

# Uniting

HOSPITALS, HEALTH SYSTEMS  
& CARE PROVIDERS

## For Healthier Communities

NCHA | 2019 Annual Report



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## Unity of Purpose

Each of us is driven by a purpose. Creating a healthier North Carolina from the Blue Ridge Mountains to the Outer Banks is the greater purpose that we all share.

NCHA members and community partners are taking action to make healthcare better and more patient, family, and community centric. We are doing this by focusing on increasing value and experience through high-quality, affordable, efficient and coordinated care.

The vital role health systems play to improve health extends beyond providing medical care. Through local partnerships and community investments, health systems are working on solutions to address barriers to good health like housing, transportation, education, food security and access to economic resources.

Outside forces, whether legislative or regulatory, often throw up roadblocks to building a healthier North Carolina. We've seen this year the value of staying united on important issues like the State Health Plan, 340B drug pricing, Disproportionate Share Hospital payments, and Medicaid Managed Care so we can continue to transform our health system and reach our higher purpose.

Unity to improve the health of all North Carolinians is guiding the Association's long-range strategy. Our new Vision Statement adopted earlier this year by both NCHA and



the North Carolina Healthcare Foundation — **A North Carolina where high-quality healthcare is equitable and accessible for all** — is driving us forward.

For the years ahead, we've made long-range plans to work with our stakeholders to build an influence powerhouse; redesign the health system through innovation; re-imagine rural healthcare; engage with patients on meaningful transparency; and shine the light on the care, the value and the transformations underway by our members to reach our common purpose.

This report highlights a few of the key successes we have achieved with your support and engagement in 2019. I'm proud to report that for every dues dollar in 2019, your association generated a return of **\$296** of value for hospitals and health systems statewide.

**Steve Lawler**  
**NCHA President & CEO**

## Mission

To improve the health of the communities where we live and work by advocating for sound public policy and collaborative partnerships.

## Vision

A North Carolina where high-quality healthcare is equitable and accessible for all.

## Values

Respect. Integrity.  
Teamwork. Accountability.  
Perseverance.

# Advocating Together

The 2019 long session has been unprecedented for hospitals and health systems. With proposed changes to the State Health Plan, Medicaid Transformation and certificate of need repeal threats, hospitals and health systems had more than a \$1 billion at risk. NCHA is proud to have advocated to protect these funds, ensuring that hospitals and health systems can continue to provide access to quality healthcare in their communities. It also is remarkable that the long session is only temporarily adjourned, with lawmakers returning in January 2020 to continue working on the budget and other issues.

Here is a brief recap of our accomplishments this session:

## **Treasurer Retreats on State Health Plan Changes**

The State Treasurer undertook an effort to try to transform the State Health Plan into a reference-based pricing model. NCHA members made the case that this model would harm access and united together on a value-based care solution for the Plan. NCHA led the effort in getting HB 184, *Study State Health Plan Design*, passed in the House with a vote of 75-36. This bill would prevent the Treasurer from moving to a reference-based pricing model and put together a study commission to redesign the plan. The bill was not heard in the Senate. However, the legislative momentum that we built from HB 184 helped move the Treasurer to temporarily delay his hopes to move to reference-based pricing. NCHA convened members to develop value-based care principles for the study commission to help design a better State Health Plan.

## **Protecting Providers in Medicaid Transformation**

There were two major issues involving Medicaid transformation at the General Assembly: preserving hospital assessments (the supplemental payments program) and scheduling a realistic go-live date for transformation. The NCHA finance team worked with the NCHA Technical Advisory Committee (TAC) to ensure that the correct language for hospital assessments in managed care was put into legislation. Due to the ongoing budget stalemate, the language has not become law. Additionally, NCHA worked to delay the go-live

February 2020 transformation date until providers and the State were fully ready. In November, the NC Department of Health and Human Services (DHHS) did suspend implementation due to inaction on the budget.

