



Aging and Disability  
**BUSINESS INSTITUTE**

*Connecting Communities and Health Care*

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# Advancing Successful Partnerships Between CBOs and Health Care Entities:

## Lessons from the Trailblazers Learning Collaborative

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# 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.

[aginganddisabilitybusinessinstitute.org](http://aginganddisabilitybusinessinstitute.org)



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Success Stories

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## Aging and Disability Business Institute

### Connecting Communities and Health Care

*When community-based organizations (CBOs) and the health care system work together, older adults and people with disabilities get the coordinated care that lets them live with dignity and independence in their homes and communities as long as possible.*



Featured Items

Resource Categories

Get Started

Understand the Landscape

Define Your Value

Build Your Network

Manage Finances

Evaluate Contracts

Deliver Measurable Results



advocacy | action | answers on aging



Aging and Disability  
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# Our Funders



The John A. Hartford  
Foundation



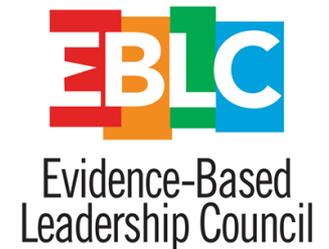
# Our Partners



Elder Services of the Merrimack Valley, Inc.



[www.picf.org](http://www.picf.org)



# Learning Collaboratives for Advanced Business Acumen Skills

- *Learning Collaboratives for Advanced Business Acumen Skills* (Awarded on September 30, 2016)
  - Organize and conduct topically-based action learning collaboratives to address “next generation” issues
  - Create knowledge and capture insights through these collaboratives to incorporate into future curriculum for national dissemination.
- The grants have built on our current grant from The John A. Hartford Foundation
- Work involves several Business Institute partners: ASA, ESMV, EBLC, MOWA, NCOA, PICF



# Trailblazers Learning Collaborative (TLC)

- Purpose:
  - 1) Develop comprehensive strategies for approaching and engaging different health care payers and providers
  - 2) Develop and test “road maps”
- 2 work groups – Health plans and health systems
- 30 months, ends September 2019



# Health Systems Workgroup

- Purpose: develop strategies for approaching and engaging health systems in order to establish future contracts/agreements.
- Deliverables
  - 4 Assessment Tools
  - Lessons Learned
    - 2 Case Studies
  - Expanded Contracts- check list



# Health Systems Workgroup Members

- Elder Services of Merrimack Valley (co-chair)
- University of New Hampshire (co-chair)
- Ability 360
- Direction Home Akron Canton AAA
- Indiana Aging Alliance
- New Opportunities Inc.
- Partners in Care Foundation



# Tools Overview

The potential to improve health outcomes and reduce medical spending through addressing the social determinants of health has resulted in numerous opportunities for CBOs to develop cross-sector partnerships with health care organizations, which can lead to

- service expansion,
- organizational growth,
- revenue diversification and
- mission expansion for CBOs.

However, making the decision to develop and pursue a partnership strategy often requires organizational transformation, including strategic, cultural, and operational changes. It requires commitment of time and resources, as well as the development of new skills and capacities. For example, it may require

- developing a deeper understanding of your local health care market and the potential partners that exist,
- redesigning your services to meet the demands and interests of potential partners and
- incorporating new processes for collecting outcomes data that can demonstrate the positive impact your services have on health outcomes and medical spending.

There is no standard roadmap or playbook that a CBO can follow to successfully prepare for, pursue and secure cross-sector partnerships. This is because every organization, every partner and every community is unique and has varying factors to consider when designing a partnership. The most effective partnerships are those that carefully consider and address the needs for all parties involved - including the health care organization, the CBO, and the community to be served.

There is, however, a partnership readiness process with phases of development that are needed to pursue and implement effective cross-sector partnerships.



