver services to the resident?



1. CHW administers attestation form and refers resident to support services.

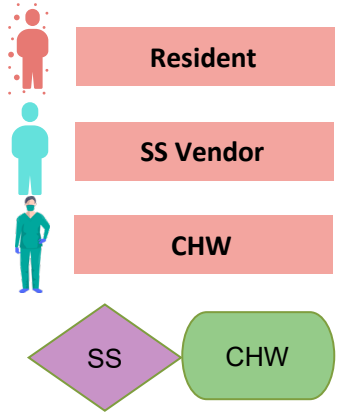
2. **If service is in-network in NCCARE360**:
Support services vendor receives request in NCCARE360 with the attestation included, accepts the referral, and processes the request. If referral is not accepted, referral is routed back to CHW restart the request processes.

If service is out-of-network in NCCARE360:
Support services vendor receives request (fax, phone call, etc.) with the attestation included, then processes the request.

3. After request is processed, resident receives support.

4. Support services vendor closes referral in NCCARE360 and reports referrals to DHHS on a monthly basis.

Refer to slide **14** for Attestation Form



Scenario #5: CHW and support service vendor confirm service delivery to resident

How does the CHW and support service vendor confirm service delivery and follow-up with resident?



Vendor delivers service to resident

Vendor closes referral in NCCARE360

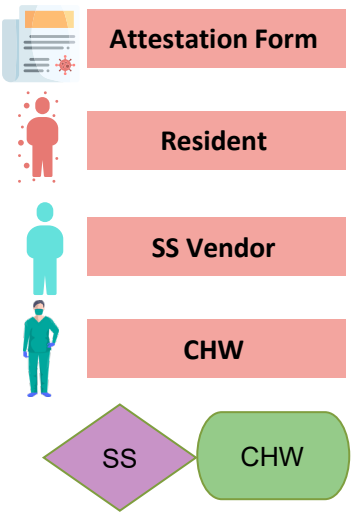
Resident may reach out to CHW for additional assistance.

**CHW provides resident with their contact information during initial interaction so that the resident may reach out to the CHW if new needs arise.*

The process ends here unless the resident initiates outreach

If new resident needs arise, the CHW can refer the resident to additional services.

CHW connects resident to resources via NCCARE360 or phone/fax/etc.



Next Steps

1. Welcome and Introduction
2. Quarantine and Isolation Support Overview
3. Community Health Worker Overview
4. Non-Congregate Shelter Overview
5. Support Services Overview
6. Community Partnership with Community Health Worker and Support Services Organizations
7. Next Steps
8. Q&A
9. Appendix

Questions?

Use the Q&A function to submit your question

Next Steps and Expectations



Connect with the CHW vendor in your county, and begin referring residents
Contact information in Appendix



NC DHHS will be setting up a regular cadence to meet with this community partners to discuss program updates and gather feedback



Enroll in NCCARE360 (if not currently enrolled) and contact community engagement manager (reference slide 17)

Q&A

1. Welcome and Introduction
2. Quarantine and Isolation Support Overview
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Quarantine and Isolation Support Resources

Community Health Worker

- Webpage: https://www.ncdhhs.gov/divisions/office-rural-health/community-health-workers
- About the Community Health Worker initiative: https://www.ncdhhs.gov/divisions/office-rural-health/community-health-workers/about-nc-community-health-worker-initiative
- Community Health Worker core competencies: https://files.nc.gov/ncdhhs/Core%20Comps%20and%20Process%20Graphics.pptx
- Community Health Worker resources: https://www.ncdhhs.gov/divisions/office-rural-health/community-health-workers/resources
- Community Health Worker press release: https://www.ncdhhs.gov/news/press-releases/ncdhhs-send-community-health-workers-underserved-covid-19-hot-spots

