



EMPOWER 2016

Executive Leadership Summit (ELS)

THE PREMIER CARE MANAGEMENT CONFERENCE

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CEO, HDA

Hosted By





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Challenges & Opportunities with Special Needs Populations

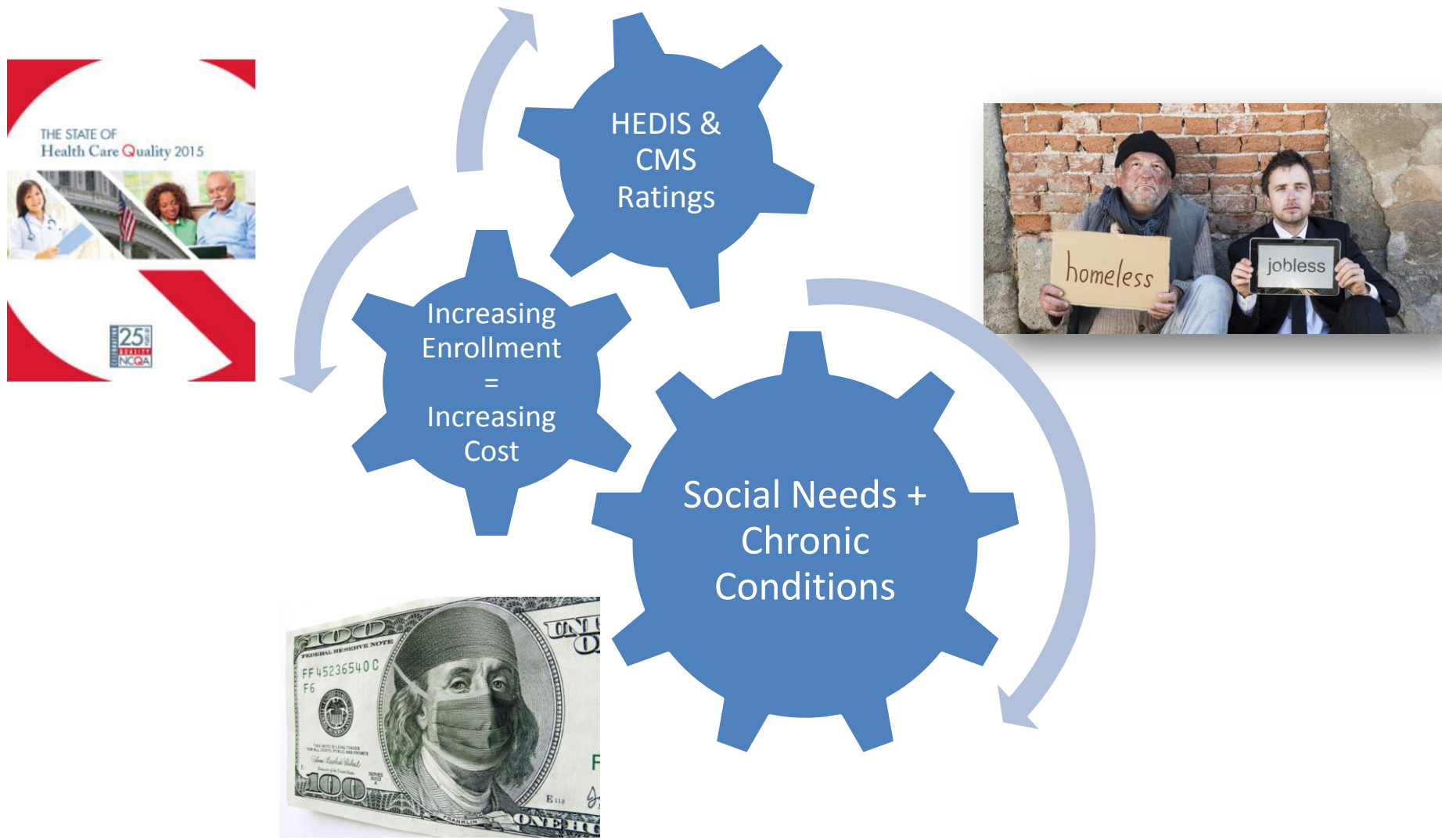
Special Needs Populations: Working Definition

Physical, developmental, sensory, behavioral, cognitive or emotional impairment or limiting condition that requires medical management, health care intervention and/or use of specialized services or programs.

*Council on Clinical Affairs, Reference manual



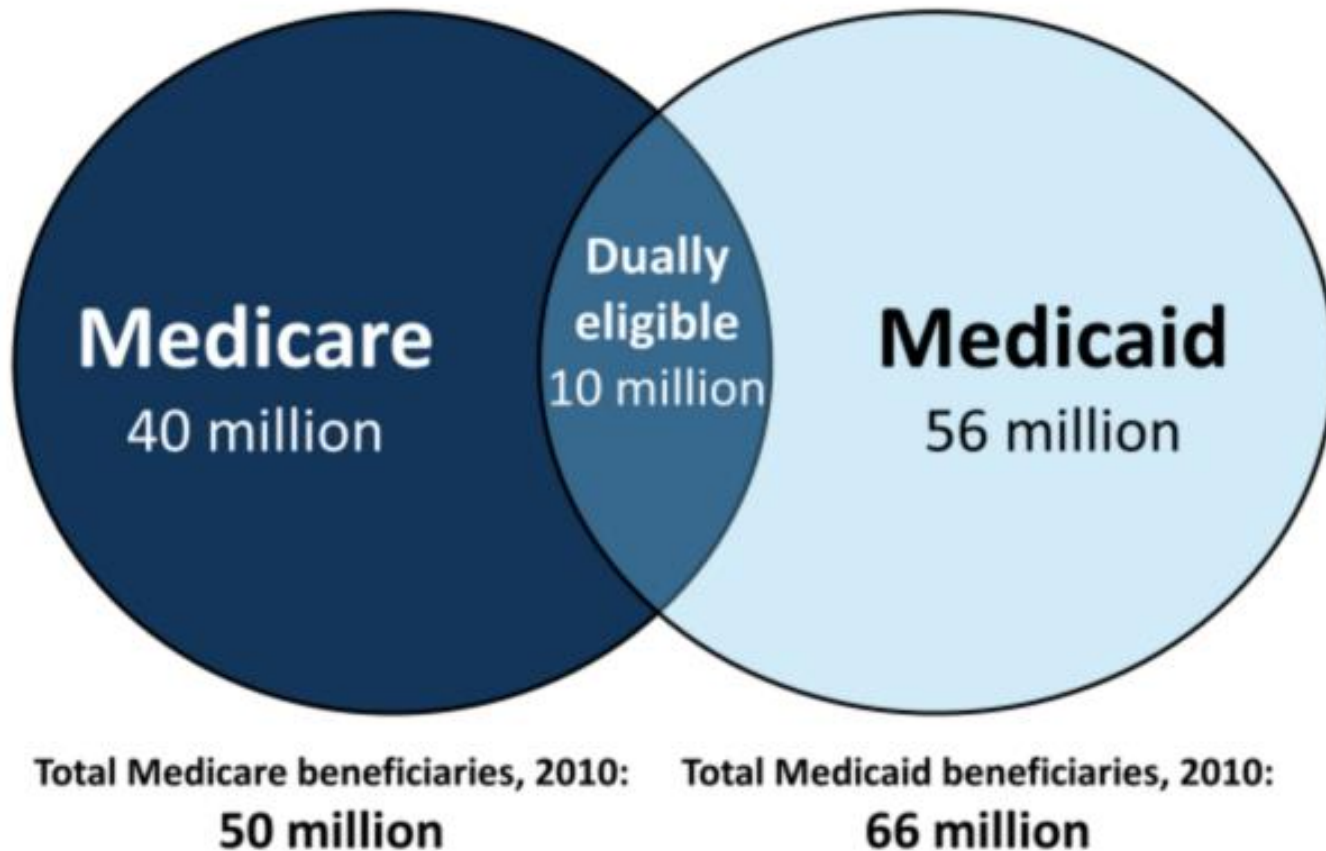
Special Needs Populations: Challenges



Health care for special needs populations requires
“specialized knowledge acquired by additional training”
and care measures “beyond what is considered routine.”

