Payer as Partner

A Discussion on Working with Medicaid Health Plans to Impact Social Determinants of Health and Health Equity

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April 2019

Learning Objectives

- Develop knowledge about how to engage with Medicaid Health Plans (MHP) around topics of health equity and social determinants of health
- Understand challenges experienced by MHPs which are attempting to impact health equity and social determinants of health
- Describe a population health management model that emphasizes locally rooted practice transformation and a person-centered approach to quality improvement and risk management.

Current SDoH initiatives

Challenges with SDoH Collection

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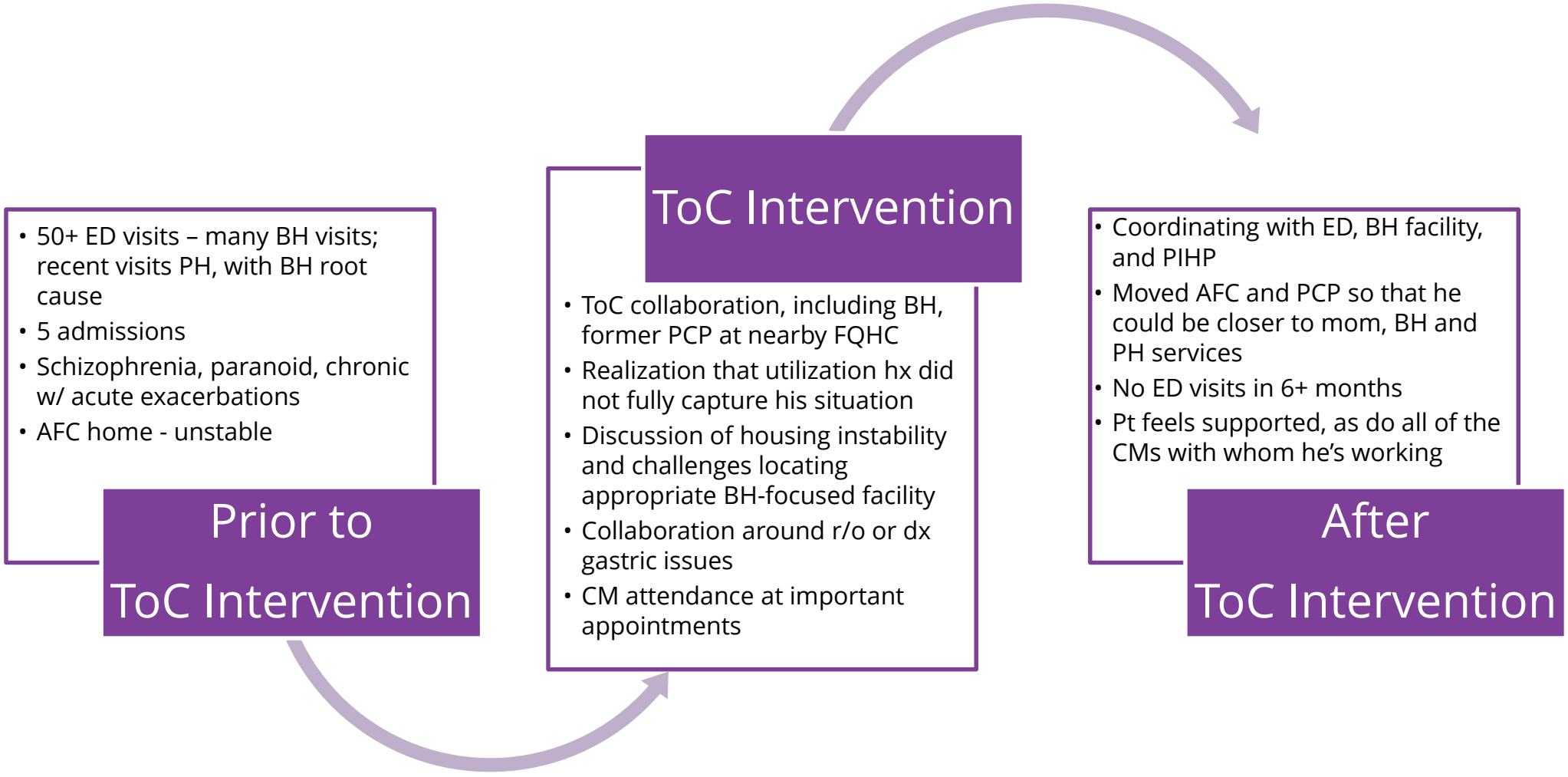
Aetna’s Pop Health Management Approach