# Partnership Readiness Process



# Health Systems Workgroup Assessment Tools



## External Assessment | Introduction

<p>Introduction of the External Assessment</p>	<p>An external assessment is a process that identifies the external trends which can inform an organization's strategy and impact the organization's performance in executing a strategy. This tool will guide you through the process of conducting an external assessment of your local market's health care landscape to identify and better understand the health care organizations that exist within the market, including their challenges, incentives, and organizational characteristics, which can then inform the development of a strategy for effectively pursuing targeted health care partnerships.</p>				
<p>Importance of Conducting an External Assessment for Partnership Strategy</p>	<p>Making the decision to pursue partnerships with the health care sector is significant and requires effort and commitment on behalf of an organization. It requires the devotion of staff, time and resources and often demands the development of new skills, approaches and processes. Once the decision has been made to pursue partnerships, organizations that thoroughly prepare to pursue partnerships and put together a targeting strategy are more likely to find success and more efficiently utilize resources. Conducting an external assessment to better understand the health care landscape and the individual health care entities present within a local market is a key step in the readiness process. The external assessment allows for the identification of potential partners, informs the strategy for developing relationships and proposing a partnership, and prepares an organization to approach and engage a potential partner in discussion.</p>				
	<p>The first building block to an external assessment process is ensuring your organization develops initial knowledge and understanding of the health care landscape and the health care organizations present within your local market. Using this tool helps to build initial understanding and can support you in making informed decisions on how to prioritize relationship development efforts. However, the health care landscape is constantly changing and this</p>				



# External Assessment

- ***Why it's important to conduct one:*** understand the health care landscape
- ***What tabs are focused on:*** trends, identifying policies and regulations, targeting health care client type, challenges, differentiators
- ***What elements should be considered or researched:*** type of health system, the size, that particular organizations mission and vision, quality performance ratings
- ***Top takeaways from this tool:*** health care landscape is constantly changing, stay informed of potential/new opportunities to partner



# Competitor Analysis

<p>Importance of Conducting a Competitor Assessment for Partnership Strategy</p>	<p>If you see the opportunity to develop health care partnerships, there will also be other organizations also seeking partnership opportunities that provide the same services. It is important to identify and understand all the competitors in your market so that your organization can best position itself to secure partnerships by demonstrating the ways in which your organization can differentiate from the competition.</p>
<p>Defining Competition</p>	<p>When considering your competition for pursuing partnerships with the health care sector, there are 3 categories of competition:</p> <p><b>Traditional Competition:</b> This includes other nonprofit, community-based organizations within your market that offer the same and / or similar services that might also be pursuing partnerships with health care</p> <p><b>Non-Traditional Competition:</b> This includes, often for-profit, organizations that are offering services that are the same or similar to your organization as a response to the growing opportunities to contract with health care organizations. Examples of these competitors include Uber, Lyft and Mom's Meals</p> <p><b>Build versus Buy Competition:</b> This includes the health care entities themselves that you may pursue as potential partners. Some health care entities are choosing to build their own service models rather than purchase services from another organization</p> <p>All three types of competitors should be identified and analyzed when using this tool.</p>
<p>Incorporation of Ongoing External Assessment within</p>	<p>It is critical to first develop a broad understanding of the competitive landscape. This tool has been designed to guide you through the process of conducting the initial assessment. However, new competition can enter the market and competitive risks can change at any time, so it is important to develop a process for monitoring competitor activity on an ongoing basis. This includes identifying staff responsible for conducting the research, committing to a timeframe in which to conduct the review (e.g. identifying a specified number of competitors to review each month), and developing processes for updating and sharing information among individuals within the organization. The following tool has been developed with assignment and timeline</p>



# Competitor Analysis

- ***Why it's important to conduct one:*** understand all the competitors in your market so that your organization can best position itself to secure partnerships, what makes you different
- ***What tabs are focused on:*** turning information gathered into useful and informed insights
- ***What elements should be considered or researched:*** understanding categories of competition
- ***Top takeaways from this tool:*** comparison and analysis of strengths and weaknesses of competitors