* American Association of Persons with Disabilities, 2012

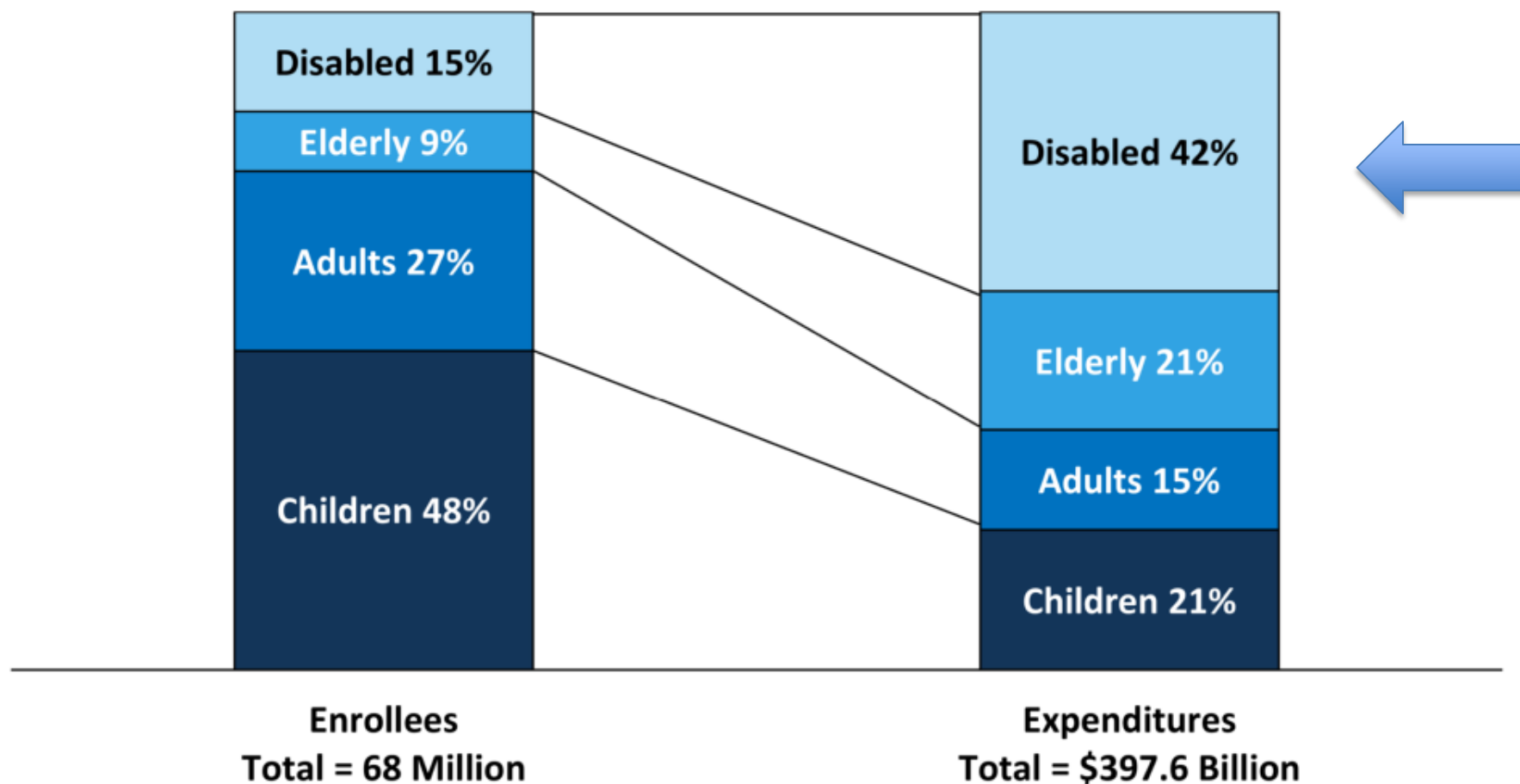
Number of Beneficiaries Enrolled in Medicare, Medicaid, and Both Programs, 2010



SOURCE: Kaiser Family Foundation analysis of a 5 percent sample of Medicare claims from the Chronic Conditions Data Warehouse, 2010, and Kaiser Commission on Medicaid and the Uninsured and Urban Institute estimates based on FY2010 MSIS.



Medicaid Enrollees and Expenditures, FY 2011



SOURCE: KCMU/Urban Institute estimates based on data from FY 2011 MSIS and CMS-64. MSIS FY 2010 data were used for FL, KS, ME, MD, MT, NM, NJ, TX, UT, OK but adjusted to 2011 spending levels.



It's The 80/20 Rule:



County Health
Rankings show:

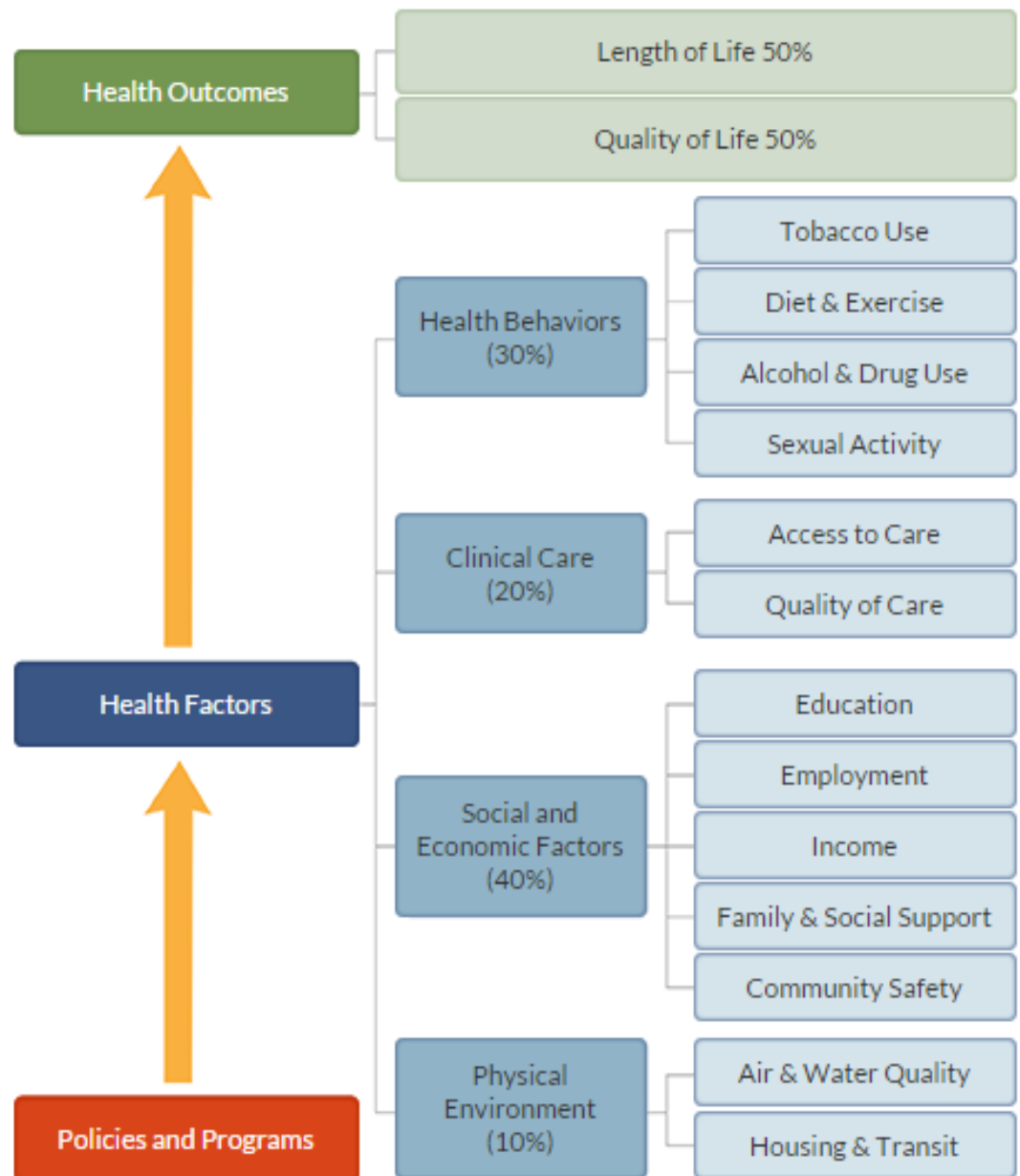
Much of
what affects health
occurs outside of the
doctor's office.

