Functions of a Mature Community Care Hub
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Background

Overview of the Community Care Hub Concept

A community care hub ("CCH" or "hub") is a community-focused entity that organizes and supports a network of community-based organizations (CBOs) providing services to address health-related social needs (HRSNs). A community care hub centralizes administrative functions and operational infrastructure, including, but not limited to, contracting with healthcare organizations, payment operations, management of referrals, service delivery fidelity and compliance, technology, information security, data collection, and reporting. A community care hub has trusted relationships with and understands the capacities of local community-based and healthcare organizations and fosters cross-sector collaborations that practice community governance with authentic local voices. For more on community care hubs, see Community Care Hubs: Making Social Care Happen.

Across the healthcare and social care landscapes, there is common recognition of the importance of addressing HRSNs, such as food insecurity, housing instability, and lack of transportation, and the role that social inequality plays in health disparities. To better align social care delivery with healthcare delivery and payment, health plans and systems are partnering with community-based organizations (CBOs) to coordinate and deliver whole-person care that address HRSNs. Recent trends indicate a growing number of health plans contracting with CBOs, particularly through CCHs and the community care networks they organize. The evolution of the CCH reflects an administrative approach aimed at achieving economies of scale and offering a broad range of services over a larger geography than provided by a single CBO. The CCH also provides an efficient means of creating advanced financial, technical, and operational infrastructure required by healthcare partners on behalf of multiple agencies in an organized network delivery model. This has the benefit of ‘leveling the playing field’ to enable smaller CBOs with close ties to their local community but lacking organizational capacity and resources to work directly with healthcare organizations to participate in contracting opportunities.

There are many challenges in this work, including the differences in language, culture, practices, and regulations between the healthcare and the social care sectors. Community care hubs are an efficient solution to bridge these gaps and connect healthcare organizations with social care CBOs to better align, coordinate, and deliver person-centered services to historically and/or currently marginalized communities and populations.
Intent of this Report

This document seeks to define the capacities of hubs across the country. We recognize that hubs evolve and mature over time, and that the functions described below correspond to those of a mature hub that has been operating for multiple years. Many organizations are currently operating as hubs while building their capacity to fully meet these functions. This document is designed to serve as a vision and could inform a roadmap towards a model CCH. The document can be used to guide an assessment of gaps, strengths, and areas for growth. It can also be used to communicate to stakeholders the benefits that hubs bring to a community.

Additionally, it is not expected that hubs will serve all these functions alone. In some communities, certain functions are already performed by the CBOs within the community care network or other partners, and hubs would be needlessly duplicating efforts to also complete them. Instead of carrying the responsibility for implementation, these are the functions that the hub is responsible for ensuring happen.

This document is the product of the Partnership to Align Social Care (Partnership), a national learning and action network consisting of leaders from health plans, health systems, CBOs, CCHs, national associations, and government. The purpose of the Partnership is to advance equitable health and social care ecosystems through a co-design process across sectors. This resource was developed by the Partnership’s community care hub working group, which includes leaders from multiple existing hubs as well as other healthcare, community, and government stakeholders. The working group reviewed existing frameworks and literature as well as the experience of hubs that are currently operating to produce the following functions. The requirements were also tested with a diverse group of active hubs to ensure that they accurately reflect the requirements and capacities of hubs. This document is the product of thorough research and testing, yet it is still a draft. As our understanding of CCHS and their role continues to grow and evolve, this document will be updated.

In this document, the “functions” are the roles and responsibilities of a CCH. They group into six domains, which are:

1. Leadership and governance;
2. Strategic business development;
3. Network recruitment, engagement, and support;
4. Contract administration and compliance;
5. Operations; and
6. Information technology and security.
Summary of CCH Domains

