What we’ve learned, how we’ve grown, and what to expect going forward.
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INTRODUCTION
We have a lot to share this year.

Our 2018 Impact Report covers events, initiatives, spending, and improvements for our 2018 fiscal year: July 1, 2017-June 30, 2018. A lot has happened, good and bad. This year’s report addresses both head on.

Our purpose is to help people with mental and behavioral needs get the support they need to be well, and we’re committed to being transparent in how we do so. In this report, you’ll find detailed reporting on the year, starting with a letter from our CEO, Trey Sutten.

We welcome your feedback about this report.
View the report online and take a short survey to share your ideas with us.

www.cardinalinnovations.org/impactreport
OUR PURPOSE

Helping members and their families live their healthiest lives.

We exist to help people with mental and behavioral needs get care. In the past year, that focus was clouded by headlines and shifting ideals. But our organization is getting back to its mission—helping people live their best lives.

OUR MISSION

Our mission is to improve the health and wellness of our members and their families.

We believe that inclusion, compassion, and respect drive a high-performing culture that supports the success of our members, our employees, and our communities. We are committed to fostering a collaborative environment that appreciates individuality and benefits from a workforce of diverse backgrounds and experience.
“Opportunities for dramatic improvement often arrive disguised as setbacks.”
This year was filled with much-needed change for Cardinal Innovations—from the top down. Our core mission has always been to serve our members and communities with compassion and expertise. But things got cloudy at the top. Corporate spending was needlessly inflated and the focus was taken off our members, our providers, and our communities. That’s not how our organization operates, and it certainly doesn’t reflect the compassion, care, and professionalism of our employees and provider network.

In the past year, we’ve learned some hard lessons and made big changes—including a change in top leadership and an overhaul of our Board of Directors. We’ve recommitted ourselves to transparency and honesty in what we say, how we operate, in our spending, initiatives, and priorities.

We have learned to be better listeners—to the ideas and input of all audiences, starting with our members and their families, as well as caregivers, providers, our community partners, government and elected officials, advocates, and more. We don’t have all the answers, but we’re not afraid to ask the questions. Especially if they lead to better, long-term health outcomes for our members.

We’ve learned it truly takes a community to serve and support people and families with empathy and grace. We salute our partners in health care, in emergency services, law enforcement, nonprofits, and so many others. The compassionate professional answering phone calls at 3 AM. The officer trained to identify when someone is in a mental health crisis as they respond to a domestic disturbance and have a split-second to assess the situation. The caring experts at a women’s shelter taking in a mom and her children. The understanding employer who helps keep a promising young person from returning to jail. We thank you.

Lastly, we’ve learned that even in the face of dramatic and public change, we can count on our employees to remain steadfast in their dedication to the people and communities we serve. As a result, our organization has emerged stronger, more resilient, and more member-focused than ever before.

We continue to grow, learn from our past, and prepare for the future. Our journey is far from over, and it’s a journey we are taking together.

Charles E. Sattwill
RENEWING OUR PRIORITIES

Every day, we are improving the way we serve our members, work with our communities, and support our providers.

OUR VALUES

Courage
Integrity
Accountability
Compassion
Pioneering
Patricia Herrera is seen here working on one of her favorite activities, a puzzle. She also loves dancing and volunteering at her local library. Diagnosed with a developmental disability, Cardinal Innovations helps Patricia and her family manage her care, connecting her with the support that she needs while making sure she stays active and happy in her community.

**Active and happy**

Patricia Herrera is seen here working on one of her favorite activities, a puzzle. She also loves dancing and volunteering at her local library. Diagnosed with a developmental disability, Cardinal Innovations helps Patricia and her family manage her care, connecting her with the support that she needs while making sure she stays active and happy in her community.
2

IMPROVEMENTS
How we’re getting better.

Change happens from the inside out, from the top down. We’ve got new leadership in place and a renewed focus on our members and communities. Throughout the past year, we’ve worked to improve access to care, prevent crises, and combat the opioid epidemic. Here are the highlights.

