

Social Determinants of Health (SDH) & Community Based Organization (CBO) Requirements for MLTC



Quick Review of CBO and SDH Standards

All new and existing VBP Level 2 & 3 arrangements MUST include:

- 1. At least one Social Determinant of Health Intervention.
- 2. 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
- 3. Must have a contract with least one Tier 1 Community Based Organization (Non-Medicaid billing, non-profit social and human services organization).
 - The Tier 1 Community Based Organization can be subcontract with a Tier 2 or 3 Community Based organization. This requirement does not have to be paired with the SDH requirement.
- 1. VBP Level 2 & 3 contracts without SDH and CBO requirements will not meet the definition of VBP.



Tier 1, Tier 2, and Tier 3 CBO Definitions

Tier 1 CBO

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02

03

- Non-profit, non-Medicaid billing, community based social and human service organizations
 - e.g. housing, social services, religious organizations, food banks
- <u>All or nothing</u>: 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



SDH Example: Medical Respite Program

- Goal: To shorten hospital stays; decrease readmission rates, and unnecessary emergency department visits.
- Program provides emergency shelter service for homeless adults being discharged from inpatient hospitalization with ongoing medical needs.
- Program allows plan members who are homeless or housing insecure to recover, while also working with a care manager to secure permanent housing.
- Average cost of \$140/night per respite bed. This represents 6% of the average cost per night for a hospital admissions.
- Intervention also linked directly to reducing unnecessary hospitalizations.
- Return on investment in New York has been measured as high as <u>300%</u>.

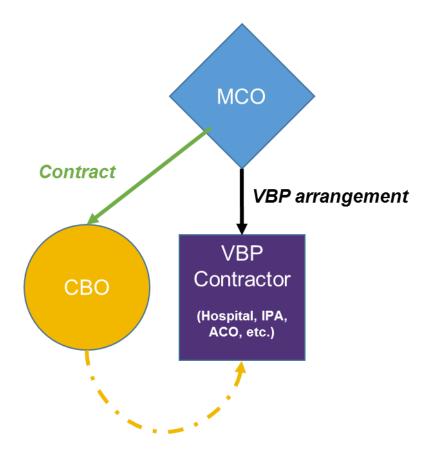


CBO Contracting Strategies



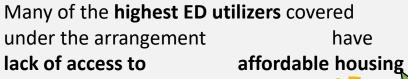
CBO Contracting Strategies – Scenario A

- CBOs may support VBP arrangements by: Acontracting directly with an MCO to support
 - a VBP arrangement

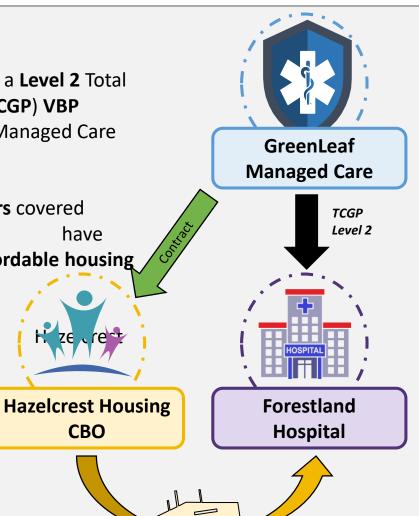


Hypothetical Example

Forestland Hospital enters into a Level 2 Total Care for General Population (TCGP) VBP arrangement with GreenLeaf Managed Care



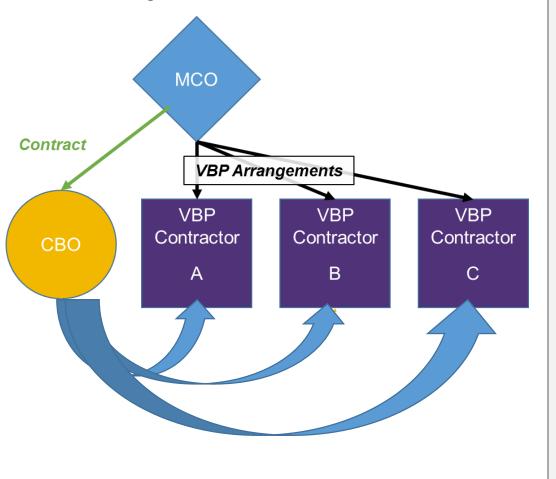
Greenleaf contracts with Housing CBO to implement a **Housing Intervention** for the highest utilizers covered under Forestland's VBP arrangement



CBO Contracting Strategies – Scenario B

CBOs may support VBP arrangements by:

B contracting directly with an MCO to support <u>multiple</u> VBP arrangements

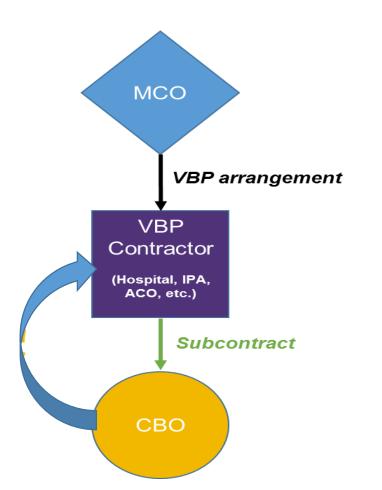


Hypothetical Example EverGreen contracts multiple VBP **arrangements** targeted at the Special Needs **EverGreen** Subpopulations (HIV/AIDs & HARP) Managed Care A community needs assessment has revealed that a large challenge facing C HIV/AIDS HARP local Special Needs Level 3 the Level 2 Subpopulation is food insecurity EverGreen contracts with Applewood CBO to implement a Nutrition Intervention for the Applewood Chestnut **Forestland** CBO Clinic Hospital local Special Needs Subpopulation served by the multiple VBP arrangements

CBO Contracting Strategies – Scenario C

CBOs may support VBP arrangements by:

subcontract with a VBP Contractor (Hospital, IPA, ACO, etc.)



