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TRAINING SESSION 1
THE RATIONALE FOR CBO AND MCO/PROVIDER PARTNERSHIPS

April 28, 2021

Agenda

- **Welcome and Introduction**
- **Training Objectives**
- **Training Session Curriculum**
  - Context for Value-based Purchasing (VBP)
  - Rationale for VBP in Pennsylvania
  - Example CBO and MCO/Provider Partnerships
- **Business Case Tool**
- **Post-Training Evaluation**
- **Q&A**

Image Source. Nature

Virtual Training Etiquette

Due to the large number of attendees:

- Please turn off your video camera

- We will mute all lines during the presentation

- Please use the chat feature to ask questions

- Be sure to ask for clarification when needed

Image Source. Ellicom

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Social Determinants of Health (SDoH):

The social, environmental, and economic conditions that impact and affect mental health & physical health outcomes across various populations.

Image Source. Ellicom

DHS SDoH Strategy

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Assess for unmet social needs via the newly-procured Resource and Referral Tool, RISE PA

- Multi-sector collaborative approach to addressing social determinants of health and care coordination

Build out partnerships with community-based organizations to address identified, unmet social needs

- Partnerships with community-based organizations for value-based purchasing

More generally, we should all work together to address community-level factors

- Regional Accountable Health Councils (RAHCs)
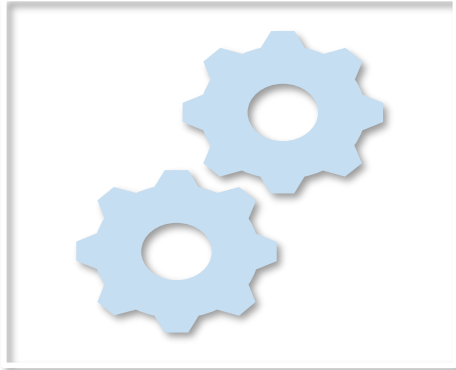
Recognize that some CBOs may need resources and training to support their efforts to form productive partnerships with MCOs and provider organizations

Training Schedule

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Training	Timeline	Focus
Training Session 1: The Rationale for CBO and MCO/Provider Partnerships	April 28 9:00 a.m.	An overview of Value-based Purchasing (VBP), customized for a CBO audience, focusing on the rationale and goals of transitioning from fee-for-service to MCO/provider contracts that are part of a VBP arrangement.
Training Session 2: Aligning CBO Governance and Operations with MCO and/or Provider Partnerships	May 17 11:00 a.m.	An overview of how CBOs can best align and adapt their governance and operations to support participation in an MCO and/or provider contract.
Training Session 3: Evaluating CBO Opportunities and Negotiating an Agreement	May 28 11:00 a.m.	This session will focus on evaluation of readiness for partnerships, as well as considerations for picking an MCO or provider organization partner and negotiating an agreement.
Training Session 4: CBO Workshop Session	June 17 4:00 p.m.	This workshop-style session will seek to provide examples for how CBOs can plan for and implement SDoH interventions that are part of a value-based purchasing arrangement between MCOs and provider organizations.

Training Resources
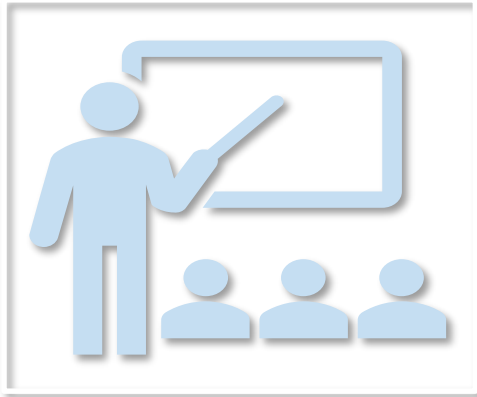
All four training sessions are being recorded. These recordings, the slides, and tools will be posted on the Department of Human Services website.

Training Session Facilitators

- **Center for Evidence-based Policy**
  - Susan Stuard, MBA, Lead for Pennsylvania TA
  - Mike Bonetto, PhD, Member of Pennsylvania TA
  - Brittany Lazur, MPH, Policy Analyst
  - Allyson Evans, JD, MED Director
  - Nicole Thompson, Project Coordinator
  - Daniel Vizzini, Policy Analyst

Training Objectives

✓ High-level overview of value-based purchasing and how CBOs can be involved

✓ Overview of benefits and challenges of CBO partnerships with MCOs and/or provider organizations

Image Source. New York State Department of Health

Commonly Used Acronyms

- CBO: community-based organization

- DHS: Department of Human Services

- MCO: managed care organization

- RAHCs: Regional Accountable Health Councils

- SDoH: social determinants of health

- VBP: value-based purchasing

Managed Care Organizations

Managed care organizations coordinate delivery of care and payment of services for Medicaid enrollees.

They enter into contracts with health care providers and medical facilities to provide care for their members.

