

**To:** All Providers of State and Medicaid Funded Services

**From:** Khristine Brewington  
VP of Network Management, MS, LCMHC, LCAS, CCS, CCJP

**Date:** July 1, 2020

**Subject:** Recruitment Opportunity Announcement, Important NCSNAP Reminders, TBI Survey, Contingency Plan Reminder, Risk Factors for Severe Illness from COVID-19

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### **RECRUITMENT OPPORTUNITY ANNOUNCEMENT**

#### **DAY TREATMENT REQUEST FOR PROPOSAL- RECRUITMENT OPPORTUNITY ANNOUNCEMENT**

Trillium has identified a need for a Day Treatment program in the Brunswick County school system located at Bolivia Elementary School. A Request for Proposal has been posted on the Trillium webpage. Deadline to apply is July 13, 2020. Providers interested in applying should review all eligibility requirements prior to submitting an application. Providers will be asked to submit a detailed project timeline including plans to begin the service at the onset of the 20/21 school year.



 [RFP-Day Treatment to Serve Members in Brunswick](#)

### **IMPORTANT NCSNAP REMINDERS**

#### **NC SNAP EXAMINER'S GUIDE**

 [2017 NC Snap Examiner's Guide](#)

#### **All persons served by the State's Developmental Disabilities (DD) System Require an NC SNAP:**

-  Assessments should be completed and submitted upon initial contact with the I/DD service system (Provider)
-  Assessments should be updated annually and anytime a significant change has occurred in the individual's needs/level of support

#### **NC SNAPs must be submitted via email or fax:**

-  Email: [NCsnap@trilliumnc.org](mailto:NCsnap@trilliumnc.org)
-  Fax Number: 252-215-6874; 910-353-4954

**Ensure NC SNAPs are filled out completely prior to submission:**

- 🌱 Assessments missing pertinent information (Consumer ID Number, Type of Assessment, etc.) will be returned to the provider for correction
- 🌱 Individual's Case Number should be the member's Trillium Case/Record Number
- 🌱 Assessments may be completed "by hand" but should be written in clear/legible handwriting (please do not use cursive handwriting)
- 🌱 Members' social security numbers should not be recorded on NC SNAPs

**Each page of the NC SNAP must be submitted for initial and annual assessments:**

- 🌱 NC SNAP Summary Report & Supplemental Information forms may be sent in isolation for Discharge NC SNAPs only
- 🌱 Incomplete assessments will not be processed, and will be returned to the provider (via email)

**Discharge NC SNAPs should be submitted as promptly as possible:**

- 🌱 Please do not wait until the member is due for an annual NC SNAP update to submit discharge NC SNAP
- 🌱 If a member has changed providers, the new provider should be listed on the Summary Report & Supplemental Information page of the NC SNAP

**NC SNAPs submitted via email must be sent securely:**

- 🌱 Members' names/initials should not be listed within the subject line of the email (this is an electronic HIPPA violation)

**The date of NC SNAP assessment should reflect the date that assessments are completed:**

- 🌱 Assessments listing a future date cannot be entered into the database
- 🌱 Assessments containing a future date will be returned to the provider for correction

**Past-due NC SNAP Notifications are sent out weekly:**

- 🌱 Please respond to requests for updated NC SNAPs as promptly as possible
- 🌱 A Plan of Correction will be issued for providers that fail to submit assessments after the third request has been sent

**Necessary corrections to a member's NC SNAP utilizing the following procedures:**

- 🌱 Corrections should be made by the individual who completed the assessment
- 🌱 One single line shall be drawn through the error, making sure the original entry is still legible
- 🌱 The corrected information shall be recorded legibly above or near the original entry
- 🌱 An explanation as to the type of documentation error shall be included whenever the reason for the correction is unclear
- 🌱 Correction fluid or tape shall not be used for the correction of errors

## **TRAUMATIC BRAIN INJURY ASSOCIATION NEEDS YOUR FEEDBACK!**

The TBI Association is thinking about offering two free webinar presentations from national experts in the field of TBI sometime during this coming fiscal year. They are requesting that people complete the anonymous survey at the link below so that they can determine the level of interest. Please complete this survey by Friday, July 17.