- **Community Reinvestment**
  Through our Community Reinvestment Initiative, we invested more than $4 million in our 20 counties, funding dozens of initiatives to improve health outcomes for our members.

- **Combatting the Opioid Crisis**
  Working with first responders, providers, and other local partners, we conducted a series of Town Hall sessions to discuss the opioid epidemic and distributed over 12,200 Narcan kits across our communities.

- **Highland Avenue Center**
  The Highland Avenue Center opened its doors in Forsyth County in 2018 to help ease overcrowding in hospital emergency rooms by providing care to individuals in mental health or substance use crisis. This facility is the first of its kind in North Carolina, and houses three important resources: an outpatient behavioral health clinic operated by Daymark Recovery Services, Highland Avenue Primary Care (a joint venture of Novant Health and Wake Forest Baptist Health), and Cardinal Innovations Healthcare’s Triad Community Office and Forsyth Wellness Center.
Family-Centered Treatment (FCT) is a service involving direct intervention with a child and his or her family that aims to lower the rate of children being placed out of their homes for treatment.

We are putting enhanced supports in place as quickly as possible for youth who are at risk for abandonment, crisis episodes, or restrictive levels of care due to behavioral health needs.

Together with our partners at Monarch, we helped pilot an Enhanced Crisis Response program in Mecklenburg County. This is the first program of its kind in North Carolina.

Mental Health Youth Crisis Center

Family-Centered Treatment

Enhanced Crisis Response Pilot

Renewed Focus on Communication

We sought to improve communications with those we serve by redesigning our website and launching a monthly member newsletter, Cardinal Innovations COMMUNITY. Sign up for this newsletter on our website.
“My friend said to me, ‘I was once you. Somebody believed in me, and I’m going to do the same for you.’”

- Cheryl

Against the odds

Cheryl was close to losing hope after battling addiction for over 35 years that left her with a long criminal record. Through the support of providers, family and friends, today she is in recovery and using her life experience to help others in the same situation.
Focus on community

21 Directors installed to our new Board in January 2018

39 Community organizations awarded over $4 million in grants through our Community Reinvestment Initiative

12,200 Opioid overdose reversal kits donated to partner organizations in our communities

Represents data from Fiscal Year 2018 (from July 1, 2017 to June 30, 2018).

A community effort

In 2018, we held a series of town hall sessions across our region about the opioid epidemic. After the sessions, attendees helped assemble over 12,200 opioid overdose reversal kits (Narcan kits). They were distributed to 160 partner organizations throughout the region.
FINANCIALS
Putting our money where our mission is.

Our priority is to get people the care they need. We work hard so members can spend more time living healthy, independent lives, and less time being treated or hospitalized in a crisis. We also work to make sure providers are paid on time, facilities are open and accessible, and our community partners and providers are well-trained in mental and behavioral health.

It's all about responsible money management, preventive care, and investment in our communities.
HELPING MEMBERS LIVE WELL

We are entrusted with the health and wellbeing of our members—linking people to services and supports to help them live their best lives. It’s a responsibility we don’t take lightly.

Outpacing the odds

Matthew’s parents were told by doctors he would probably not live past six months. Now in his 20s, Matthew graduated high school with a 4.0 and is a published author and classical composer.
Revenue

Our revenue comes from a number of sources. These dollars translate into better care, services, and support for the people we serve.

FY 2018 Revenue

$735 million
$118 million

FY 2017 Revenue

$724 million
$114 million

Medicaid revenue is funding that allows us to manage Medicaid benefits. These funds are received through a contracted arrangement with the State of North Carolina.

Non-Medicaid revenue refers to several other funding streams we manage outside of Medicaid revenue. This includes state funds, county funds, federal block grants, and more.
Expenditures

We’re putting even more money where it will do the most good: toward our members and toward our communities. Included in these expenditures are investments in our communities, including funding for special, local initiatives or one-time grants and donations.