<table>
<thead>
<tr>
<th>Domain</th>
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<td>1. Leadership and governance</td>
<td>The community care hub’s mission, vision, and values incorporate the goal of operating a network to address social needs through partnerships and contracts with healthcare. The hub’s leadership, governance group, committees, and other structures support this goal and include key stakeholders, including members of the network and the community. This domain outlines the ways in which the organization’s legal structure enables it to operate a community care network and incorporates the needs and goals of the relevant stakeholders.</td>
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<td>2. Strategic business development</td>
<td>Community care hubs use strategic and business planning processes to make key decisions regarding business development, partnering, contracting, and meeting social needs. This domain outlines the requisite elements of planning, implementation, and monitoring to achieve the goal of expanding healthcare partnerships.</td>
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<tr>
<td>3. Network recruitment, engagement, and support</td>
<td>The community care hub is responsible for recruiting community care network members and building the network’s capacity to efficiently, effectively, and equitably deliver services to meet the social needs of the community. This domain outlines recruitment, engagement, monitoring, and retention of members, as well as quality improvement, training of CBO staff, leadership support and development, and other capacity-building efforts on behalf of the CBO members.</td>
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<td>4. Contract administration and compliance</td>
<td>Once community care hubs have contracts, they must fulfill regulatory and contractual requirements set with healthcare partners and administer payment to the network members. This domain outlines the management of the business fiscal cycle, responsibilities of administering contracts, managing risk, implementing quality improvements, and managing relationships with healthcare entities.</td>
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<tr>
<td>5. Operations</td>
<td>Community care hubs create standard processes and workflows that enable an efficient, effective, and equitable referral and service delivery system and the reporting and analysis of these activities. This domain outlines the functions necessary to manage the flow of data, individual referrals, and services between the contracting healthcare entity, hub, and network, as well as continuous quality improvement efforts.</td>
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<td>6. Information technology and security</td>
<td>Community care hubs maintain a cybersecurity and risk framework which keeps them in regulatory compliance with healthcare standards and deploy IT tools to facilitate data sharing with healthcare and CBO partners. This domain outlines the functions necessary to share data between organizations securely and efficiently.</td>
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Community Care Hub Domains and Functions

1 Leadership and governance
The community care hub’s mission, vision, and values incorporate the goal of operating a network to address social needs through partnerships and contracts with healthcare. The hub’s leadership, governance group, committees, and other structures support this goal and include key stakeholders, including members of the network and the community. This domain outlines the ways in which the organization’s legal structure enables it to operate a community care network and incorporates the needs and goals of the relevant stakeholders.

1.1. Hub’s structure, culture, and practices embrace serving a network of CBOs and doing business with healthcare entities.
- The hub’s mission and vision reflect the goals of serving a network of CBOs and doing business with healthcare entities.
- The hub’s governance structure and legal and business capacity to contract on behalf of the community care network is formally established by the hub’s articles of incorporation, bylaws, or board resolution.
- The hub leadership, including advisory council, executive staff, and board, effectively communicates and partners with both network CBOs and healthcare entities and can bridge the sectors.

1.2. Hub’s governance structure provides routine opportunities for key stakeholders to influence strategy and planning
- Network member CBOs are involved in the hub’s governance.
- Community stakeholders, including people with lived experience, community residents, and/or consumers, are involved in the hub’s governance.

1 A community care hub can be an independent organization with its own board and mission or an initiative of a larger organization. If the hub is part of a larger organization, the organization's board, mission, and vision will not be designed exclusively around the hub’s goals and operations. However, they should be consistent with the goal of operating a hub. Moreover, the governance structure requirement is flexible, but there should be clear documentation that oversight of the hub is a significant component of the work of the board, a committee, or another formal structure.
Strategic business development

Community care hubs use strategic and business planning processes to make key decisions regarding business development, partnering, contracting, and meeting social needs. This domain outlines the requisite elements of planning, implementation, and monitoring to achieve the goal of expanding healthcare partnerships.

2.1. Hub conducts strategic planning to guide the future direction of the hub with input from key external stakeholders representing network providers, healthcare partners, and consumers of services.

- The hub develops or updates a strategic plan every 3-5 years.
- The strategic planning process includes input from key external stakeholders including healthcare entities, community stakeholders, consumers of services and other people with lived experience, as well as existing and potential network providers of diverse sizes and serving a wide range of clients.
- The hub communicates the main areas of focus of the strategic plan to network member CBOs and makes the information available to community residents and service populations.

2.2. Hub executes its strategic plan.

- The hub implements its strategic plan (using short-term and long-term action plans) that includes gap identification, performance measures, timeline, workforce support, and capitalization strategy, as well as recognizes and responds to changes in external circumstances.
- The hub monitors progress toward achieving strategic goals, as well as opportunities for adjusting tactics to reach goals, based on collected data.
- The hub continuously evaluates capacity, plans for operational continuity, demonstrates contingency planning, and other tactics for maintaining service in a shifting environment.