 [TBI Survey](#)

## **CONTINGENCY PLAN REMINDER**

Please remember to send your Re-Opening Contingency Plans and any questions regarding re-opening congregate settings to [NetworkMonitoring@TrilliumNC.org](mailto:NetworkMonitoring@TrilliumNC.org). Thank you!

## **RISK FACTORS FOR SEVERE ILLNESS FROM COVID-19**

People who are over the age of 65 and people of any age who have certain underlying health conditions are at higher risk for severe illness from COVID-19. These conditions include chronic lung disease, cardiovascular disease, severe obesity, diabetes, kidney disease, liver disease, and immunosuppressive conditions, including cancer treatment, smoking, and other immune disorders.

These underlying health conditions identified by the Centers for Disease Control and Prevention (CDC) were cross referenced with NC Department of Health and Human Services (NCDHHS) data sources to identify the percent of North Carolinians with higher risk for serious illness. There are limitations to this analysis. The NCDHHS data sources do not contain every underlying health condition identified by the CDC, and the definitions of the specific health condition may not align exactly.

### **WHAT PERCENT OF NORTH CAROLINIANS ARE AT HIGHER RISK FOR A SEVERE ILLNESS FROM COVID-19?**

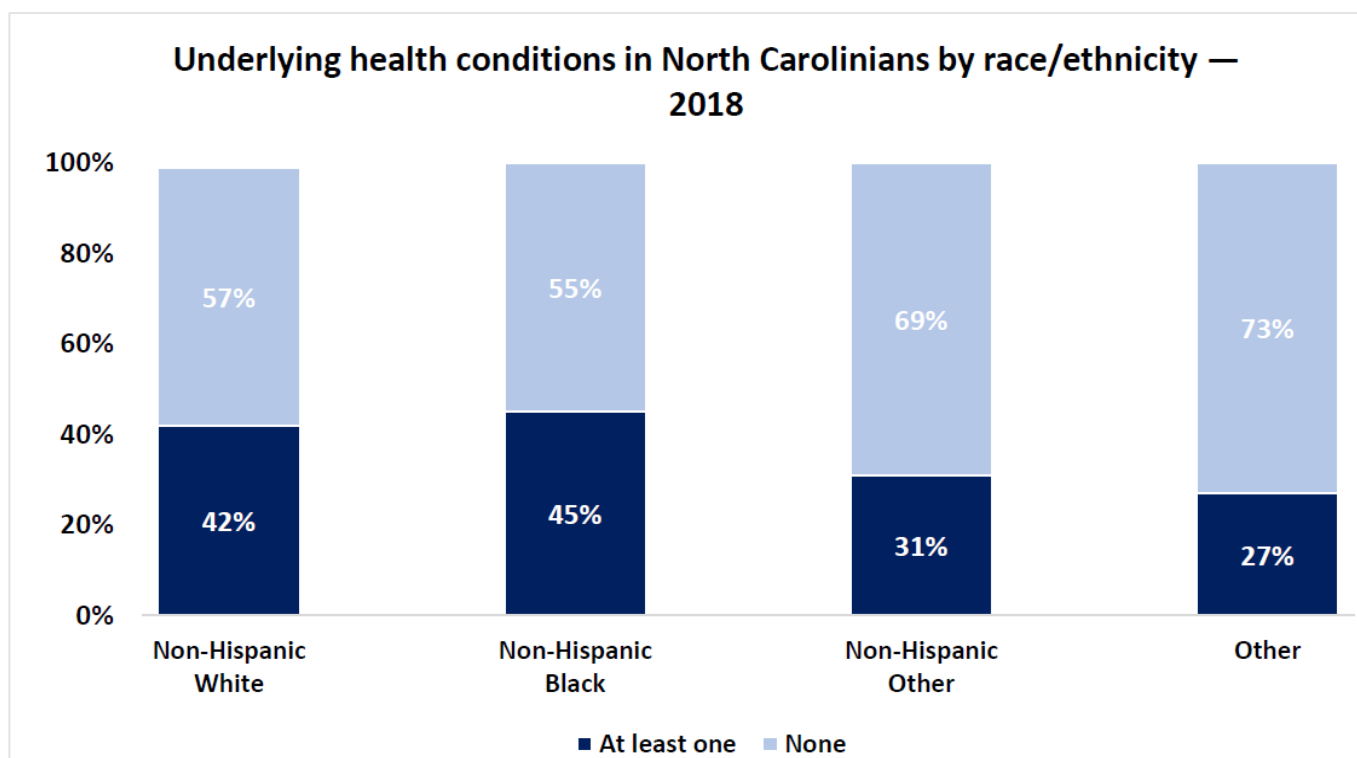
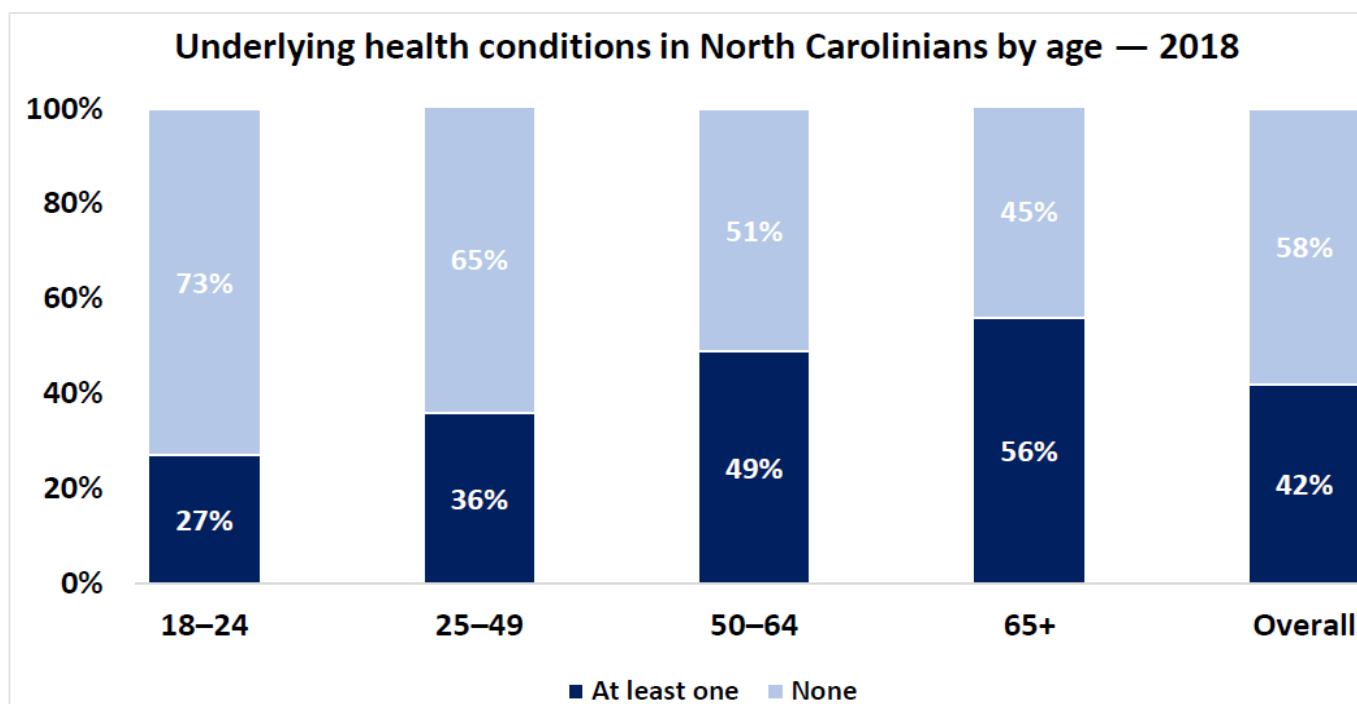
An estimated 51.1% of adults in North Carolina are at higher risk for severe illness from COVID-19 based on being 65 or older, having at least one of the underlying health conditions, or both. These data are from the NC State Center for Health Statistics Behavioral Risk Factors Surveillance System (BRFSS) for 2018, which is the most recently available year of data.