<table>
<thead>
<tr>
<th>FY 2018 Expenditures</th>
<th>FY 2017 Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$792 million</strong></td>
<td><strong>$735.6 million</strong></td>
</tr>
<tr>
<td><strong>$90 million</strong></td>
<td><strong>$87 million</strong></td>
</tr>
</tbody>
</table>

**Care costs** refer to money spent directly on services that contribute to the health and wellness of our members. Examples of these care costs include inpatient and outpatient treatment, recovery services, and supported employment for people with disabilities. Also reflected within care costs are investments in improving quality, including activities to prevent hospital readmissions, wellness programs, patient-centered education, counseling, or care coordination.

**Admin & Other** includes the cost of administrative and operational requirements such as personnel, property, and utilities.
**Net Position**

At the end of the day, our approach to spending is simple: put members first.

<table>
<thead>
<tr>
<th>FY 2017 NET POSITION: $259.1 MILLION</th>
<th>FY 2018 Total Net Position in millions</th>
<th>FY 2018 NET POSITION: $226.6 MILLION</th>
<th>NET LOSS: $32.6 MILLION</th>
</tr>
</thead>
</table>

**What does this mean?**

Net position refers to the remaining resources available at a point in time to support operations. Our net position is at a loss for the fiscal year 2018.
The loss in our net position from fiscal year 2017 to fiscal year 2018 is due to three main factors:

- additional spending on member services
- one-time transfer of Highland Avenue Center to Forsyth County
- impact of legislative cuts to single-stream funding

Why is there a negative change in net position?

What is **single-stream funding**?

Single-stream funds are state dollars that LME/MCOs use to cover behavioral health services and supports for people who do not have health insurance and do not qualify for Medicaid. We provided coverage for more than 26,000 people with this type of funding in FY 2018.

In FY 2016, the North Carolina General Assembly made its first significant cut to the amount of single-stream funds that LME/MCOs receive, while requiring them to keep the same level of services as the previous year (FY 2015). The North Carolina General Assembly has made additional cuts to single-stream funds in every subsequent year since, while still requiring the maintenance of FY 2015 service levels.

### Legislative reductions in single-stream funds

<table>
<thead>
<tr>
<th></th>
<th>CARDINAL REDUCTION</th>
<th>SYSTEM-WIDE REDUCTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY16</td>
<td>-$22,635,538</td>
<td>-$110,808,752</td>
</tr>
<tr>
<td>FY17</td>
<td>-$31,223,572</td>
<td>-$152,850,133</td>
</tr>
<tr>
<td>FY18</td>
<td>-$21,914,121</td>
<td>-$86,942,289</td>
</tr>
<tr>
<td>FY19</td>
<td>-$44,019,405</td>
<td>-$107,630,358</td>
</tr>
<tr>
<td>TOTAL</td>
<td>-$119,792,636</td>
<td>-$458,231,527</td>
</tr>
</tbody>
</table>
PEOPLE
Healthcare made human

We serve people with intellectual or developmental disabilities, mental health conditions, or substance use disorders (IDD/MH/SUD). In short, people.

97%
Percentage of service requests we approved

1,645
Number of new people we helped connect to services for opioid use disorders (opioid addiction)

213
Number of people we helped transition from adult care homes to living independently

Represents data from Fiscal Year 2018 (from July 1, 2017 to June 30, 2018).

Transitions to Community Living (TCL)

We made a commitment to the State to help a minimum of 130 people establish a home of their own, who had been living, or were at risk of living, in an adult care home in FY 2018. Our TCL team ended the year having helped over 200 people transition to independent living in the community of their choice.
“I never thought I’d be homeless. They gave me so much hope to let me know somebody cares.”

Sheila

Healing support

A diagnosis of breast cancer and separation from her husband left Sheila homeless and emotionally in a dark place. Overwhelmed and alone, Sheila drove herself to the hospital. Through our provider network, Sheila was able to find safe, stable housing so she could focus on getting well, physically and mentally.
Supporting our network

We recognize that we are only as good as our providers. That’s why we’re committed to recruiting and retaining the highest quality clinicians and practices in our provider network to care for our members and families.