Support Services

- Support Services fact sheet: https://files.nc.gov/covid/COVID-19-Support-Services-Program-Fact-Sheet-FINAL-revised-8-5-20.pdf
- Webpage: https://covid19.ncdhhs.gov/information/human-services/assistance
- Health insurance options: https://covid19.ncdhhs.gov/information/human-services/health-insurance-options
- Food and nutrition services: https://covid19.ncdhhs.gov/information/human-services/changes-food-and-nutrition-services
- Resources for renters facing eviction: https://files.nc.gov/covid/documents/info-for/housing-sheltering/COVID19-Renters-Eviction-Resources-Flyer.pdf

Non-Congregate Shelter

- Webpage: https://covid19.ncdhhs.gov/information/housing-sheltering/non-congregate-sheltering
- Access points: https://files.nc.gov/covid/documents/info-for/housing-sheltering/NCS-Access-Points.pdf
- Direct FEMA reimbursement guidance: https://files.nc.gov/covid/documents/info-for/housing-sheltering/NCS-State-Centric-Guidance-Documents.pdf
- Expediated NCEM reimbursement guidance: https://files.nc.gov/covid/documents/info-for/housing-sheltering/NCS-State-Centric-Guidance-Documents.pdf
- Reporting: https://app.smartsheet.com/b/form/add5cfc0fda647b4bd3d00707ea5d875
- FAQs: https://files.nc.gov/covid/documents/info-for/housing-sheltering/NCS-State-Centric-FAQs.pdf
- MOA template: http://files.nc.gov/covid/documents/info-for/housing-sheltering/NCS-State-Centric-MOA-Template.docx

Community Health Worker Vendor Contact Information

Counties	Vendor	Contact	Phone	Email
Catawba	Catawba County Public Health	Honey Estrada	(828) 695-6683	honey@catawbacountync.gov
Alamance, Buncombe, Chatham, Craven, Davidson, Davie, Durham, Forsyth, Franklin, Gaston, Granville, Guilford, Harnett, Henderson, Johnston, Lee, Onslow, Orange, Pitt, Randolph, Surry, Vance, Wake, Warren, Wayne, Wilkes	Curamericas Global	Andrew Herrera	(919) 801-0612	Andrew@Curamericas.org
Cabarrus, Gaston, Mecklenburg, Montgomery, Rowan, Stanly, Union	Keystone Peer Review Organization (KEPRO)	Lisa Bennett		lbennett@Kepro.com
		Renee White	(919) 523-7999	stwhite@Kepro.com
Bladen, Columbus, Duplin, Pender, Robeson, Sampson	Mt. Calvary Center for Leadership Development	Jimmy Tate	(910) 284-9382	tatej99@gmail.com
		Carol Highsmith	(910) 789-1886	ch0917@ec.rr.com
Duplin, Greene, Johnston, Lenoir, Sampson, Wayne, Wilson	One to One with Youth	Danny King	(919) 922-7713	dking@adlainc.org
		Inonda Kind	(919) 987-2798	kone2one@aol.com
Johnston, Orange, Wake	Southeastern Healthcare of NC	Joyce Harper	(919) 987-2798	jharper@sehcnc.com
		Evelyn Sanders	(919) 987-2791	esanders@sehcnc.com
Beaufort, Bertie, Chowan, Dare, Duplin, Edgecombe, Halifax, Hertford, Northampton, Pitt	Vidant Health	Melissa Roupe	(252) 847-9350	myroupe@vidanthealth.com
		Crystal Dempsey	(252) 847-5162	Crystal.Dempsey@vidanthealth.com