2.3. Hub systematically and continuously assesses the market to identify opportunities to expand its service offerings and business and partnership opportunities.

- The hub conducts environmental scans and market research to identify current state, opportunities, potential partners, and ongoing trends, including tracking healthcare payment changes and which healthcare entities and providers in the area are participating in federal and state programs that incentivize and/or encourage cross-sector partnerships.
- The hub conducts a coordinated process to seek additional resources to address gaps between contract requirements, community needs, and available resources.
- The hub fosters strategic relationships to influence, encourage, and support state and federal policies and programs that are incentivizing or encouraging cross-sector partnerships and integration.
2.4. **Hub positions its services in the market and develops new and expanded contractual relationships to expand populations served and services offered.**

- The hub develops its brand, identity, and value proposition to attract new and retain and expand existing healthcare partners.
- The hub has a process in place to generate new business leads and initiate dialogue with potential partners in the healthcare sector.

2.5. **Hub has a reliable multi-year finance strategy that is designed for sustainability.**

- The hub has a business plan including capitalization strategy for infrastructure support.
- The hub maintains a pricing methodology that reflects the requirements of network members as well as hub infrastructure support.
- The hub maintains a development strategy that identifies potential funding support for the hub including public and private contracts and grants.

### Network recruitment, engagement, and support

The community care hub is responsible for recruiting community care network members and building the network’s capacity to efficiently, effectively, and equitably deliver services to meet the social needs of the community. This domain outlines recruitment, engagement, monitoring, and retention of members, as well as quality improvement, training of CBO staff, leadership support and development, and other capacity-building efforts on behalf of the CBO members.

3.1. **Hub engages, recruits, and organizes a contracted network of CBOs into a social care delivery system.**

- The hub defines the geographic region served and the priority population(s) of the network.
- The hub develops and communicates a value proposition for existing and prospective network members.
- The hub has a systematized effort to identify, attract, and recruit network service providers, including enhanced efforts to recruit CBOs serving and/or led by historically and/or currently marginalized communities and/or CBOs with smaller operating budgets.
- The hub has a standardized process to assess prospective member CBO capability and alignment with the network.
- The hub conducts a standardized and comprehensive onboarding of new member CBOs.
- The hub maintains written contracts with each CBO in the network.
- The hub conducts regular and productive engagement with member CBOs through communications, meetings, workgroups, and satisfaction surveys.
3.2. **Hub ensures that the community care network reflects local priorities and community with an emphasis on access and equity.**

- The hub supports CBO members to attract, recruit, and retain a diverse workforce that reflects the community and populations served and demonstrates cultural humility.
- The hub ensures that products, services, and materials are culturally relevant and responsive as well as accessible to community residents and consumers in partnership with people with lived experience and consumers of services, including those with limited English proficiency, and comply with ADA regulations and standards.

3.3. **Hub has a standard process for selecting and onboarding CBOs to specific contracts.**

- The hub has a written manual of policies, procedures, and standards of conduct focused on an open, fair, and transparent referral process.
- The hub has a transparent, equitable, and public process for assigning work to CBOs.
- The hub conducts a standardized and comprehensive onboarding of network members to contracts.

3.4. **Hub conducts quality control and improvement activities of each CBO in the network through data collection and auditing, capacity building, and retention efforts.**

- The hub sets an essential set of processes and procedures to regularly monitor the array of individual network partners and their services, data, capabilities, IT, performance, financials, client records, policies and procedures, and staffing.
- The hub builds CBO capacity by providing periodic training and technical assistance on a wide range of topics related to partnering with healthcare organizations.
- The hub has a process for retaining high-performing community care network members, as well as a process for implementing corrective action plans as needed to address identified issues and gaps.
- The hub has written policies and procedures for managing contracted CBO ideas and complaints with board or leadership oversight.

3.5. **Hub conducts quality assessment and improvement of the entire community care network through assessing, identifying, and monitoring the needs and challenges of the service provider CBOs and priority population(s).**

- The hub continuously assesses the network for adequate capacity to deliver needed services by geography and populations.
- The hub has established quality and performance metrics, a system for monitoring performance, and quality assurance tools and processes for periodic evaluation of the community care network.
The hub undergoes a process to improve, repurpose, and/or add new services, programs, and initiatives to create the capacity required to meet healthcare partnership opportunities, build CBO capacity, and meet community needs.

