

Welcome!



North Carolina Institute of Medicine Overview of 2016-2017

Adam Zolotor, MD, DrPH President & CEO

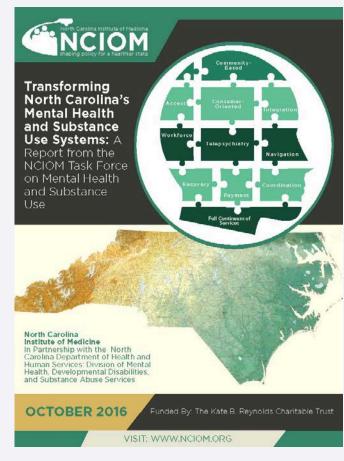
September 25, 2017

- Overview of 2016-2017 NCIOM Activities
- Current Work
- New Website
- NCMJ
- Upcoming Projects
- Overview of Today's Agenda
- Special Thanks



Mental Health & Substance Abuse

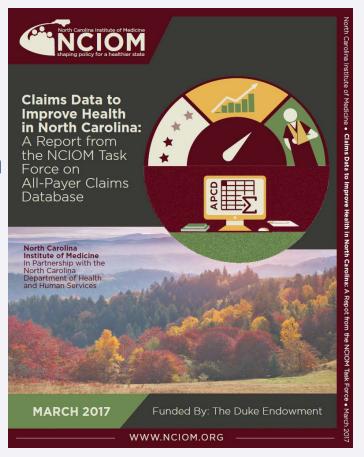
- Co-chairs: Senator Angela Bryant, Representative Josh Dobson, John Santopietro, Courtney Cantrell
- Funded by Kate B. Reynolds.
- Focused on cross-cutting issues, older adults, and adolescents





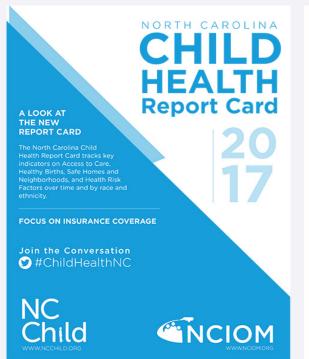
All-Payer Claims Database

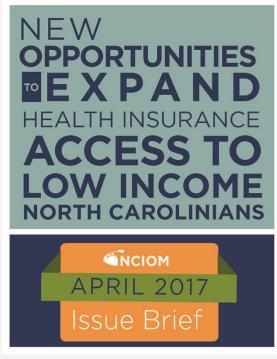
- Co-chaired by Joe Cooper and Blanton Godfrey.
- Funded by The Duke Endowment.
- Developed consensus around the development of a system to aggregate health claims to be used to understand care gaps, variation in care, cost, quality, and improve transparency.





Issue Briefs & Data Reports







Impact of the American
Health Care Act:
How Repeal and Replace
Could Affect
North Carolina



Characteristics of Uninsured North Carolinians

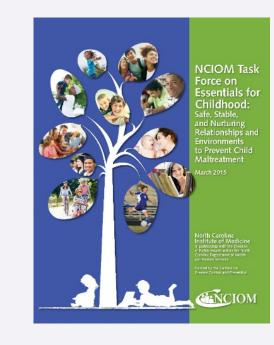


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Essentials for Childhood

- Funded by NC DHHS with support from the Centers for Disease Control and Prevention
- Ongoing support of work groups from Task Force (2014-2015).
 - Evidence-based practice work group
 - Trauma informed practices work group
 - Work across stakeholder groups (pathways, especially data group, children's cabinet, etc.)







Bridging Local Systems

Strategies for Behavioral Health & Social Services Collaboration

- Strategies for Behavioral Health & Social Services Collaboration.
- Funded by The Duke Endowment.
- Series of regional leadership summits between LME/MCOs and DSS agencies in catchment area.