Physicians say:

Unmet social needs are
directly *leading to*
worse health.

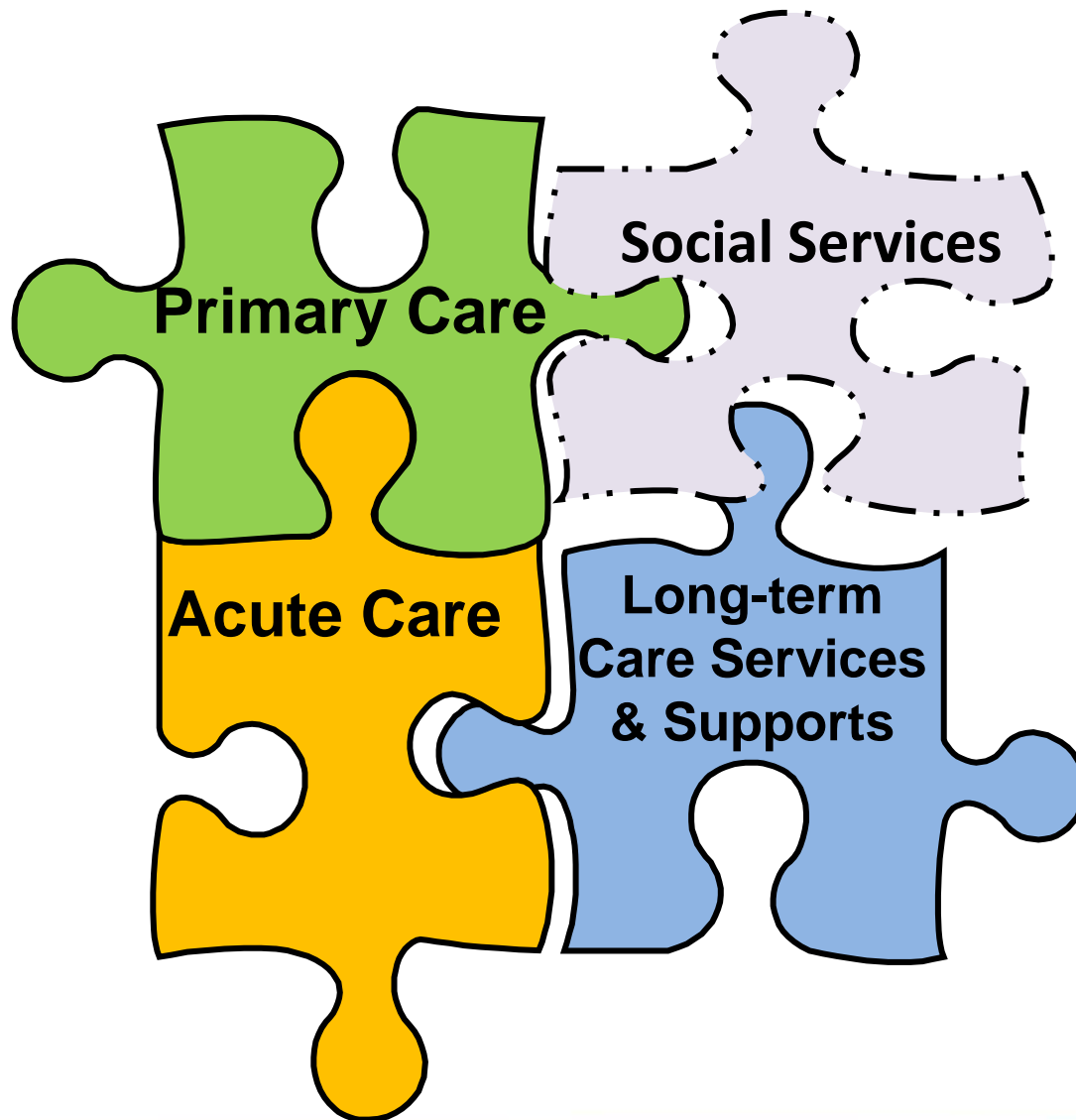
The problems created by
unmet social needs are
problems for *everyone.*

80/20 Rule



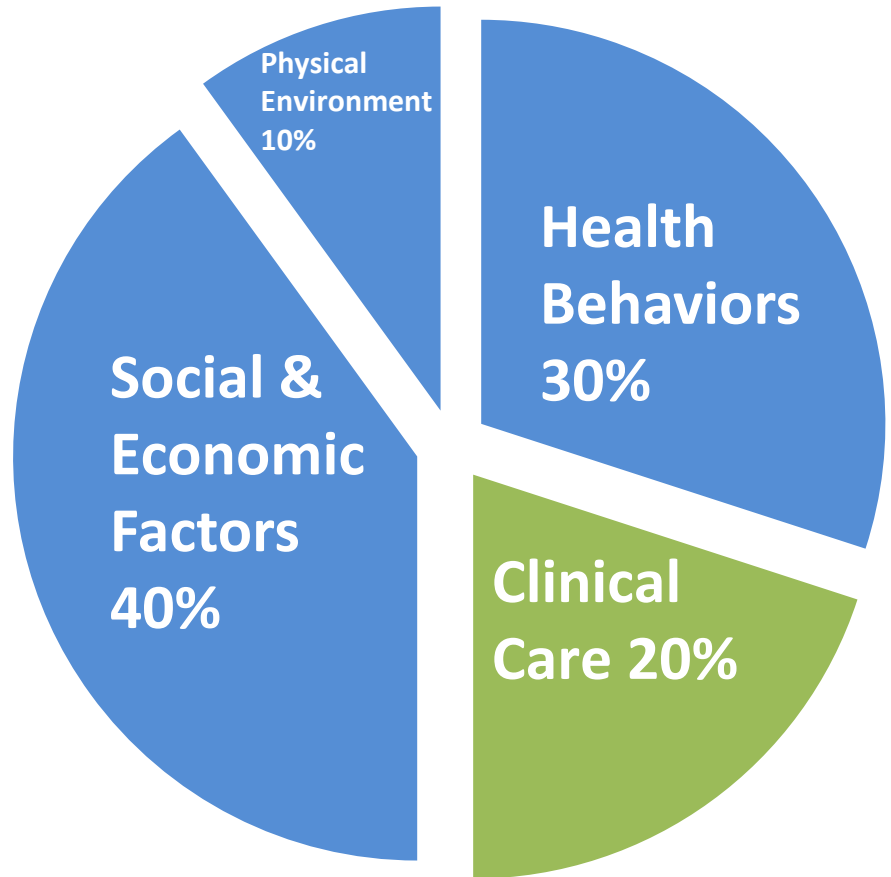
County Health Rankings model © 2014 UWPHI