Image Source. Managed Care Network
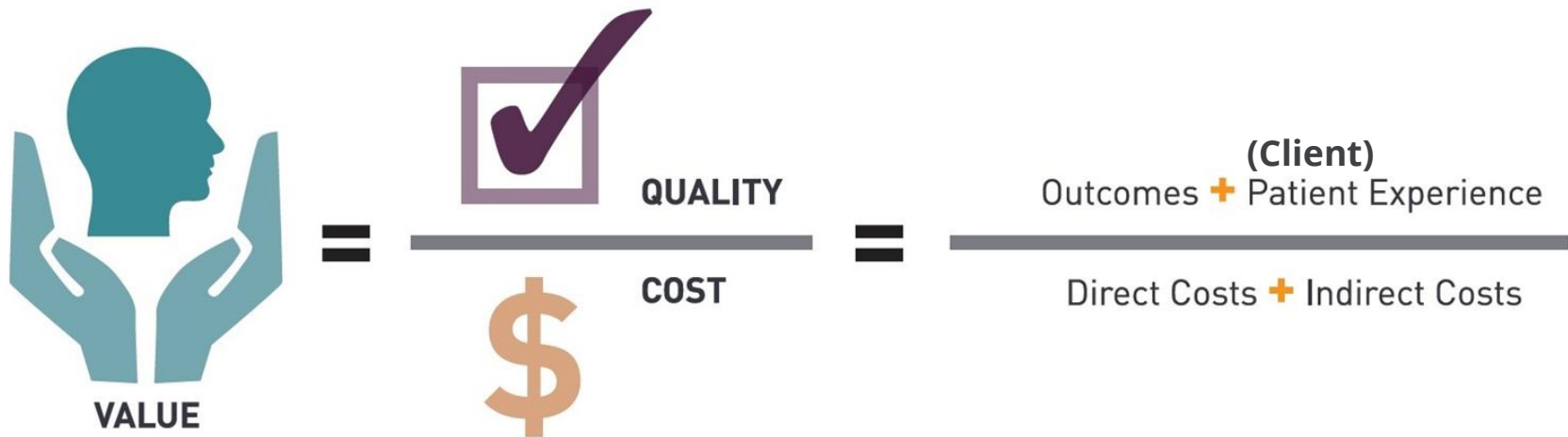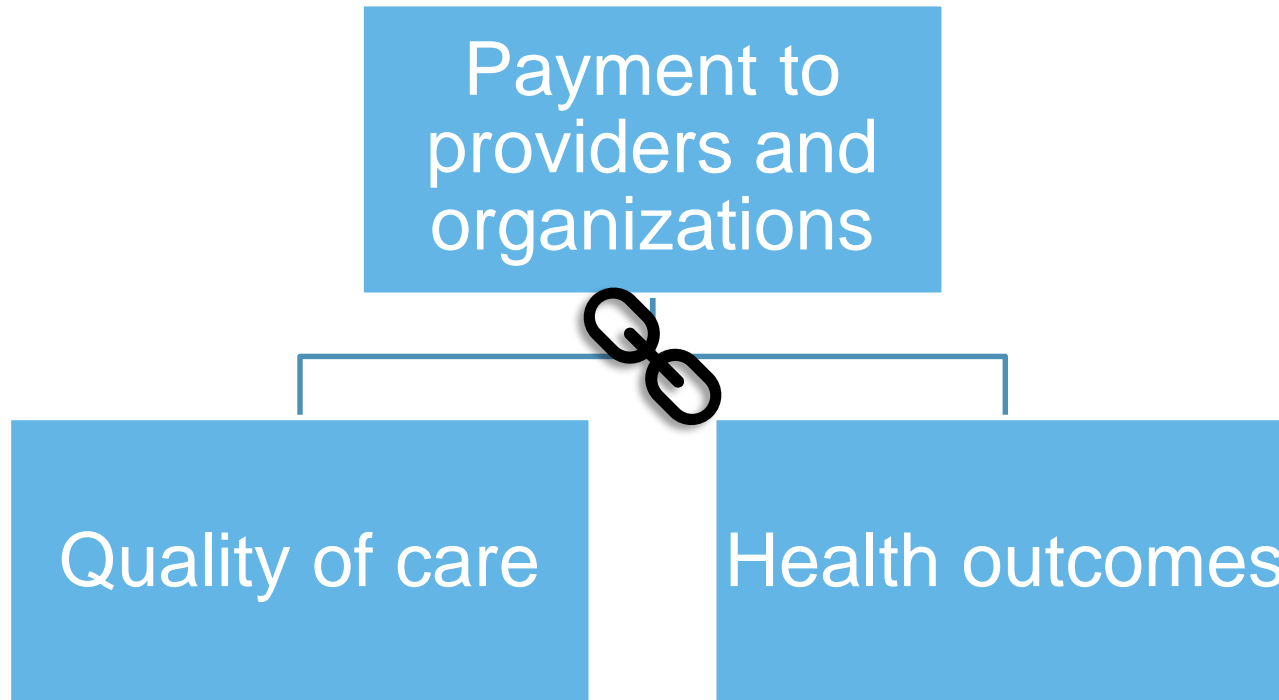
Context for Value-based Purchasing

$$\text{VALUE} = \frac{\text{QUALITY}}{\text{COST}\ \$} = \frac{\text{(Client) Outcomes} + \text{Patient Experience}}{\text{Direct Costs} + \text{Indirect Costs}}$$

