N.C. Department of Health and Human Services

Integrating Systems for Whole-Person Care

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Whole-person care

- Matching physical and behavioral health care to patient needs through:
  - Co-located and fully integrated physical and behavioral health personnel
    OR
  - Tightly coordinated behavioral and physical health services
- Common physical and behavioral health documentation system
- Unified outcomes

Behavioral Health and Physical Health Are Inseparable

Current state of integration

- NC is a growing leader in integrated care
- CCNC partnering with LME-MCOs on subset of consumers
- Limited number of projects across the state
- Fee-for-service does not support team-based, whole-person care
- Limited ability to include medical care in BH agencies
- Systems are siloes

Opportunities for whole-person care

- Provider-level accountability and control
- Flexibility in investment under ACOs
- Team-based primary care
- ACOs as neighborhoods of care

Options

- Align care coordination/management expectations
- Two-way accountability for whole person
- Support co-location of medical in behavioral and other systems
- Allow primary care to enhance their team with experts