## **Preserving Certificate of Need**

A group of Senators made multiple attempts this session to repeal the certificate of need (CON) laws in North Carolina. When full repeal failed, these Senators shifted their efforts to carving certain service lines out of the law. These efforts also were unsuccessful. NCHA worked with allies in both chambers and other interest groups to build a coalition to successfully preserve CON.

## **Closing the Coverage Gap**

Medicaid expansion was a top priority for the Governor this session, resulting in a veto of the budget when expansion was not included. NCHA advocated for HB 655, *North Carolina Healthcare for Working Families Act*, a common-sense option to close the coverage gap and increase affordable access to health insurance for working individuals and families in North Carolina. The bill passed the House Health Committee and is awaiting a hearing on the House floor. NCHA will continue to push for legislation that provides insurance to North Carolinians who are in the coverage gap.

## **Increasing Access to Telehealth**

NCHA led the effort in the House to overwhelmingly pass HB 721, *Increase Access to Telehealth Services*, a bill developed by NCHA's Telehealth Workgroup. This bill would require commercial insurance, Medicaid and the State Health Plan to reimburse for telehealth services. NCHA worked with other stakeholders who shared the same goal to increase access to these services across the state. Due to the overwhelming support in the House for HB 721, the House passed the bill again in another omnibus healthcare bill. Since the bill has passed one chamber, it is eligible for the 2020 short session.

### Federal Advocacy

NCHA works with members to maintain an active presence in Washington, DC. This has included 18 Capitol Hill visits, two visits to the White House, four delegation staff round-table meetings, and numerous interactions with committee staff.

Healthcare costs continue to be a top federal issue. Congress narrowed its focus to surprise billing and drug pricing. NCHA joined forces with the NC Medical Society on surprise billing, advocating that patients should be held harmless and not have to bear the burden of serving as an intermediary between health plans and providers. Also, the government should not establish a fixed payment amount for out-of-network services. Amendments were made by NC representatives to House legislation to preserve providers' ability to negotiate for adequate reimbursements. In the Senate, Senators Burr and Tillis remain committed to a solution that protects patients, but does not favor one party over the other. It is likely that surprise billing will be an election year topic.

Work continues to permanently delay the Disproportionate Share Hospital cuts and for a new methodology to be developed that will not harm states that did not expand Medicaid.

The President has also weighed in on healthcare costs with an executive order and a rule from the Centers for Medicare and Medicaid Services requiring hospitals to publicly post their prices for services online by January 2021. The American Hospital Association and others are expected to file a lawsuit to halt this requirement.



### HOSPAC Campaign Update

HOSPAC, NCHA's political action committee, contributes to success in advocacy by building relationships between community hospitals and their elected officials. The 2019 HOSPAC Campaign has raised \$150,597 or 75% of our \$200,000 goal (as of Nov. 29). Donations ensure a strong voice when decisions are made that affect hospitals' ability to fulfill their mission.

## Advancing Sound Policies & Regulations

### Engaging Members in Policy Development

The Regional Policy Councils, formed last year under a new model, convened in three regions of the state for a total of six meetings. The first round discussed workforce shortages, while the second considered solutions to the continuing behavioral health crisis. All six meetings produced recommendations for consideration at the Policy Development Committee (PDC). The PDC approved recommendations from the RPCs to advocate for parity in treatment options and reimbursements for behavioral health services.

Going into 2020, NCHA has realigned the Policy Development Process to better utilize and coordinate with the North Carolina Healthcare Foundation and the expertise housed there. Staff will be working through the Foundation to identify deficits and barriers to innovation at member facilities. This operational shift will help ensure improvements are sustained and scalable through institutional and state level policy change. Problems identified will then be discussed at the Regional Policy Councils, with recommendations sent to the PDC.

### Protecting the Healthcare Safety Net

The 2019 Medicaid Reimbursement Initiative/ Gap Assessment Program (MRI/GAP) resulted in approximately \$1.13 billion in net Medicaid revenues to hospitals to offset Medicaid and uninsured losses. The MRI/GAP Technical Advisory Committee continues to work with the State to ensure these funds are preserved during the transition to Medicaid managed care.