Image Source. PM360

Payment to providers and organizations
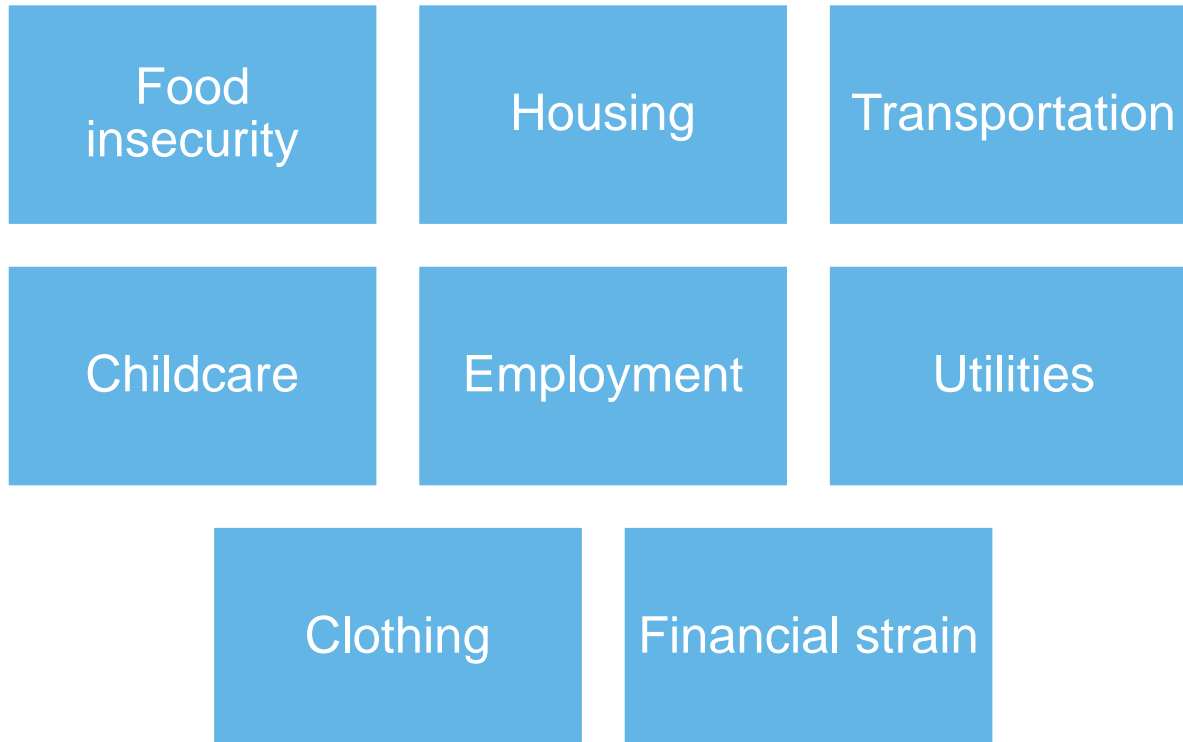
Quality of care

Health outcomes

What is Value-based Purchasing?

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For the purposes of this contract, the CBOs must provide (and preferably have a history of successfully providing) services within the following domains

Food insecurity	Housing	Transportation
Childcare	Employment	Utilities
Clothing	Financial strain	

Must be committed to adopting RISE PA when available in their county

Guiding Principles for PA

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Improve quality

Reduce cost

Address identified, unmet social determinant of health needs
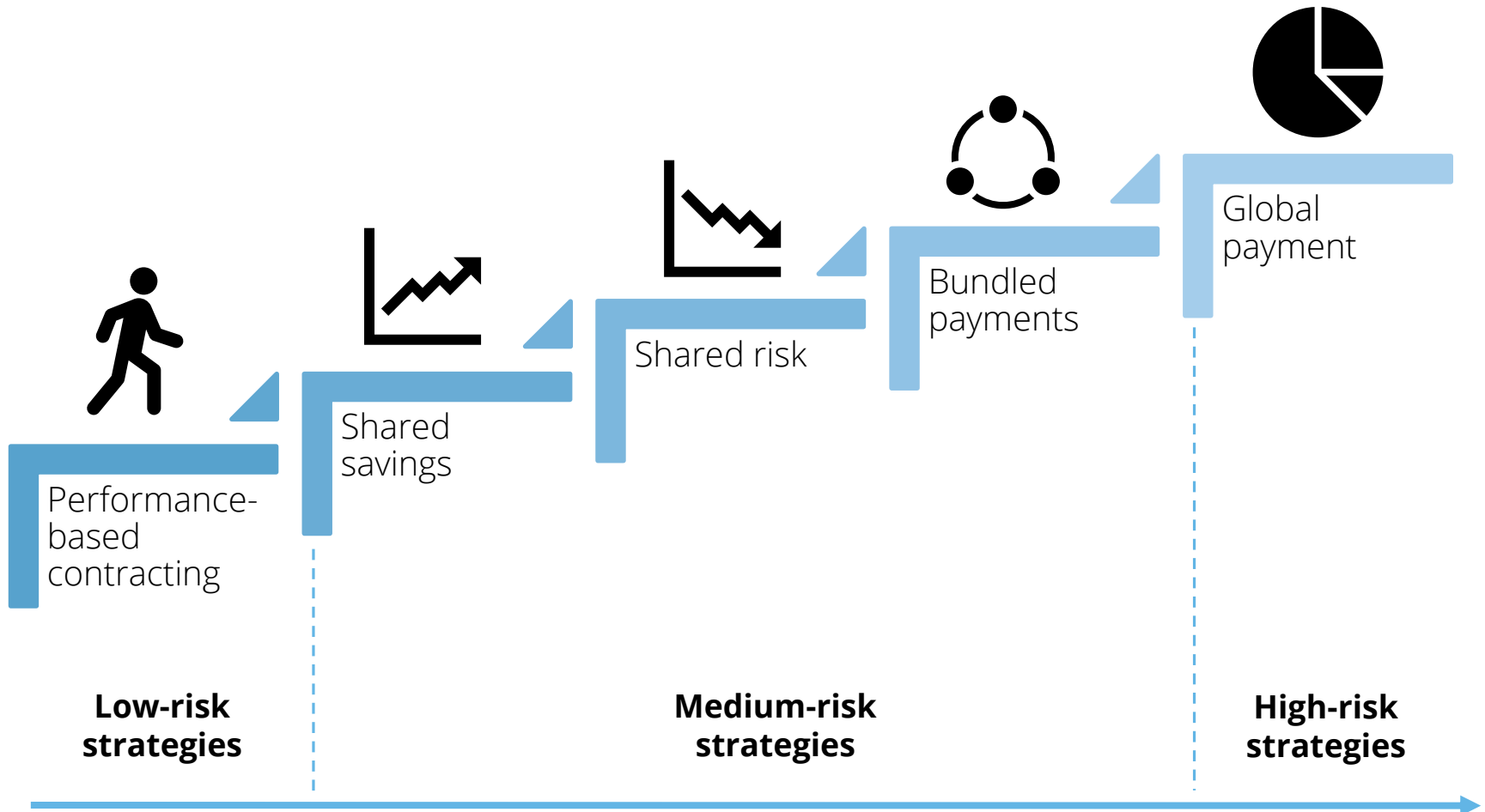
Promote health equity