Patient story: Marcus

Patient Story: Marcus



Aetna Medicaid's Population Health Approach

Objectives

To promote a collaborative Population Health management approach that:

- Delivers the best care to patients
- Offers the most insightful data to health providers for optimal decision making
- Manages costs, minimizes duplicative efforts and services

Supporting the collaborative approach through:

- CareUnify: A proprietary software for comprehensive patient care
- Population Health Specialist: Open and supportive communication with knowledgeable staff
- Value Based Contracts: support new delivery models and sophisticated value-based arrangements driven by payment based on achieving quality outcomes

Population health specialists

Value-based contracting	Real relationships	Personalized health	Workflow analysis
Onsite support	Data-driven decisions	Experienced clinicians	Care coordination

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Improve your patient outcomes

Receive high-risk patient alerts

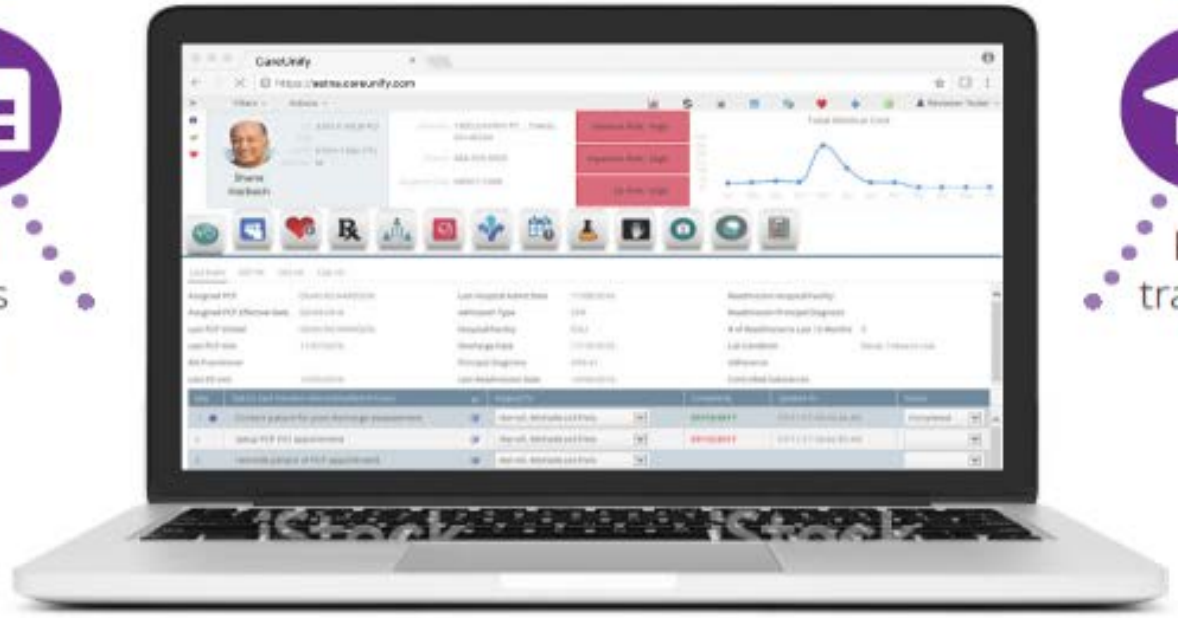
View care data points in near-real time

Direct patient contact

Introducing

CareUnify

Use across mobile devices



Track patient activity across care points

Receive personal training and support

Case Study

Health System Overview

Value-based arrangement

Duals only

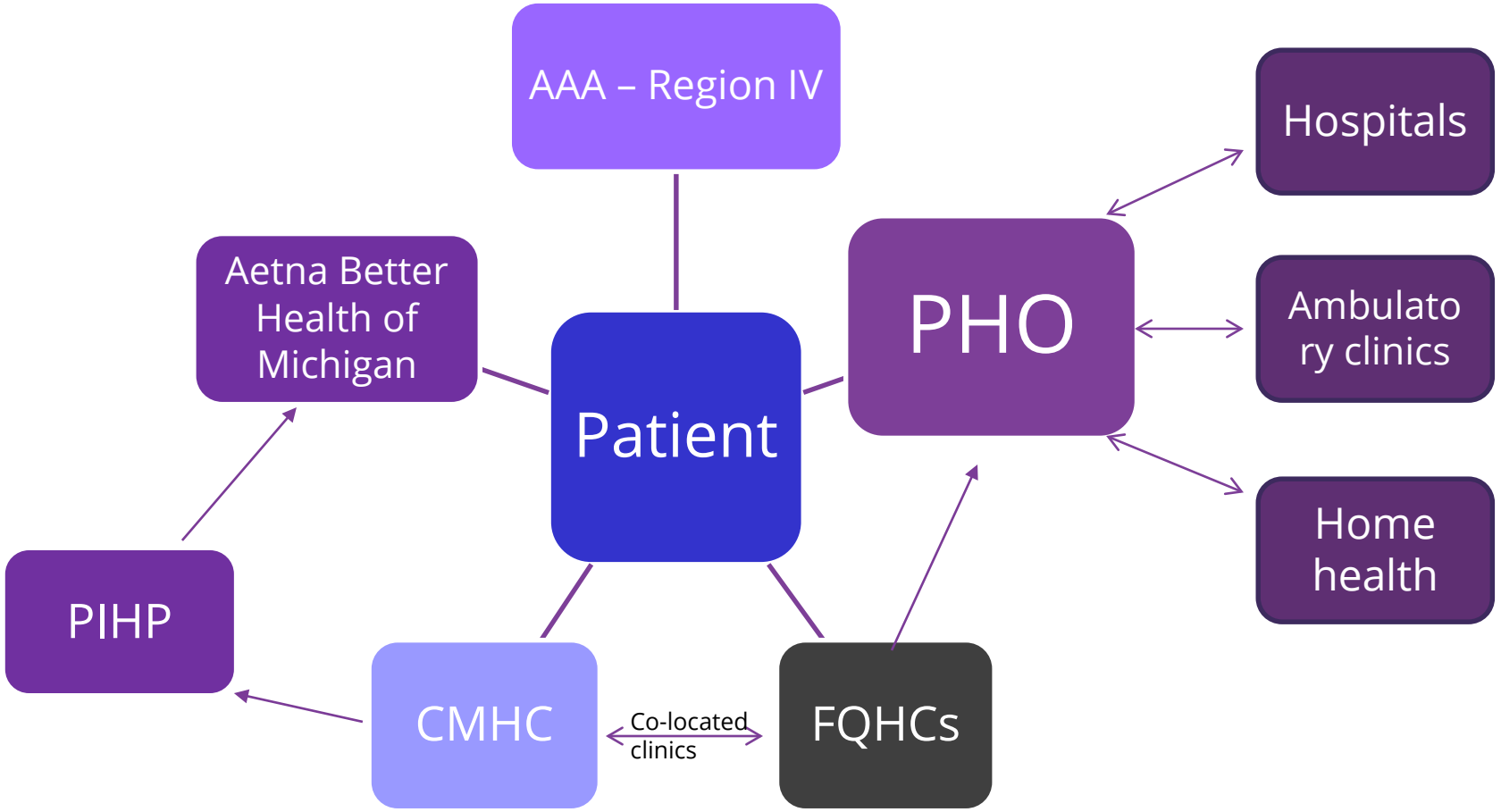
~500 dual-eligible Aetna patients

~90 PCPs

~97% market share in SW MI

Vertically integrated

Healthcare Ecosystem



Care Collaboration Model – Goals &Planning

Goal-Setting

- Determined collaboratively by stakeholders
- By the numbers: Impacting utilization and cost
- More difficult to measure: Stronger relationships, improving experience of care, integrating BH/PH, addressing SDoH

Initial Planning

- Facilitated by Population Health team, decisions made by stakeholders
- Stakeholders include clinical and quality teams at both plan and provider
- Establish new forum to address ongoing, nearly universal challenges
- Level of involvement and collaboration determined by stakeholders