Critical Piece of Special Needs Care Puzzle



Nonmedical Services that Benefit Health

- Housing
- Nutrition assistance
- Employment counseling
- Transportation
- Language and literacy training
- Legal and financial services
- Peer networks
- Supports that promote independence and optimal functioning



Models States Are Using for Special Needs Populations

**Medically & Socially
Complex Populations**

Fee for Service

Accountable Care Organizations
Integrated Care Models

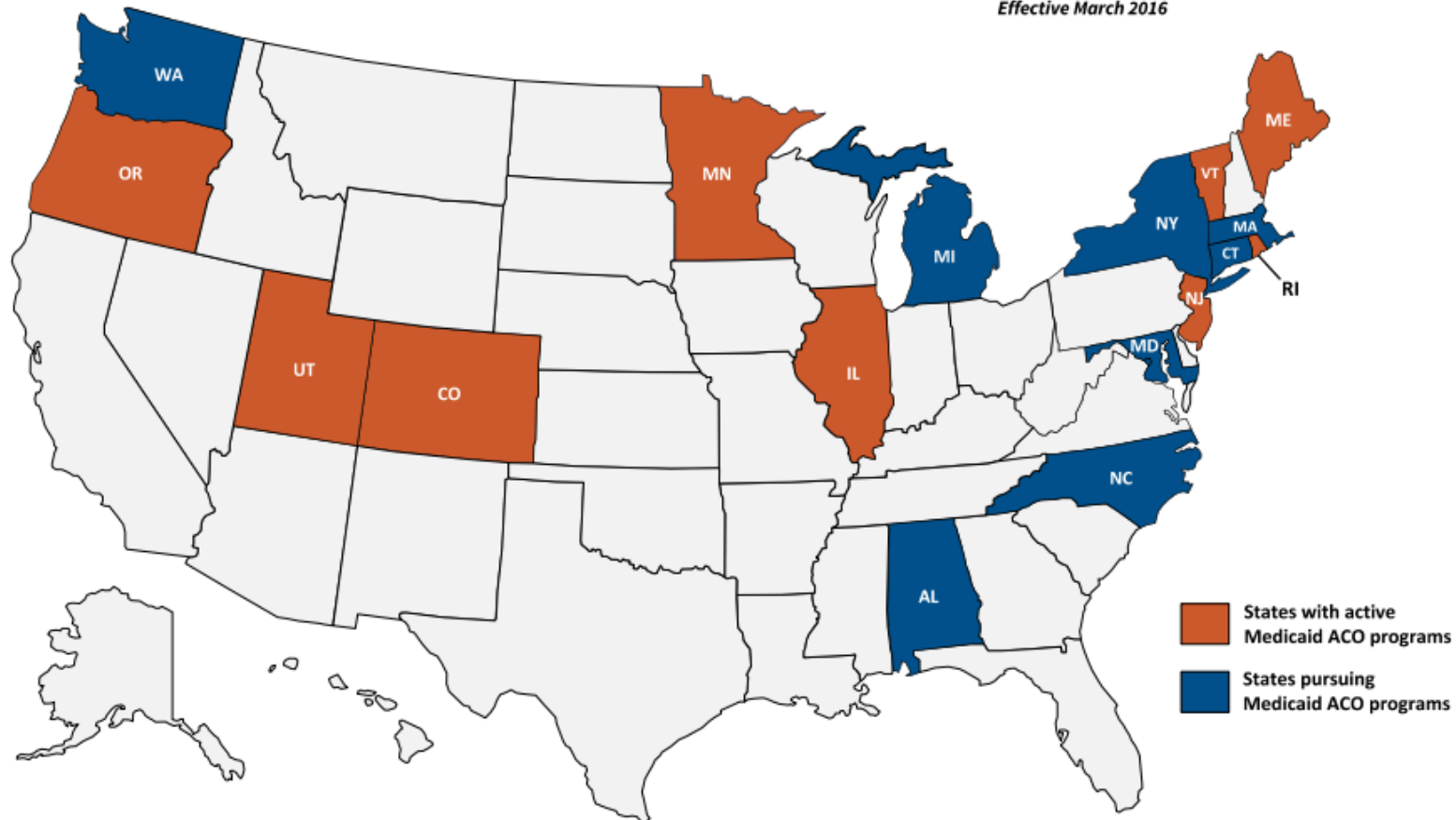
Full Risk
Managed Care

**Integrates Social Services
into Care Model**

Medicaid Accountable Care Organizations

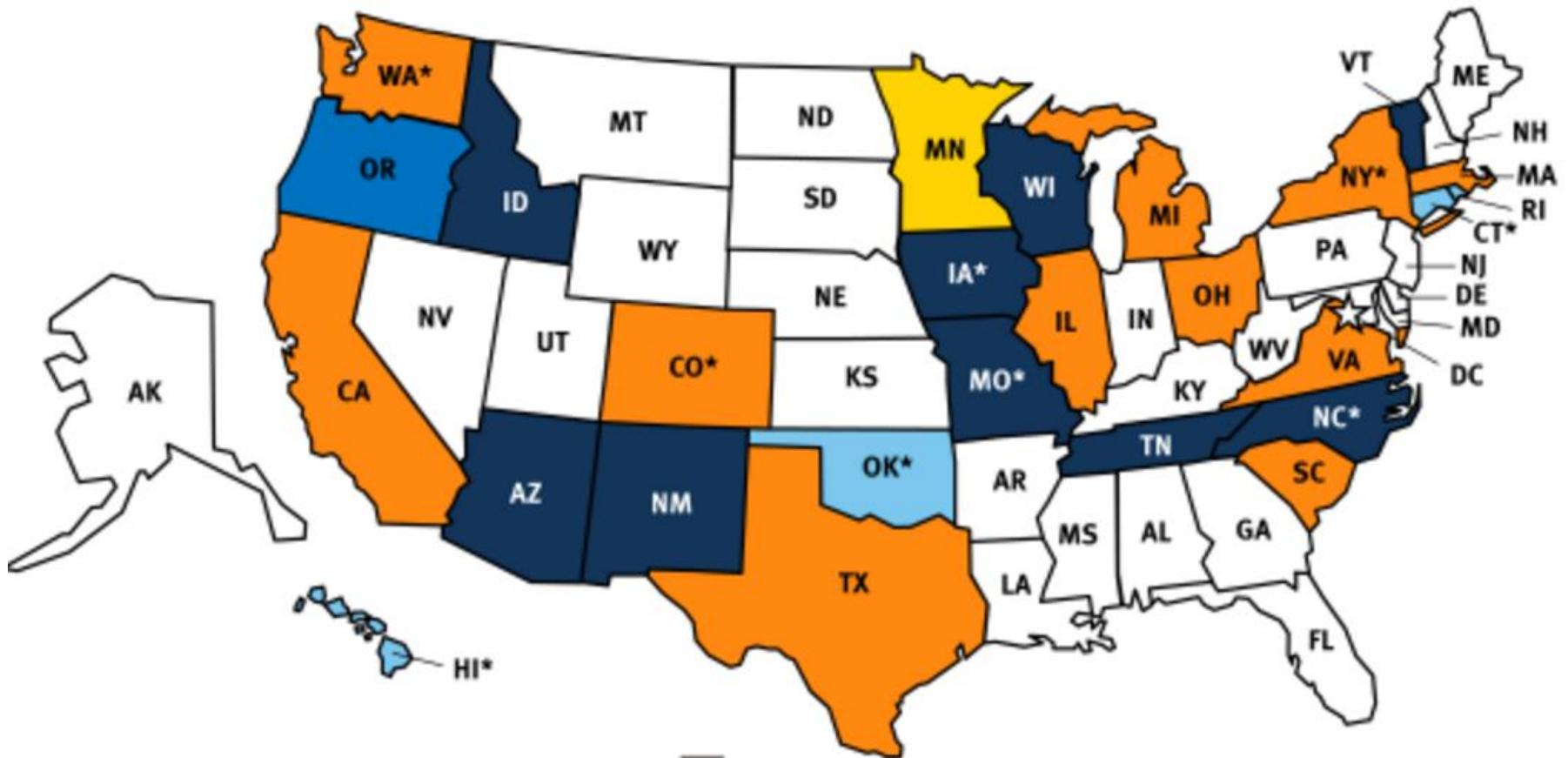
