Accountable Communities for Health: Perspectives on Grant Projects and Future Considerations

ACH Report Webinar
November 15, 2016
Agenda

- Overview of the ACH grant program
- Discussion of key findings
- Perspectives from ACH projects
- Questions and answers
Overview of the ACH Grant Program and Goals
ACH Goals

- Encourage clinical and community partnerships that provide holistic, person-centered coordinated care
- Determine whether Accountable Communities for Health (ACH) in partnership with Accountable Care Organizations (ACO) result in Triple Aim improvements
Foundation of ACHs

- 2008 - Health Care Reform Legislation Health Care Homes established
- 2011 - Community Care Team pilots
- National Models
How ACHs Work

• Community planned and led
• Target population with substantial health and social needs
• Community partners that contribute to a person’s health
• Integrate services using business agreements
• Identify and address structural barriers to health
Evolution of an ACH
Evolution of an ACH

- Foundational elements
- Start-up challenges
- Maturation and growth of the ACH
Key Takeaways

- Backbone organization, leadership, partners vary
- Community engagement is ongoing and a learning process
- Community care coordination systems and teams develop and change over time
Recommendations

- Engage with and maintain key partnerships
- Establish governance and goals
- Work toward sustainability
- Dedicate a coordinator
ACH Perspectives

Heidi Favet, Community Care Team Leader/Project Manager, Essentia Health Ely Clinic
Community Care Team
Ely

Mary Rapps
Program Development Director, Generations Healthcare Initiatives
Together for Health at Myers-Wilkins
Duluth
Ely Community Care Team

- Serving entire geographic population of NE Iron Range
- Health care, mental health, education, government services, non-government social services, community members
- Culture/system change in clinic, Essentia Health, community
Together for Health at Myers-Wilkins

- TOGETHER for the health of the Myers-Wilkins neighborhood
- Community led, Community-based
- Monthly care coordination team meetings
- Communication
- Still growing and maturing
Leadership Team Composition
Multi-Sector Stakeholders

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<th>Sectors</th>
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<td>Community Members</td>
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Progress towards the Triple Aim
Progress toward the Triple Aim

- Improvements in care
- Reducing costs
- Improving population health emphasizing social determinants of health
Key Takeaways

- Community-based care coordination
- Importance of ACO partnerships and participation
- Strategies for testing and measuring ACH project and its outcomes
Recommendations

- Use Health Care Homes model as a foundation for ACH model
- Require an attributable population
- Establish guidelines for how ACH data collection
ACH Perspectives

Shelly Zuzek, MSW, LICSW
Director of Integrated Care and Contracts at Vail Place

Diane E. Holland, PhD, RN
Nurse Scientist, Dept. of Nursing
Associate Professor of Nursing,
Mayo Clinic College of Medicine
Mayo Clinic

Tanya Harder, BSN, PHN, CCM
Preventive Health Nurse Manager
Olmsted County Public Health
Total Care Collaborative

- Spread care conference model between health systems and community organizations
- Share best practices around referral management and ongoing communication
- Advocate for population management efforts that align health systems with community providers
Mayo Clinic

- Shared care delivery model across locally-based primary care, public health and community services
- Address health-related social needs and medical needs of community-dwelling adults with chronic health conditions
- Using a strengths-based approach, the team generates and implements creative and practical solutions for patient-identified priority problems
- Co-create and utilize a single Action Plan across entities
Sustainability of the ACH Model
Sustainability of the ACH Model

- Exploration of sustainability options
- Enduring partnerships and mechanisms
- ACO involvement and measurement
- Replication
Key Takeaways

- Total cost of care equation requires attributable population and health information exchange
- Viability of sustainability options varies by time and place
- Emerging professions add value
Recommendations

- Continue to explore financing and other sustainability options
- Ensure essential model elements are in place and sustained/able
- Conduct ongoing measurement and evaluation
ACH Perspectives

Kathy Lange
Foundation Director, CHI St. Gabriel’s Health
Morrison County Community-Based Care Coordination
Little Falls

Joanna Chua
Project Coordinator, Community Health Initiatives, Lake Region Healthcare
Greater Fergus Falls ACH
Fergus Falls
Morrison Co. Community-Based Care Coordination

- Financial sustainability through value-based pay revenue with SCHA
- Care Model sustainability through traditional patient billing procedures
- Partnership sustainability expanding into mental health access
- Project sustainability through legislative funding sources
  1. Federal Department of Justice - $250,000 focusing on more law enforcement
  2. Federal funding to expand care model into neighboring communities
Greater Fergus Falls ACH

- ACH Leadership Committee - Collaboration, Partnership and a Common Goal
- Project Manager position to be funded by Lake Region Healthcare
- Staff time of partner agencies
- Financial savings from care coordination
Questions and Answers
ACH Grant Manager Contact Information

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For more information

- SIM website - ACH

- “Accountable Communities for Health: Perspectives on Grant Projects and Future Considerations” Report
  http://www.health.state.mn.us/healthreform/homes/documents/achwhitepaper.pdf

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