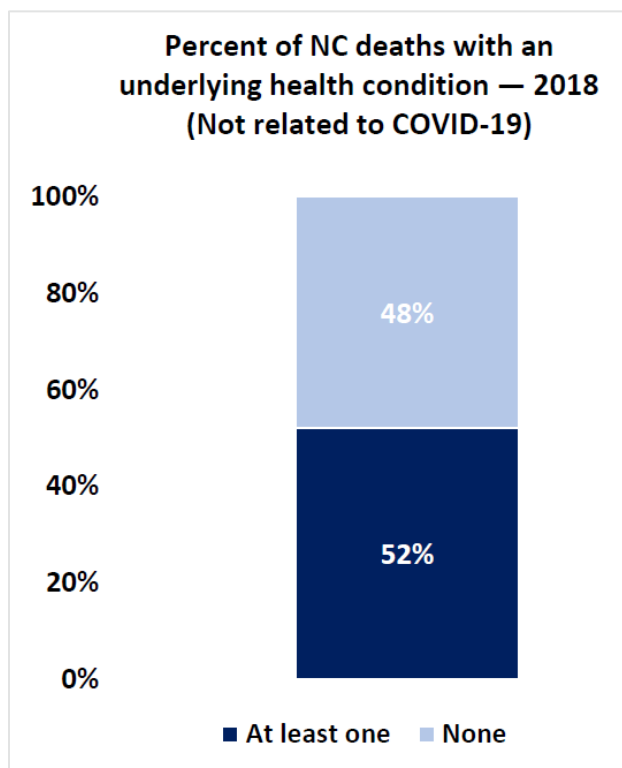
### **WHAT PERCENT OF PEOPLE IN NORTH CAROLINA HAD ONE OF THESE UNDERLYING HEALTH CONDITIONS?**

An estimated 42% of people in North Carolina has one of the underlying health conditions included in the CDC's guidance on people at high risk for a severe illness from COVID-19. Fifty-two percent of people in North Carolina who died in 2018, the most recent complete year with data available, had one of these underlying health conditions.

These underlying health conditions include chronic lung disease, cardiovascular disease, severe obesity, diabetes, kidney disease, liver disease, and immunosuppressive conditions, including cancer treatment, smoking, and other immune disorders.

Data on underlying health conditions in North Carolina's population are from the NC State Center for Health Statistics BRFSS for 2018, which is the most recently available year of data. Data on underlying health conditions in North Carolina deaths are from the NC State Center for Health Statistics Vital Statistics.



