

~ CCNC EXECUTIVE LEADERSHIP ~

## CCNC Taps Former Biologics Executive to Run Operations

Ron Smith is CCNC's new Executive Vice President and Chief Operating Officer. Smith will oversee all enterprise operations, sharpening CCNC's business as it prepares to form new relationships with payers, providers, hospitals, and pharmacies.

"Ron knows how to run a business. He knows healthcare. And, he knows us," said CCNC CEO Allen Dobson, MD. "He will lead our executive team in day-to-day operational decision making as we reposition CCNC for new opportunities today and post reform."



Smith was formerly the Chief Operating Officer for Biologics, a national oncology services company of owned by the McKesson Corporation and held several leadership positions at Blue Cross and Blue Shield of North Carolina.

## Bakolia Takes on CCNC Chief Information Officer Role

George Bakolia, the State of North Carolina's longest-serving CIO and a consultant to government and private industry, has accepted a permanent position with CCNC as its chief information officer. George has been contracting with CCNC since February 2016, leading the company's drive to improve efficiencies, reduce costs and ensure that CCNC has the technology platform, people and capacity to meet new business needs.



Bakolia led the state of North Carolina in a number of major, first-time initiatives such as a statewide security assessment, enterprise project management office, statewide IT asset management and establishing a second State Data Center.

"We were extremely lucky to get George on board this year to help assess our current and future needs in this vital area," said CCNC President and CEO Allen Dobson. "His extensive experience in both the public and private sector have guided our decisions and plans for the Informatics Center as we ramp up our capabilities to serve new partners, multiple payors and populations."



## Fewer Unintended Pregnancies in North Carolina's Medicaid Population

The rate of unintended North Carolina pregnancies among Medicaid beneficiaries fell from 52.4% in 2012 to 46.8% in June 2016, an important trend as the majority of babies born in North Carolina are covered by Medicaid – approximately 55,000 last year alone.

The drop reflects efforts by CCNC, public health departments, state Medicaid officials and health care providers to give North Carolina women access to health care services, including a range of contraceptive options such as long-acting reversible contraception (LARC).

Unplanned pregnancies are more likely to result in a poor outcomes, such as preterm births, that can have long-term impacts on the health of children, said Kate Berrien, RN, BSN, MS, Director of [CCNC's Pregnancy Medical Home program](#). "Women's health providers have made a tremendous effort to improve access and to support a key goal of CCNC's program: providing comprehensive postpartum care, including family planning. The work of women's physicians, care managers, health departments and state leaders is beginning to have an effect."

CCNC has pregnancy Medical Homes 96 counties and a network of more than 1,700 prenatal care providers -- the only statewide model working with prenatal care providers for publicly-funded patients in the country.

## Connect with CCNC on Social Media!

Facebook: [www.facebook.com/communitycarenc](http://www.facebook.com/communitycarenc)

Twitter: [www.twitter.com/@communitycarenc](http://www.twitter.com/@communitycarenc)

LinkedIn: [www.linkedin.com/company/n3cn](http://www.linkedin.com/company/n3cn)

# Community Care Physician Network Hits 1,000 Clinicians

North Carolina's independent physician clinically integrated network - [Community Care Physician Network \(CCPN\)](#) - continues to expand. See the most recent [map of CCPN provider practice locations](#).

CCPN recently signed its 1,000th clinician. These physicians represent 300 physician practices from around the state, helping the network achieve the provider mass necessary for participating in value-based efforts like Medicaid ACOs, Medicare Shared Savings Plans and others.

Dr. Greg Adams, a member of the CCPN Board of Managers, see tremendous potential in CCPN and its continued growth.

"We have the best Medicaid program in the nation," Dr. Adams said. "I'm glad to be a part of a network that will give us an opportunity to do what we do best – and that is care for our patients."

Once fully operational, CCPN will provide the infrastructure needed to deliver and coordinate patient care across conditions, providers, settings and time. For information about joining CCPN, please visit the [CCPN site](#).