Support Services Reimbursement Rates

	Service	Rate
	Home-delivered healthy food box (Individual)	$90.04/food box
	Home-delivered healthy food box (Family up to 2 members)	$90.04/food box
	Home-delivered healthy food box (Family more than 2 members)	$141.06/food box
	Home-delivered healthy meal (Individual)	$4.87/meal
	Home-delivered medically-tailored meal (Individual)	$5.05/meal
	COVID Relief Payment (Individual)	$400/individual
	COVID Relief Payment (Family)	$800/family
	Private, safe transportation to/from non-congregate shelter, medical visits, and testing sites (Individual)	$50 cap per ride, 6 one-way ride cap per individual
	Private, safe transportation to/from non-congregate shelter, medical visits, and testing sites (Family)	$50 cap per ride, 6 one-way ride cap per family
	Medication Delivery (Individual)	$1.50/medication mailed $3/medication courier-type delivered
	COVID-Related Supplies (e.g. face mask, hand sanitizer, cleaning supplies) (Individual)	$50/package
	COVID-Related Supplies (e.g. face mask, hand sanitizer, cleaning supplies) (Family)	$50/package

Contractors and subcontractors may invoice certain operational expenses separately, up to a cap.

Individual Level Services (1/4)

Service	Service Description & Reimbursement Requirements	Rate
Services Available to Individual		
Nutrition Assistance: Healthy Food Box – Delivered	• A healthy food box for delivery consists of an assortment of nutritious foods that is delivered to an isolating/quarantining individual's place of shelter. • Food selection should generally adhere to Dietary Guidelines for Americans, but is not required to. • Food selection should include meat/protein and other refrigerated foods. • Food may be tailored to meet cultural preferences or specific medical needs. • To receive this reimbursement rate, the healthy food box must constitute sufficient food for 3 meals and two snacks per day for one week (7 days). • Support Service Vendors and nutrition assistance organizations may establish a proportional amount of food and reimbursement if it is more appropriate to deliver less than one week's worth of food. For example, if an individual only has two days left in their isolation/quarantine period a food box may be delivered with two days' worth of food at a proportionally lower rate. • Individuals are eligible for up to 14 days' worth of food boxes if they isolate or quarantine for up to 14 days. This may be delivered via 2 food boxes that each cover 7 days or a different combination of proportional food boxes and reimbursements. • The reimbursement rate for a healthy food box is inclusive of all direct and indirect costs related to providing the service, including staff time and materials needed for preparing and delivering the service.	$90.04/food box
Nutrition Assistance: Healthy Meal – Delivered	• A healthy, home-delivered meal consists of a hot, cold, or frozen meal that is delivered to an isolating/quarantining individual's place of shelter. • Meals should generally adhere to Dietary Guidelines for Americans, but is not required to. • Meals may be tailored to meet cultural preferences or specific medical needs. • This reimbursement rate is for one meal. Individuals are eligible for up to 3 meals per day. • The reimbursement rate for a healthy meal is inclusive of all direct and indirect costs related to providing the service, including staff time and materials needed for preparing and delivering the service.	$4.87/meal

Individual Level Services (2/4)

Nutrition Assistance: Medically-Tailored, Delivered Meal	• A medically-tailored, delivered meal must be targeted to a specific disease or condition and developed in accordance with nutritional guidelines established by the National Food is Medicine Coalition or other appropriate guidelines. • Medically-tailored meals generally include an evaluation with a Registered Dietitian Nutritionist or Licensed Dietitian Nutritionist to assess and develop a medically-appropriate nutrition care plan and the preparation and delivery of the prescribed nutrition care regimen. • Food may be tailored to meet cultural preferences. • This reimbursement rate is for one meal. Individuals are eligible for up to 3 meals per day. • The reimbursement rate for a medically-tailored meal is inclusive of all direct and indirect costs related to providing the service, including staff time and materials needed for preparing and delivering the service.	$5.05/meal
COVID Relief Payment	This service is a one-time disaster relief payment provided to the isolating/quarantining individual in response to the federally-declared COVID-19 public health emergency. The intent of the payment is to assist the individual in meeting their basic living expenses such as housing, food, utilities, medical costs, child care costs, and household bills. The Support Service Vendor is responsible for managing this service and should bill administrative expenditures such as staff time to execute the COVID Relief Payments and mailing costs as operational expenses.	$400/individual