State-Based Medicaid Accountable Care Organizations

Effective March 2016



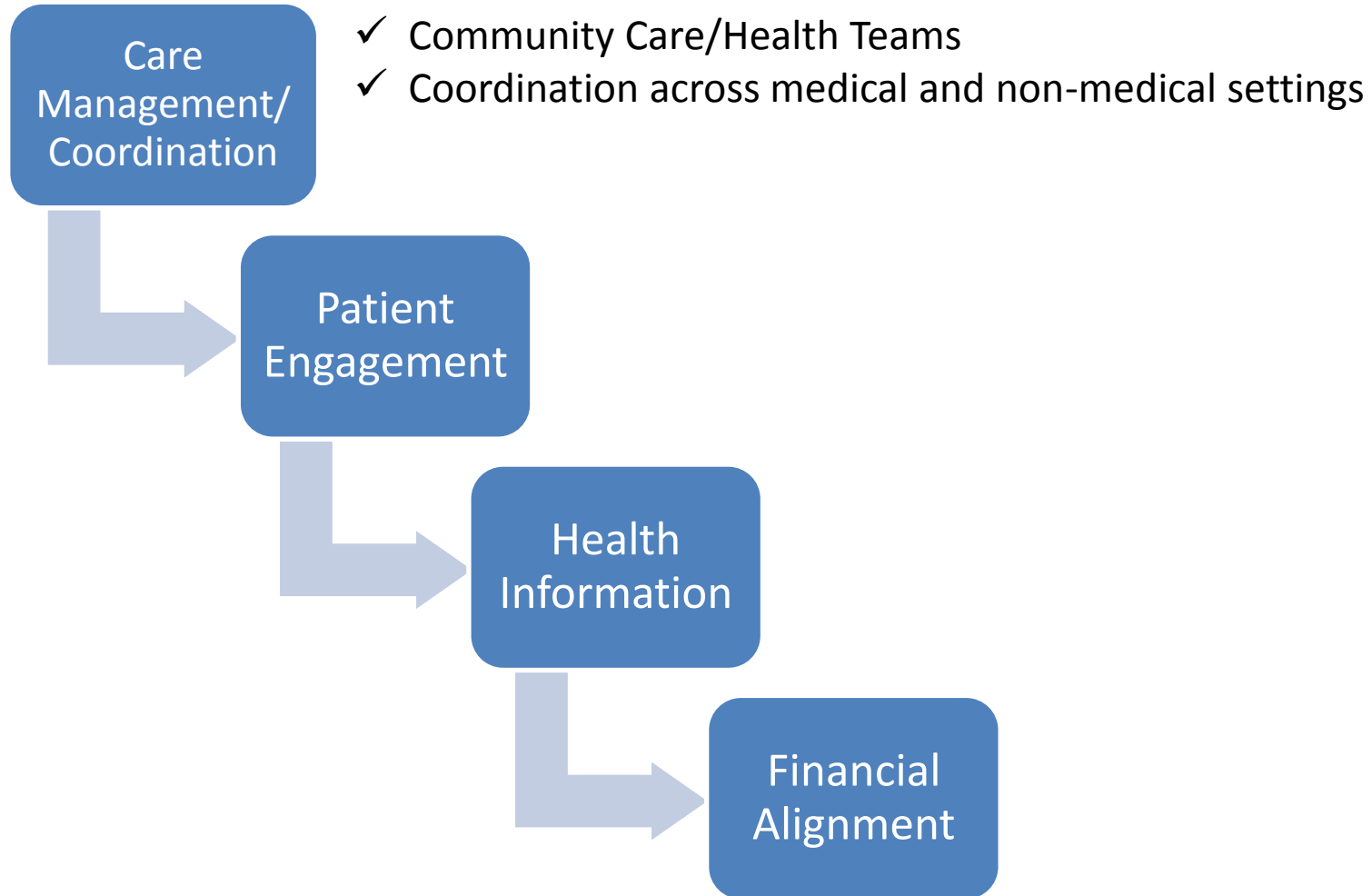
Center for Health Care Strategies, March 2016

Integrated Care Models – Dual Eligibles



Kaiser Family Foundation & CMS, Feb. 2015

Components of Successful Care Models



Next Practice: Community Care Teams

Common Attributes Across Models

- ✓ **Comprehensive** assessments- beyond clinical needs
- ✓ **Evidenced-based care planning** that includes health-related needs & preferences
- ✓ **Coordinates** between primary care and community resources (**social services**)
- ✓ In person, **face to face** contact