196
Number of Therapeutic Foster Care providers added to our network

2x
Increase since FY 2017 in number of Applied Behavior Analysis providers in our network to support members with autism

$1,858,839
Total amount paid daily to providers

Represents data from Fiscal Year 2018 (from July 1, 2017 to June 30, 2018).

Speed of payments

We’re committed to paying our providers in a timely and accurate manner so they are able to focus on what they do best: delivering high-quality care to our members. In FY 2018, we paid our providers within seven days on average from receiving a claim.
“You’ve got to be a very good listener. . . It’s about listening to the person, communicating, and trying to validate what’s going on.”

- Wanda

Guidance in a crisis

Wanda is a mobile crisis provider of mental health in the Cardinal Innovations’ Five County region—which serves Franklin, Granville, Halifax, Vance, and Warren counties. She responds whenever someone is in crisis from addiction, mental illness, or other behavioral health emergencies. If someone decides in the middle of the night to seek sobriety, she will be there offering her calm voice and guidance when an individual is most vulnerable.
Community partners

We believe in meeting our members where they are. When we bring local community partners and leaders together, we are able to address needs that extend beyond a doctor’s visit. It is vital to connect the dots between a member’s health and their integration into the community. We do that by supporting our communities with resources, trainings, events, and initiatives.

946
Total community training sessions conducted by Cardinal Innovations (up from 297 in FY 2017)

14,550
Total number of people who attended a community training session (up from 5,472 in FY 2017)

734
Number of law enforcement and first responders we trained in Crisis Intervention Team (CIT) Training

Represents data from Fiscal Year 2018 (from July 1, 2017 to June 30, 2018).
“When you see someone truly in crisis, and you are the only thing they have to cling to, it just makes you feel human.”

Deputy Andrews

**Crisis Intervention Training**

CIT is a nationally recognized course to help law enforcement and first responders better identify and respond to someone in mental health crisis.
A dedicated team

Our devoted staff has carried us to where we are now, and we’ll continue to rely on the strength and compassion of our team as we move forward.

887
Total Cardinal Innovations team members (as of June 30, 2018)

80%
Percentage of Cardinal Innovations employees who have completed diversity and inclusion training

34
Number of senior leaders certified in Person-Centered Thinking (as of June 30, 2018)

Represents data from Fiscal Year 2018 (from July 1, 2017 to June 30, 2018).

Person-centered philosophies

The philosophy of being person-centered, recognizing a person before their diagnosis, is core to the DNA of Cardinal Innovations. Our leadership is expected to understand and practice this philosophy, regardless of department or title. It’s what we stand for.
“The secret to population health management isn’t technology. It’s humanity.”

-Julie

Helping young members succeed

Cardinal Innovations has developed a model to search for young members who are about to turn 18. Julie, an integrated health nurse manager, and the other members of Cardinal Innovations’ Population Health Specialist Team work to reach out and help them transition into adulthood with the services and supports they need to be successful.
Cardinal Innovations Healthcare is committed to fostering a collaborative environment that appreciates individuality. Our members benefit from a workforce of diverse backgrounds and experiences.

We believe that inclusion, compassion, and respect drive a high-performing culture that supports the success of our employees, our members, and our communities.

Our team members work together to create positive solutions for members, caregivers, our communities, and providers.
What inclusion and diversity means at Cardinal Innovations:

Our employees reflect the diversity of our members, and each employee is responsible for creating and maintaining an environment of mutual respect and support. We value different perspectives and understand that when we leverage the diverse thinking, skills, experience, and working styles of our employees and other stakeholders, we will have the greatest success in promoting both individual and organizational growth.

