NYS DSRIP Program Update

Engaging Community Agencies in Upstate NY

February 2020

CARE COMPASS NETWORK

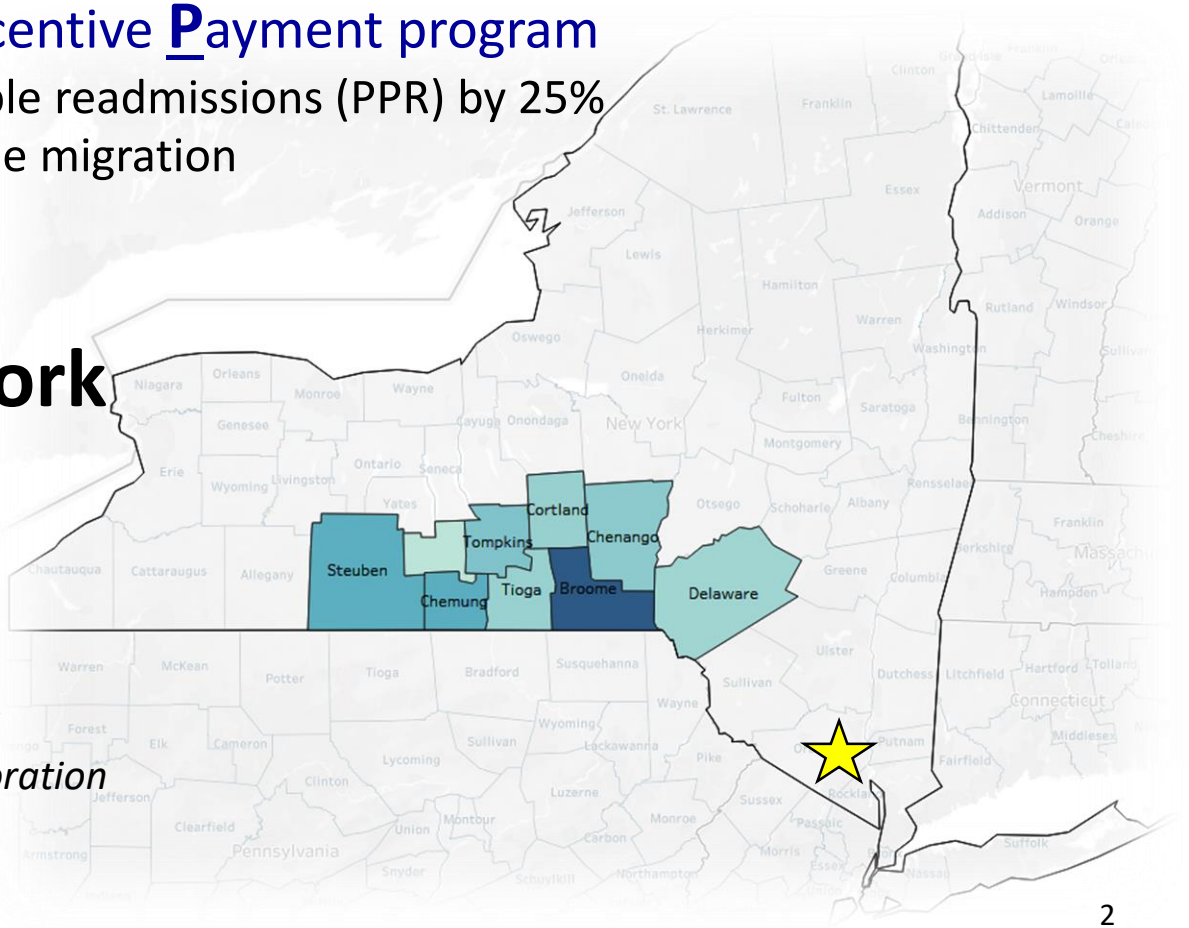
1115 Waiver DSRIP Overview

- State & Federal funding deployed to improving patient care & experience through a more efficient, patient-centered and coordinated system.

