

Partnership Profile

Partnering with Medicare Advantage Plans on Evidence-Based Approaches to Improve Health Outcomes

Introduction

A 2021 survey from USAging's Aging and Disability Business Institute (Business Institute) showed that 43.8 percent of responding community-based organizations (CBOs) were currently contracting with one or more health care entities, with another 12.3 percent pursuing such contracts.ⁱ Although the number of CBOs contracting with health care entities has increased over the last five years, as of 2021 only about 17 percent of those responding to the Business Institute's health care contracting survey indicated that they had contracts with Medicare Advantage (MA) plans.

While offering the same benefits as Original (Fee-For-Service) Medicare, MA plans often provide additional coverage for health and wellness benefits such as fitness programs, gym memberships and discounts, as well as some additional vision, hearing and dental services. With the new flexibility provided to them through the CHRONIC Care Act to offer additional supplemental benefits, MA plans are opting to cover transportation to physician visits, non-prescription or over-the-counter medications, and other health-related services for members, often contracting with AAAs or other CBOs to provide those benefits. This case study will explore one collaboration between an MA plan and a CBO network to provide evidence-based programs to plan members in three New England states—Maine, New Hampshire and Massachusetts.

Evidence-Based Health and Wellness Program Value to MA Plans

According to the Evidence-Based Leadership Collaborativeⁱⁱ, the last 10 years have seen a shift from untested health promotion programs to proven evidence-based programs (EBPs) that can be implemented at a wide variety of community settings supporting older adults: Area Agencies on Aging

(AAAs), senior centers, YMCAs, housing sites, faith-based organizations and multi-cultural organizations, to name a few. These EBPs have been tested in experimental or quasi-experimental trials and can be broadly disseminated in diverse community settings. Most programs are also administered by non-clinicians, allowing for lower costs, greater sustainability, and a focus on education and behavior change outside of clinical settings. Programs also connect back to a participant's primary health care provider. Among these EBPs are interventions that address chronic diseases, falls prevention and management, behavioral health and depression, the benefits of physical activity and nutrition, and family caregiver burden and stress. In a study of Medicare beneficiaries and subsequent report to Congress, the Centers for Medicare & Medicaid Services (CMS) found that participation in some EBPs were associated with lower unplanned inpatient costs and fewer unplanned hospitalizations.ⁱⁱⁱ In addition to the cost savings reported in this study, EBP participants also demonstrated increased health care activation, meaning they were equipped with the knowledge, tools and confidence to take more active roles in managing their health outside of the physician's office. In 2021, EBPs were among the services most frequently provided by CBOs under contract with MA plans.ⁱⁱⁱ

Harvard Pilgrim Health Care

Harvard Pilgrim Health Care^{iv} (HPHC) is a nonprofit managed care provider serving Maine, New Hampshire, Connecticut and Massachusetts. In 2021, HPHC merged with Tufts Health Plan, adding Rhode Island to the states covered and growing the number of members covered to more than 1.1 million.^v In 2020, the HPHC MA plan covered approximately 11,000 members.

Collaboration With Healthy Living Center Of Excellence

As early as 2017, HPHC partnered with AgeSpan (formerly Elder Services of the Merrimack Valley and North Shore)^{vi} to provide evidence-based and evidence-informed programs across Massachusetts to community-dwelling older adults. As a AAA, AgeSpan had developed considerable experience in the implementation of evidence-based programs using federal funds under Title III D of the Older Americans Act. The programs implemented under this project included Healthy Eating for Successful Living for Older Adults, A Matter of Balance, Tai Chi Quan Moving for Better Balance, and Savvy Caregiver. As a result of success in growing these programs between 2017 and 2019, HPHC next sought to expand program offerings beyond Massachusetts to Medicare Advantage Members in Maine and New Hampshire through the A Matter of Balance, Tai Chi Quan Moving for Better Balance and Savvy Caregiver programs. This expansion was motivated by a desire to better manage costs of care for members at risk for falls and to create increased value in the HPHC plans in a very competitive field of MA plans in New England.