We believe in creating a safe space where individuals can safely speak up and express their authentic self. Discrimination based on age, generation, gender identification, sexual orientation, race, national or ethnic origin, religion, language, political beliefs, and mental and physical abilities is not tolerated. Our employees learn and work better when they interact with others who are not like themselves. Innovation occurs more rapidly when we draw on the diverse perspectives, skills and experience of others.

We believe that culturally competent organizations have improved health outcomes, increased respect and mutual understanding, and increased participation from the local community. Our policies are clear and equitable: suitability for employment, promotions, transfers, demotions, and wages is determined only by an individual’s ability to perform the job.

By embracing diversity in our communities, we develop collaborative, sustainable relationships with our colleagues, our members, and our local community stakeholders. Our core values of Courage, Integrity, Accountability, Compassion and Pioneering underpin our commitment to ensuring that the value of cultural competency is upheld in all that we do.
COUNTIES
Explore the 20 counties we serve every day.

Cardinal Innovations provides 20 counties in North Carolina with comprehensive behavioral healthcare services. We partner with nearly 1,000 doctors, hospitals, clinicians, and licensed professionals to ensure that our members receive exceptional care and support services.

Each county in Cardinal Innovation’s service area has unique strengths, needs, and demographics.
Our service area

Alamance
Cabarrus
Caswell
Chatham
Davidson
Davie
Forsyth
Franklin
Granville
Halifax
Mecklenburg
Orange
Person
Rockingham
Rowan
Stanly
Stokes
Union
Vance
Warren
Alamance County

Population
162,391

Training Attendance
941

Receiving Services
6,297

Eligible
35,405

Innovations Waiver
186

“I was in recovery for many years, and I needed a way to stay in recovery, to stay clean. I also wanted a way to give back to the community that I had to leave behind in order to survive. CFAC provided that for me.”

Jeanette Williamson | MEMBER AND CFAC MEMBER

COMMUNITY REINVESTMENT

Career College Mentorship Project
Alamance Community College

ABSS Youth Mental Health First Aid Workshop
Alamance-Burlington School System

Central Family Partner Community Involvement
North Carolina Families United, Inc.
Cabarrus County

**Population**
206,872

**Training Attendance**
1,800

**Receiving Services**
6,213

**Eligible**
38,047

**Innovations Waiver**
228

“*What do I wish that I knew then [about having a child with Down Syndrome]? That it was going to be ok, and we were going to make it.*”

*Ann Gulf  |  Parent and Employee*

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**COMMUNITY REINVESTMENT**

- **Hired 2 PATH Instructors for Equine-Assisted Therapy Program**
  *Wings of Eagles Ranch*

- **Assistive Listening Devices Upgrade**
  *Cabarrus County Schools*
## Caswell County

<table>
<thead>
<tr>
<th><strong>Population</strong></th>
<th>22,646</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Training Attendance</strong></td>
<td>206</td>
</tr>
<tr>
<td><strong>Receiving Services</strong></td>
<td>856</td>
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<tr>
<td><strong>Eligible</strong></td>
<td>5,586</td>
</tr>
<tr>
<td><strong>Innovations Waiver</strong></td>
<td>29</td>
</tr>
</tbody>
</table>

### Community Reinvestment

<table>
<thead>
<tr>
<th><strong>CHOICES Program, focusing on decision making, healthy lifestyle, anti-bullying, and SUD intervention</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Caswell County Schools</em></td>
</tr>
<tr>
<td><strong>Central Family Partner Community Involvement</strong></td>
</tr>
<tr>
<td><em>North Carolina Families United, Inc.</em></td>
</tr>
</tbody>
</table>

“Behavioral health is the key to unlocking the mysteries of a human being if we just take a moment and get to know them, where they are and who they are, and not where we think they should be.”