Integrate physical and behavioral health across the lifespan
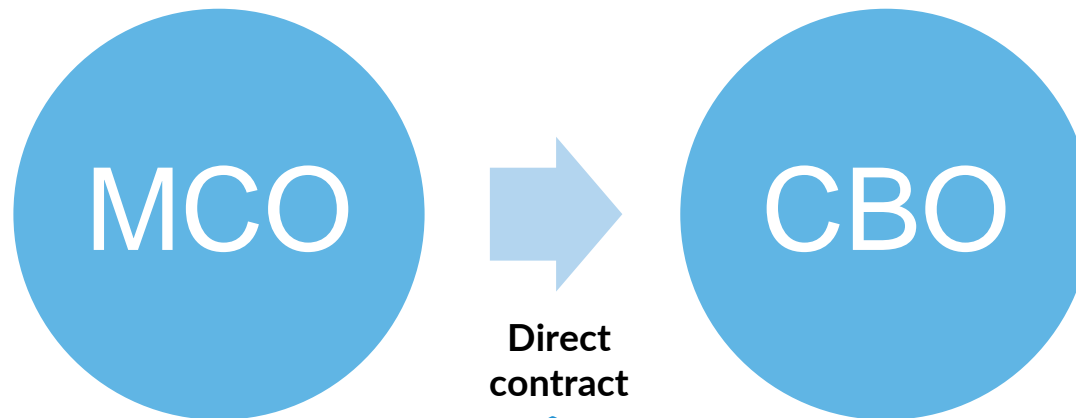
VBP Arrangements: MCO/Providers

Performance-based contracting

Shared savings

Shared risk

Bundled payments

Global payment

Low-risk strategies

Medium-risk strategies

High-risk strategies

CBO Involvement

DHS has indicated 3 ways in which CBOs can be involved:

✓ Direct contract with an MCO

✓ Direct contract with a provider who is in a value-based purchasing agreement with an MCO

✓ Shared savings with an MCO and a provider

Direct contract with an MCO

MCO → CBO

Direct contract

Fee-for-service, capitated rate, or pay-for-performance

CBO Involvement

Direct contract with a provider
who is in a value-based purchasing (VBP) arrangement
with an MCO