# Opportunity Assessment

<p>Importance of Conducting an Opportunity Assessment for a Partnership Strategy</p>	<p>Pursuing partnerships with the health care sector can provide great value to your organization and those you serve, but the process of pursuing and securing partnerships is a significant undertaking, often requiring substantial time, resources and investment. To succeed in your partnership pursuit efficiently, your organization should consider spending the limited time and resources you have on high priority opportunities. An opportunity assessment helps your organization to identify the potential opportunities and prioritize them based on a set of criteria. This tool has been designed to guide your organization through the opportunity assessment process, beginning with an exploration of the internal and external factors that may influence and / or present opportunities, ideation of the potential opportunities to consider, and prioritization of opportunities based on a simple scoring system. Prior to completing this tool, it is recommended that your organization complete a market assessment and competitor analysis (see Overview tab).</p>
<p>Incorporation of Ongoing Opportunity Assessment within Organizational Processes</p>	<p>The health care landscape is in constant flux, with trends, activities, and organizations involved frequently changing and evolving. Because of this, opportunities for partnership will also continually change. Sometimes new programs and policies may present new opportunities. Other times an emerging competitor may decrease the potential of an opportunity. This tool provides a framework for capturing initial ideas for partnership opportunities and for continually revisiting and assessing the initial and new opportunities to inform your organization as to which opportunities you should prioritize and pursue. This helps you to devise a plan for pursuing partnership opportunities that dedicate the limited time, resources and staff you have in the most effective way possible. To aid in the development of a continual process for your organization to conduct an assessment of opportunities, view the <b>Process Development</b> tab at the end of this tool.</p>

# Opportunity Assessment

- ***Why it's important to conduct one:*** consider spending the limited time and resources you have on high priority opportunities
- ***What tabs are focused on:*** internal and external elements that may influence the identification and organization of potential opportunities
- ***What elements should be considered or researched:*** Partner(s) involved, collaborators, service offerings, population(s) served, staff requirements and resources needed
- ***Top takeaways from this tool:*** developing a process for continuously assessing responsibilities



# Building the Case for Partnership

<p><b>Importance of Building the Case for a Partnership</b></p>	<p>Once your organization has decided to pursue health care partnerships and you've gone through the process of identifying potential partners and opportunities for partnership, you are then ready to initiate conversations with the potential partner about partnership. Developing a compelling case for the partnership is instrumental in gaining the interest of the partner and increasing the likelihood of continued conversations and engagement. A compelling case should be one that demonstrates a return on investment (ROI) for the potential partner such as improvement in operational, clinical, and financial performance.</p>
<p><b>Introduction to the Building the Case for Partnership Tool</b></p>	<p>This tool has been designed to guide you through the process of developing a compelling case for partnership. By using this tool, you will be instructed to complete a total of six tabs in order. These tabs will walk you through the process of mapping out the service proposed, identifying the costs and estimating the volumes. Then, the tool will guide you through analyzing the incentives for the partner to invest in this service. Once this has been determined, your organization can work on framing the value of the partnership in a compelling way that will resonate with the potential partner.</p> <p>Though your organization may consider presenting the same service to multiple potential partners, you should develop a case for each partner (and for each service to that partner) as the case will be unique for each. This tool can be used to develop each case. Although some information will need to be changed for each scenario, there may be an opportunity to reuse portions of the tool, rather than starting from an empty template.</p>
<p><b>Resources</b></p>	<p>Building the Business Case: Community Organizations Responding to the Changing Healthcare Environment for Aging Populations by The SCAN Foundation, National Coalition for Care Coordination, and Collaborative Consulting</p> <p>Webinar: Preparing Community-Based Organizations for Successful Healthcare Partnerships: How to Make the Business Case presented by Victor Tabbush</p> <p>A Matter of Mindset: CBOs Must Master "Outside In" Thinking to Partner Up and Deliver Quality, Cost-Efficient Care by Victor Tabbush</p>



# Building the Case

- ***Why it's important to conduct one:*** Developing a compelling case for the partnership is instrumental in gaining the interest of the partner
- ***What tabs are focused on:*** Identifying variables of interest to a particular potential partner, and figuring out cost and volume projections
- ***What elements should be considered or researched:*** explore the potential impact your service may have on variables of interest
- ***Top takeaways from this tool:*** Used to develop the narrative of why others should partner with you