**Meredith Peffley | Employee**
Chatham County

<table>
<thead>
<tr>
<th>Population</th>
<th>71,472</th>
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<tbody>
<tr>
<td>Training Attendance</td>
<td>227</td>
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<tr>
<td>Receiving Services</td>
<td>1,716</td>
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<tr>
<td>Eligible</td>
<td>9,813</td>
</tr>
<tr>
<td>Innovations Waiver</td>
<td>79</td>
</tr>
</tbody>
</table>

COMMUNITY REINVESTMENT

- **Expanding Mental Health Services for Latino Families**
  
  *El Futuro*

- **Expansion of Primary Mental Health Service Space**
  
  *Chatham County Government*

- **Mental Health Initiatives**
  
  *YMCA of the Triangle*

- **Central Family Partner Community Involvement**
  
  *North Carolina Families United, Inc.*

“After many years of hard work on her part and mine, and others supporting us, [daughter, Sasha, who has Fetal Alcohol Spectrum Disorder] is happy and fulfilling her dream of being more independent from me and doing activities and work she loves to do. She has friends. She has fun. She IS fun! And loving.”

Kathy Hotelling | PARENT OF MEMBER, SASHA
Davidson County

<table>
<thead>
<tr>
<th>Community Reinvestment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Clinic Expansion for</td>
</tr>
<tr>
<td>Davidson Health</td>
</tr>
<tr>
<td>Gaston Family Health Services</td>
</tr>
</tbody>
</table>

**Population**
165,466

**Training Attendance**
292

**Receiving Services**
5,638

**Eligible**
35,440

**Innovations Waiver**
180

“Any challenge we put in front of [Scott], any goal that we set, he always meets it and surpasses it.”

Jill Hunt  | PARENT OF MEMBER, SCOTT
Davie County

Population
42,456

Training Attendance
1,136

Receiving Services
1,187

Eligible
7,166

Innovations Waiver
51

"I was drawn to this field as a place where my skills and characteristics could make a positive difference in someone else’s life."

Melissa Bunker | Employee
Forsyth County

Population
376,320

Training Attendance
333

Receiving Services
13,055

Eligible
80,283

Innovations Waiver
498

“Working with counties to address local gaps and needs and to assure better access to services and supports is extremely rewarding.”

Ronda Outlaw | EMPLOYEE

COMMUNITY REINVESTMENT

Program Expansion
iCan House Services

Rapid Response Housing Program
United Way of Forsyth County

Mobile Medical Unit for Mental Health Service Expansion
School Health Alliance for Forsyth County
## Franklin County

<table>
<thead>
<tr>
<th>Population</th>
<th>66,168</th>
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</thead>
<tbody>
<tr>
<td>Training Attendance</td>
<td>506</td>
</tr>
<tr>
<td>Receiving Services</td>
<td>2,354</td>
</tr>
<tr>
<td>Eligible</td>
<td>13,808</td>
</tr>
<tr>
<td>Innovations Waiver</td>
<td>70</td>
</tr>
</tbody>
</table>

“Franklin County is one of the fastest growing counties in North Carolina, and we’re proud of the work we do with local stakeholders to develop resources that improve access to health care and improve outcomes for our members,”

Elliot Clark  |  Employee
Granville County

<table>
<thead>
<tr>
<th>Population</th>
<th>59,557</th>
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</thead>
<tbody>
<tr>
<td>Training Attendance</td>
<td>446</td>
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<tr>
<td>Receiving Services</td>
<td>1,847</td>
</tr>
<tr>
<td>Eligible</td>
<td>11,248</td>
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<tr>
<td>Innovations Waiver</td>
<td>62</td>
</tr>
</tbody>
</table>

**COMMUNITY REINVESTMENT**

- **Mental Health & Substance Abuse Telemedicine for Granville County Detainees**
  - *Granville County*

- **Integrated Care for Diversion Program**
  - *Granville/Vance Public Health*

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“Somebody believed in me, and I’m going to do the same for you.”

Cheryl Pauling  | MEMBER AND PEER SUPPORT SPECIALIST
Halifax County

**Population**
51,310

**Training Attendance**
2,974

**Receiving Services**
3,208

**Eligible**
16,972

**Innovations Waiver**
70

“MHFA has reduced the stigma associated with mental illness in our communities. Our community talks much more openly about mental health concerns and how we can better collaborate, support, and reach out to someone experiencing a crisis. By intervening early and helping people access treatment as soon as possible, there is a greater likelihood that an individual will achieve recovery and stave off long-term mental illness or substance abuse.”

