UnitedHealthcare Investment

Presented by

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Board of County Commissioners Meeting

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Outline

- Community Paramedicine (CP) Program Overview & Update
  - Program Data
  - Service Opportunities
- UnitedHealthcare Investment Pilot
  - Purpose
  - Goals
- Request for Board Action

CP Overview & Update

Current Staffing

- The Community Paramedicine Program currently supports Post Overdose Response (PORT) and Mobile Community Outreach (MCOT) – 16 positions w/ contracted Peer Support & Mental Health Clinicians
  - 6 Regular Positions: 1 – CP Program Manager & 6 Community Paramedics
  - 8 Opioid Settlement funded staff: 3 CP Supervisors, 3 Community Paramedics, 1 Case Management Supervisor & 1 CP Peer Coordinator
  - 2 FT EMT's ARPA funded (through June 30, 2026)

CP Overview & Update
PORT Data

- ✓ Referrals to PORT since January: 290
- ✓ Since May: 4,448 dispatches and responses
- ✓ Suboxone inductions: 272
- ✓ Suboxone follow up dosing after induction: 953
- ✓ Mental health clinician referrals from PORT: 420
- ✓ Mental health clinician referrals from Law enforcement: 52
- ✓ Mental health clinician referrals to detox or rehab: 100
- ✓ Trainings offered monthly: Stop the bleed, Wound care, Narcan/Safe Use, CPR/First Aid AHA certification courses: 789 persons trained

CP Overview & Update
MCOT Services and Data

- ✓ Individual client therapy sessions with PORT/MCOT mental health clinicians since January: 320
- ✓ Wound care initiated in the field by MCOT since January: 430
- ✓ Code purple transports since January: 257
- ✓ Long standing/scheduled medical and outreach events with FQHC and NPO stakeholders M-F: 221
- ✓ Rides to and from pharmacy for patient medication pick up
- ✓ Weekend stopgap coverage of outreach services

CP Overview & Update
Service Opportunities

- Chronic Disease Management
- Follow up services needed: Hep C, TB, other communicable disease management
- Elder care and home safety evaluations
- Post-op follow ups and wound care management
- Unmet MIH service requests since January: 145

UnitedHealthcare Investment Grant Mobile Integrated Health (MIH) Pilot

What?

- Provide MIH services for 12 months through the expansion of Community Paramedicine Program
- $500K - 2 FT Community Paramedic Positions, PT Temp/PRN & 1 vehicle

Why?

- Many patients who require MIH services also require medical support around addiction, housing insecurity, and behavioral health.
- There is no path to continue care for PORT patients who require chronic disease management or communicable disease management.
- This leaves people vulnerable to hospitalization, relapse, and houselessness.

Pilot Goals

- Visit high-risk individuals in their residences, providing follow-up care and disease management education.
- Access Social Determinants of Health (SDoH) and other, with referrals made to NCCARE360 or other community resources
- Reduce non-emergent ER transport and utilization
- Decrease inpatient hospitalizations for uncontrolled chronic diseases

Request for Board Action

- ❑ Approve Budget Amendment to Accept United Healthcare Investment to Fund Mobile Integrated Health Initiative

- ❑ Approve two new grant-funded, time-limited positions