Community Care Hub 101
Learning Series

Building the Business Case:
CCH Partnership Development and Value Propositions

December 14, 2023

Center of Excellence to Align Health and Social Care
Welcome
Webinar hosted by the Center of Excellence to Align Health and Social Care, powered by USAgeing’s Aging and Disability Business Institute

In partnership with:
• The Administration for Community Living

Presenters
• Paul Cantrell, Director, Center of Excellence to Align Health and Social Care, USAgeing PCantrell@usaging.org
• Melissa Gualtieri, Director of Clinical Innovations, Central Ohio AAA MGualtieri@coaaa.org

Facilitator
• Maya Op de Beke, Senior Program Manager, USAgeing’s Aging and Disability Business Institute
Community Care Hub 101 Learning Series Overview

1. **Introduction to Community Care Hubs**: November 16, 2023, from 2:00-3:30 PM ET

2. **Community Care Hubs Core Functions**: November 30, 2023, from 2:00-3:30 PM ET

3. **Contracting Opportunities to Address Health-Related Social Needs**: December 7, 2023, from 2:00-3:30 PM ET

4. **Building the Community Care Hub Business Case**: December 14, 2023, from 2:00-3:30 PM ET
Webinar Instructions for Zoom

Audio Options
- Use your computer speakers, OR dial in using the phone number in your registration email.
- All participants are muted.

Questions and Answers (Q&A)
- You can submit questions for the panelists at any time during this presentation. On the Zoom module on the bottom of your screen, click the Q&A icon, type your question in the box and submit.

Chat Feature
- The Chat feature allows webinar attendees to make comments during the webinar question and answer period.
Today’s Focus

Importance of being health care industry savvy

Alignment of Community Care Hub (CCH) model/services with health care industry priorities

Priming your marketing approaches/value proposition

Promoting DEI to address health disparities-Health Related Social Needs (HRSNs)
Poll Question

Which of the following would you rank as the most beneficial attribute of what a CCH can offer a health care contracting partner?

- Trusted community knowledge and relationships
- Array of social care programs and services
- Ability to improve health, well-being, and client satisfaction
- Deep community-level reach (geographic and population)
- Capacity to deliver social care services across our communities
- Ability to identify, manage, and close gaps in care
- Single contracting entity for our network of local community social care providers
Knowledge is Power

• Basic understanding of the healthcare ecosystem’s drivers/goals:
  – Quality/Performance Outcomes
  – Patient Experience/Retention
  – Cost Effectiveness/ROI
  – Mission
  – Regulatory
  – Industry Standards
• These issues are not homogenous across the health care ecosystem
• Variation exists among individual entities within an industry subsectors (e.g., Medicaid, Medicare Advantage, etc.)
Targeted Organization Preparation

IDENTIFY ORGANIZATIONAL GOALS

KNOW YOUR AUDIENCE

PRIORITIZE/ALIGN AGENCY PROGRAMS AND SERVICES

FOCUS YOUR VALUE PROPOSITION AND DATA DASHBOARDS
CCH Services Alignment

- What do you know about health plans/systems and their priorities/pain points?
- What CCH products/services offer solutions?
- CCH proficiency/experience
  - ✓ Outcomes not outputs
  - ✓ Hard and soft ROI
  - ✓ Delivery capacity/service area
  - ✓ Volume and Scalability
# Data Supports Outcomes/ROI

<table>
<thead>
<tr>
<th>VAAACares’ successful contracting healthcare organizations outcomes:</th>
<th>Lifespan acting as the CCH in receiving referrals from physicians and home health:</th>
</tr>
</thead>
</table>
| • Reduced 30-day readmission rates:  
  • High-risk older adults from 23.4% to 14.4%  
  • Medicaid beneficiaries from 25% to 7% | • 1,200+ consumers were connected to services between 2016 and 2019 |
| | • Program results:  
  ✓ Stays 28% reduction in emergency room visits  
  ✓ 29% reduction in inpatient hospitalizations  
  ✓ 23% reduction in observation |
Building Your Health Care Connections

Mine existing relationships and connections

- Boards (yours and others in the community)
- Health Care industry groups
- Associations
- Public Policy forums
- Regulatory and legislative meetings and hearings
- Health care reporters
- Volunteer engagement events
- Foundations
Marketing CCH ROI
Hubs provide an opportunity to effectively and equitably coordinate health care and social care to meet the needs of individuals within their communities.