- **D**elivery **S**ystem **R**eform **I**ncentive **P**ayment program
  - Quality Goals: Reducing avoidable readmissions (PPR) by 25%
  - Reimbursement Goals: Statewide migration to Value Based Care

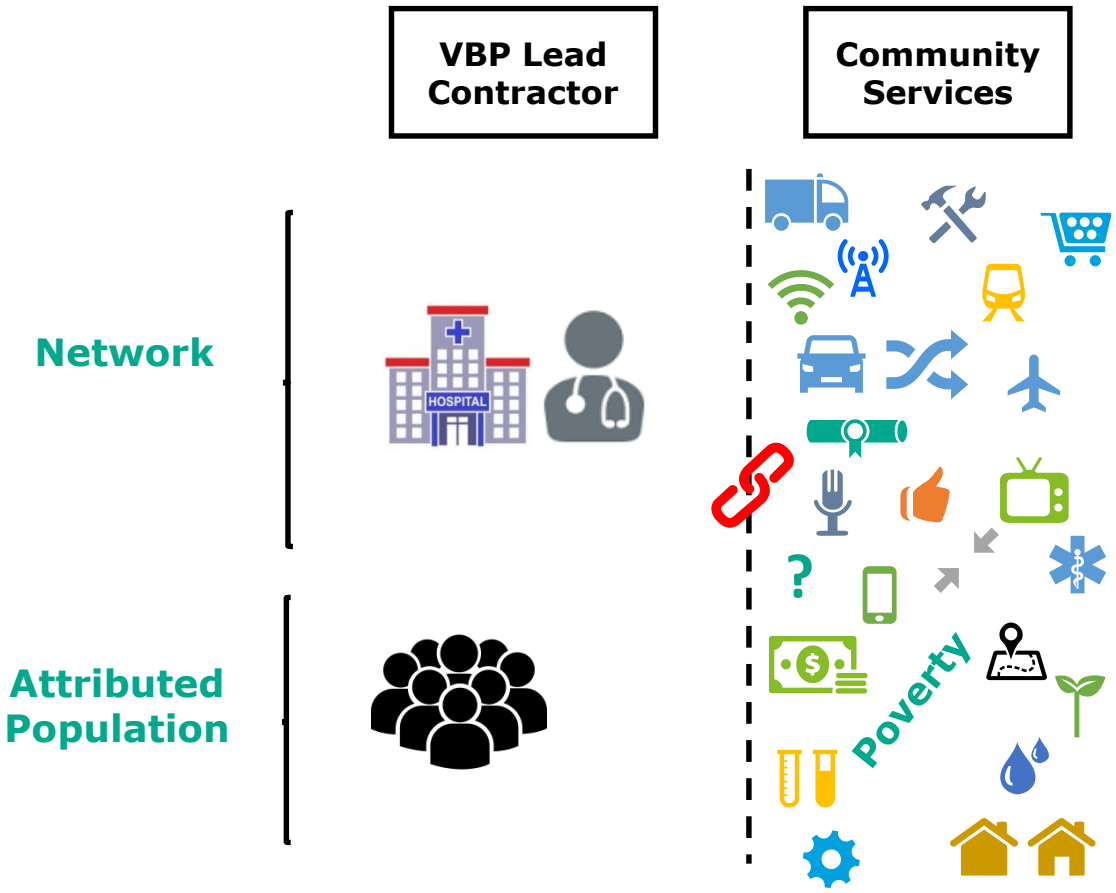
Care Compass Network

- 1/8th of NYS
- 220K Medicaid Members
- The Baseline
  - *2015: 0 VBP*
  - *Access to Care / Workforce Challenges*
  - *Minimal Community & Clinical Collaboration*



