



Community Care of North Carolina

Improving Care, Saving Money

What Is Community Care of North Carolina?

Established in 1998, Community Care is a partnership between NC DHHS and 14 independent networks across the state covering all 100 NC counties.

500 North Carolinians are now directly employed by Community Care and its networks, which include 18 clinical pharmacists and 10 psychiatrists.

More than 4,000 physicians work closely with CCNC's networks as do most of the state's hospitals and LMEs.

CCNC networks bring local doctors, hospitals, public health departments, mental health agencies and other community providers together to improve care and save money for Medicaid and other state and local programs.

Community Care serves more than 1 million North Carolinians, including more than 55,000 uninsured North Carolinians.

CCNC is an award-winning, innovative program unlike any other in the US.

More than 775,000 of Community Care's clients are children.

More than 179,000 of CCNC's clients are aged, blind or disabled and 41 percent of these clients have some kind of mental illness, developmental disability or substance abuse issue.

The Results: Savings *and* Quality Care

From 2003-2008, CCNC has saved more than \$1.6 Billion in Medicaid costs, according to independent evaluations by Mercer Consultants.

During this time period, every dollar invested in the CCNC program generated \$8 in savings.

North Carolina was one of only three states to have a decrease in Medicaid costs between FY 2008 and FY 2009.

Through January 2010, Medicaid costs on a per member per month (pmpm) basis are 5.3% below FY 2009 pmpm costs.

CCNC is in the top 10% in national quality measures for diabetes, asthma, and heart disease compared to Medicaid managed care organizations.

What Makes Community Care Special?

Physicians get regular performance information that drives their improvement.

Hospitals provide data and collaborate in patient management.

Health departments, LMEs, AHEC, and DSS are key partners.

Efforts to improve care and save money are owned by those who care for the patients.

Care managers know the patients, the community and the resources that are available.

Care managers connect the dots between patient, physician, specialist, hospital, home health, and other community resources.

Physicians work with other physicians to improve care and save money.

Community Care By the Numbers

Enrollment
(May, 2010)

1,026,640 patients

179,249 Aged/Blind/Disabled

1,402 Provider Practices

More than 500 Staff Members including
central support and 14 networks

More than 4,000 physicians

Total annual budget
for CCNC and its 14 networks
is less than one percent of total
Medicaid costs in North Carolina.

New Community Care Goals from 2009 General Assembly

Focus on patients with multiple chronic diseases

Reduce 30-day hospital readmission rate for all patients

Reduce Emergency Room visits among aged, blind and disabled (ABD) patients

Reduce prescription drug costs

Improve physicians' adherence to evidence-based treatment guidelines

How can Community Care achieve these goals?

Help aged, blind and disabled (ABD) patients who are hospitalized

Coordinate home health and doctor visits after a hospital stays, including reviewing medications, to prevent readmissions to the hospital

Manage Medicaid patients in the Aged, Blind and Disabled category with 2 or more chronic conditions to prevent hospital stays and expensive complications

Coordinate care, including home services, for patients with multiple agencies involved to prevent duplication of services

Help patients access community resources to get well and stay well

Community Care and Mental Health

Among the Aged, Blind and Disabled in Community Care, 41 percent are also mental health patients

Network physicians screen for patients with mental health or substance abuse issues

Community Care networks connects patients to local LMEs for triage and referral

Community Care networks collaborate with mental health service providers and primary care doctors

Community Care networks review quality care issues with service providers to ensure quality care and follow up

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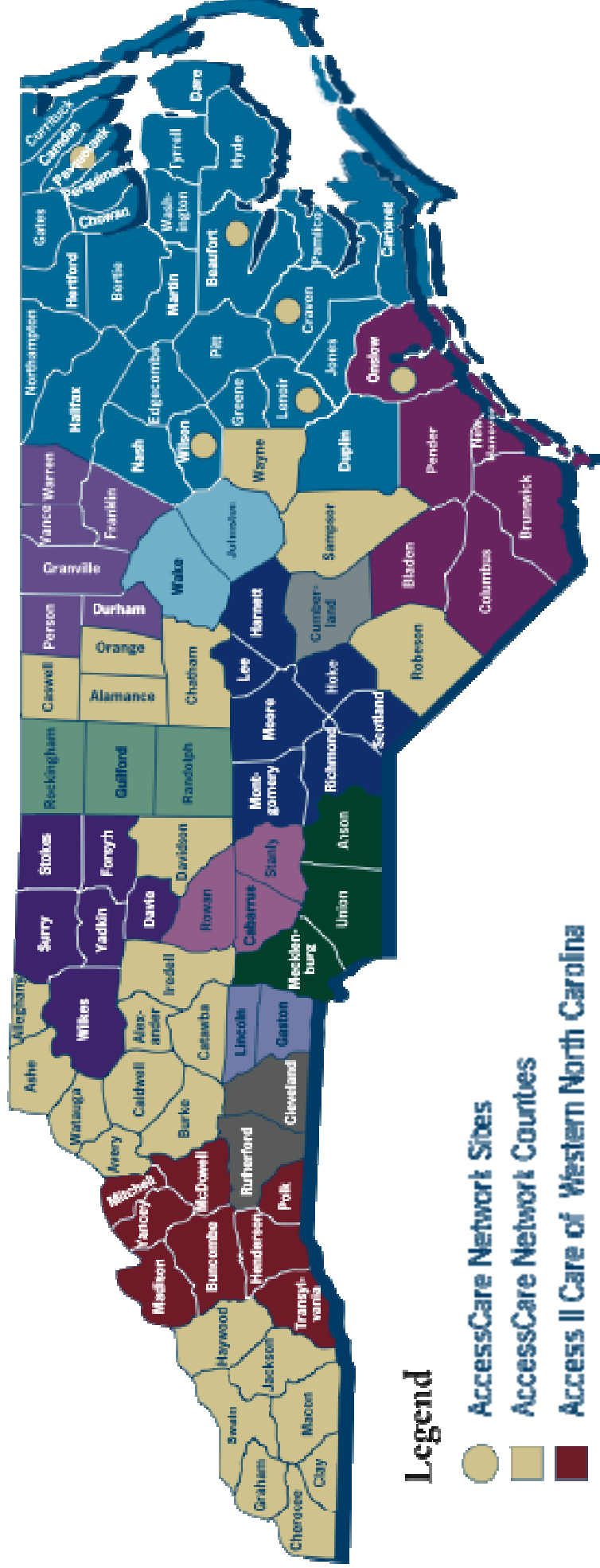


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Access II and III Networks



Legend

- AccessCare Network Sites
- AccessCare Network Counties
- Access II Care of Western North Carolina
- Access III of Lower Cape Fear
- Carolina Collaborative Community Care
- Carolina Community Health Partnership
- Community Care of Wake / Johnston Counties
- Community Care Partners of Greater Mecklenburg
- Community Care Plan of Eastern Carolina
- Community Health Partners
- Northern Piedmont Community Care
- Northwest Community Care Network
- Partnership for Health Management
- Sandhills Community Care Network
- Southern Piedmont Community Care Plan