# CCNC WII Pilot HEP C Medication Regimen

NC DMA has tapped CCNC to conduct a Medicaid test pilot to determine the viability and practicality of a new class of Hepatitis C medications. These new drugs offer a cure rate above 95% and fewer side effects than traditional Hepatitis C regimens. But the regimen is extremely expensive and must be taken for 8-12 weeks.

"Medication adherence is extremely important with this medications," says Dr. Wroth. "With nearly 20,000 Medicaid and dually-eligible Medicare-Medicaid patients with hepatitis C across the state, treating the disease before it leads to catastrophic health problems for patients and huge costs for the State is imperative. However, at a pre-rebate cost of nearly \$1,000 per day, it is equally critical that patients adhere to treatment regimens if the State is to realize the full value of this significant pharmaceutical investment. CCNC is working closely with patients and their physicians to support patients and ensure that they adhere to medication instructions."

"The stakes are high for hepatitis C," said Dr. Wroth, "both for patients in terms of future quality-of-life and for the State, in ensuring that major pharmaceutical expenditures really do hold down long-term costs. Supporting patient adherence to treatment regimens is the best way to maximize the public's return-on-investment."

# Landmark Opioid Bill Passed by Congress

Before recessing for the summer, the U.S. Congress passed the [Comprehensive Addiction and Recovery Act \(S.524\)](#), also known as CARA. The legislation addresses the growing epidemic of opioid and substance use disorders in this country by authorizing "innovation grants" and other efforts to improve treatment for these disorders. The American College of Physicians (ACP), a major supporter of the bill, highlighted the following points in public statements:

- Developing a federal interagency task force to review, modify, and update best practices for pain management and prescribing pain medication.
- Providing grants to expand awareness and education of physicians, patients and healthcare providers regarding the opioid risks.

- Improving state-based Prescription Drug Monitoring Program (PDMP) to track dispensing of controlled substances.
- Increasing availability of opioid overdose reversal drugs, e.g., Naloxone.
- Providing alternatives to incarceration for individuals who misuse opioid drugs to manage pain.
- Expanding the use of "partial fills" to allow patients to receive a portion of an opioid prescription and increasing opportunities to dispose of unwanted medications safely.

# CPESN Pharmacists Now Playing Key Roles in Overdose Prevention

Two Wilmington-area pharmacies that are part of the CCNC's [Community Pharmacy Enhanced Services Network](#) are handing out free naloxone to heroin users and have saved more than 100 lives. See coverage at [The Star News Online](#).

# CCNC Pioneers "Trauma Informed" Medical Care for Foster Children

Understanding how trauma impacts foster children can impact testing and treatment decisions and ultimately can improve outcomes while lowering costs.

Physicians, for example, often order a battery of medical tests for a seven-year-old child with repeated gastrointestinal complaints. But, CCNC experts advise, with foster children, emotional concerns related to possible trauma be investigated first.

CCNC and its partners - the Department of Social Services, pediatricians and the NC Pediatric Society - are sharing such practical information, standardized common referral forms and getting more complete treatment histories to pediatricians. "Our goal is to help foster children receive higher quality and more personalized care," said Tom Wroth, M.D., CCNC Chief Medical Officer and president of NC Community Care Networks.

"My work on this project has been extremely rewarding," says Tami Hilton, Care Manager with Community Care of the Lower Cape Fear. "I feel like we have really improved the care experience and outcomes for these children."

CCNC and its partners are also collaborating a series of ["Fostering Health"](#) tools posted on both the NC Peds and [CCNC websites](#).

# Sandhills Pediatrics Celebrates 50th Anniversary

Congratulations to CCNC Founder Dr. David Bruton for starting a remarkable practice in [Sandhills Pediatrics](#), recently celebrating 50 years of serving their community and an original CCNC practice. Also on hand for much of that time was Dr. Bill Stewart, a 34-year partner in the practice and currently a Board Member of CCNC, Inc. as well as Clinical Director for Community Care of the Sandhills. Kudos to all for their commitment to the health of their community! Don't miss the story in the Southern Pines Pilot on the practice's anniversary.

## CCNC Media Links

OPIOID/OVERDOSE ISSUES

Burlington Times News: [Burlington officers to begin using AEDs](#)

Brunswick Beacon: [Task Force Critical to Drug War](#)