CARE COMPASS NETWORK

Understanding & Integrating Social Determinants of Health



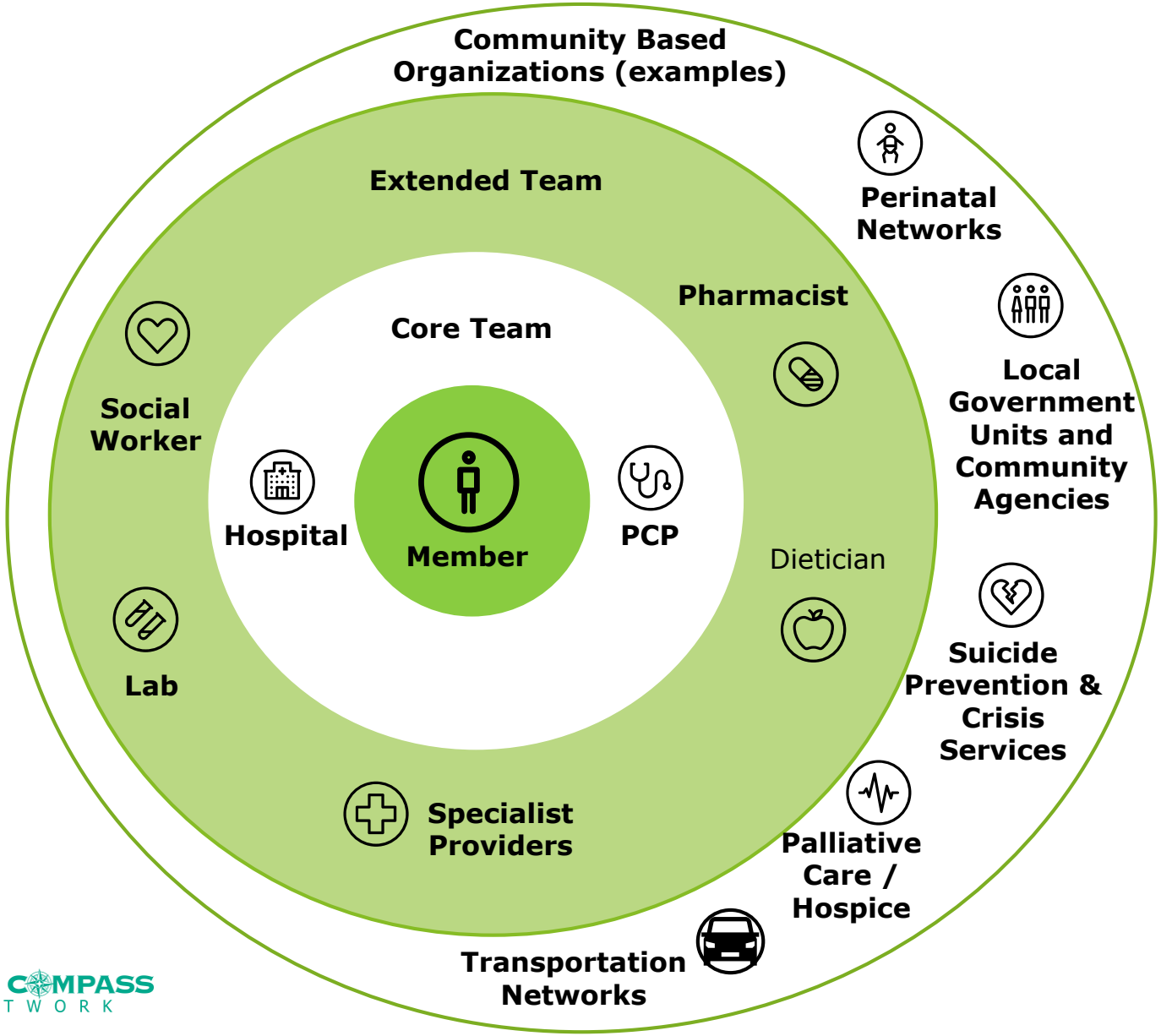
CBO Value Prop

- 'Upstream' Partner: Multiple Touches per Year/Week
- A Trusted Partner
- Mission Driven

Engagement Barriers

- Mission Driven
- Thin margins = little ability to innovate or expand capacity
- Grant infrastructure not suitable for HIPAA or FFS, let alone VBP.