To achieve statewide access across Maine, New Hampshire and Massachusetts, AgeSpan utilized its network of CBOs: The Healthy Living Center of Excellence (HLCE)^{vii}, a network of more than 80 community-based organizations across Massachusetts offering a variety of EBPs in community settings. With AgeSpan as the network hub (or network lead entity), HLCE was able to act as the central contracting entity for HPHC and then subcontract to implementing CBOs across the states. In addition, AgeSpan contracted with network hubs in Maine (Spectrum Generations)^{viii} and New Hampshire (the Dartmouth Center for Health and Aging)^{ix} to create a first-of-its-kind multi-state community-based network to deliver evidence-based programs. Today, this network also includes hubs in Connecticut, Rhode Island and Vermont, forming a New England-wide delivery network.



Outcomes

By the end of 2020, more than 1,300 older adults across Maine, New Hampshire and Massachusetts participated in one or more EBP as part of the contract between HPHC and HLCE. Among outcomes reported were:

- 97 percent reported being more satisfied with life in general
- 91 percent reduced their fear of falling
- 87 percent increased the amount of physical activity per week
- 86 percent made home safety modifications to reduce falls
- 89 percent reported satisfaction with their health plan (HPHC) for offering the program

In addition to these patient-reported outcomes, HPHC members also benefited from learning about additional resources and services provided by AgeSpan and other AAA partners. These resources included home-delivered and medically tailored meals, Alzheimer's disease and related dementia support groups, home modifications and increased social connectedness via tablets and Internet access. Program participants also gained a greater understanding of the wide variety of services provided by AAAs, as well as the opportunity to enroll in such services as their in-home needs evolve.

Conclusion

Contracting with MA plans presents a meaningful and growing opportunity for AAAs and other CBOs. Evidence-based programs focusing on disease prevention, physical and behavioral health management, and falls management complement the health promotion and wellness benefits many MA plans already offer. Area Agencies on Aging that already have experience in offering such evidence-based programs using Older Americans Act funding can now expand the reach and sustainability of these programs by contracting with MA plans. These partnerships benefit plans and their members by lowering unplanned inpatient costs and avoiding unplanned hospitalizations.

Endnotes

- i Miami University, *Advancing Partnerships: Contracting Between Community-based Organizations and Health Care Entities*, <https://sc.lib.miamioh.edu/handle/2374.MIA/6808>.
- ii Evidence-Based Leadership Collaborative, *COVID-19 Evidence-Based Program Delivery Guidance*, www.eblcpprograms.org/.
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- iv Harvard Pilgrim Health Care, *Questions about COVID-19?*, www.harvardpilgrim.org.
- v Point32Health, *Our Family of Companies*, www.point32health.org/about-us/our-family-of-companies/#:~:text=As%20a%20leading%20not%2Dfor,Maine%2C%20Connecticut%2C%20and%20beyond.
- vi AgeSpan, *AgeSpan Homepage*, www.agespan.org.
- vii The Healthy Living Center of Excellence, *Welcome*, www.healthyliving4me.org/.
- viii Spectrum Generations, *Spectrum Generations Homepage*, www.spectrumgenerations.org/.
- ix Dartmouth-Hitchcock, *Centers for Health and Aging*, www.dartmouth-hitchcock.org/about/centers-health-aging.

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This publication was produced for the Aging and Disability Business Institute by AgeSpan. Led by USAging in partnership with the most experienced and respected organizations in the Aging and Disability Networks, the mission of the Aging and Disability Business Institute is to build and strengthen partnerships between aging and disability community-based organizations and the health care system. Funded by The John A. Hartford Foundation, The SCAN Foundation and the Administration for Community Living, the Aging and Disability Business Institute provides community-based organizations with the tools and resources to successfully adapt to a changing health care environment, enhance their organizational capacity and capitalize on emerging opportunities to diversify funding. Learn more at www.aginganddisabilitybusinessinstitute.org