

North Carolina Institute of Medicine

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Organizational Structure and Mission

- The NCIOM is a separate quasi-state agency that is housed within the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill (Sheps Center).
- Mission:
 - To seek constructive solutions to statewide problems that impede the improvement of health and efficient and effective delivery of health care for all North Carolina citizens.
 - To serve an advisory function at the request of the Governor, the General Assembly, and/or agencies of state government, and to assist in the formation of public policy on complex and interrelated issues concerning health and healthcare for the people of North Carolina.

NCIOM Task Force Studies

- NCIOM studies issues at the request of:
 - North Carolina General Assembly (NCGA)
 - North Carolina state agencies
 - North Carolina foundations
 - Health professional organizations
 - Other nonprofit organizations
 - NCIOM Board
- Often work in collaboration with other organizations to study health issues



Task Force Process

- NCIOM creates broad-based task forces to study health issues facing the state
 - Task Forces are guided by co-chairs who run the meetings
 - Task Forces generally comprised of 30-60 people, who are broadly representative of stakeholder groups and other interested people
 - Task Force members typically include representatives of state and local policy makers and agency officials, health professionals, insurers, business, faith, and community leaders, consumers and other interested individuals
 - Work often guided by a smaller steering committee
 - Meetings are open to the public



Using Research to Inform Policy

- NCIOM staff and other task force experts identify and synthesize relevant research
 - Studies focus on identifying evidence-based and evidence-informed or promising policies, programs and practices
 - Information is used to inform the task force deliberation process
- Task Force uses the information to shape policy and programmatic recommendations

Implementation of Task Force Recommendations

- Task Force recommendations aimed at:
 - Policy makers (legislature, state and local agencies)
 - Health care professionals
 - Others, including: educational institutions businesses, and the faith community
- *Between 50-90% of Task Force recommendations are implemented, in whole or in part, within 3-5 years of release of the report*

Current Task Force: Accountable Care Communities

- Purpose: To study the ways in which community-based organizations and health systems can partner to address upstream determinants of health, especially as we move towards value-based payment
- Co-chairs: Dr. Ron Paulus, Secretary Cohen, Mayor Atkins, and Reuben Blackwell
- Funding: The Duke Endowment and Kate B. Reynolds
- Timeline: Report to be published in March

Current Task Force: Serious Illness Care

- Purpose
 - Access
 - Training/education
 - Communication/systems/advanced care planning
 - Funding and reimbursement
 - Public education and engagement
- Co-chairs: Paulette Dillard, Joyce Massey-Smith, Jonathan Fischer
- Funding: The Duke Endowment, NCHCFA, TCC, AHHCNC
- Timeline: Starting in April, will run through approximately February, 2020

Current Task Force: Risk Appropriate Perinatal System of Care

- Purpose
 - Response to SL 2018-93, partnership with DHHS.
 - Levels of care (maternity and neonatal)
 - Referrals and transports
 - Gaps and disparities
- Co-chairs: Kate Menard, Kelly Kimple, Walidah Karim, Latoshia Rouse
- Funding
 - Contract with DHHS
- Timeline
 - Have met twice, anticipate finishing meetings fall 2019.



Current Task Force: Healthy North Carolina 2030

- Purpose: To develop a common set of indicators for the Division of Public Health and the Department of Health and Human Services to serve as targets for the state for the next decade. Focus across four areas: health behavior, clinical care, physical environment, and social and economic factors.
- Co-chairs: Laura Gerald, Jack Cecil, Betsey Tilson, Ronny Bell
- Funding: The Duke Endowment, Kate B. Reynolds Charitable Trust, BCBS NC Foundation
- Timeline: Community meetings ongoing (#8, all across the state), see handout. Report published January 2020.



Current Task Force: Access to Services for Deaf and Hard of Hearing Populations

- Purpose: To address barriers to the access of health services for the deaf and hard of hearing populations as well as design features that make health settings welcoming for people that are deaf and hard of hearing.
- Co-chairs: Mark Benton, David Rosenthal
- Funding: Contract with Department of Health and Human Services.
- Timeline: Meetings March through September



Current Project: Essentials for Childhood

- Purpose: Staff and organize working groups that have evolved from Essentials Task Force; align goals of Essentials TF with other statewide initiatives
- Working groups include:
 - Trauma-informed communities
 - Evidence-based practice
 - Ad hoc: messaging/public awareness, data working group
 - Strategies related to ACEs for revised Opioid Action Plan
- Funding: NCDHSS via CDC grant
- Funded through September 30, 2019

Recent Study: Health Care Analytics

- Purpose: To identify quality metrics that are most important for improving population health to be used in Medicaid reform
- Co-chairs: Warren Newton (AHEC), Jim Hunter (CHS), Annette Dubard (CCNC)
- Funding: Contract with Division of Health Benefits
- Published October 2017