# Health Systems Workgroup Lessons Learned 1

- **Build vs. Buy**
  - *How do CBOs succeed in determining resonating points of persuasion to buy services through contracting with CBOs?*
    - Value based points of persuasion
    - Tactics and approach



# Health Systems Workgroup Lessons Learned 2

- **Establishing Relationships Required for Partnership**
  - *How to make the initial connection with potential partners in order to build the relationships required for partnership.*
    - Leveraging existing relationships to approach new contract opportunities



# Next Steps for Health Systems Resources

- Assessment Tools to be published on ADBI website as a suite of tools
- Lessons Learned- ADBI website
- Tips for continuing contracts-ADBI website

<https://www.aginganddisabilitybusinessinstitute.org/>



# Health Plans Workgroup

- Purpose: develop strategies for approaching and engaging health plans in order to establish future contracts/agreements.
- Standardized client satisfaction surveys to help CBOs benchmark the quality of their programs, and enhance their ability to demonstrate the quality outcomes of their services.
  - Care management client satisfaction survey
  - Care transitions client-reported outcomes and satisfaction survey (in development)
  - Evidence-based program client-reported outcomes and satisfaction survey (in development)
- Standardized scope of work for care transitions to facilitate multi-state or national global contracts covering multiple CBO networks (in development)



# Health Plans Workgroup Members

- Bay Aging/VAAACares
- Direction Home Akron Canton AAA
- Elder Services of the Merrimack Valley
- Indiana Aging Alliance
- Partners in Care Foundation (chair)



# Health Plans Workgroup

- Main focus: Metrics. Surveys that can be used for:
  - Internal quality measurement, including comparing staff members
  - Benchmarking across TLC
  - Establishing the common value proposition for the industry
- Secondary focus: Advancing the work for all
- Tertiary focus: Mutual support



