



**Department  
of Health**

Office of  
Health Insurance  
Programs

# **VBP Social Determinants of Health and Community Based Organizations**

CNY Cares Annual Meeting  
Emily Engel, Deputy Director  
Bureau of Social Determinants of Health

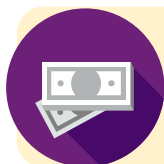
November 2018

# What are the Social Determinants of Health?

## Why Are SDH Interventions Important?



Addressing social determinants can have a significant **impact on health outcomes**



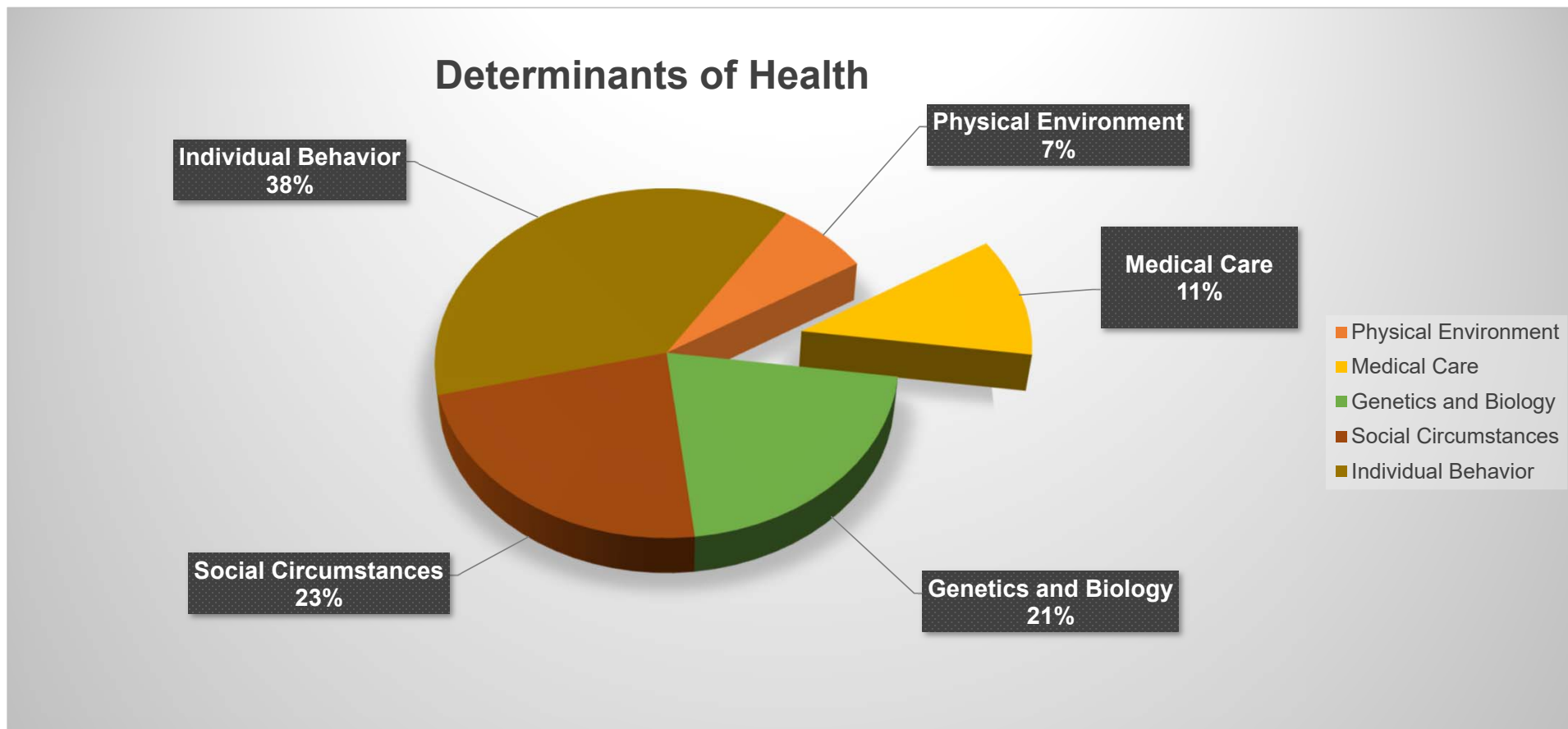
SDH Interventions can be **less costly** than traditional medical interventions



Under VBP, VBP contractors aim to **realize cost savings** while achieving **high quality outcomes**

- The VBP program design **incentivizes** VBP contractors to **focus on** the core underlying drivers of poor health outcomes—**the Social Determinants of Health**