ACO Models - CCT Models & Integrated Social Services

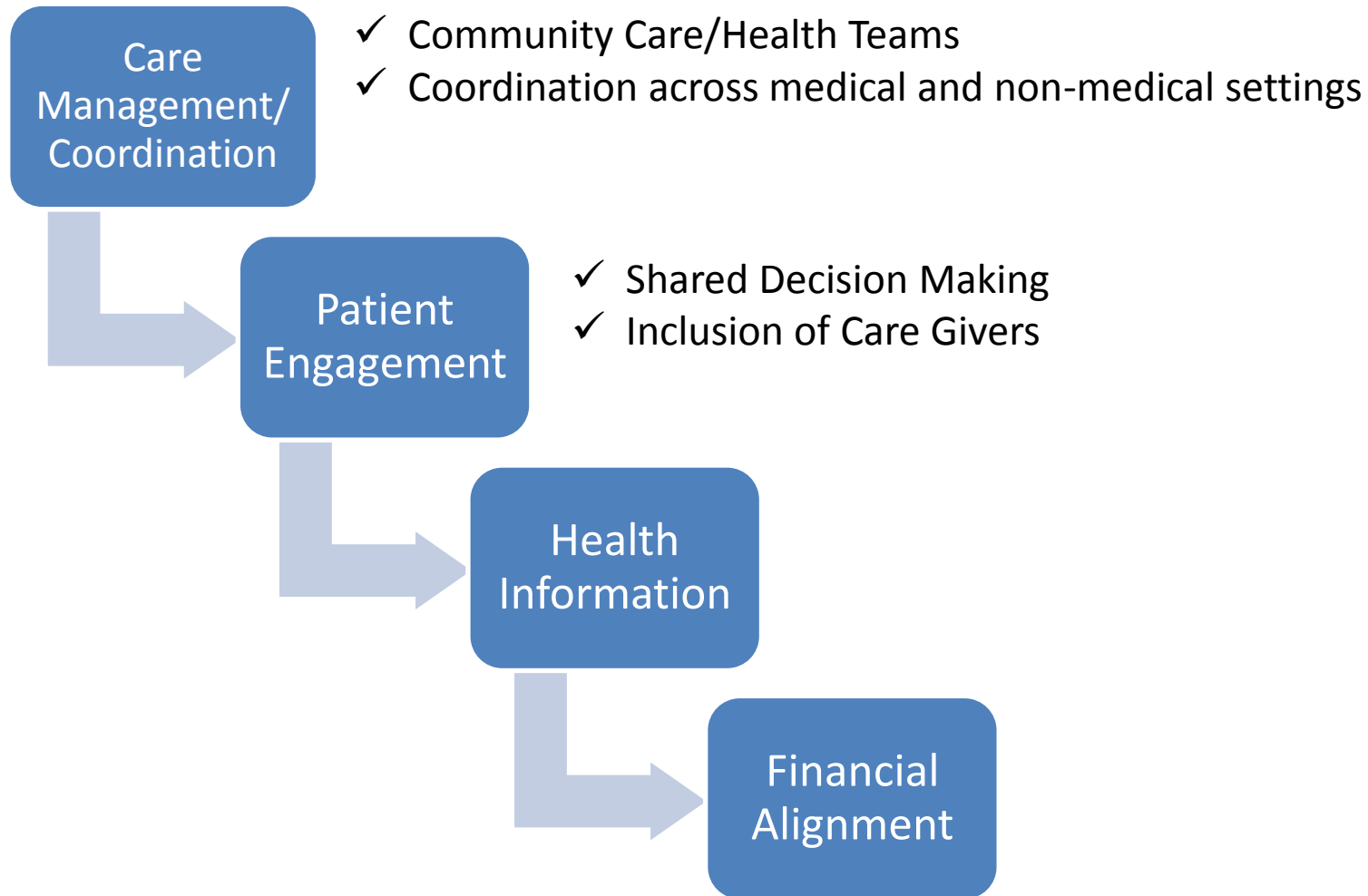
Oregon: Coordinated Care Organizations (CCOs)



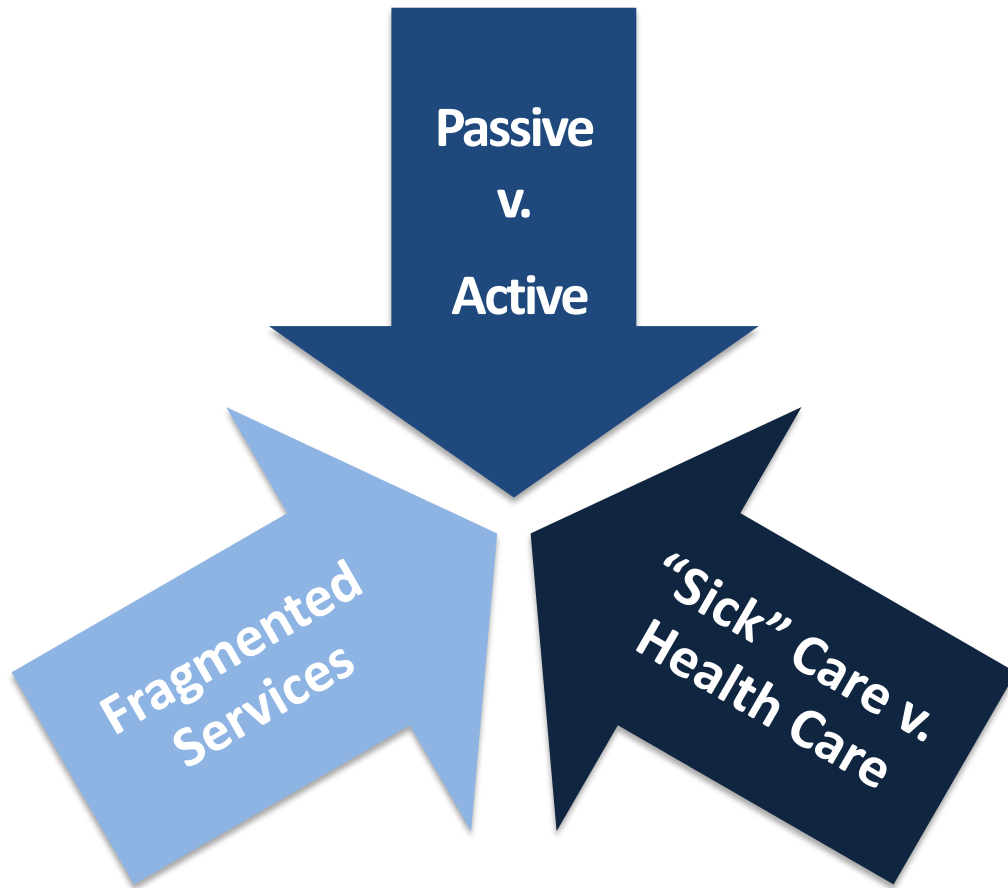
Colorado: Regional Care Collaborative Organizations (RCCOs)