Gina DeMent | EMPLOYEE

**COMMUNITY REINVESTMENT**

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>HRMC Expansion Project</td>
<td>Rural Health Group</td>
</tr>
<tr>
<td>HVAC Replacement</td>
<td>Roanoke Valley Adult Day Center</td>
</tr>
</tbody>
</table>
# Mecklenburg County

<table>
<thead>
<tr>
<th><strong>Population</strong></th>
<th>1,076,837</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Training Attendance</strong></td>
<td>482</td>
</tr>
<tr>
<td><strong>Receiving Services</strong></td>
<td>29,036</td>
</tr>
<tr>
<td><strong>Eligible</strong></td>
<td>195,192</td>
</tr>
<tr>
<td><strong>Innovations Waiver</strong></td>
<td>1,187</td>
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## COMMUNITY REINVESTMENT

<table>
<thead>
<tr>
<th>Project Description</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychiatric Residential Treatment Facility</td>
<td>Mecklenburg County</td>
</tr>
<tr>
<td>Kickstarter Ideas</td>
<td>Autism Society of NC</td>
</tr>
<tr>
<td>Clinician &amp; Community Training and Outreach Program</td>
<td>Camino Community Center</td>
</tr>
<tr>
<td>Enhancing Outdoor Learning Environment</td>
<td>Lakewood Preschool Cooperative</td>
</tr>
<tr>
<td>Providence Place Expansion</td>
<td>NAMI - Charlotte</td>
</tr>
<tr>
<td>Facility Expansion</td>
<td>Hinds’ Feet Farm</td>
</tr>
</tbody>
</table>

“Working for Cardinal Innovations, I have learned a whole lot more about [individuals with intellectual and developmental disabilities]. I see that my reason for being here is much bigger than just me. I can be a voice for those who have not been heard.”

Ricardo Torres | EMPLOYEE
Orange County

<table>
<thead>
<tr>
<th>Population</th>
<th>144,946</th>
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</thead>
<tbody>
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<td>Training Attendance</td>
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<tr>
<td>Receiving Services</td>
<td>3,792</td>
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<tr>
<td>Eligible</td>
<td>16,305</td>
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<tr>
<td>Innovations Waiver</td>
<td>184</td>
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</table>

**COMMUNITY REINVESTMENT**

- **Mental Health Initiatives**
  
  *YMCA of the Triangle*

- **Housing and Mental Health Service for Orange County Survivors of Domestic Violence**
  
  *Compass Center for Women & Families*

- **Central Family Partner Community Involvement**
  
  *North Carolina Families United, Inc.*

“I like to think I’m helping create positive changes to a system that my daughters [who both have IDD diagnoses] may one day rely upon.”

Tom Wilson | Employee and Parent
Person County

Population
39,370

Training Attendance
725

Receiving Services
1,938

Eligible
9,119

Innovations Waiver
56

“You want to make the member feel empowered and feel that they are leading their days.”

Crystal Hargrove | EMPLOYEE
## Rockingham County

<table>
<thead>
<tr>
<th>Population</th>
<th>90,949</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Attendance</td>
<td>853</td>
</tr>
<tr>
<td>Receiving Services</td>
<td>3,997</td>
</tr>
<tr>
<td>Eligible</td>
<td>22,815</td>
</tr>
<tr>
<td>Innovations Waiver</td>
<td>102</td>
</tr>
</tbody>
</table>

“I really enjoy extending my support to others. My grandmother and mother set the standard in my family to always help others that are in need.”