Source: Health Affairs article (November 29, 2023) – see resources tab for link
Adverse Impact of HRSN on Health Care Quality

- **Housing**
  - ✓ 26-36 years reduced life expectancy due to homelessness

- **Food Insecurity**
  - ✓ $155M in additional health care costs

- **Economics**
  - ✓ 24-27% higher rate of readiness for Dual Eligibles

- **Interpersonal**
  - ✓ 26% increased risk of mortality resulting from loneliness
Promoting the CCH Contracting Model

CBOs are experts in delivering social care services that address HRSNs

CCHs provide one stop shopping and service consistency

CCHs organize diverse networks of CBOs to cover:
  • Geography
  • Populations

CCHs provide a network of trusted community partners

CCHs offer a solution to regulatory requirements

CCHs enhance member experience
Keys to Articulating Your Value Proposition

Describe the value your CCH offers:
- How does your program/service solve the payer’s problem?
- What experience do you have offering this program/service?
- What positive outcomes does your program/service provide?
- What value-add does your CCH offer ("soft" ROI)
- Make it easy to understand in their “language”
Value Proposition

- Supports premise that the CCH’s product/services address key customer priorities
- Must be tailored:
  - Industry specific
  - Organization specific
  - Individual specific
Sample CCH Value Proposition: Medicaid MCO Compliance

VAAACares® monitors and evaluates compliance with Virginia Department of Medical Assistance Services (DMAS) contractual regulations. Their program demonstrated a 96-100% compliance at a rate for the following performance measures:

- **Completion of comprehensive assessments and care plan development** within
  - ✓ 30 calendar days of enrollment for waiver recipients
  - ✓ 60 calendar days of enrollment for members residing in nursing facilities
  - ✓ timely updates in accordance with DMAS contractual requirements

- **Transition Coordination:**
  - ✓ Assessment and identification of members who are appropriate to transition from institutional placement into the community setting.
  - ✓ Transition coordination planning demonstrated to begin within 24 hours of notification or member identification

- **Reporting of serious reportable events** within 24 hours to the MCO
Adding Value to CCH Contracting via DEI Practices
‘The time is always right to do the right thing’

Dr. Martin Luther King, Jr
DEI: Driving Business Reform

- Organizational vision/mission
- Employee recruitment/retention
- Consumer demand
- Industry and regulatory reform
Improving health equity requires **engagement and partnerships** across the health care ecosystem, and with other stakeholders such as employers, regulators and community-based organizations.

Eliminating health disparities in underserved populations results in **better quality** health outcomes and reduces overall cost of care.

Evolving federal and state guidelines are encouraging the industry to **identify and close gaps** in unequal treatment.
HRSN & DEI Policy/Practice Evolution

NCQA

• Social Screening and Intervention: introducing new HEDIS measure- screening for and addressing unmet food, housing and transportation needs.
• Health Plan Equity Accreditation: an additional plan certification
• Medicaid agencies may require contracted plans to have NCQA Health Plan Equity Accreditation

Regulatory

• CMS Six Pillar Strategic Framework
• CLAS
• Hospital inpatient HRSNs screening questions
States move toward Equity requirements in Medicaid

MCO Requirements to Address Health Equity, FYs 2022 - 2023

n = 37 states

<table>
<thead>
<tr>
<th>Requirement</th>
<th>In Place in FY 2022</th>
<th>Plan to Require in FY 2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>States with at least one specified MCO requirement related to health equity</td>
<td>16</td>
<td>13</td>
</tr>
</tbody>
</table>

Specified MCO Requirements Related to Equity

<table>
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<tr>
<th>Requirement</th>
<th>In Place in FY 2022</th>
<th>Plan to Require in FY 2023</th>
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<tbody>
<tr>
<td>Require MCO to have health equity plan in place</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>MCO health equity reporting requirements</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>MCO staff training on health equity and/or implicit bias required</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Required to seek beneficiary input or feedback to inform health equity initiatives</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>MCO required to have a Health Equity Officer</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Required to achieve NCQA MHC Distinction*</td>
<td>3</td>
<td>3</td>
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NOTE: Response rates per policy varied. Requirements for the NCQA Multicultural Health Care (MHC) distinction can be found here. (Note: the NCQA MHC distinction is in the process of being updated to the more comprehensive Health Equity Accreditation).

