

Community-Based Organization Integration in the U.S Health Care System: Building the Business Case

NORA SUPER, Chief of Programs and Services, National Association of Area Agencies on Aging
 ROB SCHREIBER, MD, AGSF, Medical Director, Elder Services Merrimack Valley, Harvard Medical School

The Business Institute

The mission of the Aging and Disability Business Institute (Business Institute) is to:

- successfully build and strengthen partnerships between community-based organizations (CBOs) and the health care system
- so older adults and people with disabilities will have access to services and supports that will enable them
- to live with dignity and independence in their homes and communities as long as possible.

Policy and Payment Changes Moving Toward Integrated Care

Social Determinants of Health					
Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education			
Support	Walkability				

Health Outcomes
 Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

Integrated Care Trends

Health Care Moving Toward CBOs, But With Risks Inherent

- Payment reform, away from FFS and toward VALUE, potentially "liberates" resources from delivery system and traditional payment systems
- Focus on outcomes, and social determinants of health, has taught delivery system and MCOs that CBOs/AAAs exist and are useful
- They are under intense cost pressures, and are afraid of risk of new populations and incentive schemes, so contract carefully
- New payment models all demand that payers assume financial risk so they will want CBOs to take on risk also

CBO-Health Care Successes

Why Should PCMHs Focus on Older Adults? ↔ Why a CBO Focus on Primary Care?