Individual Level Services (3/4)

Private Transportation	Provision of private transportation for the individual isolating/quarantining through one or more of the following services: (a) community transportation options (e.g., locally organized), (b) direct transportation by professional, private or semi-private vendor, or (c) account credits for taxis/ridesharing apps. Transportation services are only permissible to directly support the ability to isolate or quarantine and are subject to CHW approval. Examples of permissible transportation include, but are not limited to, transportation to/from: (a) non-congregate shelter, (b) medical visits, and (c) testing sites. Rides must be provided in a safe manner, with both the driver and passenger wearing face masks, cleaning employed between each rider, and, when applicable, with a service provider that has explicitly agreed to provide rides to a potentially or confirmed COVID-19 positive individual. Sub-contractors that provide transportation services are strongly encouraged to use large vehicles, such as vans, that allow six feet of distance between the driver and passenger. Sub-contractors providing transportation services may charge their standard meter rate, plus an additional 20% of the total ride fare to account for added costs related to taking appropriate COVID-19 precautions and cleaning the vehicle between riders. The Support Services Vendor is responsible for communicating with CHWs to coordinate transportation services and monitor caps.	$50 cap per ride, 6 one-way ride cap per individual
Medication Delivery	Delivery of prescription medication(s) to isolating/quarantining individual at their place of shelter. Reimbursement is for the delivery of the medication (not the medication itself) and may be directed to a pharmacy that mails or directly transports a medication to an individual. The reimbursement may also go to other organizations that facilitate the pick-up and direct delivery of a medication to an individual. The reimbursement rate for medication delivery is inclusive of all direct and indirect costs related to providing the service, including staff time and materials needed for preparing and delivering the service.	• $1.50/medication mailed • $3/medication courier-type delivered

Individual Level Services (4/4)

COVID-Related Supplies	Service consists of a package of COVID-related over-the-counter supplies known to help mitigate the spread and treat symptoms of COVID, including but not limited to: • Face masks • Hand sanitizer • Sanitizing wipes or liquid sanitizer with paper towels • Thermometer • Tylenol The reimbursement rate for COVID-related supplies is inclusive of all direct and indirect costs related to providing this service, including for sourcing, preparing, purchasing and delivering the supplies.	$50/package

Family Level Services (1/3)

Service	Service Description & Reimbursement Requirements	Rate
Services Available to Individual with Family Members in Household		
Nutrition Assistance: Healthy Food Box – Delivered	• A healthy food box for delivery consists of an assortment of nutritious foods that is delivered to an isolating/quarantining individual's place of shelter or to the individual's household members' place of shelter. • Food selection should generally adhere to Dietary Guidelines for Americans but is not required to. • Food selection should include meat/protein and other refrigerated foods. • Food may be tailored to meet cultural preferences or specific medical needs. • To receive this reimbursement rate, the healthy food box must constitute sufficient food for 3 meals and two snacks per day for one week (7 days). • Support Service Vendors and nutrition assistance organizations may establish a proportional amount of food and reimbursement if it is more appropriate to deliver less than one week's worth of food. For example, if an individual only has two days left in their Q/I period at the time the healthy food box is delivered. - If an individual isolating: (a) requires nutrition assistance, (b) has household/family members that also require nutrition assistance, and (c) is isolating separately from the household/family members, that individual may select to receive either healthy food boxes or meals for themselves. Service descriptions and rates in "Nutrition Assistance: Healthy Food Box – Delivered" for individuals (Appendix A) apply. Under these circumstances, the household/family members are only eligible for healthy food boxes. - If the individual and the household/family members require food assistance and are located in the same household during the isolation/quarantine, they collectively are only eligible for healthy food boxes. - The reimbursement rate for a healthy food box is inclusive of all direct and indirect costs related to providing the service, including staff time and materials needed for preparing and delivering the service.	• $90.04 for food box delivered to a household with up to two family members • $141.06 for food box delivered to a household with more than two family members