Components of Successful Care Models



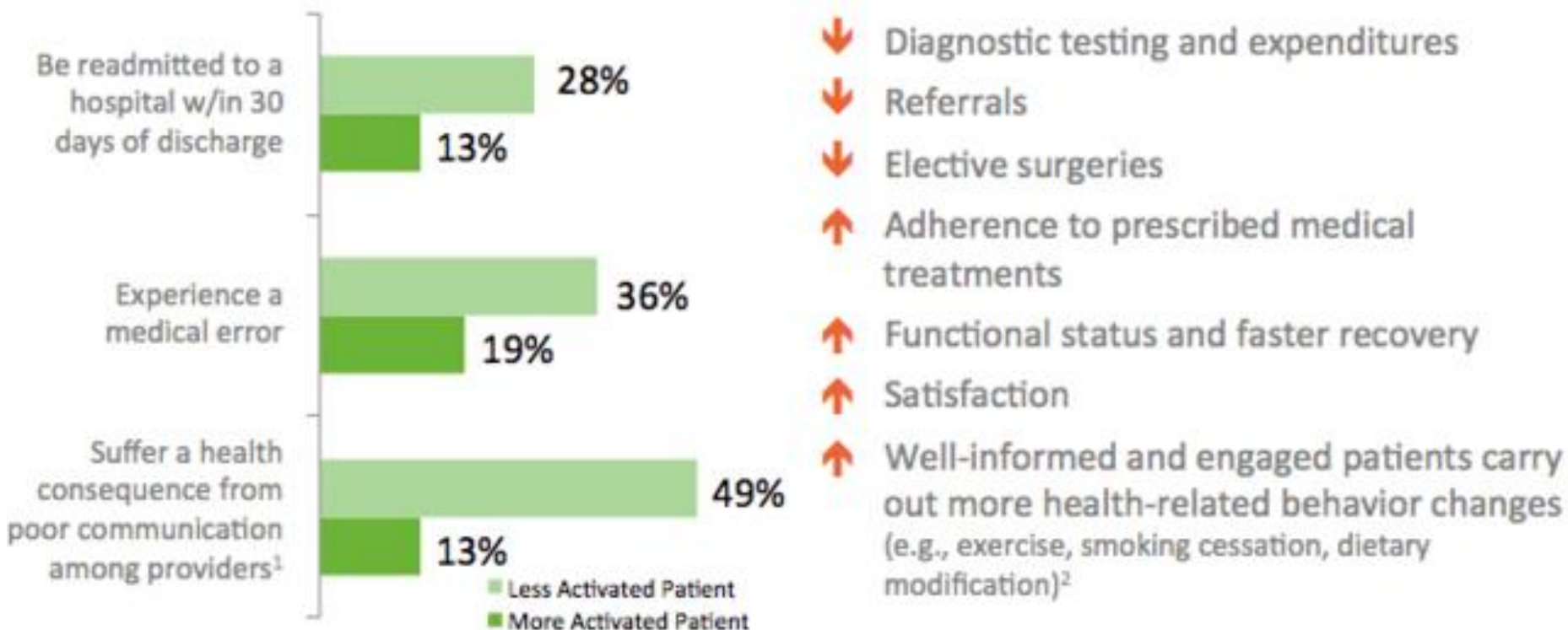
Structural & Behavioral Barriers to Patient Engagement



- Defer to “specialists”, often without Primary Care Physicians
- Conditioned to “accepting” medical procedures and medication
- Social Services and programs not well integrated with Medicaid & Medicare – often involve “hoops”

Patient Engagement Improves Outcomes

Higher patient engagement is associated with numerous improvements across various aspects of health delivery



¹AARP survey of patients over 50 with 2 or more chronic conditions ²Bipartisan Policy Center Health Information Technology Initiative, December 2012 (internal citations omitted)

Strategies to Engage Special Needs Populations

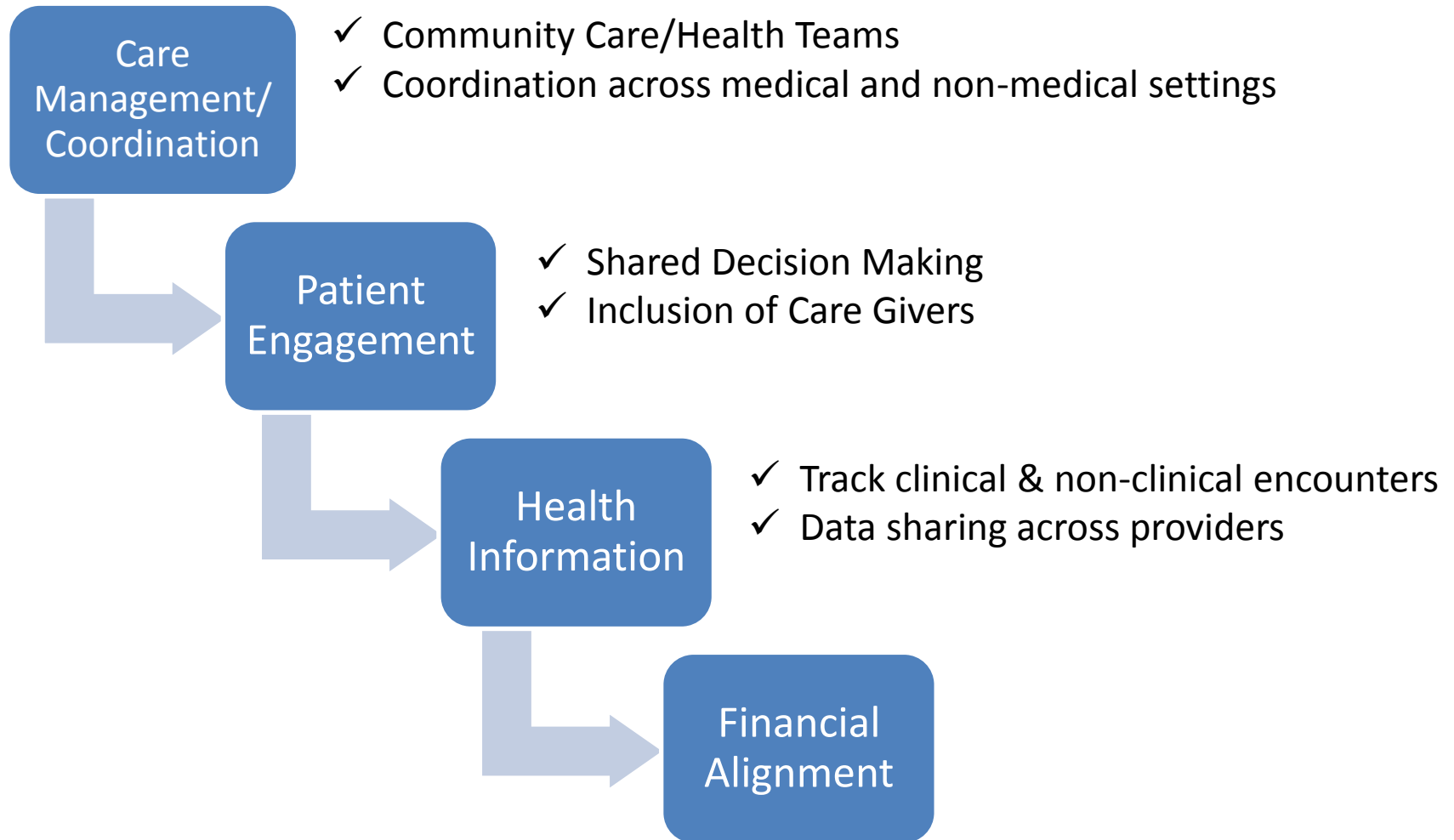


Care Models with Next Practice for Stakeholder Engagement Processes

- Multi-sector stakeholder engagement
- Consumers representative of patient population
- Patient advocacy/consumer groups
- Health plans
- Community based social services providers – food assistance, income supports, vocational services, cultural organizations and housing services
- Government entities; and
- Health care providers