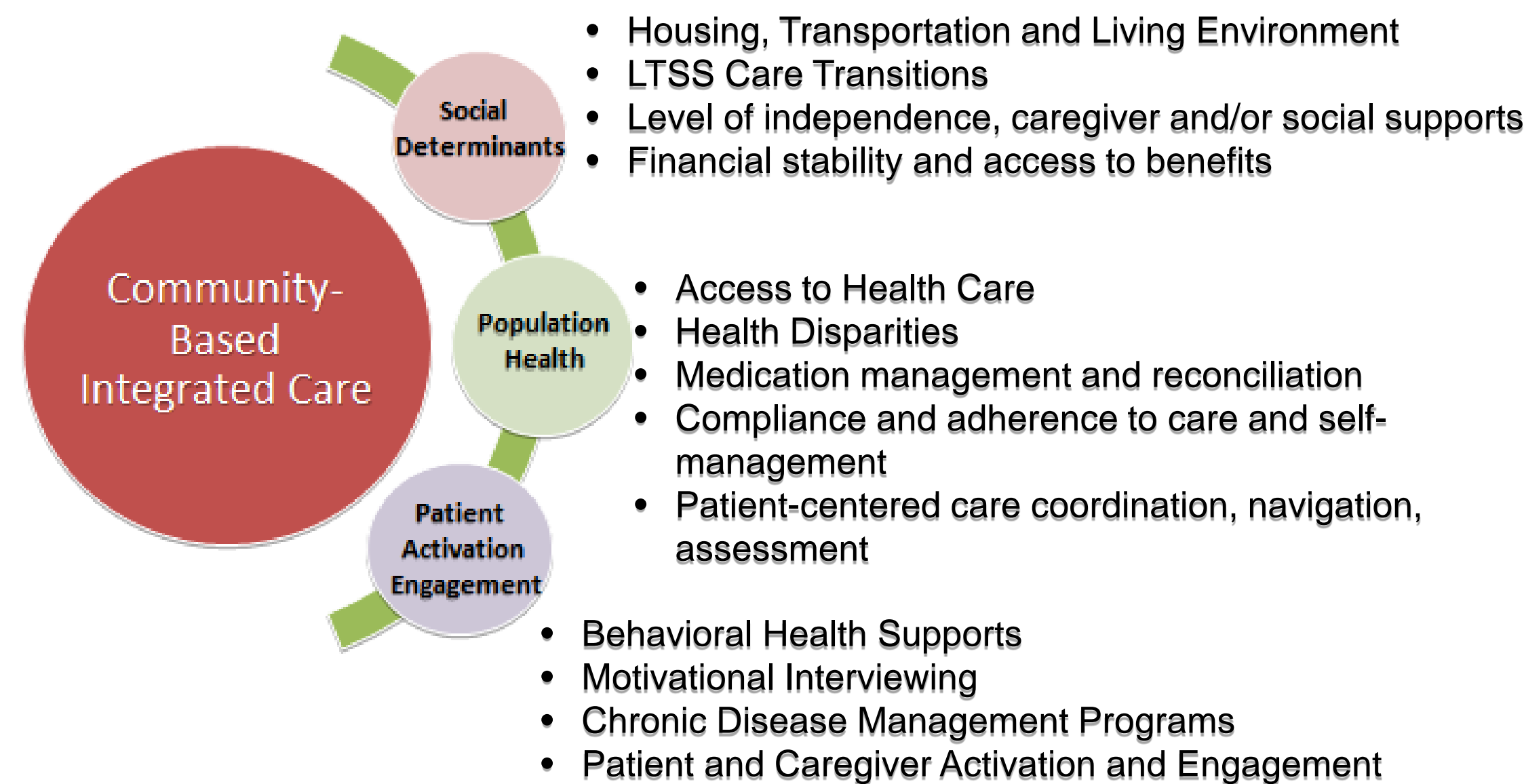


- Majority of older adults receive care from primary care teams *without formal training in the needs of older adults*;
- Historically, the bulk of high need patients in primary care practices are older;
- Primary care is increasingly the focus of health reform to reduce risk, improve outcomes, and reduce costs (in programs mostly known as Patient-Centered Medical Homes or Advanced Primary Care)