Care Collaboration Model – Preparation & Action

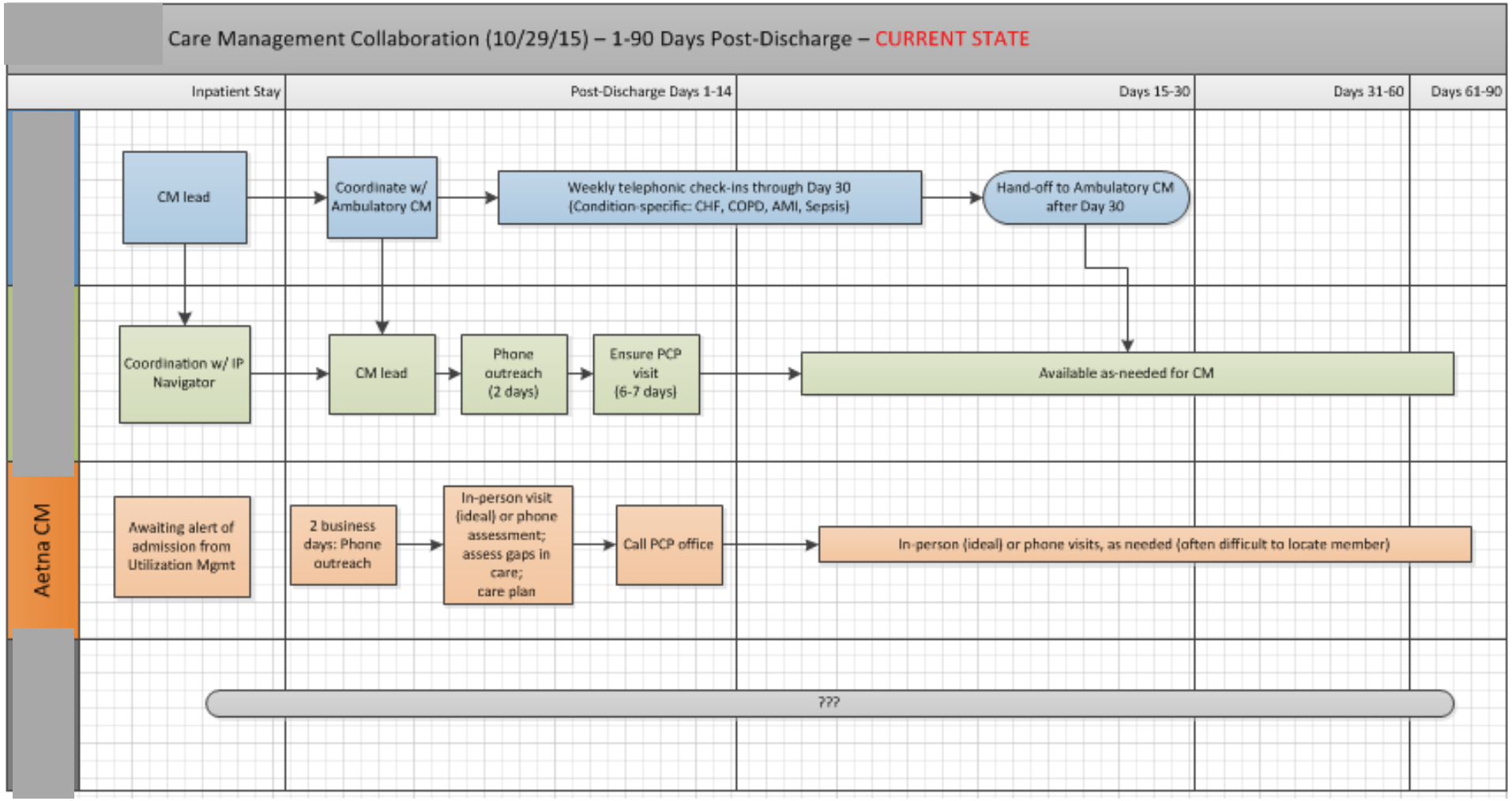
Preparation

- Pain point discussions
- Workflow analysis and proposed revisions
- Evaluation planning
- Establishment of regular touchpoint/accountability opportunity
- Launch meeting and training sessions

Ongoing Action

- Monthly evaluation conversations – monitor progress, iterate quickly
- Modify internal processes where possible and necessary
- Supported by Aetna Medicaid's online population health platform (CareUnify)
- Concerted effort to integrate BH/PH, and address SDoH

