Social Determinants of Health and Community Based Organizations

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OHIP/DPDM/BSDH
Agenda

• Quick review of VBP Roadmap Requirements
• Innovative SDH Interventions
• Highlight from 2018 SDH Summit
• VBP Readiness for CBOs
• Creating Effective Partnerships
Social Determinants of Health-
VBP Roadmap Standards & Guidelines
Standard: Implementation of SDH Intervention

“To stimulate VBP contractors to venture into this crucial domain, VBP contractors in Level 2 or Level 3 agreements will be required, as a statewide standard, to implement at least one social determinant of health intervention. Provider/provider networks in VBP Level 3 arrangements are expected to solely take on the responsibilities and risk.” (VBP Roadmap, p. 41)

Description:
VBP contractors in a Level 2 or 3 arrangement must implement at least one social determinant of health intervention. Language fulfilling this standard must be included in the MCO contract submission to count as an “on-menu” VBP arrangement.
Guideline: SDH Intervention Selection

“The contractors will have the flexibility to decide on the type of intervention (from size to level of investment) that they implement…The guidelines recommend that selection be based on information including (but not limited to): SDH screening of individual members, member health goals, impact of SDH on their health outcomes, as well as an assessment of community needs and resources.”  (VBP Roadmap, p. 42)

Description:
VBP contractors may decide on their own SDH intervention. Interventions should be measurable and able to be tracked and reported to the State. SDH Interventions must align with the five key areas of SDH outlined in the SDH Intervention Menu Tool, which includes:


The SDH Intervention Menu Tool was developed through the NYS VBP SDH Subcommittee and is available here: https://www.health.ny.gov/health_care/medicaid/redesign/dsrip/vbp_library/
Social Determinants of Health – In Action!

- According to America’s Health Insurance Plans (AHIP) Addressing Social Determinants has led to a 26 percent decrease in emergency spending.

- WellCare recognized an additional 10 percent reduction in healthcare costs roughly $2,400 in annual savings per person – for people who were successfully connected to social services compared to a control group.

- Montefiore Health System in the Bronx has tackled the social determinants of health by investing in housing, a move that has cut down on emergency room visits and unnecessary hospitalizations for an annual 300 percent return on investment.

Community Based Organizations (CBOs)-VBP Roadmap Standards & Guidelines
Standard: Inclusion of Tier 1 CBOs

“Though addressing SDH needs at a member and community level will have a significant impact on the success of VBP in New York State, it is also critical that community based organizations be supported and included in the transformation. It is therefore a requirement that starting January 2018, all Level 2 and 3 VBP arrangements include a minimum of one Tier 1 CBO.” (VBP Roadmap, p. 42)

Description:
Starting January 2018, VBP contractors in a Level 2 or 3 arrangement MUST contract with at least one Tier 1 CBO. Language describing this standard must be included in the contract submission to count as an “on-menu” VBP arrangement.

This requirement does not preclude VBP contractors from including Tier 2 and 3 CBOs in an arrangement to address one or more social determinants of health. In fact, VBP Contractors and Payers are encouraged to include Tier 2 and 3 CBOs in their arrangements.
Tier 1 CBO
- Non-profit, non-Medicaid billing, community based social and human service organizations
  - e.g. housing, social services, religious organizations, food banks
- All or nothing: All business units of a CBO must be non-Medicaid billing; an organization cannot have one component that bills Medicaid and one component that does not and still meet the Tier 1 definition

Tier 2 CBO
- Non-profit, Medicaid billing, non-clinical service providers
  - e.g. transportation provider, care coordination provider

Tier 3 CBO
- Non-profit, Medicaid billing, clinical and clinical support service providers
- Licensed by the NYS Department of Health, NYS Office of Mental Health, NYS Office for Persons with Developmental Disabilities, or NYS Office of Alcoholism and Substance Abuse Services.

Use the CBO list on DOH’s VBP website to find CBOs in your area
Innovative SDH CBO Projects

A.I.R NYC and HealthFirst

- A two part intervention that focuses on improving engagement and self-management for pediatric asthma patients. CHWs perform health education and home environment assessment to identify triggers. Also assess for other SDH needs and make appropriate referrals.

ArchCare Community Life and Catholic Managed Long Term Care Inc.

- Timebank connecting plan members with volunteers to provide companionship. Goal is to prevent loneliness, depression and prevent hospitalization among the elderly.

Schenectady City Mission and Eddy Senior Care

- Empower Health program, provides ambassadors and health coaches to engage with clients in the field to access their needs and then provide immediate referral to community resources and/or refer client to a Health Coach for addition support. Intervention helps clients navigate and address SDH needs such as housing, food, transportation, health insurance, and accessing primary care.

Northern Manhattan Improvement Corporation and SOMOS

- Intervention focuses on assisting patients to maximize entitlement support, incentivize medication adherence and to mitigate the impact of housing and food insecurity through direct service delivery and referrals. Intervention will target the top 5% high utilizers that consume approximately 50% of the total medical expenditure.

DOH has approved 45 SDH CBO contracts to date
SDH Innovations Summit

DOH launched a first of its kind initiative to identify innovative ideas that effectively address Social Determinants of Health (SDH) for Medicaid members across the State.