Business Institute Funders

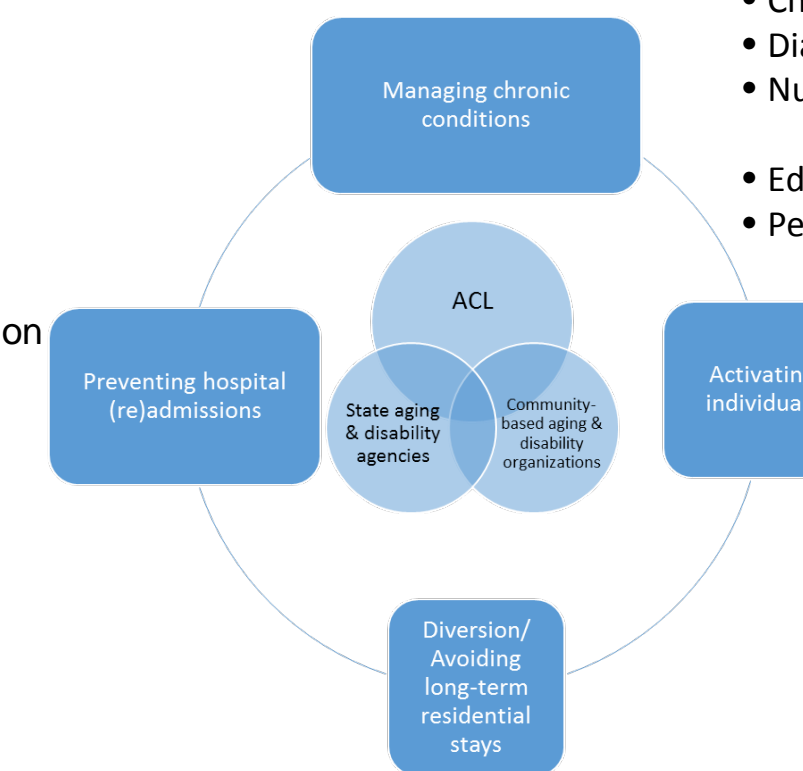


Business Institute Partners

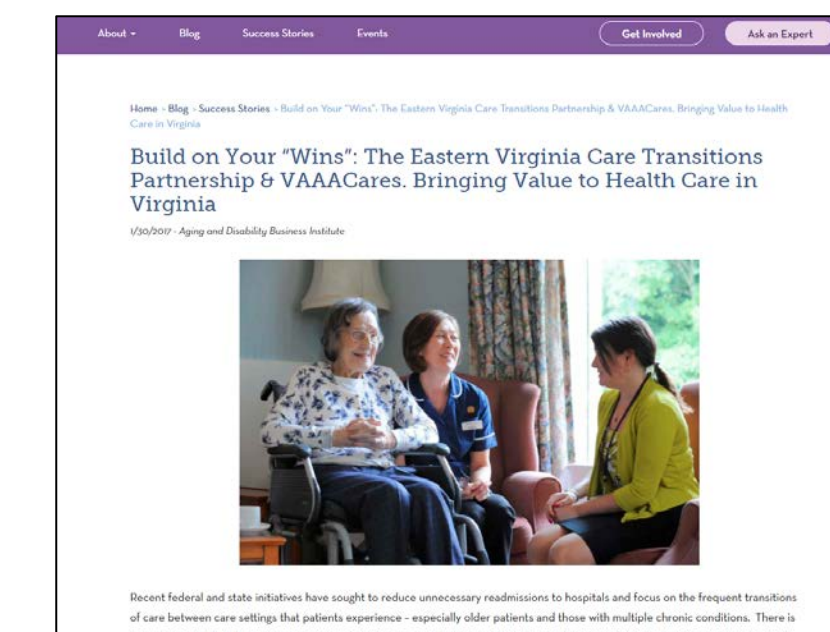


The Critical Role of Community-Based Organizations In Delivery System Reform

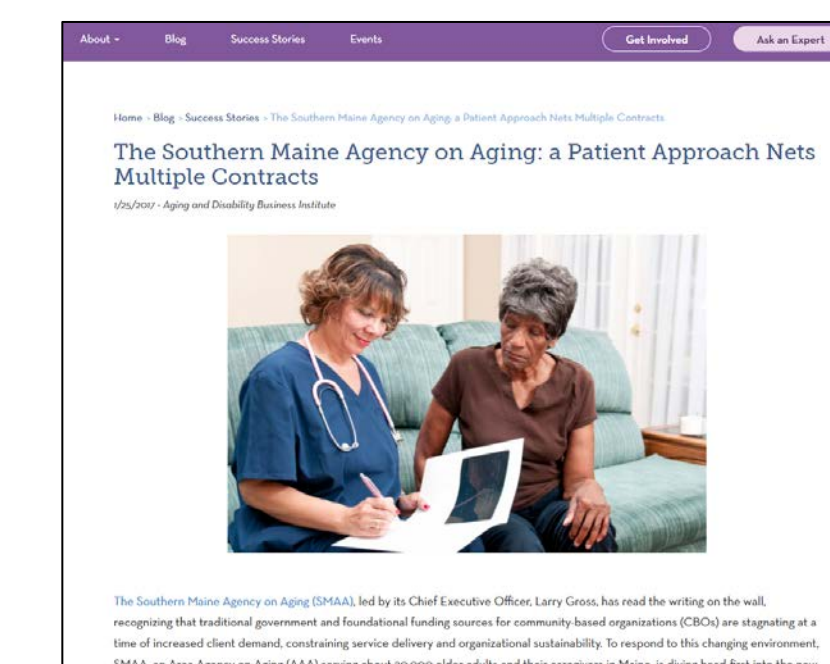
- Evidence-based care transitions
- Care coordination
- Information, referral & assistance/system navigation
- Medical transportation
- Evidence-based medication reconciliation programs
- Evidence-based fall prevention programs/home risk assessments
- Nutrition programs (counseling & meal provision)
- Caregiver support
- Environmental modifications
- Housing assistance
- Personal assistance
- Chronic disease self-management
- Diabetes self-management
- Nutrition programs (counseling education & meal provision)
- Education about Medicare preventive benefits
- Peer supports