Components of Successful Care Models

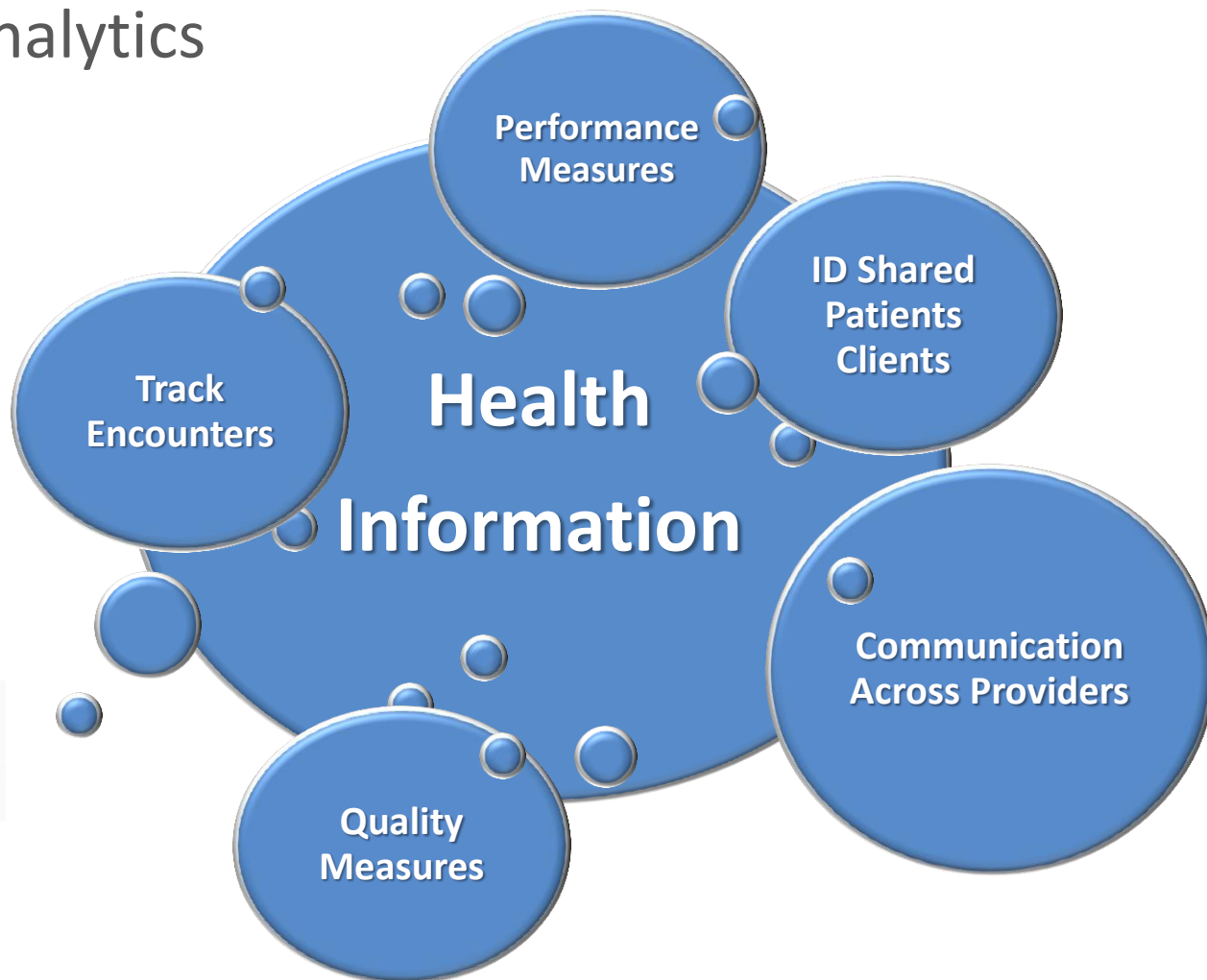


Data Sharing & Analytics

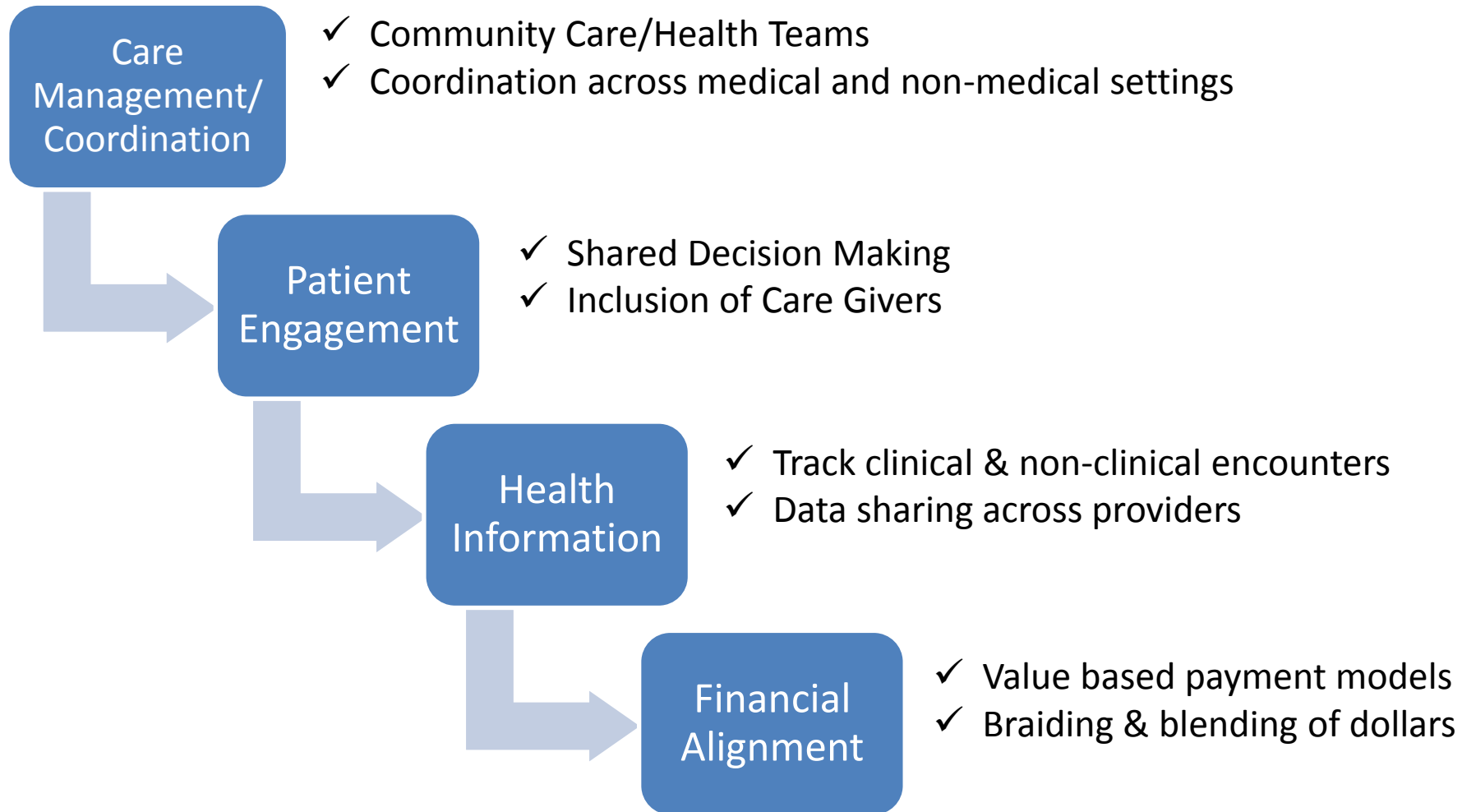
Example:



COLORADO
Department of Health Care
Policy & Financing



Components of Successful Care Models



Payment Models for Integrating Non-clinical Services



Fiscal Levers for Integrating Social Services

	Medicare/ Medicaid	Other Public \$	Grant or Privately Funded
Housing		√	√
Nutrition Assistance		√	
Employment	√	√	√
Transportation	√	√	√
Legal & Financial		√	√
Language & Literacy			√
Peer Networks	√		√

Braid and blend
federal, state and
grant funding streams



For More Information:



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25 Years of Change That Matters

We work to eliminate economic, social and structural barriers to better health outcomes. Through expert analysis, advocacy and professional training, we make systems and policies work smarter for payers and patients alike.





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