Health Care Analytics

- Co-chairs: Annette Dubard, Jim Hunter, Warren Newton
- Funding: NC DHHS
- Identified measures in five areas: population level, health system level, cost, patient experience of care, and workforce wellbeing.
- We anticipate that these metrics will be used for measuring and driving quality in Medicaid Transformation.

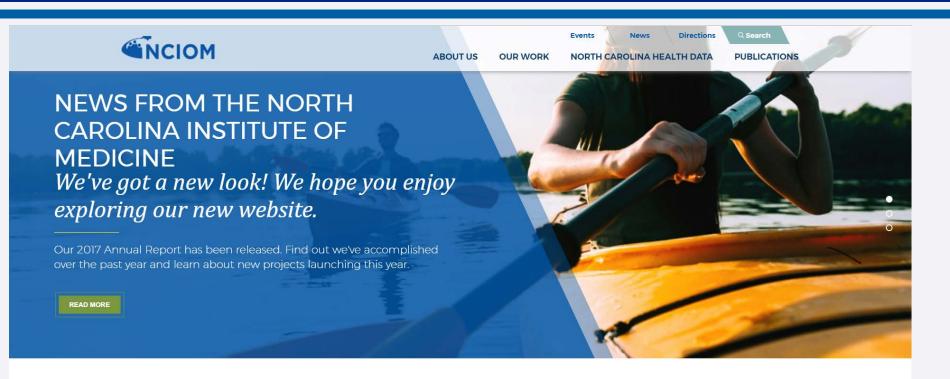




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Our New Website



SHAPING POLICY FOR A HEALTHIER STATE

The North Carolina Institute of Medicine, NCIOM, is an independent organization focused on improving the health and well-being of North Carolinians by providing analysis on the health and well-being of North Carolinians, identifying solutions to the health issues facing our state, building consensus toward evidence-based solutions, and informing health policy at the state and local level.

LEARN MORE

We bring together diverse stakeholders to develop solutions to the complex health problems in North Carolina.

The NCIOM's task forces and other projects, including the NCMJ, have led to sustained improvements in the health and well-being of North Carolinians.



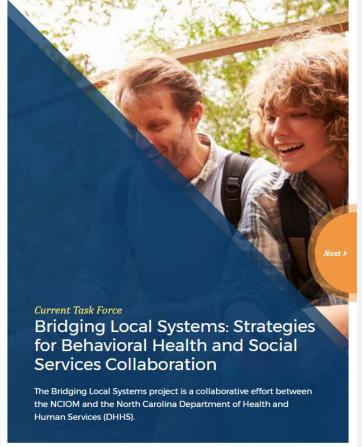
Our New Website













Our New Website

NORTH CAROLINA HEALTH PROFILE

INTERACTIVE COUNTY MAP

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Select a Topic

- O Uninsured Rate
- Population
- Percentage on Medicaid
- Median Household Income



County by Name

Alexander Alleghany Anson Beaufort Bertie Bladen Brunswick Cabarrus Caldwell Camden Carteret Catawba Chatham

Chowan Clay Cleveland Columbus CravenCumberland Currituck Davidson Davie Duplin Durham Edgecombe

Forsyth Franklin Gaston Gates Granville Creene Guilford

Harnett Haywood Iredell JacksonJohnston

Lincoln Macon Madison McDowell Mecklenburg Mitchell Montgomery New Hanover Northampton Orange Pamlico Pasquotank Pender Perquimans Polk Randolph Richmond Robeson Rockingham

Rutherford

Sampson

Scotland

Stokes Surry Swain Transylvania Union Vance Wake Warren Washington Watauga Wayne Wilkes Wilson