**\$1.13 B**  
MRI/GAP Funds

NCHA and its vital member workgroups continually work to resolve billing, claims, reimbursement, compliance, network adequacy, assignment of benefits, tiering products, and enrollment issues with Medicaid, Medicare, Veterans Affairs, Military, State Health Plan, and commercial health insurance.

### Monitoring and Commenting on Proposed Rules & Regulations

In an ever-changing regulatory environment, NCHA provides valuable resources for hospitals and health systems on state and federal regulatory requirements. This includes monitoring and commenting on state and federal proposed and final rules. By November 2019, NCHA finance and regulatory staff had submitted 11 comment letters on behalf of the field.



# THE PROPOSED STATE HEALTH PLAN WILL HURT OUR TEACHERS.

**PASS HOUSE BILL 184 TO STOP IT.**

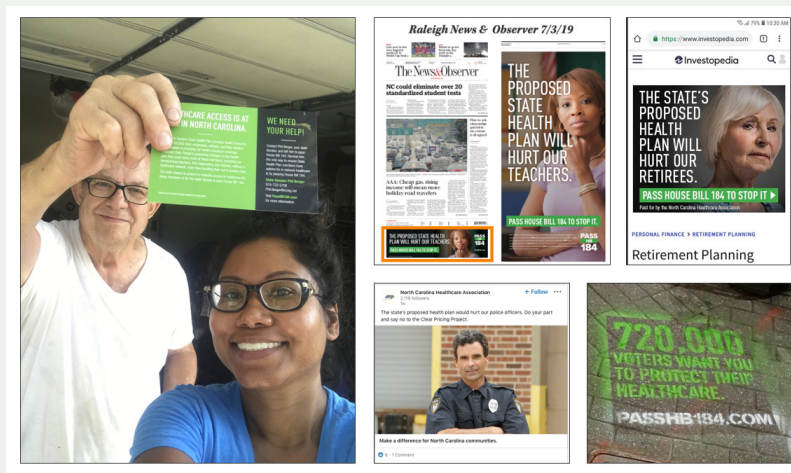
State Treasurer Folwell's proposed changes to the State Health Plan will impose catastrophic changes for its members. It will **DENY** North Carolina state employees, retirees, and their families of in-network access to critical healthcare services. Support House Bill 184 to **STOP** these devastating changes and **PROTECT** their in-network access to their trusted healthcare providers. Call your state Senator today and demand they **PASS** House Bill 184. Visit [PassHB184.com](http://PassHB184.com) to learn how to call, email or Tweet your message.

**PASS  
HB  
184**

## ➤ Purposeful Action, Meaningful Results

Your participation is key to our success. The foremost example this session was the actions taken to prevent the implementation of a harmful reference-based pricing model for the State Health Plan.

NCHA strongly advocated for the passage of HB 184, *Study State Health Plan Design*. This bill, which passed the House, would create a commission to study the design of the State Health Plan, offering an opportunity for an in-depth analysis to ensure future solvency of the Plan while simultaneously striving to improve the health of state employees and retirees.



To help get this bill passed in the Senate, members supported NCHA launching a paid media campaign to educate state employees and retirees on the issue. The campaign included digital and print ads, chalk-stenciled messages in the area around the General Assembly and hand-delivered postcards in key Senate districts.

We activated members with an advocacy communications toolkit, created a webpage highlighting value-based care success stories, and promoted these messages in social media.

NCHA and 35 member CEOs representing nearly 100 hospitals sent an open letter to State Senators, calling on them to provide uninterrupted access to care by passing HB 184. A letter from the president of the NC Association of Educators to the Treasurer expressing worries about access out-of-network costs also helped stop the reference-based plan from going forward.



Value based care: Johnston Health COPD initiative

NCHA created a video (click on the image to watch) on how Johnston Health, in collaboration with Johnston County EMS, developed a successful community paramedicine program to reduce emergency department readmissions among individuals with chronic obstructive pulmonary disease (COPD).