MCO → **Provider** → **CBO**

VBP arrangement

Direct contract

Fee-for-service, capitated rate, or pay-for-performance

CBO Involvement

Shared savings with an MCO and a provider

MCO

+

Provider

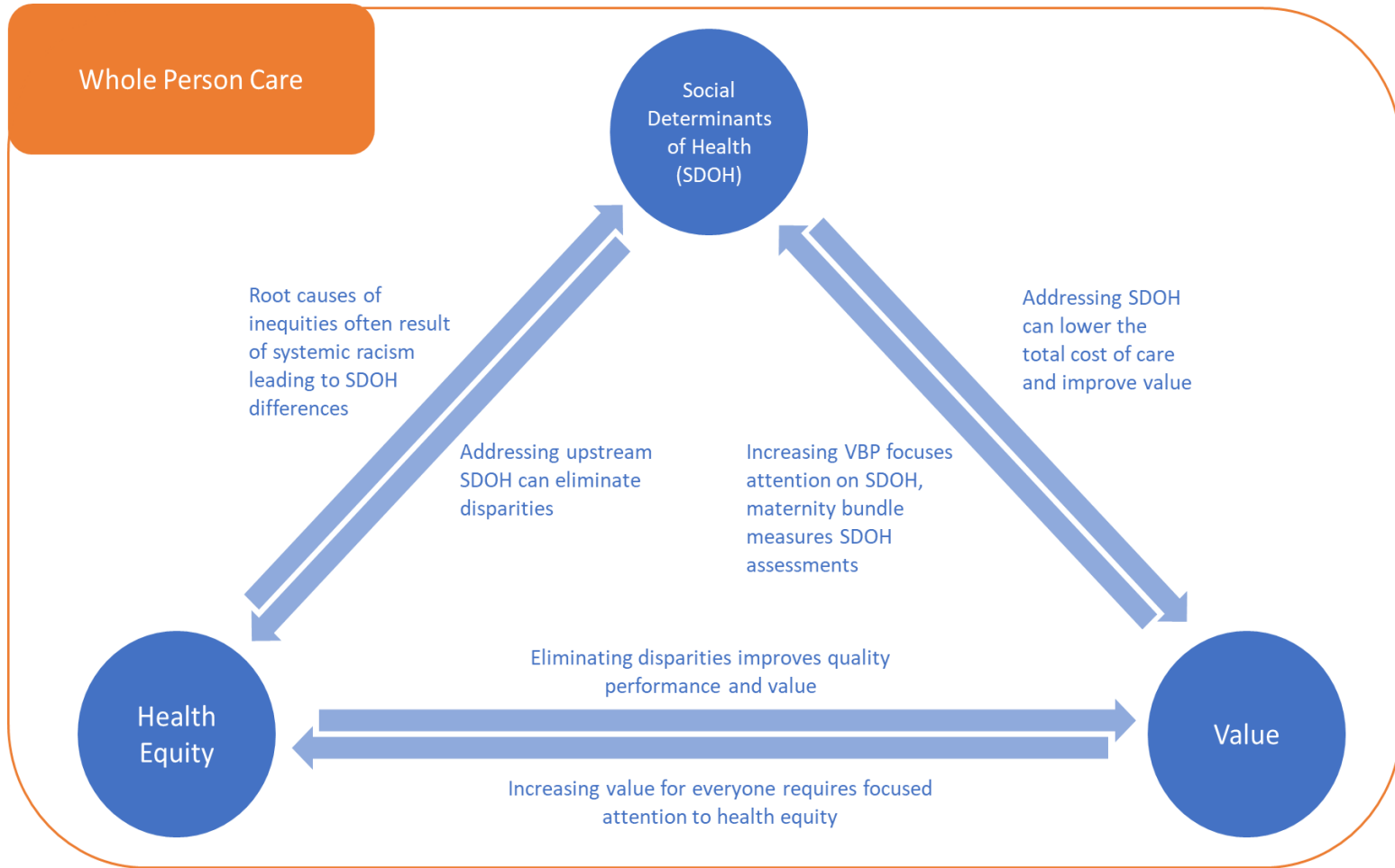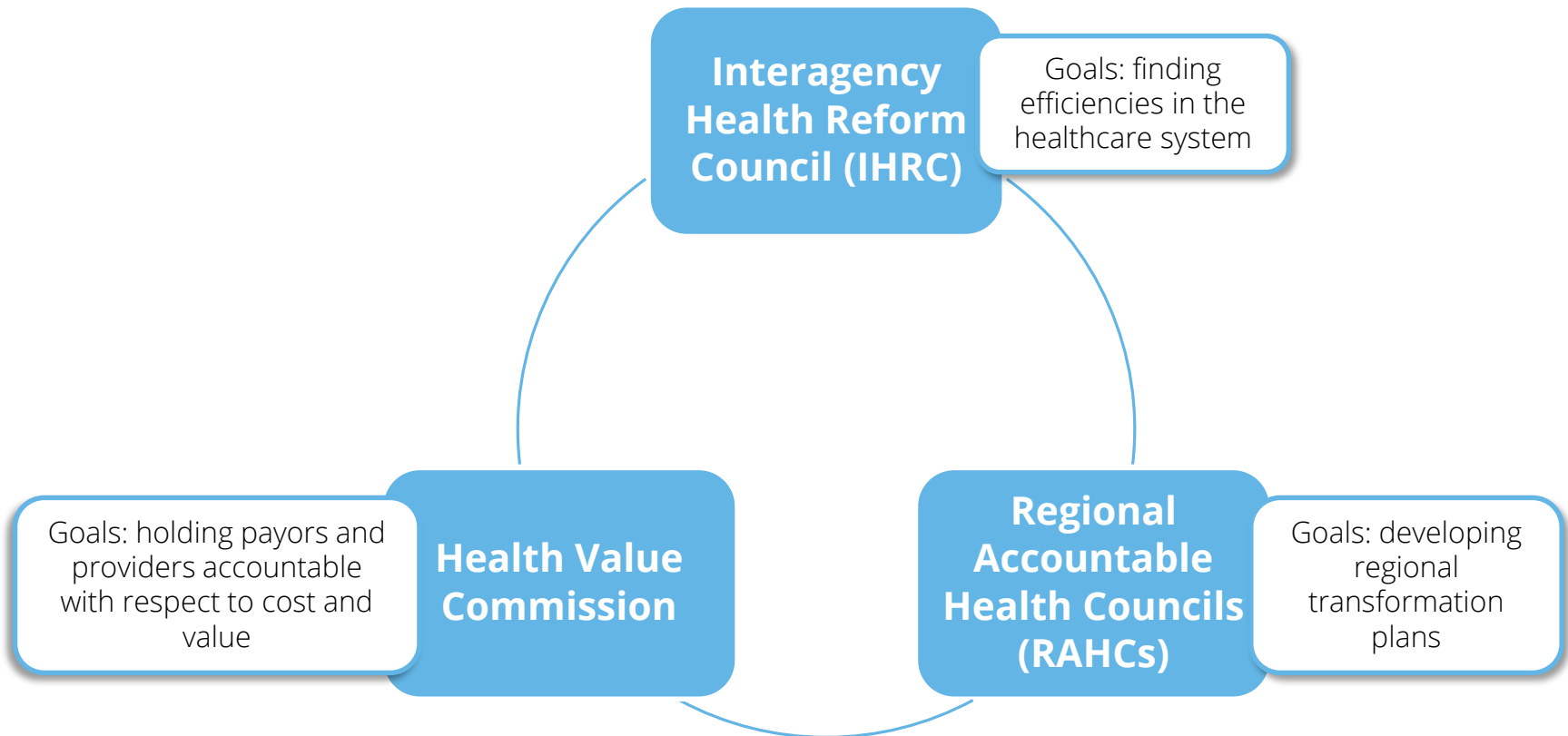CBO