# First product: LTSS client experience survey

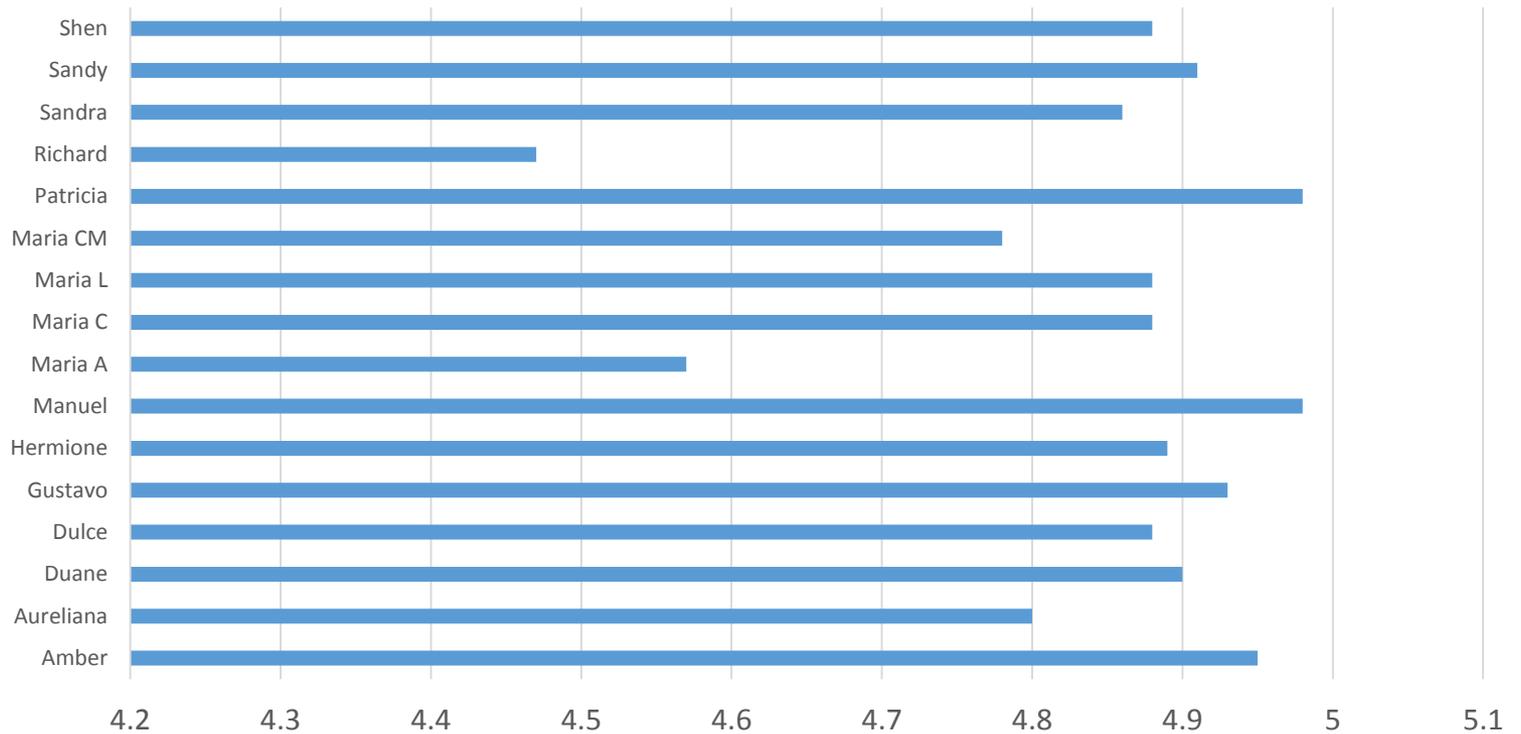
- Methods

- Collect surveys currently in use within TLC
- Scan other measures, especially those from authorities (CMS CAHPS) and those recognized in the healthcare sector
- Map commonalities
- Eliminate less crucial questions
- Refine question order, wording and answer sets (Scripps)
- Pilot & revise
- Roll out