Family Level Services (2/3)

COVID Relief Payment	- This service is a one-time disaster relief payment provided to isolating/quarantining individual and their household members in response to the federally-declared COVID-19 public health emergency. The intent of the payment is to assist the individual and their household members in meeting their basic living expenses such as housing, food, utilities, and household bills. - If more than one household member is required to quarantine or isolate and is in need of and eligible for this Support Service, only one household member may receive the Household-Level benefit. All other household members required to quarantine or isolate in need of and eligible for this Support Service must receive it at the Individual-Level. - The Support Service Vendor is responsible for managing this service and should bill administrative expenditures such as staff time to execute the COVID Relief Payments and mailing costs as operational expenses.	$800/individual (individual quarantining or isolating receives $800 regardless of number of family/household members)
Private Transportation	- Provision of private transportation for the individual isolating/quarantining or a family member through one or more of the following services: (a) community transportation options (e.g., locally organized), (b) direct transportation by professional, private or semi-private vendor, or (c) account credits for taxis/ridesharing apps. - Transportation services are only permissible to directly support the ability to isolate or quarantine and are subject to CHW approval. Examples of permissible transportation include, but are not limited to, transportation to/from: (a) non-congregate shelter, (b) medical visits, and (c) testing sites. - Rides must be provided in a safe manner, with both the driver and passenger wearing face masks, cleaning employed between each rider, and, when applicable, with a service provider that has explicitly agreed to provide rides to a potentially or confirmed COVID-19 positive individual. Sub-contractors that provide transportation services are strongly encouraged to use large vehicles, such as a van, that allow six feet of distance between the driver and passenger. - Sub-contractors providing transportation services may charge their standard meter rate, in addition to 20% of the total ride fare to account for added costs related to taking appropriate COVID-19 precautions and cleaning the vehicle between riders. - The Support Services Vendor is responsible for communicating with CHWs to coordinate transportation services and monitor caps.	$50 cap per ride, 6 one-way ride cap per family

Family Level Services (3/3)

COVID-Related Supplies	Service consists of a package of COVID-related over-the-counter supplies known to help mitigate the spread and treat symptoms of COVID, including but not limited to: • Face masks • Hand sanitizer • Sanitizing wipes or liquid sanitizer with paper towels • Thermometer • Tylenol - Up to two COVID-Related Supplies packages may be provided when an individual who needs to isolate: (a) chooses to isolate outside of his/her primary residence, and (b) attests to having family members in the primary residence that require a second COVID-Related Supplies package. - The reimbursement rate for COVID-related supplies is inclusive of all direct and indirect costs related to providing this service, including for sourcing, preparing, purchasing and delivering the supplies.	$50/package

Ms. Stephanie Nantz

Assistant Director

Office of Rural Health

NC DHHS

Uninsured NC Residents COVID-19 Related Services Payment Request Portal

Stephanie Nantz
Assistant Director
Stephanie.Nantz@dhhs.nc.gov
October 7, 2020

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES



Many North Carolina residents have lost their health insurance
due to the COVID-19 pandemic and still require healthcare



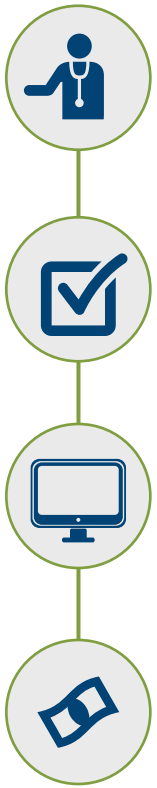
Program Overview

North Carolina developed a program to support uninsured North Carolina residents get access to healthcare for COVID-19 related needs

The program is aimed to quickly distribute reimbursement funds to primary care providers (PCP) who are providing COVID-19 related services to uninsured North Carolina residents

The program provides $150 for each eligible claim to PCPs while the fund lasts or until Dec. 30, 2020, whichever comes first

Primary Care Provider Process



Provides COVID-19 related services (e.g. follow-up appointments)

Confirms that resident has no other healthcare coverage (e.g. Medicaid, Medicare, or other health insurance) and completes the attestation form in NCTracks

Files reimbursement claim through NCTracks portal

Receives $150 payment/encounter not per service

IMPORTANT: If you are attesting that you are not receiving any other funding to support the encounter, this includes co-payment or any other forms of payment from the individual.