# Factors Correlated with Health Outcomes



Determinants of Health. (n.d.). Retrieved from <https://www.goinfo.com/features/determinants-of-health/>

## Central New York

### Social Determinants of Health:

- Transportation
- Health Literacy
- Cultural competency
- Access to fresh produce
- Support Systems
- Employment
- Walkable Space

### Prevent Chronic Diseases



Obesity Prevention



Tobacco-Free Living



Chronic Disease Management

### Healthy Women, Infants, and Children



Breastfeeding\*



Oral Health\*

### Promote Mental Health and Prevent Substance Abuse



Mental Health



Substance Abuse

HealthConnections: <http://www.healthecny.org>

# CBOs' Critical Role in this Transformation

- CBOs have many years of experience improving social determinants of health
- Have an expert understanding of community needs
- Have the ability to reach Medicaid members that no one is reaching
- Leverage new resources to bring SDH interventions to scale
- Have a huge role in fully integrating social care into the healthcare system

# Quick Refresher: SDH and CBO Requirements

## 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:

- 1) *Education*, 2) *Social, Family and Community Context*, 3) *Health and Healthcare* 4) *Neighborhood & Environment* and 5) *Economic Stability*

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/dsrp/vbp\\_library/](https://www.health.ny.gov/health_care/medicaid/redesign/dsrp/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 **medical respite**, a move that has cut down on emergency room visits and unnecessary hospitalizations for an annual **300 percent return on investment**



1. What Montefiore's 300% ROI from social determinants investments means for the future of other hospitals. (n.d.). Retrieved from <https://www.healthcarefinancenews.com/news/what-montefiores-300-roi-social-determinants-investments-means-future-other-hospitals>

# **Community Based Organizations (CBOs) VBP Roadmap Standards & Guidelines**

## Standard: Inclusion of Tier 1 CBOs



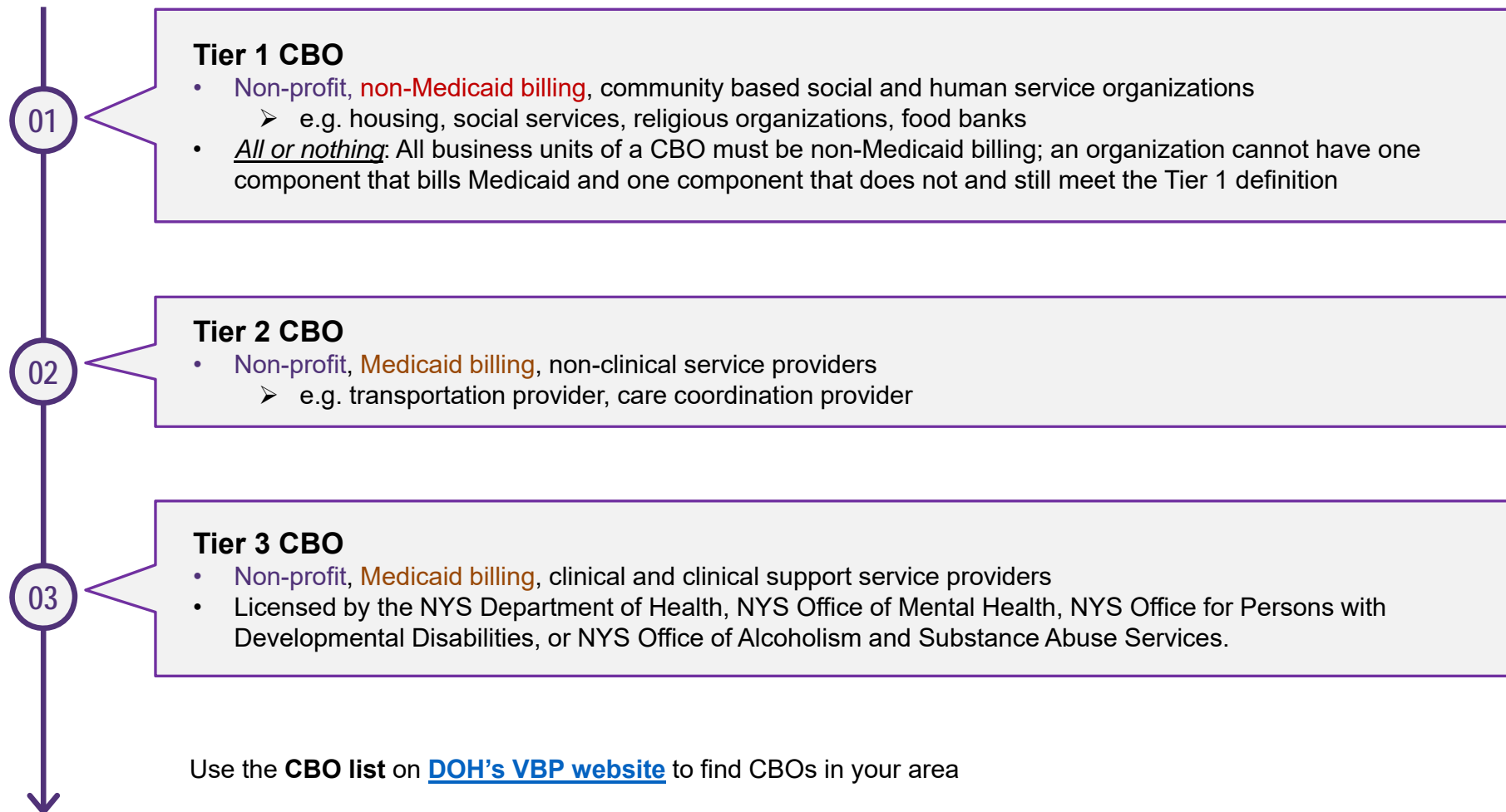
*“Though addressing SDH needs at a member and community level will have a significant impact on the success of VBP in New York State, it is also critical that community based organizations be supported and included in the transformation. It is therefore a **requirement** that **starting January 2018, 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, Tier 2, and Tier 3 CBO Definitions