• The SDH Innovations Summit was held in NYC on September 26
• The event was attended by 600 health systems, philanthropist groups, community based organizations, consulting firms, government representatives, and IT solution companies.
• Nine finalists presented their innovations to a panel of field experts and the summit attendees
• Awarded categories included: Community Based Organizations, Health Providers and Technology Solutions.
• 20 other organizations presented their innovations in a poster board session.
• Innovations will be posted on SDH CBO Website (www.health.ny.gov/mrt/sdh)
### Top Innovations - Community Based Organizations

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<tr>
<th>Organization</th>
<th>Description</th>
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<td>God’s Love We Deliver</td>
<td>Addressing food insecurity through the delivery of medically tailored meals and medical nutrition therapy to more rural and other high-need populations using a food-safe shipping carrier, and for using telemedicine to deliver nutritional assessment and counseling to individuals.</td>
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<td>Northwest Bronx Community &amp; Clergy Coalition</td>
<td>Collaboration with regional health information organizations to reduce the exacerbation of asthma symptoms for patients at high risk of emergency room and hospital admissions, who are also living in &quot;hot spot&quot; multi-family buildings in the north and central Bronx.</td>
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<td>Rural Health Network of South Central New York</td>
<td>Fruit and Vegetable Prescription Program, which helps to prevent and manage chronic diet-related diseases, and screens and connects patients with community-based preventative and management healthcare services.</td>
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## Top Innovations - Healthcare Provider Category

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<td>ArchCare</td>
<td>Creation of Timebank, a free volunteer service exchange program that empowers socially isolated New Yorkers, to meet their own needs and those of their neighbors by sharing their talents and time through a supportive community network.</td>
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<td>Community Services, Family Health Centers of NYU Langone</td>
<td>Creation of the Full Community School approach, which is both a place and a set of partnerships between a public school and other community resources to focus on academics, youth development, family support, health and social services and community development with the goals of improved student learning, stronger families and healthier communities.</td>
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<td>Montefiore Health System</td>
<td>System-wide, three-pronged approach of systemically and routinely conducting social determinant of health screenings, using an evidence-based referral tool to link patients to community-based organization services, and supporting community based organizations by providing them with training, coaching, and tools.</td>
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# Top Innovations - Technology Solutions Category

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<td>Socially Determined</td>
<td>Created a holistic model of the population by fusing clinical, claims, public and commercial data to develop a social determinants of health risk index. Based upon the social and clinical needs of the population, specific cohorts are identified to be at risk. Interventions are then designed to improve the populations' social and health outcomes.</td>
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<td>Unite Us</td>
<td>Healthy Together Referral Network which connects medical and community-based systems together for referral and care management through real-time electronic referrals, in-app messaging and notifications, as well as a shared social determinants of health dashboard that ensures all providers have access to the same information for the population they serve.</td>
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<td>Village Care</td>
<td>Recognized for the creation of the Rango program, a technology-based medication adherence and patient engagement program available via smartphone app and web browser that has been effective in empowering individuals living with HIV to better manage their condition.</td>
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Community Based Organization- VBP Readiness
How To Get Involved

• Understand Community Needs

• Know Your Key Community Partners:
  ➢ Performing Providers Systems (PPS)
  ➢ Managed Care Organizations (MCOs)
  ➢ Large Provider Systems
  ➢ CBOs

• Understand the Local VBP Level 2 or 3 Arrangements
  ➢ TCGP, IPC, Maternity, HIV/AIDS, HARP, MLTC

• Use Data to Determine the SDH Intervention Needed
  ➢ e.g. Housing, Nutrition, Health-based Housing Design

• Leverage Existing Resources
  ➢ CBO Planning Grantees, CBO Consortiums and Hubs

• Develop Your Value Proposition

Reach out Often and Engage your Existing Partners to get Involved!
Developing a Value Proposition

A value proposition is a promise of value to be delivered. It's the primary reason a prospective VBP contractor or MCO will want to work with your organization. Your proposition must explain how your services will align with and add to the success of the VBP arrangement (relevancy). The key questions to answer when developing a proposition are:

1. What is the community need and how does that overlap with the MCO’s membership?
2. What services does your organization provide?
3. Who are your community partners?
4. How much does it cost to do what you do?
5. How does the service and geographic reach provide value to the arrangement/ Medicaid population?
What are VBP contractors looking for?

• CBOs that have a strong relationship with the local community and understand the root causes of poor health among their population

• A partnership that provides value and aligns with their goals and objectives

• An intervention that can make a measurable impact on their population

• CBOs that have subcontracts to other CBOs and can coordinate social services for them

• An intervention that is flexible and can be scaled up as savings are recognized
Creating Partnerships in VBP
Pathway to SDH Intervention Implementation

1. Data Driven Needs Assessment
2. Consider Local Provider Network
3. Implement Comprehensive SDH Plan
4. Assess Existing Philanthropic Activities within Plan

Social Determinant Intervention

The NYS DOH website has a CBO Directory!
Foundation of Creating Effective Partnerships

1. Have all the key decision makers at the table
2. Utilize clear and concise contracting terms that address: terms, parties, scope of project, geographical locations, payment method or fee structure, reporting and data
3. Create measurements and milestones for project
4. Share data between the Plan, VBP Contractor and CBO
5. Meet on a regular basis to check in on the progress of the SDH project and modify as needed
SDH Intervention and CBO Contract Template

• Template must be submitted and approved in order for contract to be considered Level 2 or 3 VBP arrangement.

• MCO’s should submit the SDH/CBO Template with their DOH- Form 4255 to Contract@health.ny.gov

• MLTC’s should submit their SDH/CBO Template directly to the MLTC team at MLTCcontract@health.ny.gov.

SDH/CBO Template can be found here: www.health.ny.gov/mrt/sdh
Thank you!

Contact Information: SDH@health.ny.gov

Our Website: https://www.health.ny.gov/mrt/sdh