Vision for Integrated Care



CARE COMPASS NETWORK

Formative Years

I. Data Competencies
   - *Data Reporting, Invoicing, Paper to EHR Evolution, Security Infrastructure*
   - *Privacy, Security, Compliance, and Related Training / Support*

II. Business Planning & Scaling

III. Recognizing Baseline Skills

Recent Years

I. Network Development

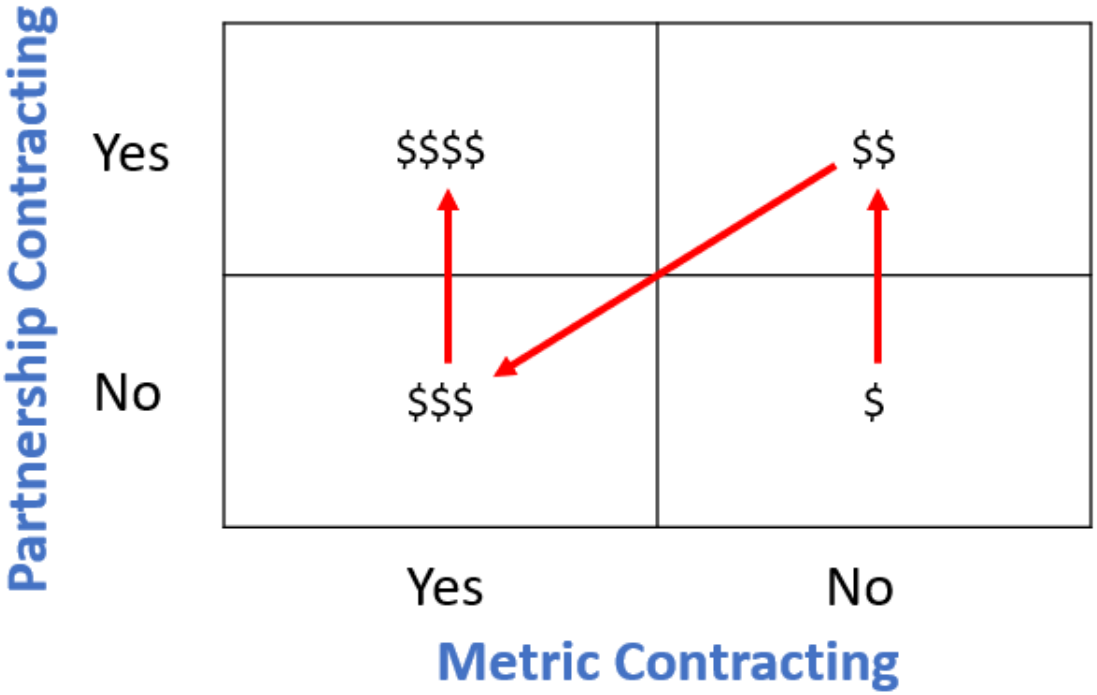
II. Data Standardization
   - *Example Comprehensive 44 question Needs Assessment*

III. Data to Drive Decisions

IV. Value Proposition Development

Mechanisms of Transformation

Phase I (4/1/16 – 3/31/17)	Phase II (4/1/17 – 12/31/17)	Phase III (1/1/18 - 03/31/20)
FFS	S&S Upside Metric Upside	Bundles, PMPM, FFS