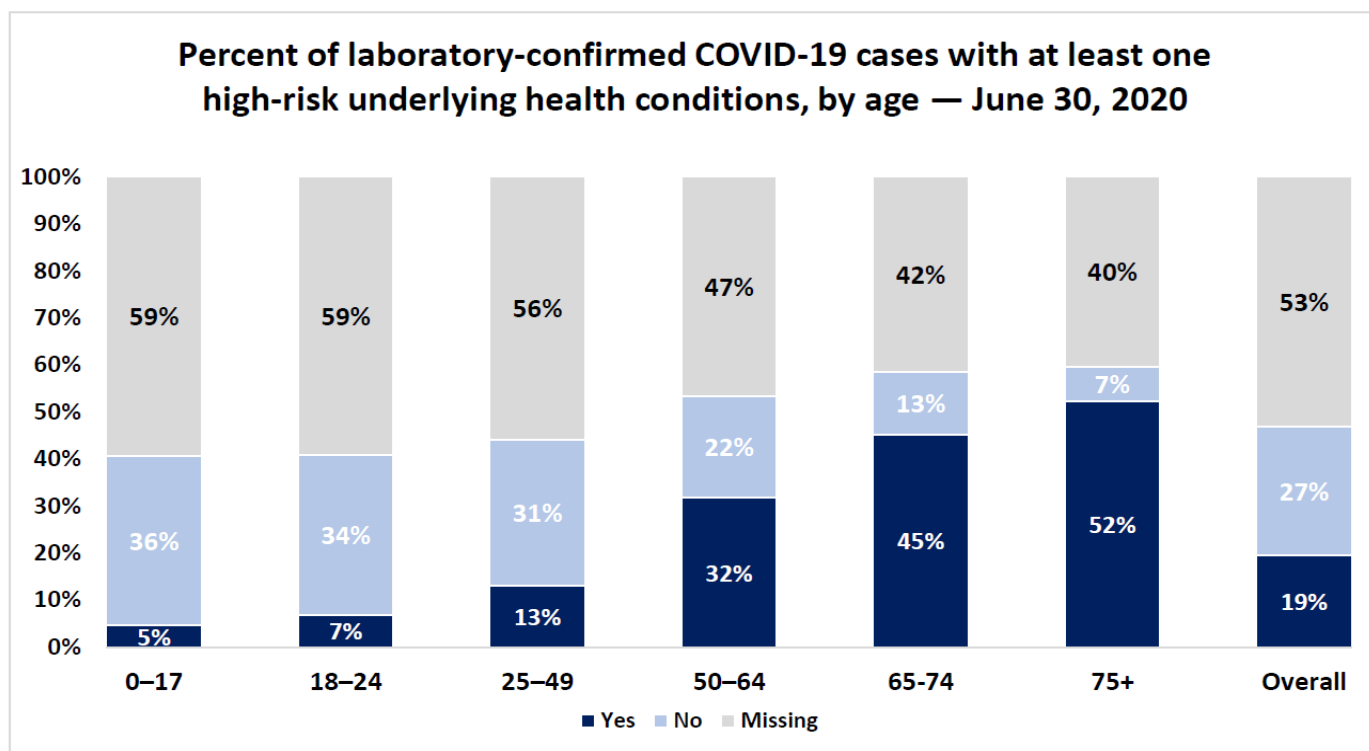


#### **WHAT PERCENT OF COVID-19 CASES AND DEATHS ALSO HAVE AN UNDERLYING HEALTH CONDITION?**

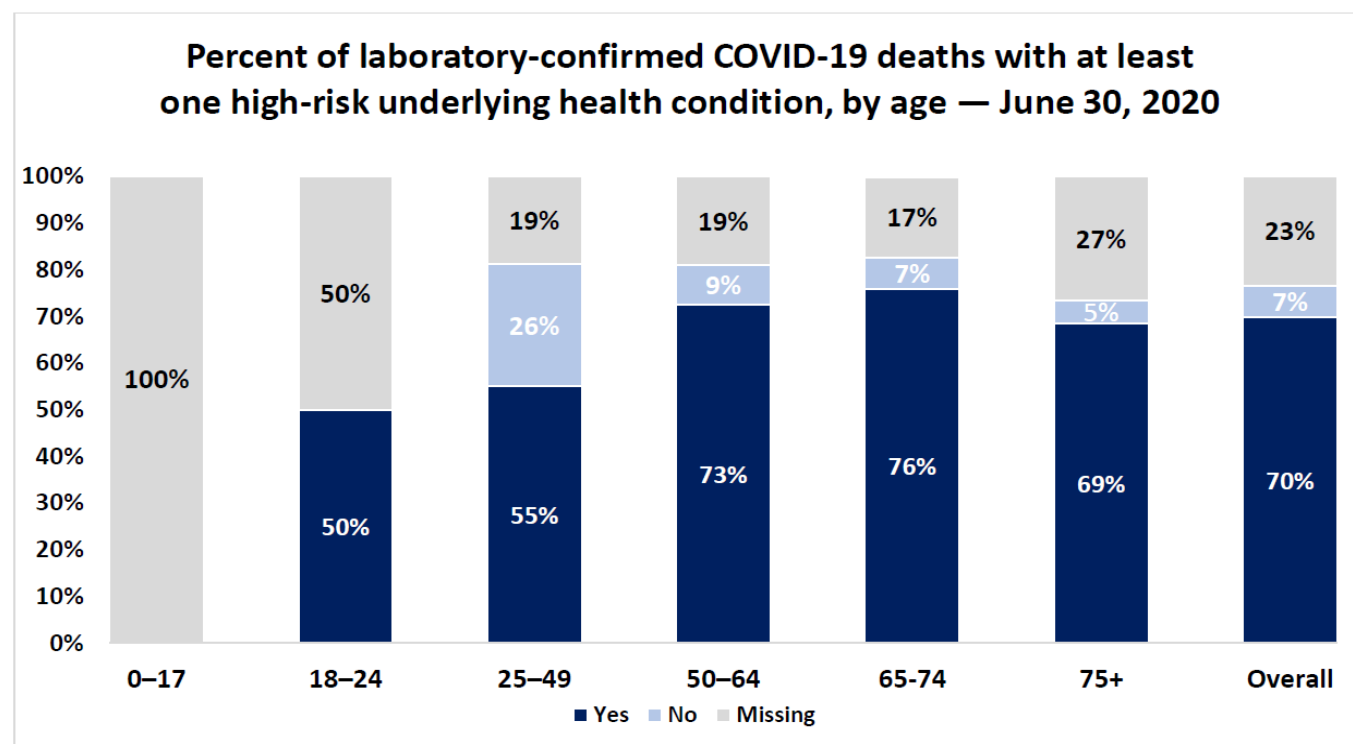
The following portion of this report will be updated weekly on Tuesdays by 4 p.m. Last updated June 30 2020.