Recent Study: All-Payer Claims Database



- An APCD is a database with all claims for all health services in a common repository.
- Includes medical, dental, behavioral, and pharmacy claims
- Can be used for population health, research, quality improvement, cost containment, consumer transparency
- Goal: to determine if an APCD is right for NC. Governance, financing, platform, etc.
- Co-Chairs: Blan Godfrey, NC State, Joe Cooper, DHHS CIO.
- Funding: The Duke Endowment
- Published March 2017

Recent study: Alzheimer's Disease and Related Dementia



- Charge: To develop a state plan addressing 16 areas named in legislation to prepare NC to best prevent dementia and meet the needs of North Carolinians with dementia and their caregivers.
- Co-Chairs: Lisa Gwyther, Director, Family Support Program, Duke University Medical Center; Doug Dickerson, State Director, AARP NC; and Goldie Byrd, Dean, Colleges of Arts and Sciences, NC A&T
- 45 additional people serving on Task Force and steering committee
- Funding: The Duke Endowment, Winston-Salem Foundation, NC DHHS, AARP NC, Leading Age NC, Alzheimer's NC, Alzheimer's Association
- Published in April, 2016. Of 33 recommendations, about 2/3 already partially or fully implemented.

Recently Completed Studies

- **Mental Health and Substance Use** (Done in partnership with NCDHSS, funded by KBR Trust, published October, 2016)
- **Patient and Family Engagement** (Done in partnership with the NCQC, NCMS, CCNC, and FNE, funded by The Duke Endowment, published March 2015).
- **Essentials for Childhood: Safe Stable and Nurturing Relationships and Environments to Prevent Maltreatment** (Done in partnership with DHHS and funded by the CDC, published March, 2015)



Recently Completed Studies

- **Rural Health Action Plan** (done in partnership with ORHCC and KBR Trust, published August 2014)
- **Early Childhood Obesity Prevention** (at the request of and funded by the Blue Cross and Blue Shield of North Carolina Foundation. In collaboration with the NC Partnership for Children, released Sept. 2013)
- **Children's Preventive Oral Health Services** (at the request of and funded by Blue Cross and Blue Shield of North Carolina Foundation, the NC Office of Rural Health and Community Care, NC Division of Public Health and in collaboration with the Oral Health Section of the Division of Public Health, released June 2013)

Common Themes in Recent Task Force Work

- Expanding access to health care
- Improving quality and efficiency
- Improving population health
- Developing new delivery systems
- Implementing evidence-based or evidence-informed strategies

Progress Implementing Past Recommendations

- Implementing Evidence-Based Strategies (Update 2016, report 2012)
 - Progress on 100% of recommendations
- Task Force on Transitions for People with Developmental Disabilities (update 2016, report 2009)
 - Progress on 79% of recommendations
- Update on Co-location in Adult care Homes (update 2016, report 2012)
 - Progress on 67% of recommendations
- Task Force on Substance Abuse (update 2013, report 2009)
 - Progress on 55% of recommendations
- Primary Care and Specialty Supply (update 2013, report 2007)
 - Progress on 76% of recommendations

NCMJ Contributors

- The Duke Endowment is a co-publisher of the North Carolina Medical Journal (NCMJ), largest supporter
- Health professional associations have supported the NCMJ including:
 - NC Medical Society
 - NC Dental Society
 - NC Hospital Association
 - LeadingAge NC
 - Alliant QIO
- Advertising



- Jan/Feb 2019 – Newborn Screening in NC. Don Bailey and Scott Zimmerman
- Nov/Dec 2018 – Rural Health in North Carolina. Tom Irons and Maggie Sauer
- Sept/Oct 2018 – Health and the Environment in NC. Kim Lyerly and David Peden



- Aug/Sept 2018 – Team-Based Care in NC- Meg Zomorodi



- June/July 2018 – The Opioid Crisis: Substance Use and Harm Reduction in NC. – Susan Kansagra and Mandy Cohen



- April/May 2018 – Addressing Adverse Childhood Experiences in NC. Kelly Kimple and Susan Kansagra

- March/April: Immigrant and Refugee Health
- May/June: Health Care Workforce
- July/August: Technology in Healthcare
- September/Oct: Medicaid Transformation
- Nov/Dec: Prison Health

Legislative Health Policy Fellows Program

- Planning on offering to legislators every other year (between long and short session). 3 days of lectures and discussions with experts in health policy.
- Have created a number of online resources for legislators and other stakeholders.
- Would like to be a service to legislative staff. This is our 1st attempt at programming for you. Please tell us what you think and how we can serve you better.

How to work with NCIOM

- Call us—rapid requests for information, extra reports and journal issues. We can also consider an issue brief around a topic of timely relevance. If we can't help you, we will try to get you to the right resource.
- Consider working with us on future legislative study bills.

For More Information

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www.ncmedicaljournal.com
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