The hub routinely solicits feedback from CBOs on their experience of participating in the hub, the experience of clients, and their needs for support from the hub.

The hub leverages existing community assessments and, when needed, collaborates on or conducts periodic surveys of community needs and strengths, ensuring representation of historically and currently underserved and/or excluded populations.

4 Contract administration and compliance

Once community care hubs have contracts, they must fulfill regulatory and contractual requirements set with healthcare partners and administer payment to the network members. This domain outlines the management of the business fiscal cycle, responsibilities of administering contracts, managing risk, implementing quality improvements, and managing relationships with healthcare entities.

4.1. Hub possesses or has access to the risk management, legal, and business experience and expertise needed to evaluate, develop, modify, and execute contracts with healthcare entities and CBOs.

- The hub practices financial risk management to limit and manage the hub’s financial exposure to costly or inefficient scenarios in healthcare contracting work.
- The hub negotiates contract fees, terms, and conditions that further the mission and business interests of the hub and the network members.
- The hub has the capacity to perform routine contract review and negotiation with healthcare entities and CBOs.

4.2. Hub meets all minimum healthcare sector compliance requirements.

- The hub maintains a formal compliance program consistent with the requirements of the HHS Office of the Inspector General.
- The hub implements written policies, procedures, and standards of conduct; designates a compliance officer and committee; conducts compliance training; develops effective lines of compliance-related communications; audits activities involving confidential health information; enforces standards through guidelines; and corrects violations.
- The hub has a written manual for policies, procedures, and standards of conduct focused on HIPAA compliance, service documentation, and non-duplication of services.
4.3. Hub performs account and relationship management with existing contractual healthcare partners to meet their needs, respond to complaints, and retain and grow contracts.

- The hub routinely engages with healthcare partners to understand their priorities, experience with the contract, challenges, and future strategy.
- The hub conducts meetings with contract partners to manage contract deliverables, performance, and risks.

5. Operations

Community care hubs create standard processes and workflows that enable an efficient, effective, and equitable referral and service delivery system and the reporting and analysis of these activities. This domain outlines the functions necessary to manage the flow of data, individual referrals, and services between the contracting healthcare entity, hub, and community care network, as well as continuous quality improvement efforts.

5.1. Hub co-designs and maintains standard workflows for delivery of services to individuals and families.

- The hub documents workflows that demonstrate person-centered co-design with community care network members and people with lived experience including screening, navigation, and service delivery guided by individuals’ stated values and preferences.
- The hub establishes a standard so that all individuals served have a completed and updated assessment that all CBOs providing services for the person have access to a process to ensure informed consent.
- The hub has a centralized system for reporting claims of service using relevant coding conventions (e.g., Z-codes).

5.2. Hub demonstrates capacity for full fiscal management and accountability.

- The hub has the capability to operate an accounting system that strictly adheres to the Generally Accepted Accounting Principles (GAAP).
- The hub demonstrates a process for managing cash flow with accounts payable and accounts receivable.
- The hub demonstrates management capacity and a standard process to meet requirements related to claims, billing, and reporting.
- The hub demonstrates the capacity to facilitate blending and braiding of funds by service providers, including ability to code and track both effort and revenue by source.
- The hub undergoes an annual certified independent financial audit.
- The hub possesses resources needed to ensure sustainability.
5.3. **Hub routinely assesses or evaluates the performance of its programs and services and responds accordingly.**

- The hub identifies agreed upon performance measures, including equity measures, with healthcare and CBO partners.
- The hub maintains an effective data-driven continuous quality improvement plan based on outcome and quality data to improve hub performance.
- The hub collects feedback from healthcare partners, network CBOs, and individuals and communities being served on the effectiveness of services, improved engagement, and health and well-being outcomes to inform quality improvements.

5.4. **Hub develops a learning and development strategy for the hub’s workforce to align with the strategy and goals.**

- The hub maintains a workforce culture that prioritizes equity, accountability, responsiveness, customer service, and continuous quality improvement.
- The hub completes at least annual self-appraisal and evaluation of hub staff, has a documented process to assess competence and efficacy of staff and a compliance standard for operations, and publishes an updated organizational chart.

6 **Information technology and data security**

Community care hubs maintain a cybersecurity and risk framework which keeps them in regulatory compliance with healthcare standards, and deploy IT tools to facilitate data sharing with healthcare and CBO partners. This domain outlines the functions necessary to share data between organizations securely and efficiently.