## The Role of Tier 2 and 3 CBOs in VBP

Tier 2 and Tier 3 CBOs can and will play an important role in VBP!



### The more the merrier

- While all Level 2 & 3 arrangements must include at minimum one Tier 1 CBO, a VBP Contractor can include more than one CBO (including Tier 2 & 3 CBOs) in an arrangement



### Make a friend

- Tier 2 & 3 CBOs may partner with Tier 1 CBOs to help support the implementation of an SDH Intervention



### VBP Contractors are incentivized to include multiple CBOs

- By addressing SDHs, CBOs (including Tier 2 and 3 CBOs) can have a large impact on the overall health of Medicaid members, which may result in more shared savings for a VBP Contractor



### Align with a VBP arrangement

- Tier 2 and 3 CBOs may be the logical partners for specific types of arrangements if the services the CBO provides are aligned with the arrangement a lead VBP contractor is implementing



### Cover a larger geographic area

- Tier 2 and 3 CBOs can cover regions/communities not already impacted by an SDH Intervention

# 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 Community Care

- 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 46 SDH CBO contracts to date**

# How CBOs Can Get Involved



# 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

# 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!

# Building Your Value Proposition

# Developing a Value Proposition

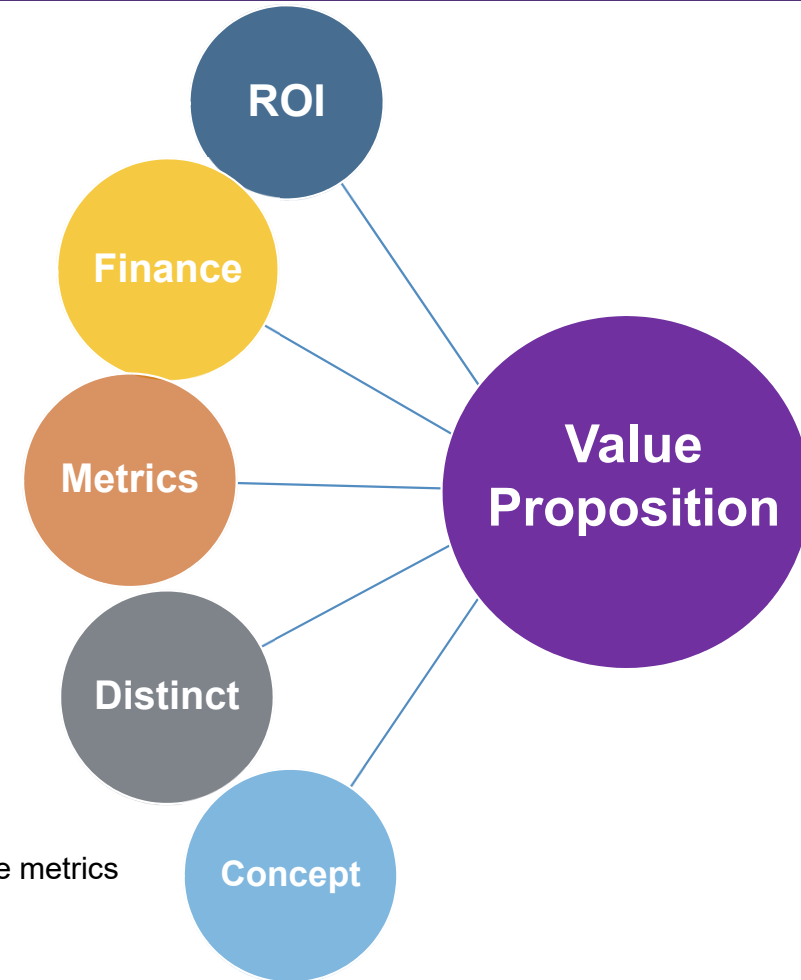
A value proposition is a promise of value to be delivered. It's the primary reason a prospective VBP contractor or MCO will want to work with your organization. Your proposition must explain how your services will align with and add to the success of the VBP arrangement (relevancy). The key questions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