DURHAM COUNTY

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KEY DATA POINT 2 TITLE

KEY DATA POINT 3 TITLE

Dissification	Urban/Rural	Urban
	Tier	3
	Metro/Micro/Neitner	Metro
Economic Welbeing	Percent Living in Poverty	19.3%
	Unemployment Rate	5.1%
	Median Household Income	\$50,885
	Percent adults who report being always or usually worried or stressed atroot having enough money to pay their rand/mortgage?	15.4%
	Percent people spending more than 30% of their income on rental housing (2006-2010)	47.1%
	Percent adults who report being always or usually worried or stressed about having enough money to buy nutritious meals?	9.2%
Education	Four-year high school graduation rate	79.5%
	Percent of adults aged 25-64 years with some post secondary equation (2014)	71.2%
	Percent Children in child care at a center with 4 or 5 star rating (e.g. higher quality careers) (2011)	71%
Physical Activity & Nutrition	Adult abusity (percent of adults that report a BMI+30)	29%
	Physical inactivity (percent of edults aged 20 and over reporting no letture time physical activity)	20%
	Limited access to healthy foods (parcent of population who are low income and do not like close to a grocery store)	6%
	Fast food restaurants (percent of all restaurants that are fast-food establishments)(2012)	53X
	Diabetes (Percent of adults aged 20 and above with diagnosed diabetes)	9%
Substance Abuse	Traffic crashes that are alcehol-related (2011)	3.94%
Mental Health	Poor mental health days	2.9%
	Suicide rate (per 100,000 population 2008-2012)	8.7%
Uninsured Data at the Country Level	Percent Uninsured Under 85 (2012)	19.8%
realth Care Professional to Repulsiven Ratio Professionals per (0,000)	All Physicians	74.7%
	Primary Care Physicians	16.2%
	Nurse Practitioners	13.6%
	Physician Assistants	77,756
	Psychiatrists	50%
	General Surgeons	37%
	Deaths	CHEM



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2016 - 2017 Issues























- 77 (5) Infectious Diseases in North Carolina
- 77 (6) Women's Health in North Carolina
- 78 (1) Medicaid in North Carolina: What is Over the Horizon?
- 78 (2) Hearing and Vision in North Carolina: Screening, Preventing, and Preserving
- 78 (3) Beyond the Counter: Pharmacists' Expanding Role in Health Care
- 78 (4) Accountable Care Communities:
 Connecting Communities and Health Care





Upcoming Issues

- 78 (5) Musculoskeletal Health
- 78 (6) Oral Health
- 79 (1) The Economics of Medicine: High Costs in NC
- 79 (2) Community Approaches to Childhood Trauma
- 79 (3) Addiction
- 79 (4) TBD
- 79 (5) Environmental Health
- 79 (6) Immigrant Health



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Legislative Health Policy Fellows

- We seek will seek to provide relevant and up to date information for local and state policy makers, including data, issue briefs, and resources regarding health policy.
- We plan to host classes of legislators every other year for three days of learning and discussion about health policy issues.
- We plan to publish at least two issue briefs every other year in response to needs identified by legislators.
- Partially funded by BCBS Foundation of NC. Two other grant applications pending.





Accountable Care Communities

- Accountable Care Communities include partnerships between health systems/providers and social service organizations.
- These partnerships work best when risk and reward are shared.
- An ACC encourages aligned investments to improve health such as housing for people with unstable CHF or food security for people with insulin dependent diabetes.
- We often think of an ACC as an opportunity to invest of social determinants of health.



Accountable Care Communities

- ACCs across the country have begun to address:
 - Food security
 - Housing
 - Transportation
 - Employment
 - Education
 - Child Care
 - Caregiving
 - Poverty
 - Health Equity
- What's is a name?





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Keynote Speaker

Jennifer DeCubellis

Deputy County Administrator

Health & Human Resources

Hennepin County, MN



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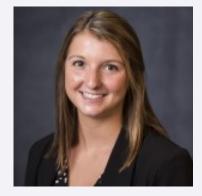
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How to partner

- Visit our new website
- Sign up for NCIOM newsletter
- Subscribe to the NCMJ (electronic is free!)
- Check out our annual report
- And for those inclined, consider financial support to help advance our mission. This support will help us produce more issue briefs, additional analysis, and improved communication. See the back of the annual report for more information.



For More Information

• Websites: <u>www.nciom.org</u>

www.ncmedicaljournal.com

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