NCTracks Attestation Statement

By submitting this transaction to the NC Department of Health and Human Services, I attest that the service performed is accurately represented as shown, and the patient was uninsured and the service was a COVID-19 related primary care service. I further attest that claims have been either submitted to the HRSA portal and denied or were not submitted because they were ineligible for HRSA reimbursement. I understand this transaction is a request for payment from CARES Act funding and is subject to audit by the Office of the State Auditor and other oversight organizations.

Next Steps

PCP Responsibilities



Ensure practice is enrolled in NCTracks as a provider; Enroll in NCTracks through the portal



Hold previous and ongoing claims backdated as of Sept. 1, 2020 until portal is live; Submit claims regularly when portal is live on Oct. 30, 2020



Expect additional communications regarding the uninsured portal including an email announcement, Fact Sheet, webinar and training before and after Oct. 30, 2020



Continue to check DHHS website for next steps, updates, and status of available funds

Uninsured Portal Communications and Training High Level Timeline

Key Audience:
- Providers
- Health Care Partners
- CCNC/AHEC
- LHDs
- CHWs

Begin eligibility

Sept. 1

Eligible claims from Sept. 1, 2020 can be retroactively submitted for reimbursement

Inform partners

Sept. – Oct.

Inform providers via webinars: PCAC (9/18), Healthcare Coalition (10/7), AHEC Open House (10/9), CHW Vendor Meeting (10/28)

Open portal

Late Oct.

Portal opens late Oct. and providers can retroactively submit claims and regularly submit new claims

End program

Dec. 30

Program ends Dec. 30, 2020 or sooner if funds are depleted



Announce program

Oct. 2

Send announcements to providers, healthcare partners, CCNC, AHEC and LHDs (e.g. DHHS Medicaid website updates, fact sheet, email announcement, special bulletin, NCTracks e-blast) about new program

Train users

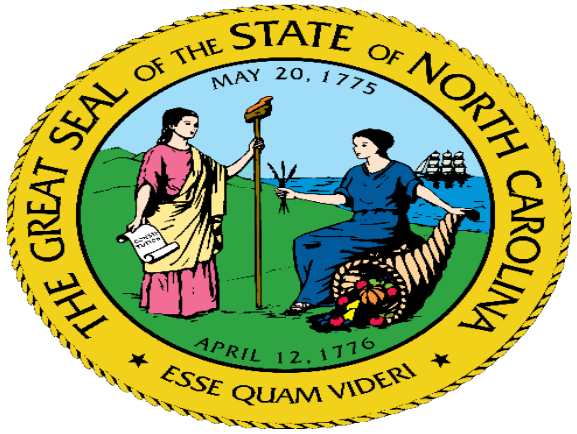
Nov. 9 – 20

Conduct 6 training sessions to educate primary care practices on reimbursement process in NCTracks

Remind providers

Nov. – Dec.

Send regular reminder emails to providers to submit claims and update website with status of available funds



Mr. Franklin Walker

Vice President

Rural Health Systems Innovation

North Carolina Medical Society Foundation

***Please note there are no slides for this speaker.**

Open Discussion

- Questions and Comments
- Upcoming Monthly Webinars:
  - November 4th
  - December 2nd



Thank you for your work in NC to make our state safe!

COVID-19 Healthcare Coalition

October 7, 2020