Shared savings

CBO Involvement
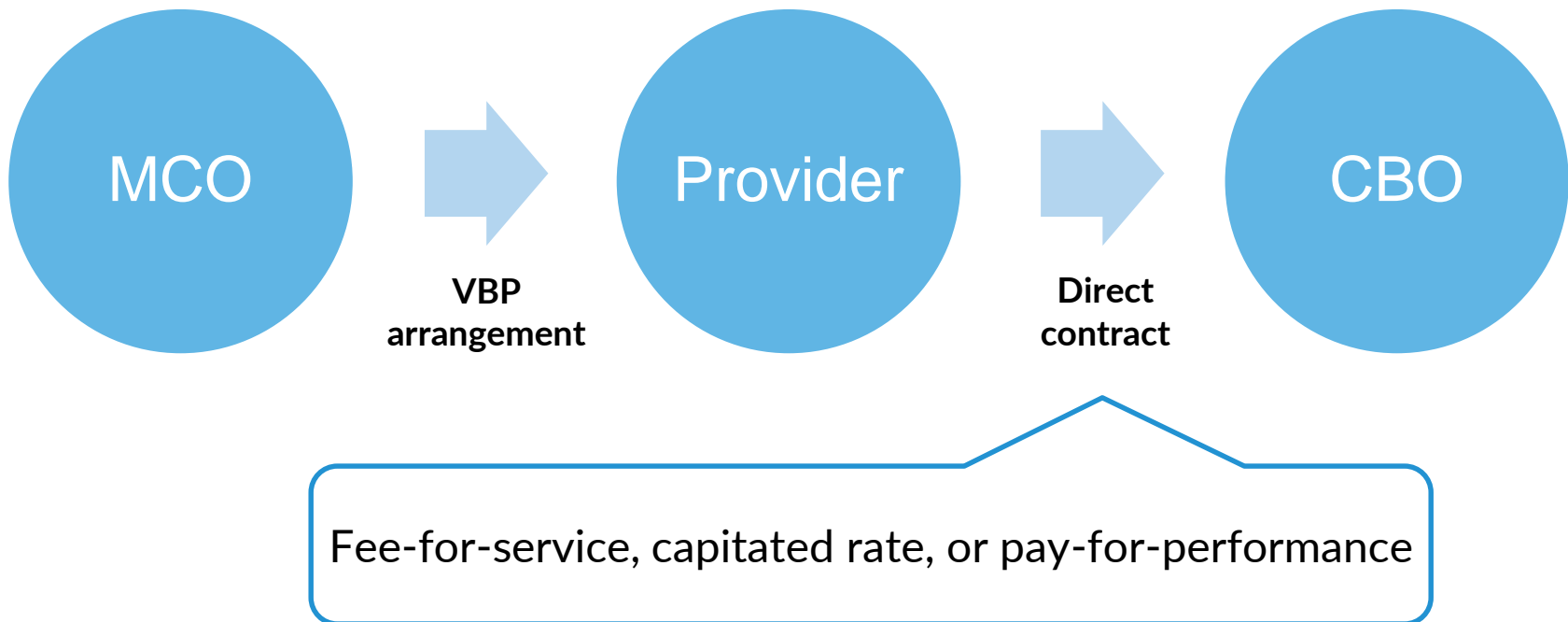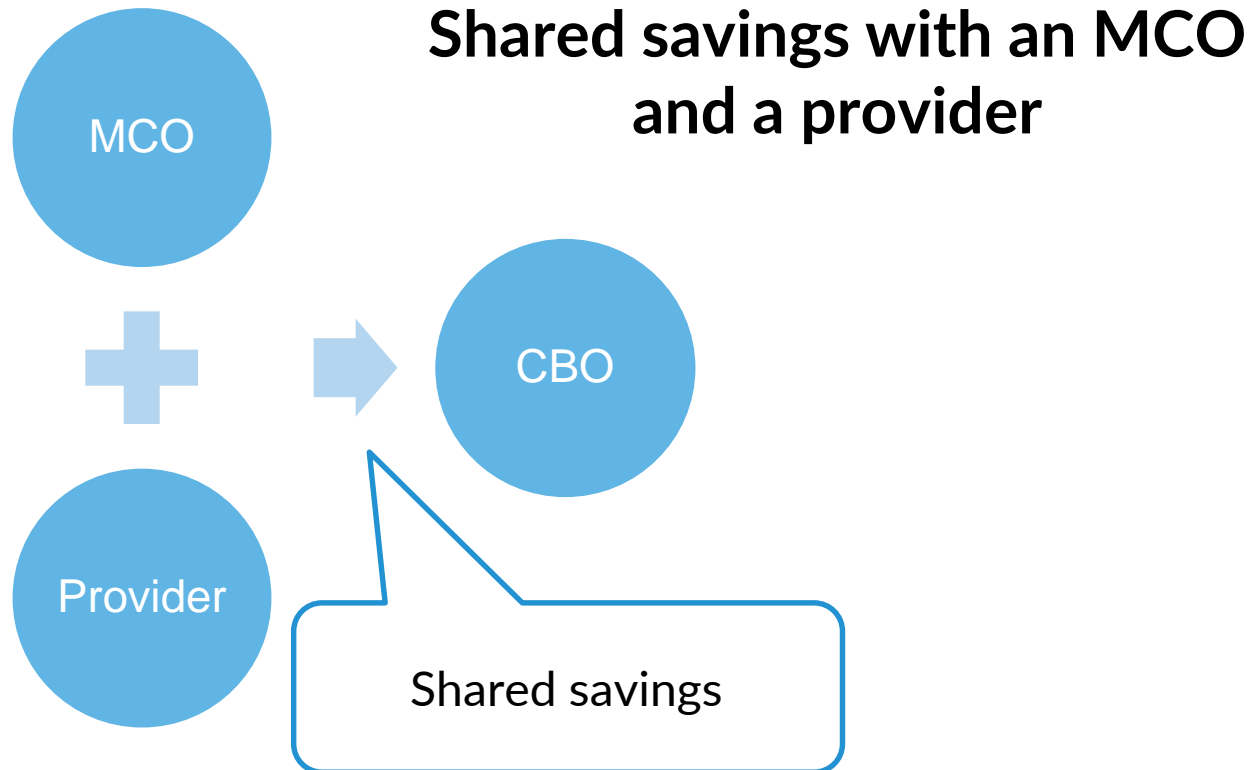
CBOs can, but are not required to, be paid through value-based purchasing arrangements. If CBOs engage in a value-based purchasing arrangement, it should *not involve downside risk*.