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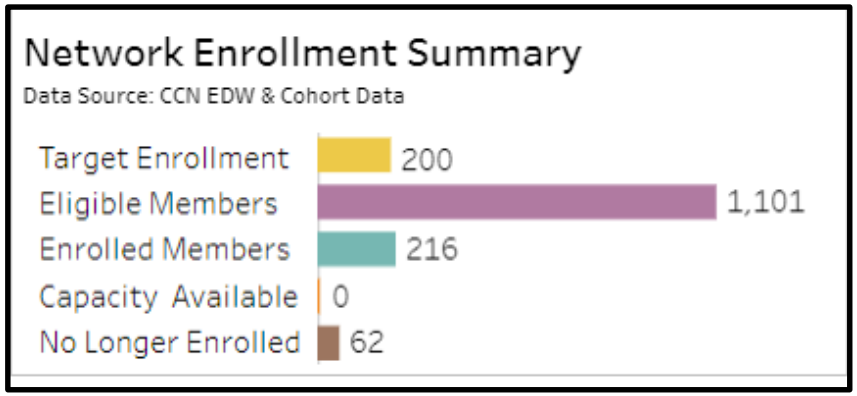
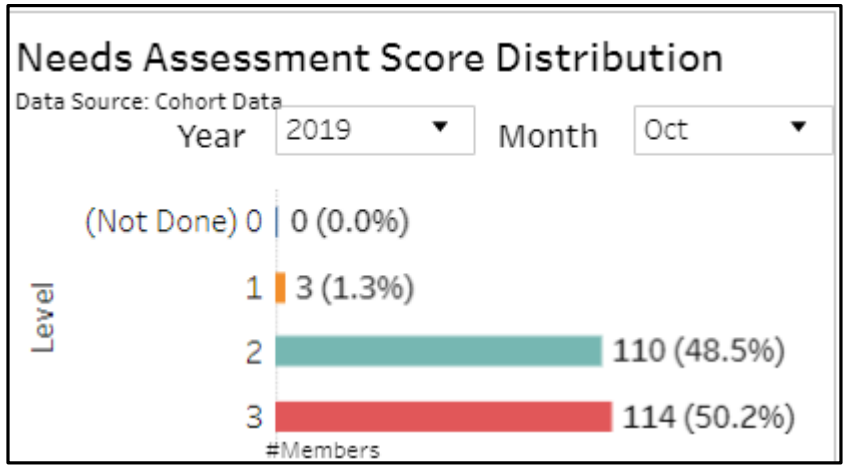
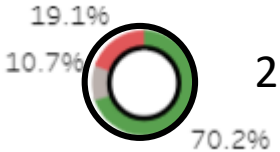
Opioid Use Disorder Cohort