Dr. Mike Waldrum, CEO of Vidant Health, explained to Rotary Club members the ramifications of the Treasurer's changes to the State Health Plan.

Our board's active engagement as ambassadors and advocates on this issue was inspiring. Board Chair Mike Waldrum, MD, CEO of Vidant Health in Greenville, led the field by testifying in Raleigh and with his system's #StandUpforENC campaign. He embarked on a speaking tour in eastern North Carolina that resulted in eight resolutions of support passed by local chambers and governments.


We are grateful for all of the board members and others who testified and gave media interviews to help explain why a value-based care approach would be better for the State Health Plan.

**Decisions are happening around us that affect our ability to achieve our missions. Some issues are important enough for us to take a stronger stand. We are now in a better position to amplify our message on a value-based care solution and impact a better Plan.**



Terry Akin, CEO of Cone Health, appeared on Spectrum News Capital Tonight to discuss the State Health Plan.





“Healthcare providers are the backbone of our state

— Gov. Roy Cooper

## ➤ Joining Forces to Do More

As Governor Roy Cooper said in his remarks during NCHA’s Winter Membership Meeting, “Healthcare providers are the backbone of our state.” We couldn’t agree more. It is a privilege to serve our members as they work to better care for their patients and their communities.

### Growing our Membership

NCHA welcomed four new members this year. They include our first new members in the newly created Associate (healthcare providers that are not centered around hospitals) and Affiliate (healthcare industry service providers that do not provide direct patient care) categories.

- **Surgical Care Affiliates** (Associate member) – SCA has seven ambulatory surgical centers in North Carolina. They are our first Associate members and we look forward to having them as part of our membership. Their NC base is in Greensboro.
- **Capstone Health Alliance** (Affiliate member) – Capstone is based in Fletcher. They are a regional group purchasing alliance of healthcare members that delivers cost savings through the power of aggregation and collaboration.
- **Veritas Collaborative** (Traditional member) – Veritas is an organization of facilities focusing on eating disorders. They have an adult and a pediatric inpatient facility, both in Durham.
- **Novant Health Rehabilitation Hospital**, an affiliate of Encompass Health (Traditional member) – This newly opened rehabilitation hospital in Winston-Salem is a joint venture between Novant Health and Encompass Health.

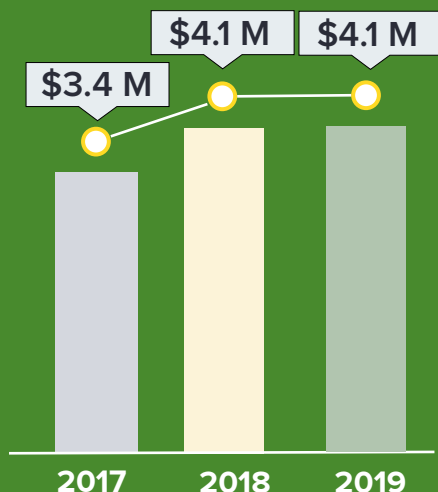
### Connecting & Sharing Data to Transform Healthcare

Hospital data increasingly drives hospital decisions. NCHA tracks healthcare trends through the Patient Data System (PDS)— a comprehensive database of patient records offered to members by NCHA. The system enables participants to analyze the healthcare market and assess market position, shifts in key product services, patient origin, quality of care, patient safety and much more. The Patient Data System program has been undergoing a migration to a new vendor in 2019 to the Hospital Industry Data Institute (HIDI), a division of the Missouri Hospital Association. We have recently completed the testing phase and will be doing a final dry run in February of 2020. We have engaged the stakeholders of the program in the design and execution of this migration and are excited about all our new partnerships.



