



Meeting #1

Date: July 30, 2015 1:00pm-4:00pm

Location: Healthcare Association of New York State (HANYS)

1 Empire Drive, Rensselaer, NY 12144

Attendees:



Overview

This was the first meeting in a series of meetings for the Social Determinants of Health (SDH) and Community Based Organizations (CBO) Subcommittee (SC). The purpose of the meeting was to kick off the SC process, educate the SC members on Value Based Payments (VBP), as well as, provide context for the purpose and timeline of the SC work. This meeting also served as a forum to discuss any questions related to the agenda items and raise questions or concerns.

The specific Agenda for this meeting included the following:

- 1. Welcome and Introductions
- 2. Subcommittee Process, Timeline, and Roles and Responsibilities
- 3. Intro to Value Based Payments
- 4. Agenda Item #1- 5 Key Areas of Social Determinants of Health
- 5. Agenda Item #2- Roadmap Questions
- 6. Next Steps and Action Items

Key Discussion Points

1) Welcome and Introductions

Kalin Scott (DOH) along with the Co-chairs opened the meeting. The SC members, as well as other present parties, were given the opportunity to introduce themselves.

2) Subcommittee Process and Timeline

The SC purpose, process, and timeline were described to the members of the SC. It was noted that this SC differs from others in that it has much less defined directives in the Roadmap, allowing for flexibility to determine and raise the issues most important to SDH and CBO. It was decided that Meetings 1-3 will focus on SDH, and Meetings 4-6 will focus on CBO.

The final recommendations of the SC will be organized into a recommendation report and submitted to the VBP workgroup for review and approval.



3) Intro to Vale Based Payments (Reference slides 10-22) During the meeting, NYS's transformation efforts were reviewed with highlighting of the VBP Roadmap.

4) Agenda Item #1- 5 Key Areas of Social Determinants of Health (Reference slides 23-29)

The overview of SDH and examples of existing projects were presented to the SC. It was emphasized that the SC should focus on programs and projects that have evidence-based success in an effort to generate the most results and positive outcomes regarding SDH. SC members acknowledged that this would be a logical approach, and expanded upon the examples provided on Slide 24, recognizing that many determinants, both tangible and intangible, could fall under several key areas. Some suggestions included adding family cohesion, stigma, discrimination, access, and chronic poverty.

5) Agenda Item #2- Roadmap Questions (Reference slides 30-31)

The members of the SC reviewed the slide containing the Roadmap questions pertaining to SDH. Several members of the SC posed questions and made suggestions in an effort to guide the SC's direction going forward. The members decided to first address the question asking, "How do we prioritize which SDH to focus on first". A discussion ensued around stigmas, social support, discrimination, housing, poverty, population health, and an acknowledgement that most of the SDH are interrelated problems that cannot be looked at in siloes. The discussion continued focusing on populations that are most taxing to the system, as well as an importance of addressing individuals, neighborhoods, and communities as a whole. A number of questions came up related to credit and flow down of making impacts on health care costs. It was suggested, and consensus was established that the SC should focus their efforts on developing a concrete deliverable for the broader VBP workgroup. The SC spent time brain storming potential options. A full summary of the brainstorming session is included in the appendix to this summary. Throughout the discussion a consensus emerged that an essential deliverable will be to identify a core set of evidence based social determinant interventions which could create a standardized set, and potentially allow the local provider communities to decide on which to focus based on the unique needs of the communities they serve. After a comprehensive discussion, the SC agreed to form a small group within this SC to research evidence-based programs and compile a list of approximately 20 concrete recommendations on which the larger group can debate and narrow down to 10 SDH. There was a recommendation that the group examine other similar workgroups, including one related to the MRT which may have begun some of this work. Other important questions that remain include once a core set of interventions is identified, how to incentive providers to invest, and how to measure their impact.

Materials that were distributed prior to the meeting:

#	Document	Description
1	SDH and CBO Meeting 1 Final	A PDF presentation of the slide deck created for Meeting #1, which introduces VBP, details the roles of the SC, explains key areas of SDH, and calls out relevant questions found in the Roadmap.
2	The Emerging Challenges for Sustained Payment and Delivery System Reform	A brief of the October 2014 Robert Wood Johnson Foundation (RWJF) meeting with grantees and various stakeholders.



3	Bridging Health Care and Population Health:	A paper highlighting the discussion at the second
	Payment and Financing Models	Population Health Summit.
4	The Social Environment	A chapter outlining objectives for early childhood
		development, housing, and culturally competent health
		care, including recommended interventions, and
		outcomes (where available).
5	Healthy People 2020 and Social Determinants of	A page outlining the five key areas of social determinants
	Health	of health, as defined by Healthy People 2020.

Key Decisions

A small group of SC members will research and recommend no more than 20 SDH that are most relevant to address in New York State. During meeting #2, the SC will debate and select 10 of those determinants on which to focus.

Action Items

- 1. Please email Josh McCabe (joshuamccabe@kpmg.com) if you attended the meeting on the phone or did not sign the attendance sheet.
- 2. Please email Josh McCabe if you would like to participate in the smaller group who will be doing research and making recommendations for SDH on which the SC will focus.
- 3. Please email Josh McCabe if you have worked on or are aware of projects that have evidence-based outcomes that can be discussed and researched further by the smaller group who will be compiling a list of 20 SDH.
- 4. The list of 20 SDH will be sent to the SC members a week prior to Meeting #2.

Conclusion

The next meeting agenda will include a discussion to select roughly 10 of the 20 SDH recommended by the small group of SC members and to make recommendations for programs that will address and improve the social determinants. The SDH selected to focus on will drive the next two meetings. The SC will also be tasked with producing recommendations for developing metrics, measuring outcomes, and incentivizing providers to participate and invest in the suggested programs.