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

# CBO Value Proposition

## Key Considerations:

1. Make your value proposition short and concise
2. Use data to create a compelling argument:
  - To show what's needed but is lacking in the community
  - Health impact of that lack on clients, members, patients
  - Financial impact on the stakeholder (i.e. MCO, VBP Contractor)
  - Why your organization is uniquely positioned to address this need
3. Know how much it costs to provide your service
  - Setup cost, Staffing cost, Administrative overhead cost, etc.
4. How will you track and measure outcomes?
  - Know the metrics that are important to the stakeholder
  - Identify and communicate your process for tracking and reporting on those metrics
5. Overall value of your service to the Stakeholder

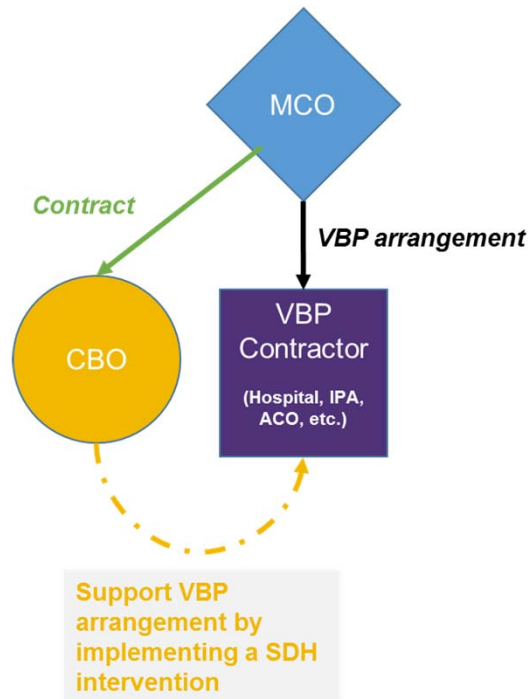


# CBO Contracting Strategies

# CBO Contracting Strategies – Scenario A

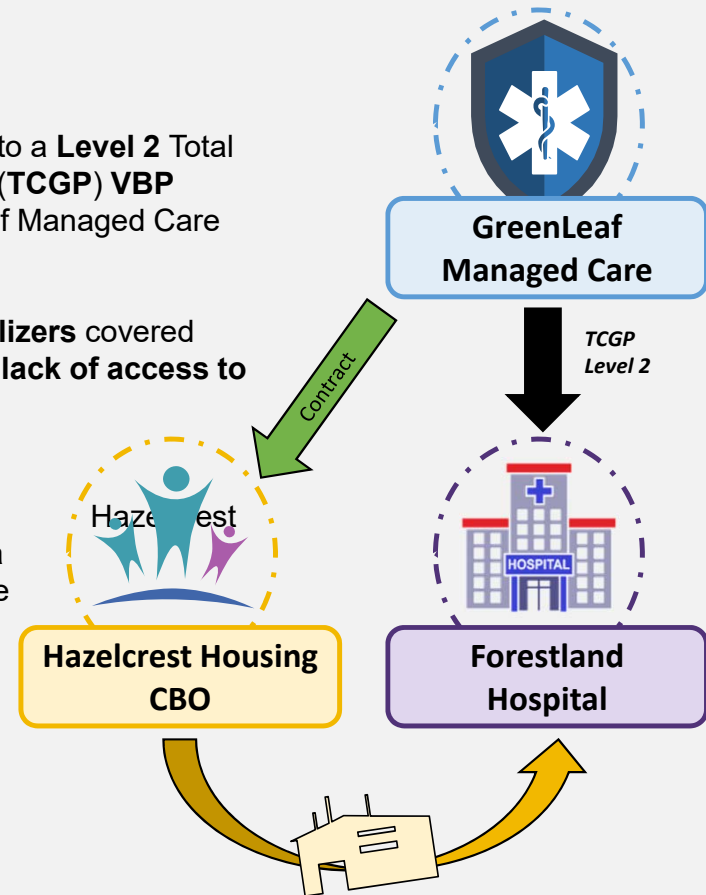
- CBOs may support VBP arrangements by:

**A** contracting directly with an MCO to support a VBP arrangement



## Hypothetical Example

- Forestland Hospital enters into a **Level 2 Total Care for General Population (TCGP) VBP arrangement** with GreenLeaf Managed Care
- Many of the **highest E.D. utilizers** covered under the arrangement have **lack of access to affordable housing**
- Greenleaf contracts with Housing CBO to implement a **Housing Intervention** for the highest utilizers covered under Forestland's VBP arrangement

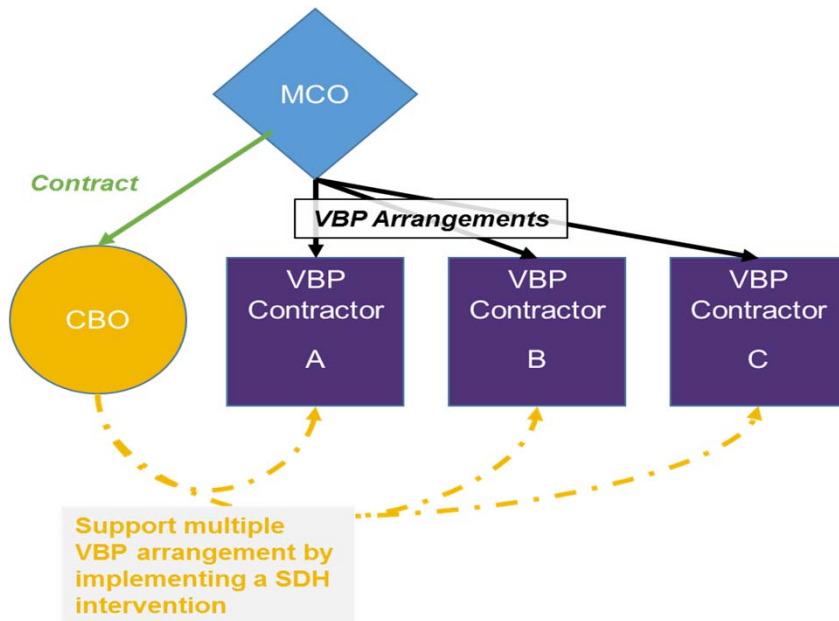


# CBO Contracting Strategies – Scenario B

- CBOs may support VBP arrangements by:

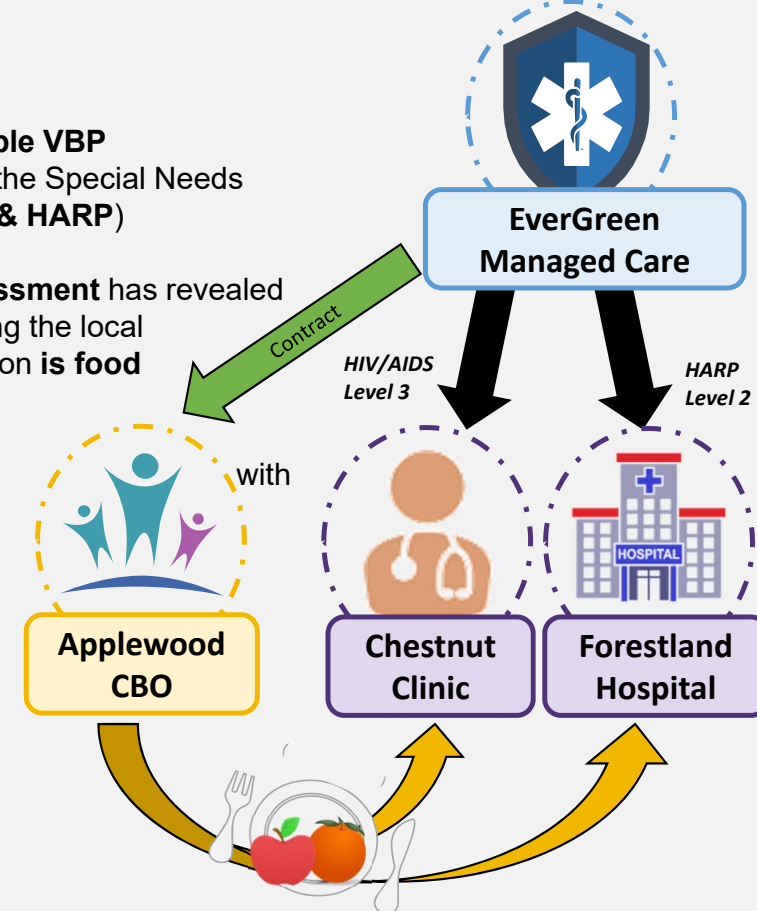
**A** contracting directly with an MCO to support a VBP arrangement