## NCHA Strategic Partners 2019 Projected Revenue

# \$4.1 Million

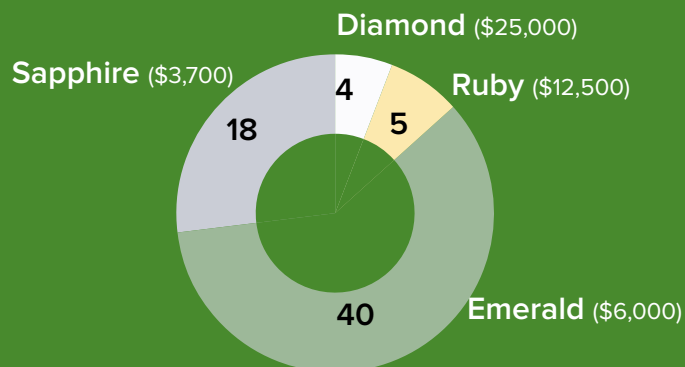


### NCHA Strategic Partners By the Numbers

	2017	2018	2019
Number of Strategic Partners	18	17	17
Number of Affiliate Companies	8	10	9
Number of Corporate Sponsors	83	89	70

## NCHA Sponsorship Program

### Sponsors by Type



## Forming Strategic Partnerships



In 1989, NCHA formed its non-dues revenue program, North Carolina Healthcare Enterprises, Inc. — now called NCHA Strategic Partners. For 30 years, they have provided NCHA members with access to hand-selected products and services that reduce costs and drive performance improvement.

This year, NCHA Strategic Partners expanded participation in its shared services offerings beyond NCHA membership to include select allied healthcare provider organizations and more post-acute healthcare providers.

All NCHA Strategic Partners undergo a strategic vetting process to ensure that they provide the right products and services our members need to respond to the changing healthcare landscape. Based on this process, candidates are evaluated for their potential as endorsed business partners, affiliate companies, or as corporate sponsors.

In 2019, 17 companies were screened via the Solution Station, one company joined as an allied partner (total 9) and three joined our business partners program (total 16).

The three new partners are:

- **MCAG** — a class action settlement expert, who has distributed hundreds of millions in cash to their clients through their Settlement Recovery Service. They help more than 1,000 health providers to streamline the filing process and secure recoveries from class action settlements.
- **Navigant** — comprehensive revenue cycle outsourcing for all phases of the revenue cycle, including: patient access, health information management, revenue integrity, and patient financial services.
- **Sensato** — world-class cybersecurity programs that help organizations prepare for, assess, and respond to cybersecurity threats with products and services designed specifically for their unique information technology requirements.



Ronnie Sloan, President of The Outer Banks Hospital, pictured on right with his team.



# Celebrating Excellence



2019 Healthier Communities Award Winner: Beth Walker (right), president of FirstHealth Montgomery Memorial Hospital, and Roxanne Elliott (left), policy director of FirstHealth Community Health Services. The Outer Banks team, awarded the 2019 Highsmith Award for Innovation, are pictured left.

NCHA is honored to recognize leaders and teams in North Carolina hospitals and health systems who are committed to improving the health of their communities through innovative, high quality care.

At NCHA's Winter Membership Meeting in February, **The Outer Banks Hospital** in Nags Head received NCHA's inaugural Highsmith Award for Innovation. Named for Dr. John Highsmith, the first president of NCHA, the newly created award recognizes innovation that creates value for patients and consumers of healthcare. The hospital was recognized for its work to become the state's first dementia-friendly hospital.

**FirstHealth of the Carolinas** also was honored at NCHA's Winter Meeting with the Association's inaugural Healthier Communities Award. This new award recognizes collaborative work by an NCHA member institution to promote health and well-being by addressing an identified need. FirstHealth was recognized for its leadership in the nation's first implementation of *The Daily Mile*, an evidence-based physical activity program. Through the First-in-Health 2020 Task Forces, FirstHealth worked with Richmond and Montgomery County school systems to ensure that every elementary school student has 15 minutes each school day (or the equivalent of one mile) to walk, jog or run apart from recess or P.E. class.