Patient Engagement

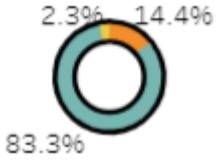




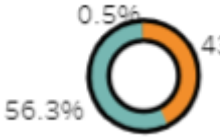
Social Determinants of Health



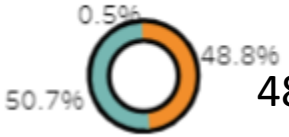
29.8% Housing Insecure



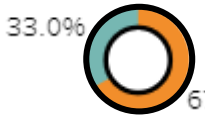
14.4% Child Care Insecure



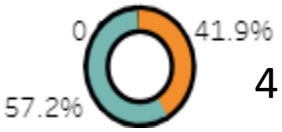
43.3% Clothing Insecure



48.8% Food Insecure



67% Transportation Insecure



41.9% Two or More ED Visits

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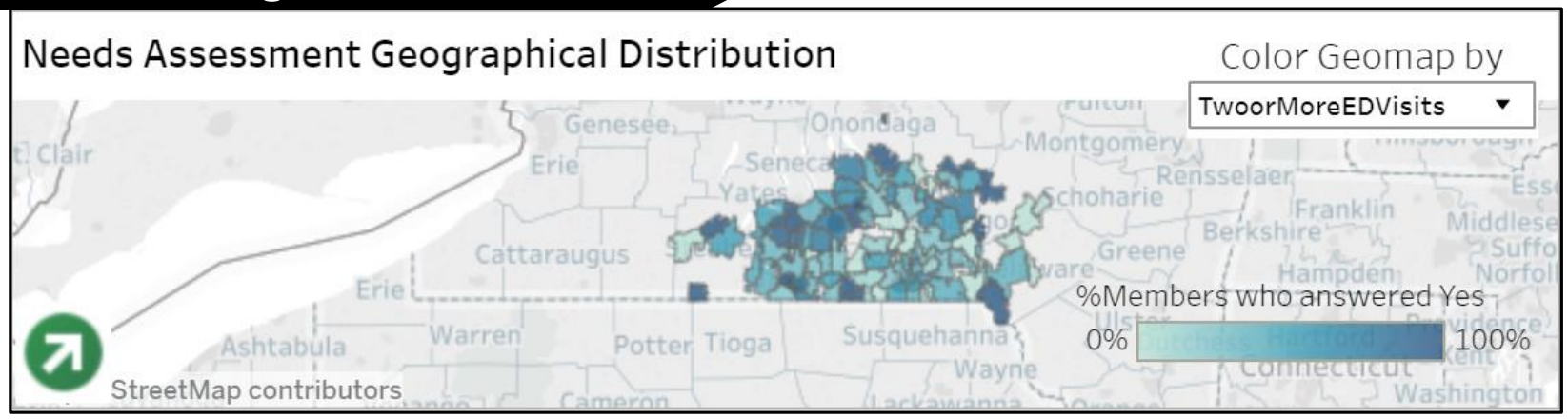
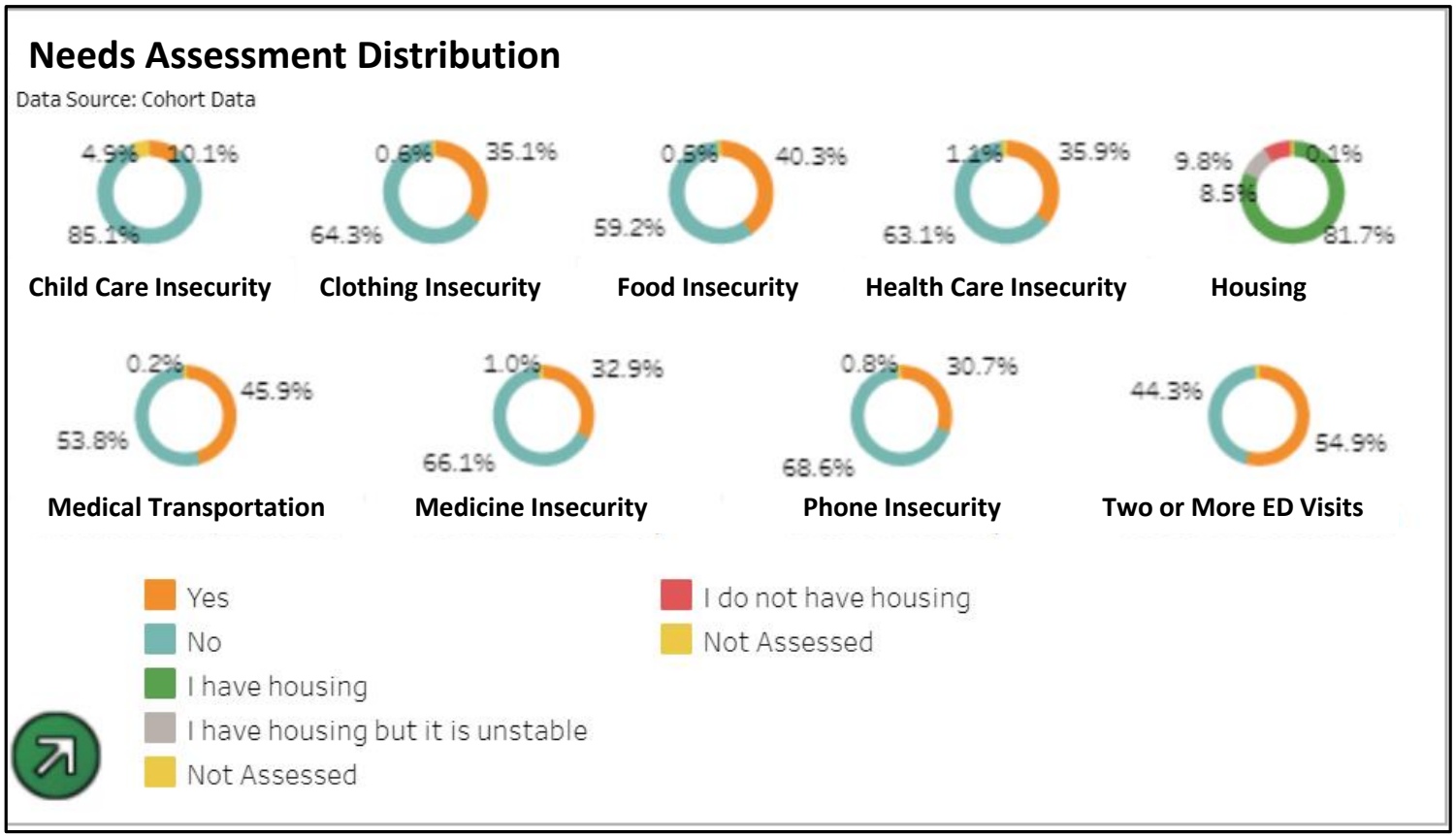
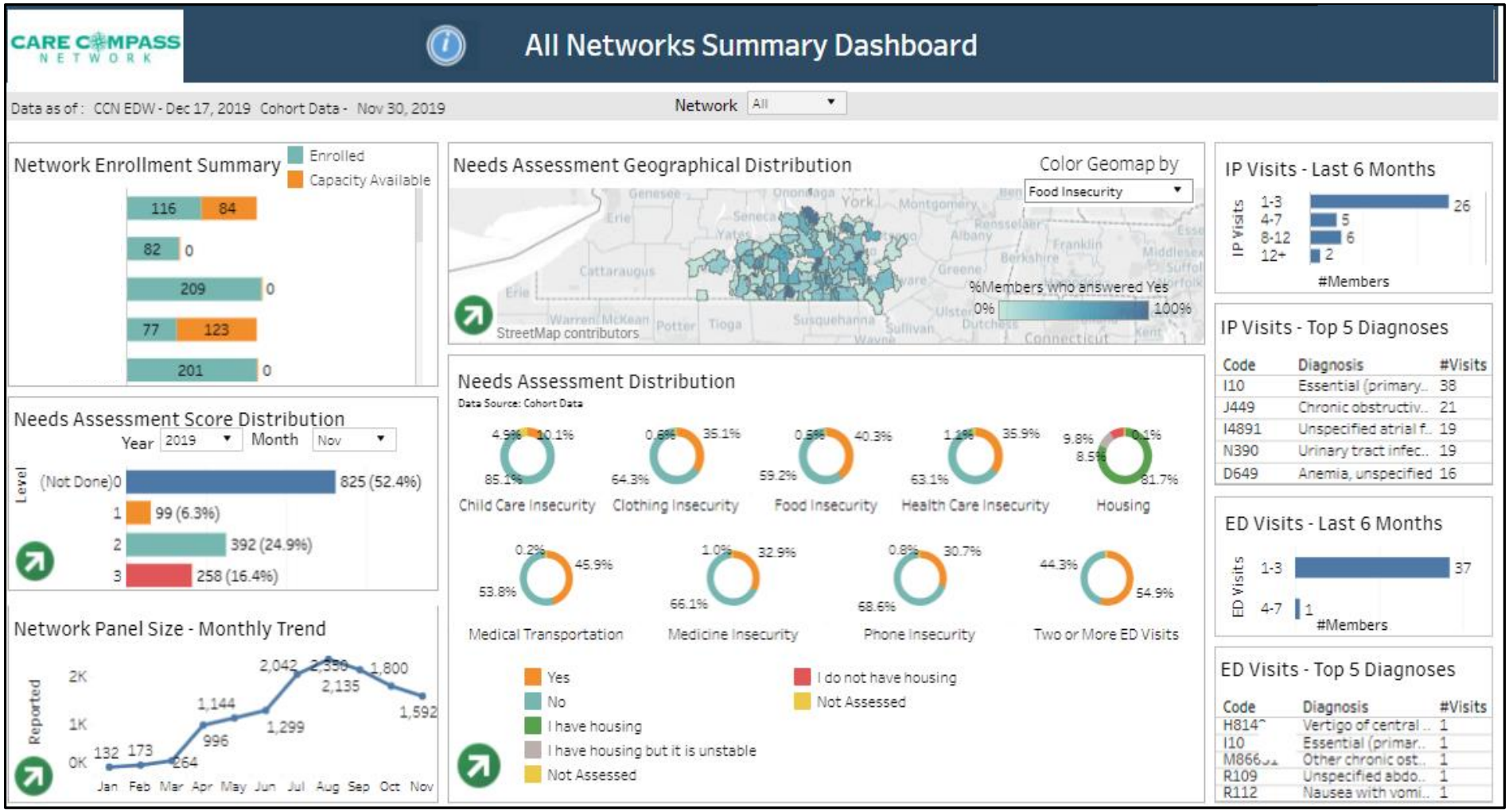
Cohort Management Dashboard