SOURCE: Annual KFF survey of state Medicaid officials conducted by Health Management Associates, October 2022 • PNG

Source: Kaiser Family Foundation – see Resources slide
Resources

Can the U.S. Achieve Equity for Elders of Color? (asaging.org)

CHRT disabilities telehealth article.pdf

Developing Your Value Proposition: How-To Guide and Worksheet (ncoa.org)

Improving Health And Well-Being Through Community Care Hubs | Health Affairs

Culturally and Linguistically Appropriate Services | Agency for Healthcare Research and Quality (ahrq.gov)

How the Pandemic Continues to Shape Medicaid Priorities: Results from an Annual Medicaid Budget Survey for State Fiscal Years 2022 and 2023 - Health Equity - 10030 | KFF
CCH 101 Webinar Series – Benefits of Joining a Network

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Discussion Topics

- CBO Profile
- Reasons for Joining Network
- Benefits of Joining Network
- Considerations/Lessons Learned
COAAA plans, funds, and delivers services that help older adults and individuals with disabilities remain safe and independent in their homes. With the assistance of area providers, COAAA arranges and coordinates services to help individuals with activities of daily living such as homemaking, transportation, home delivered meals, personal care, and more. COAAA offers education and resources to caregivers, professionals, and the public and advocates for programs and policies that benefit older adults and individuals with disabilities. COAAA manages services for 15,000 people and funds services for another 25,000 older adults in eight counties. COAAA is part of the City of Columbus Recreation and Parks Department.
REASONS TO JOIN A CBO NETWORK

- Diversification
- Relationship Building
- Optimizing Resources
- Leverage Experience
- Future Opportunities
Benefits of the CCH Network

- Opportunities
- Infrastructure
- Contracting Responsibilities
- Success Breeds Success
The Direction Home Transitional Care Program Has Proven Success

Direction Home has a long history of providing Care Transitions services. From 2012-2017, Direction Home was a CMS awardee of the Community Based Care Transitions Program, coaching over 27,000+ patients, resulting in 25.4% fewer hospital readmissions when compared with relative populations. The program helped reduce 30-day hospital readmissions from 19.6% in 2010 to 11.7% in 2016, saving area hospitals nearly $2 million in readmission costs.
Considerations/Lessons Learned

- Data, Data, Data!!
- Get comfortable in the Gray
- Business Model
- Yes, and!
- Engagement
Advocacy and Core Messaging

How do you introduce the concept of hubs (becoming one or working with one) to decision makers and funders?

- Research shows that social drivers of health (SDOH)—are responsible for 80 percent of health outcomes → need to look beyond the health care system to help drive better outcomes and eliminate health disparities
- Community Care Hubs (CCHs) are community-centered entities that organize and support networks of CBOs through a centralized administrative and operational infrastructure to help provide access to better whole-person coordinated care
- Key functions of a CCH include:
  - **Engagement with communities**: building buy-in and trust; identifying community needs
  - **Expand community capacity**: creating a network of service providers who can deliver social services at scale
  - **Support operational excellence**: building the infrastructure needed to support cross-sector partnership requirements and expectations
  - **Create pathways to financial sustainability**: promoting the sustainability of partnerships between social service and health care organizations through paid contracts
  - **Provide upstream targeted health related social needs services and supports**

Source: [Working With Community Care Hubs to Address Social Drivers of Health A Playbook for State Medicaid Agencies](#)
Questions?

Please enter your question into the designated Q&A box on your Zoom panel bar.
Technical Assistance Opportunities in 2023-24

• Community Care Hub 101 Learning Series
  – All CBOs interested in or early in their hub development

• Community Care Hub National Learning Community
  – For CBOs - existing and emerging hubs with health care contracting capacity

• Health Equity Learning Collaborative (Partnership to Align Social Care)
  – For more advanced hubs and their health care partners to collaborate on team based-learning and multi-payer alignment

• Housing and Services Partnership Accelerator
  – Support state teams coordinating across organizations that provide services and resources that help people find – and keep – stable housing in the community

• Center of Excellence to Align Health and Social Care
  – Funding opportunity for community care hubs to support and enhance hub infrastructure

• ECHO learning series on care transitions with CBOs and hospital partners
  – All CBOs serving older adults/people with disabilities with hospital partners learn how to collaborate on HRSN screening, referral, transition support, and service activation/coordination

• Multi-state IT learning collaborative on interoperable referral systems
Thank you for joining this CCH 101 Learning Series!

To review past webinar recordings and access slides visit USAging’s Business Acumen webinar page

To explore existing resources on CCHs review ADBI’s Catalog of Resources for Developing a CCH