Two healthcare leaders were awarded with NCHA's highest honors July 18 during NCHA's Summer Meeting in Pinehurst. **Joann Anderson**, RN, MSN, president and CEO of Southeastern Health in



Joann Anderson, RN, MSN, President and CEO of Southeastern Health in Lumberton, was awarded the North Carolina Healthcare Association's (NCHA) highest honor — the 2019 Distinguished Service Award.

Lumberton, received NCHA's highest honor — the 2019 Distinguished Service Award. The award is given each year to an NCHA member executive whose contributions to the healthcare field have had a positive and lasting impact at the local, regional, state or national level.

**Joan Wynn**, PhD, RN, chief quality and patient safety officer for Vidant Health in Greenville, received NCHA's 2019 Clinical Leadership Award. This award honors an individual who has demonstrated exemplary clinical leadership in care transformation through innovation and improvement.

At this same meeting, NCHA bestowed new Life Memberships (see group below) to recognize hospital and health system administrators who have retired after spending 20 or more years in healthcare and to those who have served as chair of the NCHA Board of Trustees.



2019 NCHA Clinical Leadership Award winner: Joan Wynn, PhD, RN, Chief Quality and Patient Safety Officer, Vidant Health.



2019 NCHA Life Members: Steven E. Eblin, Randolph Health; David J. Kilarski, FirstHealth of the Carolinas; Phyllis Wingate, Past NCHA Board Chair, Atrium Health Cabarrus; Jeffrey Sackrisson, Vidant Bertie and Chowan Hospitals; Ed Rush, Iredell Health; and Gene Faile, Wake Forest Baptist Health - Wilkes Medical Center. NCHA President Steve Lawler also pictured right.

# Building a Strong Foundation

The North Carolina Healthcare Foundation (NCHF) was established in 1961 to support NCHA's work in quality improvement, rural healthcare, and education. In recent years, the foundation has served as a pathway for the Association to:

- Lead North Carolina's efforts to ensure that hospitals and health systems provide the highest quality healthcare
- Advocate for rural hospitals to provide essential services
- Support innovative, data-driven initiatives to improve healthcare
- Address barriers to establishing a high-quality behavioral health system across the state
- Convene and connect hospitals and their communities

## Redesigning the Health System Through Innovation

In 2019, NCHF was engaged by The Duke Endowment to co-design a bi-state innovation infrastructure with the people, processes, and functions needed to test and disseminate new models of care. The NC Health Innovation Institute (NCHII) was created to actively connect with stakeholders to focus on issues impacting health improvement across the state. The South Carolina Hospital Association is partnering to implement the same infrastructure in its state.

NCHF continues to execute strong programs focused on rural, behavioral, and population health, while evaluating the opportunities to grow those efforts within the NCHII model. NCHF conducted a "soft launch" of the NCHII at the 2019 NCHA Summer Meeting, building momentum and garnering support from hospital and community leaders.

The NCHII team has conducted several retreats, meetings, and design sessions with stakeholders to define the phases of the institute's development, which includes evaluating how existing programs will be integrated into or inform the institute's structure.

## Collaborating with Hospital Foundations

NCHF convened Hospital Foundation and Health Conversion Foundation leaders for the first time at the 2019 NCHA Summer Meeting. Partnerships have evolved as a result of NCHF meeting individually with these leaders to determine the best way for continued engagement.

Key areas of opportunity are:

- Help broker statewide relationships
- Develop affinity groups for collective investment between hospital foundations
- Identify ways to link philanthropy work to advocacy to make policy change

## Improving Behavioral Health

NCHF has been working to identify, standardize and disseminate evidence-driven behavioral health best practices.

Here is an update on current initiatives:

### ED Peer Support Pilot Project

NCHF was awarded funding from NC Department of Health and Human Services (DHHS) for the Emergency Department (ED) Peer Support pilot project through June 30, 2020. As of Aug. 30, 2019, the six participating EDs have seen 3,393 patients and the initial results are promising: a 40% decrease in ED visits, 56% decrease in hospitalizations, and 34% decrease in 30-day readmissions compared to the previous year. As the project is coming to a close, NCHF is working closely with NC Medicaid and the Division of Mental Health to create statewide service definitions for peer support specialists to sustain current pilot sites and spread the model throughout the state. Simultaneously, NCHF will create an implementation guide for hospitals to replicate the model. It will be available by summer 2020.