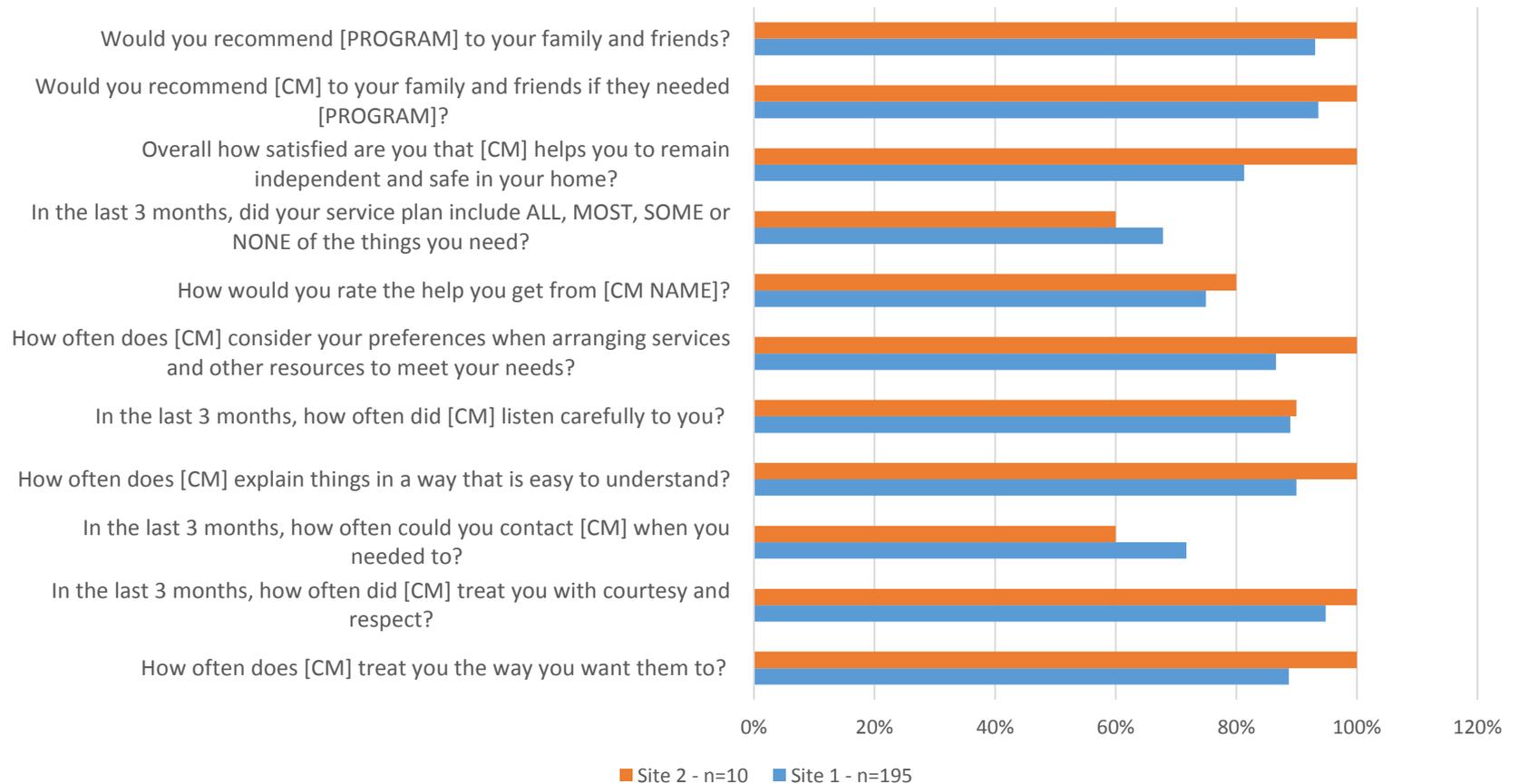
# Results to date: LTSS – internal view

Overall Scores by CM



# Results to date: LTSS comparative view

Percent of clients giving top rating; comparison of 2 sites



# Results to date: LTSS Overall

- Net promoter score for LTSS Medicaid waiver programs run by CBOs
  - 93%
  - 7% neutral; no negatives
- Would you recommend the program to a friend or relative?
- Would you recommend your care manager to a friend or relative
  - 93% provide the top answer – Definitely Yes!



# Care Transitions Pt. Experience

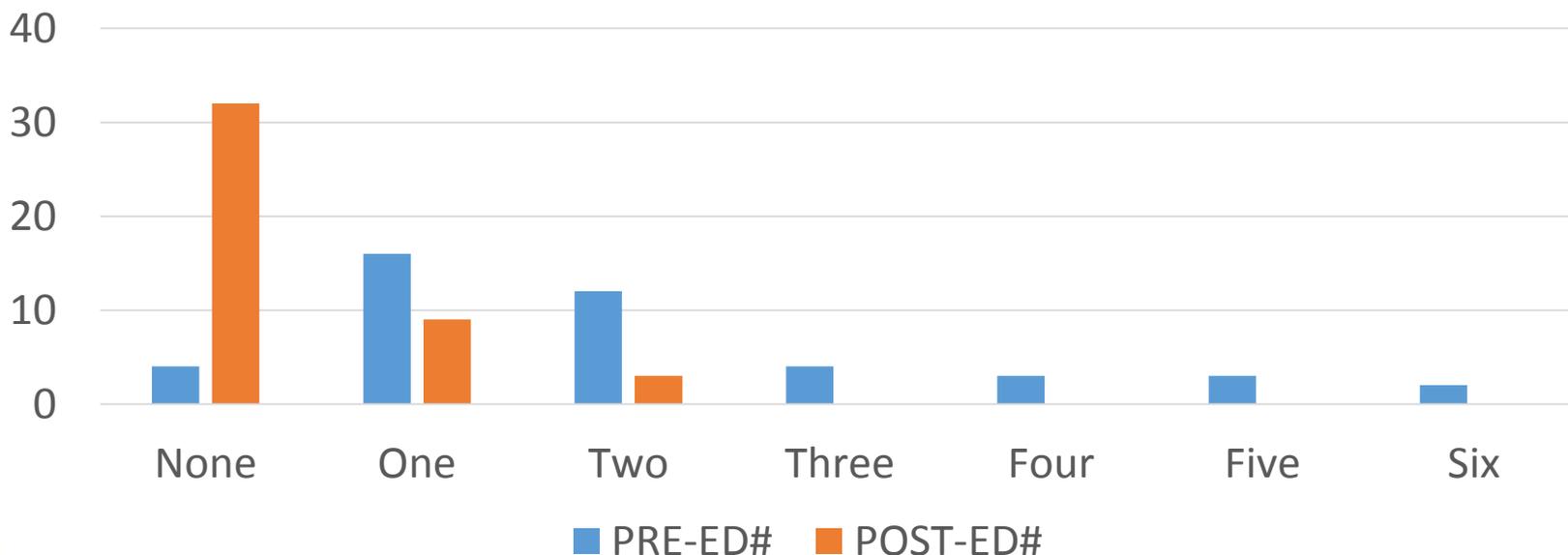
- Content:
  - Utilization—pre and post
  - Self-care/lifestyle (healthy habits, understanding meds)
  - Use of Personal Health Record and other tools
  - Communication with providers (med list, etc.)
  - Confidence in ability to manage health
  - Coach rating
  - Net promoter score (would you recommend to colleague, family or friend?)