Rationale for Value-based Purchasing in Pennsylvania

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Whole Person Care

Social Determinants of Health (SDOH)

Root causes of inequities often result of systemic racism leading to SDOH differences

Addressing SDOH can lower the total cost of care and improve value

Addressing upstream SDOH can eliminate disparities

Increasing VBP focuses attention on SDOH, maternity bundle measures SDOH assessments

Eliminating disparities improves quality performance and value

Health Equity

Value

Increasing value for everyone requires focused attention to health equity

PA Health Transformation Work

On October 2, 2020, Governor Tom Wolf issued an executive order outlining the state's reform proposal, including the formation of:

Interagency Health Reform Council (IHRC)

Goals: finding efficiencies in the healthcare system

Health Value Commission

Goals: holding payors and providers accountable with respect to cost and value

Regional Accountable Health Councils (RAHCs)

Goals: developing regional transformation plans

Timeline for CBO Inclusion

June 1, 2021
50% of medium and high risk VBP payment strategies must incorporate at least 1 CBO that addresses 1 SDOH domain

January 1, 2021
New agreement starts

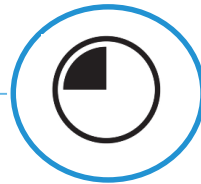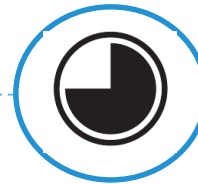**January 1, 2022**
Next agreement year begins
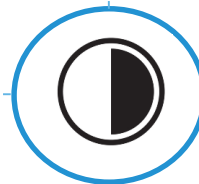
March 1, 2021
25% of medium and high risk VBP payment strategies must incorporate at least 1 CBO that addresses 1 SDOH domain

September 1, 2021
75% of medium and high risk VBP payment strategies must incorporate at least 1 CBO that addresses 1 SDOH domain, and 25% of VBP payment strategies must incorporate 1 or more CBOs that address 2 or more SDOH strategies

Image Source. Shutterstock

Examples of CBO-MCO/Provider Partnerships

Examples: Food Security

Together in Care (MD)

Partners: Meals on Wheels of Central Maryland and John's Hopkins Bayview Medical Center

Target population: food insecure, home-bound seniors

Services provided: meal delivery, in-home safety checks, fall prevention, medication reminders, engagement to minimize loneliness and depression

Value aspect: designed to ensure that any future hospitalizations are clinically necessary

Funding: direct contract

Image Source. Quantified Ventures

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God's Love We Deliver (NY)

Partners: 30+ Managed Long Term Care, Dual Eligible, and Programs of All-inclusive Care for the Elderly (PACE)

Target population: Medicaid beneficiaries with chronic illnesses and high healthcare costs

Services provided: medically-tailored meals and nutrition therapy, flexible plans and delivery

Value aspect: aims to reduce high healthcare costs and utilization among the top 5% of beneficiaries who account for 50% of health care spending

Funding: direct contract, value-based purchasing

Image Source. God's Love We Deliver

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Empire Housing Pilot (NY)

Partners: The Bronx Health & Housing Consortium and Empire BlueCross BlueShield

Target population: houseless Medicaid beneficiaries

Services provided: initial identification, selection refinement, location/engagement, supportive housing

Value aspect: aimed to decrease hospitalizations and emergency department visits, and tracked pre/post Medicaid utilization/spend

Funding: direct contract

Image Source. New York State Department of Health

Examples in Pennsylvania

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Partners: Health Partners Plans, Philabundance, and Food Connect

Target population: food insecure individuals and families

Services provided: home food delivery

Value aspect: pairing food delivery with social determinants of health interventions (e.g., vocational training) and health services

Funding: direct contract and SNAP 50-50 funding

Examples in Pennsylvania

Partners: AmeriHealth Caritas Pennsylvania/Keystone First and Manna

Target population: food insecure individuals and families

Services provided: food services

Value aspect: Keystone case managers refer cases to Manna, who in turn provide services based on member's needs