Cohort Management Dashboard



Deploying a standardized needs assessment across the region to identify SDOH needs and map interventions to clinical outcomes.

CARE COMPASS NETWORK

Framework for SDOH Value Prop

Creating Hope, Transforming Lives
Catholic Charities
DIOCESE OF SYRACUSE
Chenango County

Client Profile. Rural, high rates of poverty and disabled. The Roots & Wings program is the largest food pantry in a multi-county region.

Geographic Coverage. Currently, services are offered in Chenango County which has 50,477 population with a high (15%) proportion living at or below the Federal Poverty Level. Using the ALICE indicator for Working Poor, this rises dramatically to 33%. (Assets Limited, Income Constrained, Employed). The average median income is 16% below that of New York State. The average median income is 16% below that of New York State. One-fifth of the population or 20% are elderly, with a high proportion of legally disabled (30%) (www.census.gov). Roots & Wings, the low-income support program, provides services to 22% of Chenango County residents not including other programs of CC of CC.

The Value

The Value

Outcomes

SOCIAL RETURN ON INVESTMENT (SROI)

Program	Outcomes	Social Return on Investment Calculation
Health Homes	❖ **Reduce ED visits and Avoidable Hospitalizations** ❖ Increase health and overall well-being ❖ Increase Primary Care physician connectivity ❖ Increase Appointment Adherence	❖ Emergency Department visits (2018) with average cost at $2,032 for avoidable visit vs. $193 in urgicare and $167 in primary care office ($1,852 more/visit) x 2/3 avoidable ED visits/year x 19,994 visits x .33 (2018) = 6,598 avoidable visits x **$12,219,533** potential savings ❖ Hospital readmissions (2018) with 412 avoidable readmits x 11% x $12,300 = **$557,436/year** *Source: NYS DOH, DSRIP*
Housing	❖ Support independent living skills for ❖ Provide stable housing ❖ Increase Medication Adherence ❖ Enhance independent self-management	
Cohort	❖ **Decrease avoidable ED visits**	❖ Emergency Department visits (2018) with $12,219,533 in potential savings (Source: United HealthCare, 2019)
NOEP (Nutritional Outreach & Education Program)	❖ Increase food security	
Roots & Wings	❖ Support low-income household to address basic needs including food, clothing, shelter ❖ Increase self-sufficiency	
		TOTAL SROI: $12,776,969

KPIs

Key Performance Indicators

1) Increase food security
2) Stabilize housing situation for impoverished, intellectually and developmentally disabled
3) Obtain access to health care and knowledge of how to use the complex healthcare system
4) Increase self-sufficiency/ independent living self-management
5) Decreased avoidable hospitalizations
6) Less ED visits
7) Subsistence support to stabilize impoverished County residents
8) Increase in Medication adherence
9) Increase in Appointment adherence
10) Client satisfaction

Infrastructure

Infrastructure

- Data tracking (GSI), Patient Activation Measures (PAM Scores), Flourish for Dashboards & mapping.
- Currently bill New York State (OMH, OPWDD) and Medicaid FFS & Managed Care (processed bills)
- Have functionality but haven't billed **Medicare** Managed Care to date.

CARE COMPASS NETWORK

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