Community Care Transitions Program Success

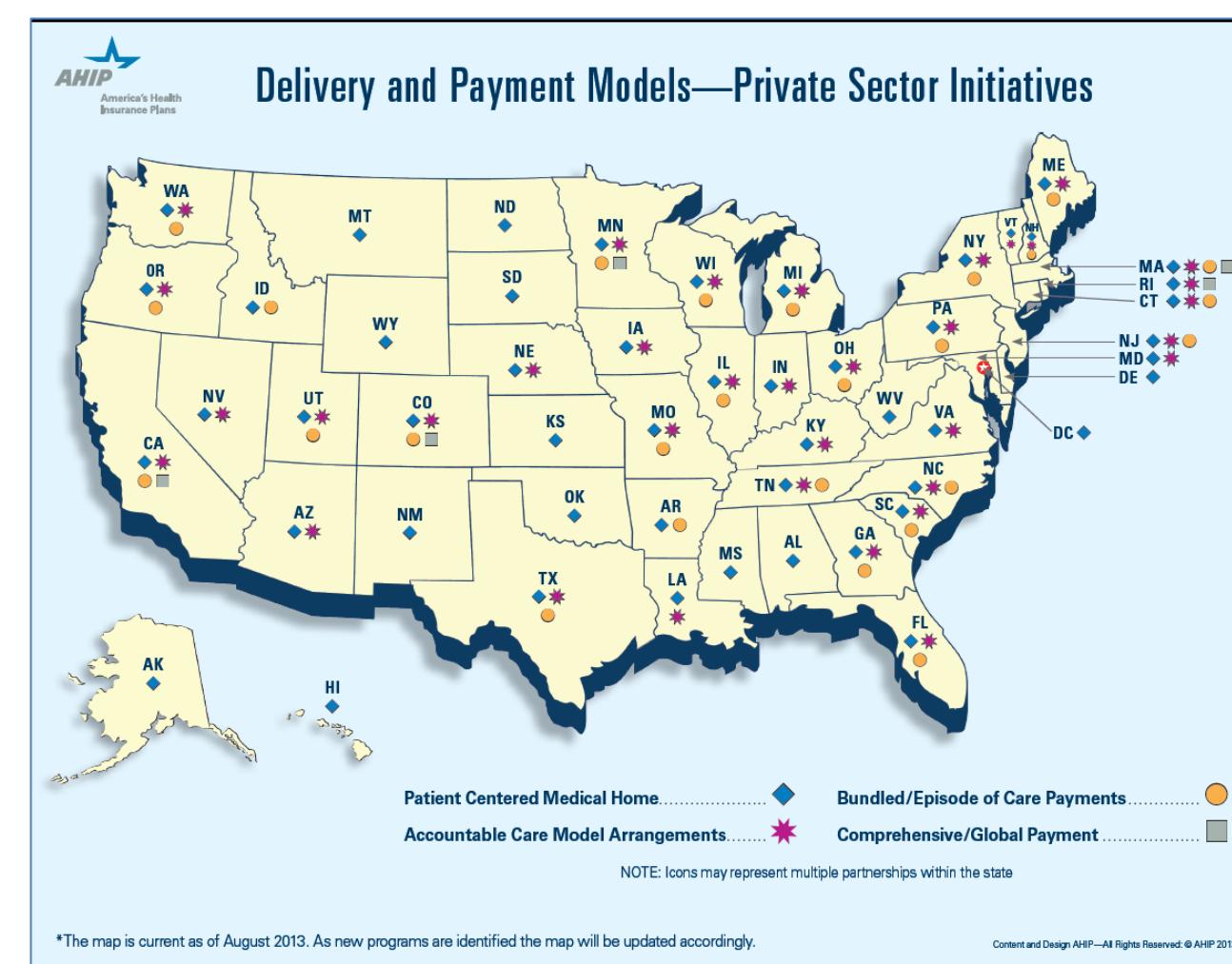


ACO Success



Contracting Opportunities for CBOs

- **Health Plans**
 - Medicaid Managed Care Organizations, Managed Long-Term Services and Supports (MLTSS), Duals Plans, Special Needs Plans (SNPs), Medicare Advantage, Commercial
- **Merit-Based Incentive Systems (MIPS) and Advanced Alternative Payment Models (APMs)**
 - Hospitals and hospital systems
 - Primary Care
 - Physicians, Physician Groups, Patient-Centered Medical Homes (PCMH)
 - Accountable Care Organizations
- Medicare
- State Medicaid Departments
- Veterans Administration Medical Centers
- Skilled Nursing Facilities and Post-Acute Care Providers



aginganddisabilitybusinessinstitute.org