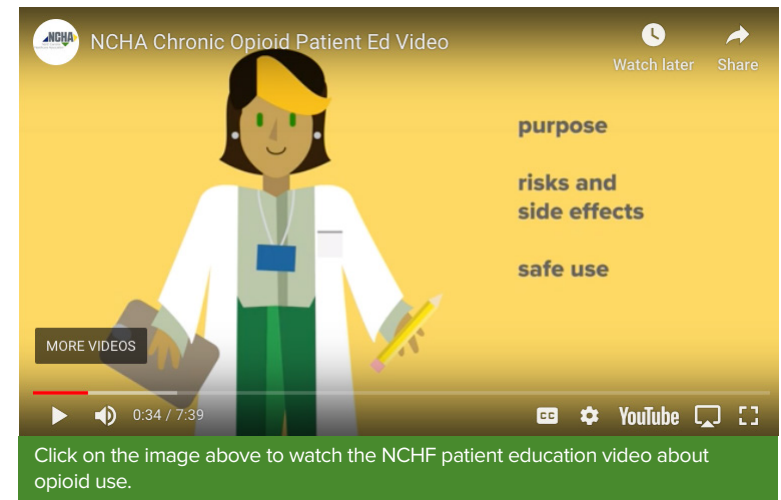




Shawn Taylor, Madison Ward Willis and Sam Melville presented together on the ED Peer Support project.

### Coalition for Model Opioid Practices

NCHF has been awarded a third year of funding from DHHS focused on changing the culture of opioid prescribing with providers and prescribers. Through this funding, NCHF has created two provider education toolkits (Healthcare Diversion Prevention Toolkit and ED Opioid Treatment Pathway), patient education about opioid use (including comprehensive tools created by and adapted for North Carolina by UC Davis Design in the Public Interest), and a comprehensive social media campaign highlighting a patient education video released earlier this summer. Throughout the fall, NCHF is focused on peer-led implementation groups to spread best practices shared within the provider education toolkits. In 2020, NCHF will identify barriers to non-opioid therapies for those with chronic pain, a condition estimated to affect 20% of the U.S. population.



### NCHA Behavioral Health Workgroup

The Behavioral Health Workgroup is a multi-stakeholder coalition ranging from patient advocates, hospitals, Local Management Entities/Managed Care Organizations, and state agencies convened by NCHA to help improve the crisis array for people living with behavioral health conditions, with emphasis on ED boarding. The workgroup continues to focus on implementing SB 630, *Revise IVC Laws to Improve Behavioral Health*, effective Oct. 1, 2019. NCHA has a comprehensive educational tool on the changes to the involuntary commitment process under SB 630 and can be accessed at <https://www.ncha.org/ivcbill/>.





"Solutions for Vulnerable Communities in Rural North Carolina" was a topic at NCHA's Summer Membership Meeting (pictured here).

## Advancing Improvement in Quality and Patient Safety

### The Quality Center Patient Safety Organization

The Quality Center Patient Safety Organization (PSO) added four new acute care facilities to its membership, bringing the total to 54 members. In June 2019, a new Director of Clinical Performance, Shelby Lassister, was hired to oversee the PSO. The Director began collaborating with the Foundation and NCHA teams to revise the remaining 2019 PSO event plans based on budget needs, PSO event data, and voice of customer data obtained through one-on-one discussions with members and the PSO Clinical Advisory Council. This council was revitalized and is comprised of members representing the varied PSO membership. Current PSO activities include:



**The Quality Center**  
Patient Safety Organization

- Restructuring membership fee structure to include a tiered plan for different non-acute care settings
- Creating a standardized schedule for invoicing, developing monthly financial reports, planning for 2020 member events based on PSO data analysis and voice of membership
- Growing membership and partnering with other divisions in the Foundation and NCHA, such as Strategic Partners, to leverage strengths and maximize value to members.