Funding: direct contract

Image Sources. AmeriHealth Caritas, Keystone First, Manna

Examples in Pennsylvania

Partners: UPMC Health Plan and Community Human Services

Target population: unhoused individuals and families

Services provided: supportive housing and care coordination

Value aspect: uses predictive analytics to identify Medicaid recipients who are on a path to significant use of low-value health care and who are likely to benefit from stable housing and enhanced care coordination

Funding: transitioned from program funding, to per-member per-month quality bonuses, to value-based purchasing

UPMC HEALTH PLAN

chs
community human services

Image Sources. UPMC Health Plans and Community Human Services

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Housing Smart Initiative

Partnerships: Resources for Human Development, Temple University Health System, Health Partners Plans, Keystone First

Target population: high health service utilizers

Services provided: supportive housing and care coordination

Value aspect: aims to reduce emergency department visits for high health service utilizers

Funding: direct funding to CBO; value-based purchasing contract for CBO was discussed but not yet executed

Image Sources. Resources for Human Development and Temple University Health System

Lessons Learned

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Successes

- Quality assurance
- Data use agreements may be sufficient in some cases
- Additional funding provided by MCOs to CBOs to support their work
- Addressing targeted social determinants of health areas
- Ability to scale over time
- Transition to value-based purchasing over time

Challenges

- Reporting requirements
- Identifying and tracking beneficiaries
- Data collection and sharing
- Payment for indirect costs
- Contracting and business associate agreements
- HIPAA, patient consent, and record keeping
- Paradigm shift (communities vs. members)

Business Case Tool

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Developing a Business Case:
Questions to Consider for CBO Partnerships with MCOs and Provider Organizations

As your organization develops its ideas for a partnership with an MCO and/or provider organization, you will need to consider a series of questions related to evidence, staffing, data, target population, evaluation, reimbursement, and risks. The following questions offer guideposts for this planning. Responses to these questions may help your organization's leadership evaluate the feasibility of a partnership concept and may also be useful to prospective MCO and provider organization partners during the planning process.

Questions	Responses
1. Describe the SDoH intervention, highlighting elements that could be used to incorporate quality assurance. What is the anticipated ROI and/or evidence for the SDoH intervention?	
2. How will the CBO staff the SDoH intervention? Will new staff or additional training be required?	
3. What data will be exchanged with the applicable MCO and/or provider organization and at what intervals? What steps must be taken to obtain consent to share information across systems?	
4. What technology will be used to track and transmit these data?	
5. In what geographic area will the intervention be implemented?	

1

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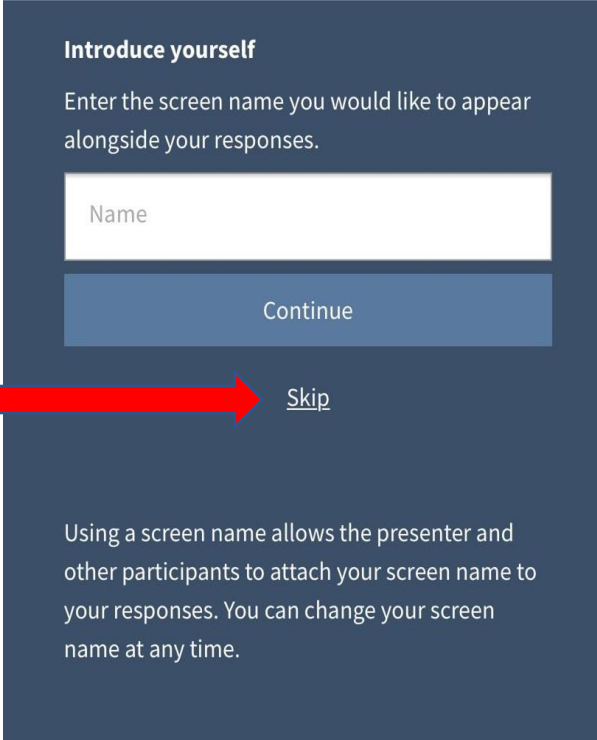
6. What is the target population for the intervention? What is the estimated volume of individuals who would receive the intervention and how will their eligibility be identified? How will individuals be selected? What agreements are needed to refer members?

7. How will the intervention be tracked and evaluated? What measures will be used?

8. What is the timeline for implementation?

9. How will the CBO be paid for its SDoH intervention?

10. What are the key risks of the proposed CBO-MCO-Provider partnership to implement this intervention? How might these risks be mitigated?

Post-Training Evaluation

Poll Everywhere

- Navigate to the link **PollEv.com/cebpohsu300** and wait for the question prompts on your screen
- You should be able to click on link inserted into the chat feature
- If you wish to be anonymous, select the skip option when prompted to enter your name
- Your device will automatically advance you to the active poll
- Results will appear on the screen upon entry submission; you are allowed to change your responses if you wish

Introduce yourself

Enter the screen name you would like to appear alongside your responses.

Name

Continue

Skip

Using a screen name allows the presenter and other participants to attach your screen name to your responses. You can change your screen name at any time.

What is Pennsylvania's state flower?

A - White Trillium

B - Mountain Laurel

C - Swamp Azalea

D - Penngift Crownvetch

Start the presentation to see live content. For screen share software, share the entire screen. Get help at **pollev.com/app**

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Excellent = 1

Good = 2

Average = 3

Poor = 4

Very Poor = 5

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Why did the training session content meet or not meet your expectations?"

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What questions or topics would you like to see addressed in future sessions?

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Q&A

Thank you for your participation!