# Example of questions/data

During the past 2 months, how many times have you gone to a hospital ER about your own health (This includes emergency room visits that resulted in a hospital admission.)?

**Pre-post comparison ED visits in previous 60 days. Avg. pre: 2.1 visits; Avg. post: 0.3 visits**



# Care Transitions Scope of Work

- Care transitions standard “product” description to serve as standard scope of work in national contracts
  - Surveyed TLC and others for common components of care transition contracts, e.g.
    - Is hospital visit required?
    - Are SNF rehab visits included?
    - Inclusion of non-CTI elements like service coordination
    - Targeting criteria
    - IT systems and components
  - Draft, review, finalize SOW
  - Surveyed CCTP providers – great interest in national contracts



# Next up

- Combined table of outcomes from individual agencies.
- Response to national trend of SDOH referral software setting up CBO “networks” and becoming MSO-like entities
- Advocacy to healthcare to avoid focusing on SDOH referrals rather than payment for services or building community capacity
- Lessons learned from piloting use of physician billing codes for TCM, CCM, Advance Care Planning & Cognitive Assessment/Care Plan
- Hiring, onboarding, training for the new culture of healthcare partnerships



# Member Testimonials

- The Trailblazers Learning Collaborative (TLC) has been an invaluable catalyst in bringing together diverse experiences and significant knowledge from across the country to examine the current relationships between health care and social services. TLC is working toward building new and better interactions that will improve the outcomes of both. Improving such interactions, in a formal structured way, is a vital key to any realistic chance of truly achieving “population health” in our country. -Gary Cook
- Direction Home, the Trailblazers, and the Aging/Disability Networks are evolving quickly to engage in the changing health care landscape. It’s been great having a built in support group with the Trailblazers organizations. Additionally, the tools developed by the n4a Aging & Disability Business Institute are useful for veteran organizations looking to optimize their programs as well as Agency’s new to performance-based contracting. -Abigail Morgan
- The Trailblazers Learning Collaborative has been a fantastic forum to exchange new ideas with the true pioneers of our ever-changing environment. The lessons learned have been helpful not only in our day-to-day work, but helps us develop our way forward, too. There’s true value in simply connecting with colleagues across the country. -Susan Sigmon
- “The Trailblazers Learning Collaborative was a fulfilling way to work towards a stronger national aging and disability network with some of the most experienced and creative programs in the country. I found the work challenging, the outcomes beneficial, and the process comforting in that the challenges we face are shared by our peers.” -Matt Reed
- It has been extremely rewarding to be part of the Trailblazers Learning Collaborative and to be amongst other leading community-based organizations doing wonderful work across the country to serve the most complex and vulnerable populations. Thanks to this opportunity provided by n4a’s Aging and Disability Business Institute, social services organizations were able come together to share best practices and create tools that can help with growth and sustainability. -Ester M. Sefilyan, MSG



# Q&A

**Thank You!**