Establishing Case Rounds – Workflow analysis



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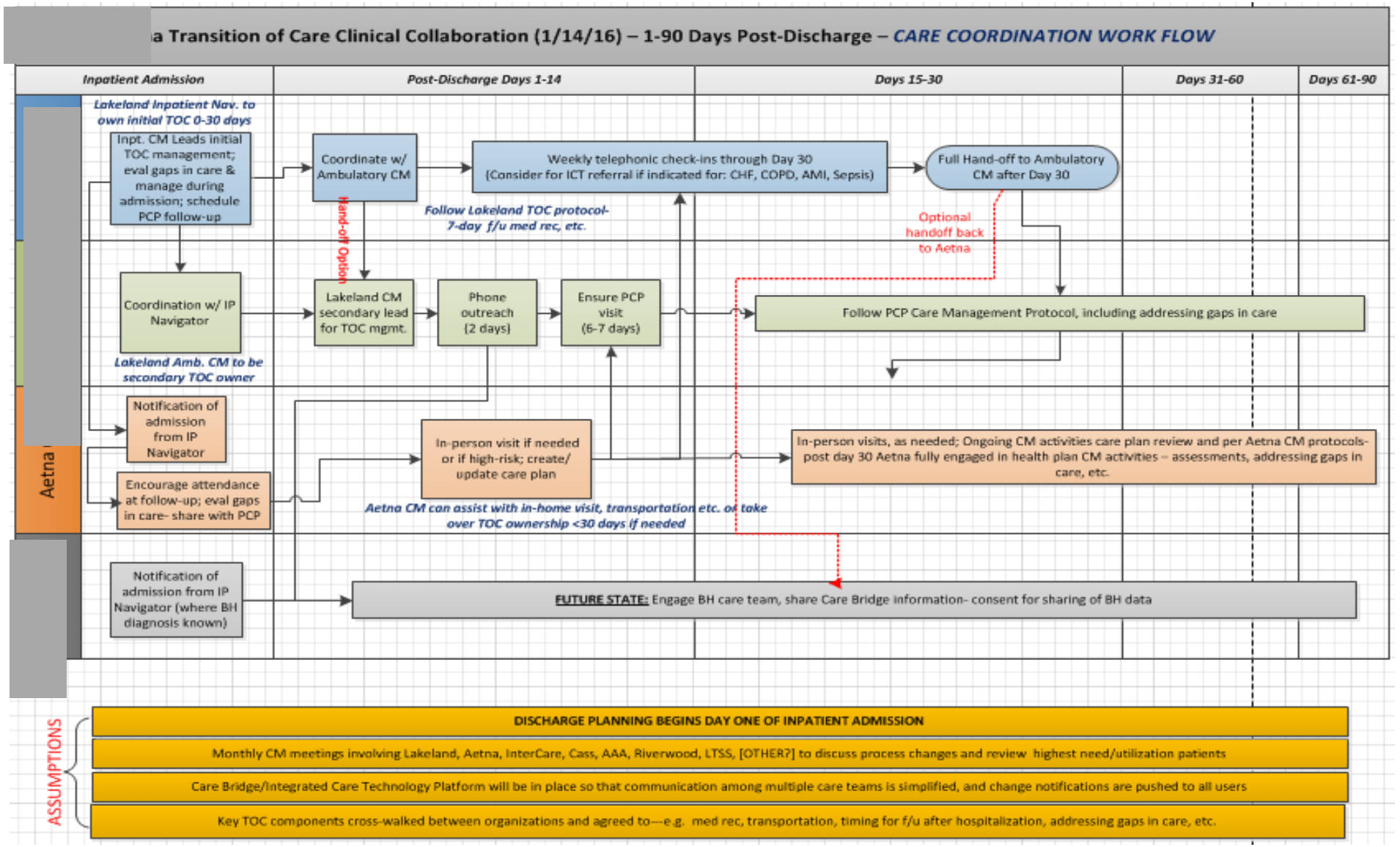

Engaging with Medicaid Health Plans

- Medicaid Health Plans (MHPs) want to engage with you – if you haven't been approached yet, you may be soon
- NCQA has rolled out new, robust Population Health Management standards for all accredited health plans, which include identifying/addressing SDoH
- Many states are strengthening their expectations for MHPs around SDoH
- MHPs are using data sets (e.g., ICD-10 Z codes, CM assessments) to identify and address SDoH – this data is sorely needed at plans
- Once plans understand member SDoH needs, we can better address/support addressing them through care management, CHW activation, food security programs, etc.
- We're trying to improve! Could we explore collaboration?

Discussion

Activity: SDoH Practices and Needs

What works?

- What SDoH-focused efforts have been successful in your experience? Write down the specific practices with which you're engaged (and outcomes, if you have them). Categorize them on the wall.

What barriers do we face, and what's needed to overcome them?

- What's still needed in order to identify and address consumers' SDoH needs? Categorize them on the wall.

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Discussion: SDoH Practices and Needs

Under what category do most comments fall?

What observations do you have about the posted comments?

How can we work together to address SDoH?

Who else should be at the table?

Thank You!

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