These graphs show the percent of COVID-19 cases and deaths with at least one underlying health condition. Percentage of COVID-19 cases and deaths in persons over 65 is updated daily on the NCDHHS COVID-19 Case Count dashboard.

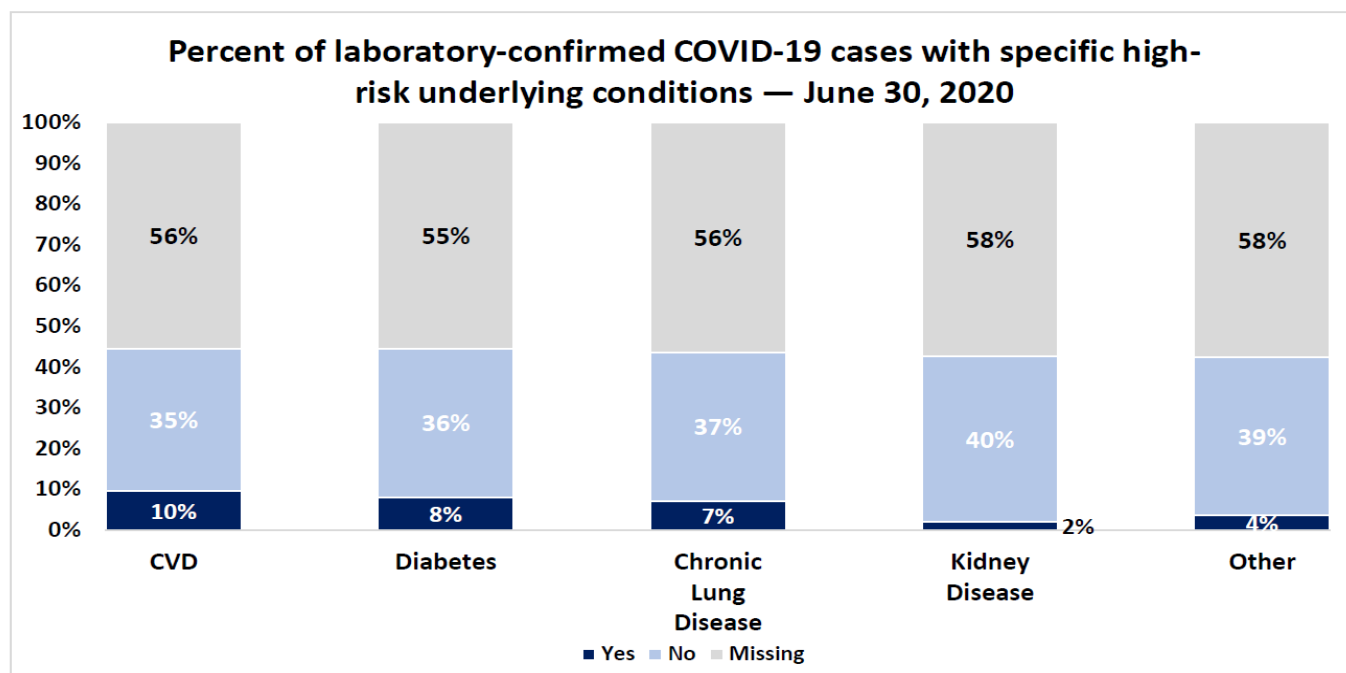
Data about underlying health conditions in COVID-19 cases are obtained through case investigations, which take time. Local Health Departments contact each person that has tested positive for COVID-19 to gather this data. Information about the presence or absence of specific health conditions will become more complete as case investigations are completed and information is entered into the North Carolina Electronic Disease Surveillance System (NC EDSS), but this information will not be available for all cases. Therefore, data are not yet available for every case or death.