**B** contracting directly with an MCO to support multiple VBP arrangements



## Hypothetical Example

- EverGreen contracts **multiple VBP arrangements** targeted at the Special Needs Subpopulations (HIV/AIDS & HARP)
- A **community needs assessment** has revealed that a large **challenge** facing the local Special Needs Subpopulation is **food insecurity**
- EverGreen contracts Applewood CBO to implement a **Nutrition Intervention** for the local Special Needs Subpopulation **served by the multiple VBP arrangements**

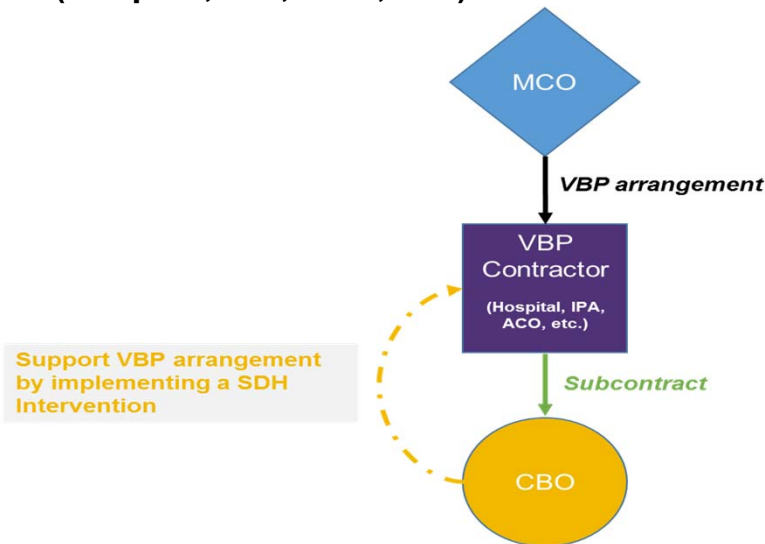




# CBO Contracting Strategies – Scenario C

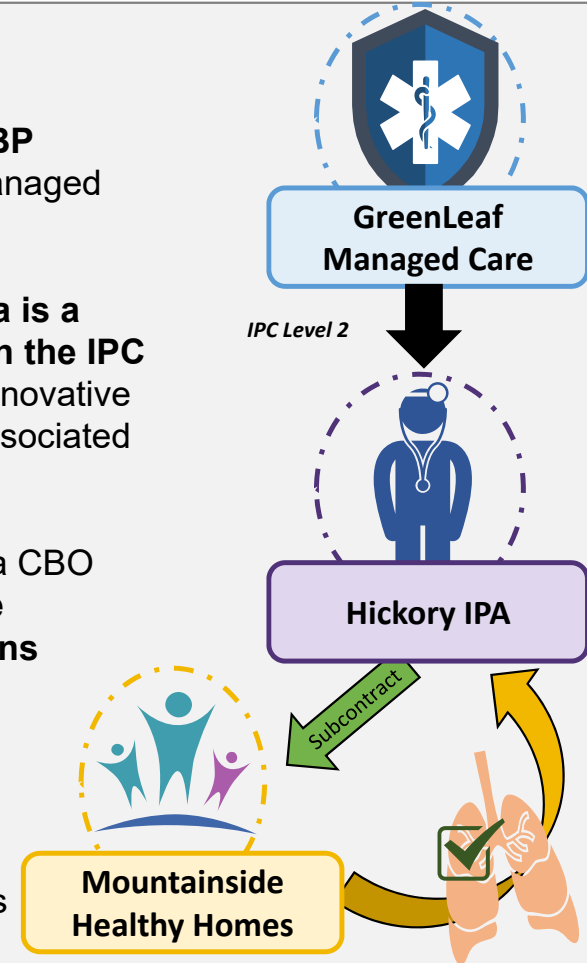
- CBOs may support VBP arrangements by:

- (A) contracting directly with an MCO to support a VBP arrangement
- (B) contracting directly with an MCO to support multiple VBP arrangements
- (C) subcontract with a VBP Contractor (Hospital, IPA, ACO, etc.)