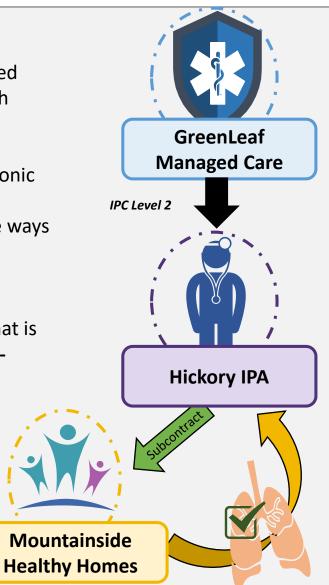
Hypothetical Example

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**

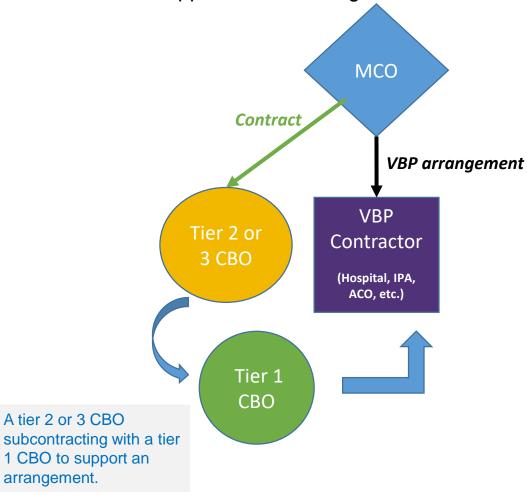


CBO Contracting Strategies – Scenario D

CBOs may support VBP arrangements by:

arrangement.

multi-tier CBO partners contracting directly with (D) an MCO to support a VBP arrangement



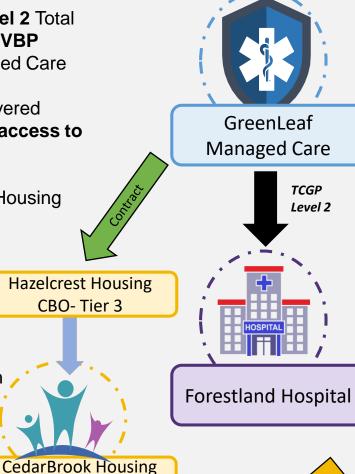
Hypothetical Example

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-Tier 1

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CBO Contracting Options

- CBO contracts are <u>not</u> required to include risk
- CBO contracts could be structured as:

Payment for services rendered	Upside only	Upside and Downside risk
Contracts without a risk- based component	No downside risk	Risk sharing contract
	If savings are achieved, CBO receives a portion of shared savings	If savings are achieved, CBO receives a portion of shared savings
	If losses are incurred, CBO would not take on any losses	If losses are incurred, CBO would take on some degree of loss

 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



SDH Intervention Examples



SDH Example: Peer Mentoring and Wellness Coaching Program

- Goal: Promote the use of evidence based care to manage chronic disease using trained peers
- Peer Mentors are recruited and matched with members based on their chronic conditions, language, and culture, etc.
- In-person or telephonic outreach to participant members to provide one-on-one support and encouragement for behavior change, leading to better self management skills
- Supports include:
 - Adhering to diet while being culturally sensitive
 - Identifying and avoiding triggers that lead to negative outcomes
 - Providing follow up and increased medication adherence



SDH Examples: Continued

SDH Domain	Intervention
Economic Stability	 Housing Insecurity: Capital investment to build affordable housing or provide service and operating funding in exchange for dedicated housing units for your plan members. Plan may also select to implement an SDH intervention that focuses on providing assistance to members at risk of becoming homeless. Intervention may involve: Assistance with rental arrears Back payment for utilities Legal services to prevent eviction Housing location and application assistance
Social and Community Context	 Informal Support and Social Cohesion: 1. Volunteer service program that matches members and volunteers based on shared interests, talents, and spiritual needs. Volunteers provide face to face visits and/or telephone calls. In addition to companionship, volunteers provide assistance with grocery shopping, minor home repairs. For more information, please check out ArchCare's TimeBank Program: https://www.archcare.org/community-resources/timebank
Economic Stability	 Social Transportation: Providing transportation services to social events such as; going to a place of worship, visit with family, grocery store and medication pick up.

SDH Examples: Continued

SDH Domain	Intervention
Neighborhood and Environment	 Healthy Homes: 1. SDH intervention focusing on comprehensive home environment assessment of members with Asthma and other Chronic Respiratory conditions to identify triggers that negatively impact health. Home remediation may include performing mold and lead abatement, or carpet removal.
Economic Stability	 Financial Security and Education: Tailored one-on-one or group education session for plan members to educate on financial literacy to promote self sufficiency and independence. Life skills training to promote an independent and healthy lifestyle (i.e. how to grocery shop and cook healthy affordable meals).
Health and Health Care	 Community Based Case Management: 1. Comprehensive case management services connecting unengaged plan members. 2. Telemedicine 3. Assistance with benefit coordination, public assistance, getting a drivers license and filling out applications. 4. Health classes and disease management for chronic conditions.



Thank you!

For Additional Information: <u>https://www.health.ny.gov/mrt/sdh</u>

Contact Us: Bureau of Social Determinants of Health <u>SDH@health.ny.gov</u>