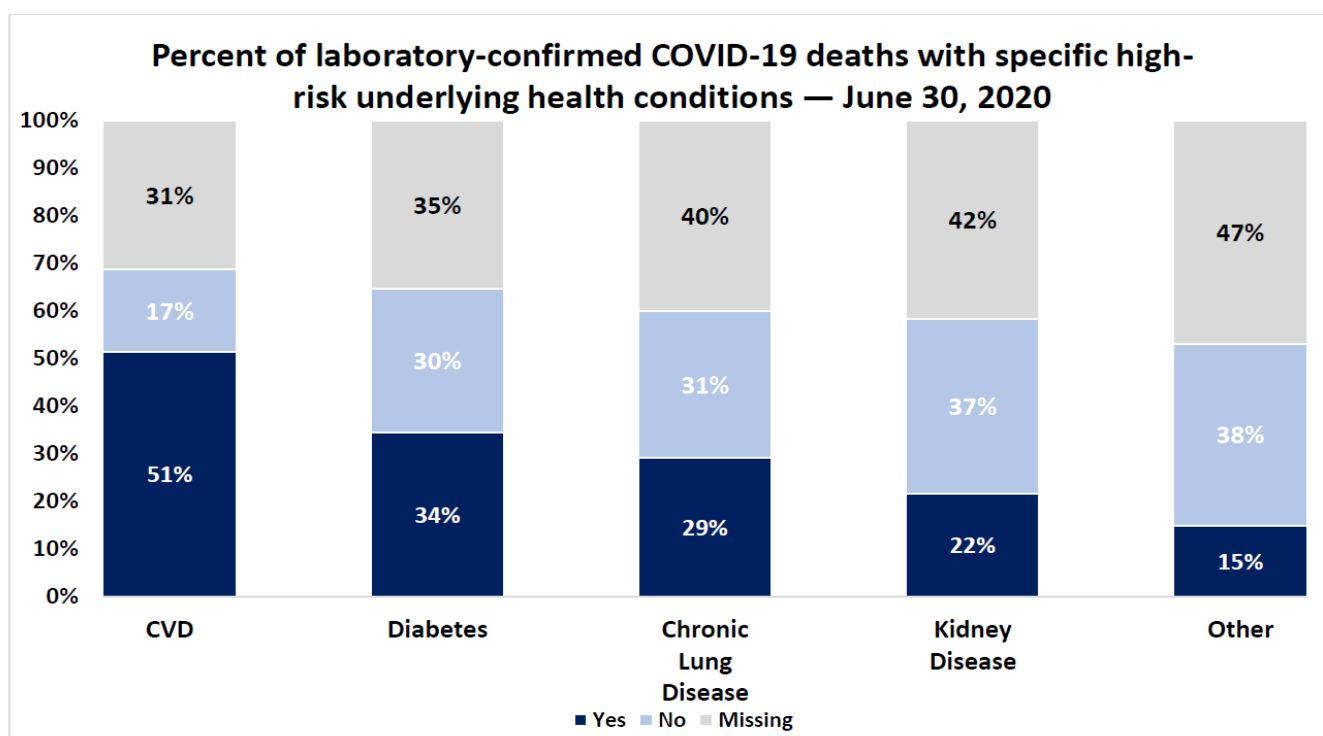
This includes total North Carolina laboratory-confirmed cases, from date of first confirmed case on March 2, 2020.



80% of deaths are among people 65 or older. Deaths reflect deaths in persons with laboratory-confirmed COVID-19 reported by local health departments to the NCDHHS.



CVD is cardiovascular disease. "Other" includes metabolic disorders and immunosuppressive conditions.



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Any questions about this Communication Bulletin may be sent to the following email: [NetworkManagement@TrilliumNC.org](mailto:NetworkManagement@TrilliumNC.org). These questions will be answered in a Q&A format and published on Trillium's website.