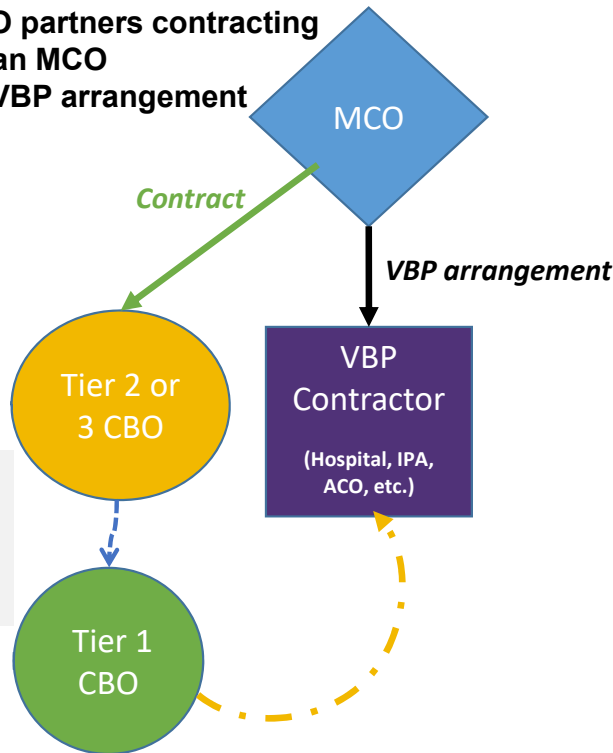
## Hypothetical Example

- Hickory IPA enters into a **Level 2 Integrated Primary Care (IPC) VBP arrangement** with GreenLeaf Managed Care
- Hickory IPA is aware that **Asthma is a chronic care episode included in the IPC arrangement**, and is exploring innovative ways to prevent complications associated with asthmatics
- Mountainside Healthy Homes is a CBO that is known regionally for **home environment-based interventions**
- Hickory IPA subcontracts with Mountainside Healthy Homes to **implement home-based interventions targeted at improving air quality in the homes of asthmatics**



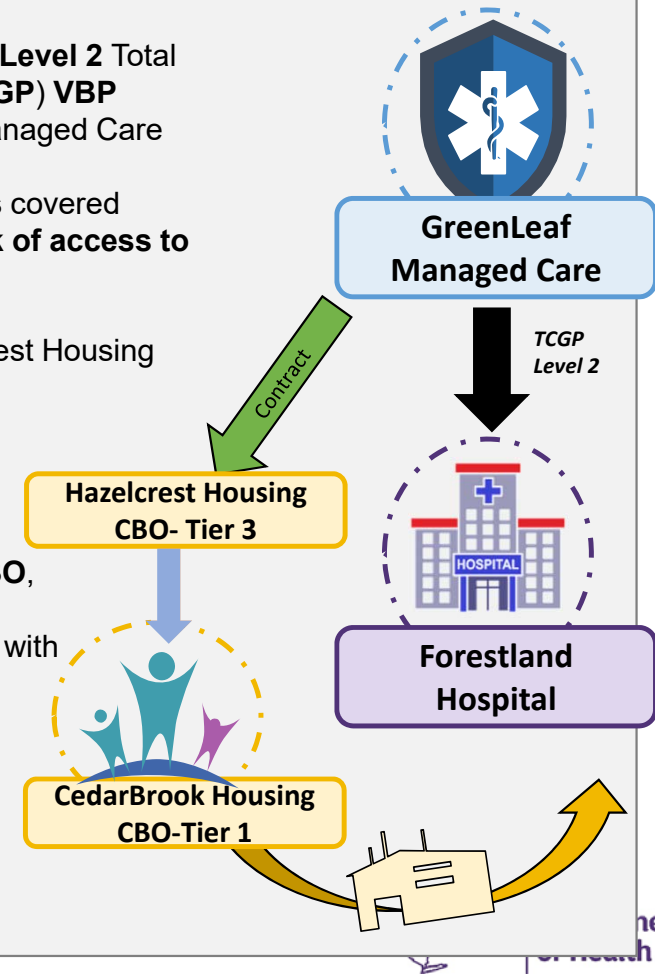
# CBO Contracting Strategies – Scenario D

- A** CBOs may support VBP arrangements by: contracting directly with an MCO to support a VBP arrangement
- B** contracting directly with an MCO to support multiple VBP arrangements
- C** subcontract with a VBP Contractor (Hospital, IPA, ACO, etc.)
- D** multi-tier CBO partners contracting directly with an MCO to support a VBP arrangement