Janell Jordan

**COMMUNITY REINVESTMENT**

- **Transformative Training for School Staff - Trauma**
  - *Rockingham County Schools*
Rowan County

Population
140,644

Training Attendance
170

Receiving Services
6,189

Eligible
33,914

Innovations Waiver
159

“...I knew as a young adult that I had a desire and passion to work with people and serve my community. I was particularly interested in working with children and youth, trying to have a positive impact in their lives and on their future.”

Reid Thornburg

COMMUNITY REINVESTMENT

- Establishing Post-Overdose Response Teams, etc.
  Center for Prevention Services

- Triple P-Positive Parenting Program
  Ketchmore Kids
Stanly County

Population
61,482

Training Attendance
152

Receiving Services
2,867

Eligible
13,190

Innovations Waiver
68

“People [diagnosed with an IDD] want to have relationships, and I don’t think people understand that. They’re just like you and me.”

Lori Klein  |  EMPLOYEE

COMMUNITY REINVESTMENT

Shelter and Services Expansions
Esther House of Stanly County

Equipment for Facility Expansion
GHA Autism Supports
Stokes County

Population
45,717

Training Attendance
684

Receiving Services
1,697

Eligible
9,045

Innovations Waiver
58

“I am passionate about connecting with our members and community on a personal level. This type of contact allows me to better serve my community and provide opportunities for members to engage in healthy activities in an inclusive environment.”

Amanda Smith | EMPLOYEE

COMMUNITY REINVESTMENT

Stokes Circle of Parents
Children’s Center of Surry, Inc.
Union County

**Population**
231,366

**Training Attendance**
1,424

**Receiving Services**
5,384

**Eligible**
32,917

**Innovations Waiver**
251

“How can we reduce stigma? My brother [who we lost to suicide] drives me on that. I think about how my parents suffered [as survivors of suicide] and didn’t understand. I use that as a guide.”

John Giampaolo | EMPLOYEE
Vance County

Population
44,211

Training Attendance
989

Receiving Services
3,288

Eligible
17,220

Innovations Waiver
56

“T’m glad to be out on my own again. They really worked to help us, and I appreciate it.”

Fred Ayscue | MEMBER

COMMUNITY REINVESTMENT

Integrated Care for Diversion Program
Granville/Vance Public Health

ARC Access to SUD Services
Alliance Rehabilitative Care

Residence support for women with substance use disorders
Freedom House Recovery Center
Warren County

Population
19,883

Training Attendance
62

Receiving Services
1,001

Eligible
5,456

Innovations Waiver
37

“CFAC [Cardinal Innovations’ Consumer and Family Advisory Committee] was instrumental in Donnie [her late sister] blossoming socially, and it gave her the opportunity to know she was not alone in her personal challenge with bipolar disorder.”

Angela Kearney-Dunlap | CFAC MEMBER

COMMUNITY REINVESTMENT

Improving care for persons experiencing mental health and substance crisis through specialized IVC transport, community liaison, and enhanced sworn officer training.

Warren County

Residence support for women with substance use disorders

Freedom House Recovery Center
MOVING FORWARD
The future of healthcare begins today.

At Cardinal Innovations, our focus is always going to be on the lifelong health and wellness of our members and their families. That’s not going to change.

What you can expect to change, and improve, is our commitment to doing it better, and with you in mind. Every day. To work with our community partners to explore better ways to combine compassion, innovation, and technology. To make sure our members and their families are at the table with us, designing their care plans. To give people access to a network of high quality providers. To do all of it with honesty and transparency. And do it together. That’s our promise.
Next year and beyond

We’re proud to be agents of change for those whose voices matter most. And as Medicaid Transformation evolves in North Carolina, it’s more important than ever for us to listen and understand to those we serve.

We rely on your voices to shape what we do and how we do it. The future belongs to all of us.

**Dedication and outstanding spirit**

Scott Hunt is a volunteer for Meals on Wheels, an active member of his church, and a decorated Special Olympics athlete. He received the Andy Lineberry Memorial Outstanding Athlete Award in Davidson County for his “dedication and outstanding spirit”.

![Photo of Scott Hunt and his mother](image-url)