### Focusing on Rural Health

NCHF continues to support Critical Access (CAHs) and small rural hospitals across the state through its Medicare Rural Hospital Flexibility Program (FLEX) and Small Hospital Improvement Program (SHIP). These programs are designed to provide resources and support for performance improvement in quality and patient safety and population health services. In 2019, NCHF supported all 20 CAHs by providing virtual and on-site technical assistance, delivering patient safety and quality reports and analysis, delivering webinars and other educational resources, and facilitating two statewide gatherings for CAHs. In 2020, NCHF will collaborate with all NC CAHs to co-design community profiles to support continued expansion of population health initiatives.



## Building Community Partnerships to Improve Health

### AccessHealth NC

NCHF provides technical assistance to 18 community-based networks of care across the state providing access to coordinated primary and specialty healthcare services for the low-income, uninsured in 41 counties. Networks, funded in part by The Duke Endowment, are composed of a broad range of healthcare providers, both within and outside of the local hospital system, as well as other community stakeholders working in collaboration to leverage resources and align services.

In 2019, NCHF's technical assistance has focused on capacity building to enable networks to evaluate their impact on key health outcomes, including reduced unnecessary ED utilization, reduced unnecessary inpatient utilization, and improved HbA1c levels for diabetic patients. This support has been provided through collaborative learning sessions, coaching calls, sustainability workshops, development of performance accountability tools, and refinement of measurement strategies. NCHF is working on agreements with the networks to capture data that will be mapped with the statewide hospital claims data housed within NCHA, to enable the creation of aggregate level data utilization reports for each network. These reports will enable networks to assess their impact on preventing unnecessary use of the health system for the uninsured.

NCHF will continue to highlight this work with NCHA member hospitals through 2020, as well as facilitate meetings between key hospital partners and their supporting network to identify opportunities for alignment around population health.

### Healthy People, Healthy Carolinas

This Duke Endowment initiative takes a community-based approach to addressing chronic health issues, such as unhealthy weight, diabetes and heart disease, through the establishment of local coalitions initiating evidence-based interventions (EBIs) to engage residents in improving their health. In 2019, NCHF began providing technical assistance to the 10 North Carolina coalitions through work with Population Health Improvement Partners. In partnership with the South Carolina Hospital Association, NCHF is continuing to develop a meaningful framework for evaluation of these community-wide efforts and recently selected a vendor for the data



NCHA Award: 2019 Healthier Communities Award - FirstHealth of the Carolinas, The Daily Mile

The Montgomery/Richmond 2020 Task Force, a local Healthy People, Healthy Carolinians coalition, received NCHA's Healthier Community Award at NCHA's 2019 Winter Meeting (along with FirstHealth of the Carolinas) for implementing The Daily Mile (click on the image above to watch a video on this initiative).

infrastructure that will be established in 2020 and will support this initiative, as well as future programs within NCHF. In order to identify the gaps and pain points where coalitions can support improved health outcomes, NCHF has drafted a community profile template. This snapshot reflects data from the community health needs assessment, clinical care, prevention quality indicators, county health rankings, social & economic factors, health behaviors, and local demographics. This action-oriented profile paired with coalition EBIs, will connect policy changes to local needs and will serve as a critical connection between the work of the coalition, the health system, and the health department in supporting population health improvement.

### Mentorship Program

This year, NCHF launched a new mentorship program designed to help cultivate a diverse pipeline of leaders for the healthcare field. The one-year program pairs eight high-achieving women and men from underrepresented communities who are already employed in healthcare with four executive leaders from health systems, hospitals and the North Carolina Healthcare Association who will serve as mentors. The mentoring program reflects NCHA and NCHF's vision of creating a North Carolina where high-quality healthcare is equitable and accessible for all.