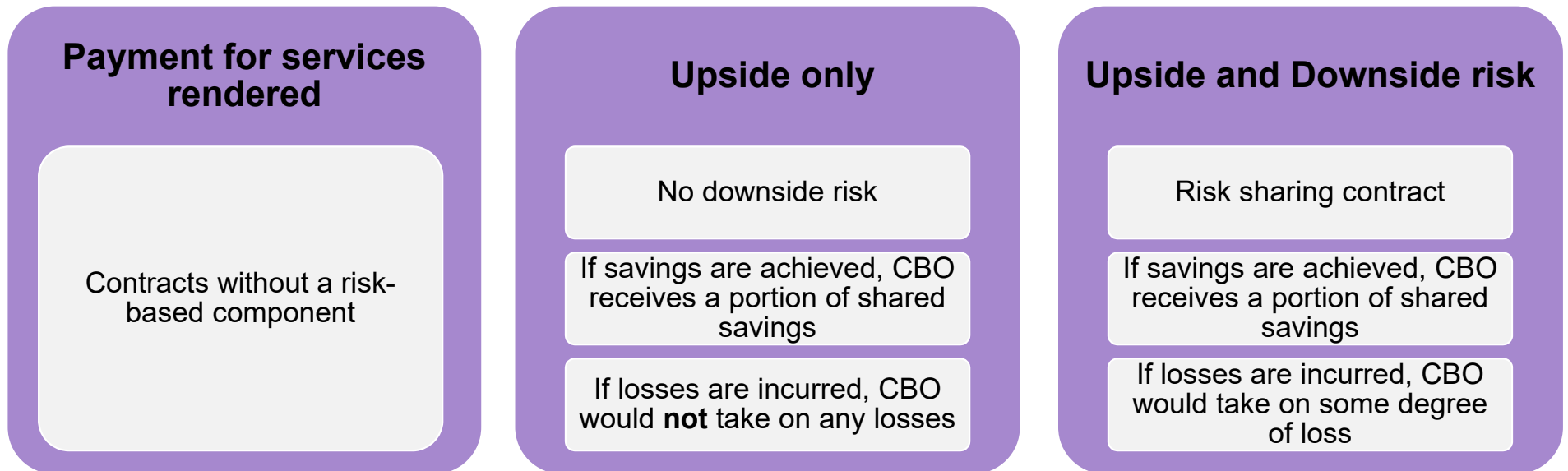
## Hypothetical Example

- Forestland Hospital enters into a **Level 2 Total Care for General Population (TCGP) VBP arrangement** with GreenLeaf Managed Care
- Many of the **highest ED utilizers** covered under the arrangement have **lack of access to affordable housing**
- Greenleaf contracts with Hazelcrest Housing CBO to implement a **Housing Intervention** for the highest utilizers covered under Forestland's VBP arrangement
- **Hazelcrest Housing, a tier 3 CBO, subcontracts with CedarBrook Housing, a tier 1 CBO,** to assist with implementation of Housing Intervention by covering a specific geographical area.



# CBO Contracting Options

- CBO contracts are **not** required to include risk
- CBO contracts could be structured as:



- CBOs may be held to performance measure standards by the party they are contracting with (VBP Contractor or MCO) in order for contracting to continue

# Key Contracting Terms

# 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

# Key Items for Contracting

## Contract Term

- What is the “Effective Date” of the contract and when does it end?
- Does the contract automatically renew after the initial period?

## Contracting Parties

- Who are you contracting with, the MCO or VBP Contractor (Hospital, IPA, ACO)?
- Use the legal names for each entity in your contract

## Scope of Project

- Describe your project implementation
- What services will be provided by the CBO?
- How many people will the intervention target? All members in the arrangement? Members that meet specific requirement?
- Will the MCO or VBP Contractor identify targeted members and refer members as needed?
- How will you evaluate/measure success?



# Key Items for Contracting

## Geographical Area

- What area(s) will the intervention cover

## Payment Method

- How will your organization get paid? Lump sum? Monthly or quarterly reimbursement.
- Are payments tied to specific measures and outcomes? i.e. number of referrals made, number of visits or contact hours, number of patient who are successfully reconnected to healthcare provider.

## Reporting and Data Collection

- How often are reports due?
- What data points are collected?
- How will you track the people that are served in the intervention?



## Webinar Series

### Value Based Payment and Community Based Organizations

- Recording on SDH Website (July 11, 2018)
- How CBOs can get involved in VBP
- How a CBO can create a value proposition
- Types of CBO/VBP contracting arrangements
- VBP myths and facts for CBOs
- Key items to include in CBO/VBP contracts

### MCO MLTC: SDH and CBO Webinar

- Slides posted on SDH Website (August 8, 2018)
- VBP requirements
- CBO's in action
- Progress in payment reform
- Contract arrangements and terms
- Reporting
- Facts and myths of VBP

### Lessons from the Field

- October 30, 2018
- Hear from the perspective of a community based organization and VBP Contractor that has successfully entered into a SDH VBP contract



# Thank you!

*Contact Information:* [SDH@health.ny.gov](mailto:SDH@health.ny.gov)

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