6.1. **Hub maintains policies, practices, procedures, and a minimum set of IT capabilities to ensure data security and relevant regulatory compliance.**

- The hub maintains a formal data security program that includes industry-standard technical, administrative, and physical controls capable of preventing, detecting, and correcting cyber security incidents.
- The hub demonstrates the data security infrastructure necessary to be trusted by healthcare partners to receive and report PHI and regularly passes healthcare data security audits with no or minimal corrections required.
- The hub conducts data security assessments of its members and provides capacity-building support to ensure member compliance.
6.2. Hub maintains a functional set of IT tools to successfully deliver services in partnership with healthcare entities.

- The hub maintains a secure, centralized, scalable, and automated information system built on IT platform(s) that supports the network processes, including referrals, service delivery, reporting of services and outcomes, data sharing (through health information exchanges or community information exchanges where available), and evaluation and process improvement.
- The hub’s health sector billing and network service provider payment process seamlessly and accurately connects the network’s billable activities to claims portals for payment and is integrated into the hub’s enterprise information system.
- The hub regularly reviews its IT capabilities and needs and develops plans to upgrade to more effective and efficient IT systems as needed.
## Glossary

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<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td>Blending of funds</td>
<td>Blended funding refers to the alignment of resources to improve impact and efficiency for a specific purpose. It occurs when funds come from various entities and origins, and are combined, or &quot;comingled,&quot; for one purpose without continuing to differentiate or track individual sources.</td>
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<tr>
<td>Braided funding</td>
<td>Braided funding refers to the alignment of resources to improve impact and efficiency for a specific purpose. It occurs when funds come from various entities and origins, and while utilized for the same overall program, are expensed, tracked, and reported separately.</td>
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<td>Community care hub</td>
<td>A community-focused entity that organizes and supports a network of community-based organizations providing services to address health-related social needs. A community care hub centralizes administrative functions and operational infrastructure, including, but not limited to, contracting with healthcare organizations, payment operations, management of referrals, service delivery fidelity and compliance, technology, information security, data collection, and reporting. A community care hub has trusted relationships with and understands the capacities of local community-based and healthcare organizations and fosters cross-sector collaborations that practice community governance with authentic local voices.</td>
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<td>Community care network</td>
<td>A group of community-based organizations organized by a community care hub to deliver services to the community.</td>
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<tr>
<td>Domain</td>
<td>The major categories of roles and responsibilities that a community care hub must develop.</td>
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<tr>
<td>Functions</td>
<td>The roles and responsibilities of a community care hub.</td>
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<td>(Health related) social needs</td>
<td>Individuals’ non-medical, social, or economic circumstances that hinder their ability to stay healthy and/or recover from illness.</td>
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<tr>
<td>Healthcare sector compliance requirements</td>
<td>Policies, practices, and procedures to ensure that healthcare entities and their contracted partners comply with all legal, professional, and ethical standards for healthcare, including those governing the collection, storage, and sharing of personal health information, ensuring patient quality and safety, and the prevention of fraud, waste, and abuse.</td>
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About the Authors

The Partnership to Align Social Care ("Partnership") is a national learning and action network whose purpose is to advance the alignment of healthcare and social care service delivery to individuals through contracted partnerships between healthcare entities and social care providers, particularly community-based organizations organized into networks led by community care hubs. The Partnership consists of leaders from across the healthcare and social care sectors, including health plans, health systems, providers, community-based organizations, national associations, and government. The Partnership has constituted a cross-sector planning committee and working groups in the areas of contracting, billing and payment, and community care hubs to co-design standards, resources, and tools to accelerate healthcare - social care collaborations in practice.

The Camden Coalition is a multidisciplinary nonprofit working to improve care for people with complex health and social needs in Camden, NJ, and across the country. The Camden Coalition works to advance the field of complex care by implementing person-centered programs and piloting new models that address chronic illness and social barriers to health and well-being. Supported by a robust data infrastructure, cross-sector convening, and shared learning, our community-based programs deliver better care to the most vulnerable individuals in Camden and regionally. Through our National Center for Complex Health and Social Needs (National Center), an initiative of the Camden Coalition, we connect complex care practitioners with each other and support the field with tools and resources that move complex care forward.

This document represents the product of intentional co-design and compromise on the part of the many stakeholders participating in the Partnership to Align Social Care.