Contracting to Align Health and Social Care Ecosystems: A Webinar Series Sharing Leading Practices

Defining Core Activities: Developing an Effective Scope of Work For Contracted Partners

November 14, 2023 | Noon-1:00 p.m. ET
This webinar is being recorded. The recording, slides, and follow-up material will be shared with all registrants.

Please use the Q&A tab at the bottom of your screen and we’ll try address as many questions as possible at the end of the presentation.

Closed captions are provided for this session, can also click “Show Captions” to display automated captions.
Mission:
To enable successful partnerships and contracts between health care and community care networks to create efficient and sustainable ecosystems needed to provide individuals with holistic, person-centered social care that demonstrates cultural humility.

Vision:
A sustainably resourced, community-centered social care delivery system that is inclusive of all populations and empowered by shared governance and financing, multistakeholder accountability, and federal/state/local policy levers.
Implementing Co-Designed Social Care Delivery System Changes

1. Streamline Contracting
2. Facilitate Expanded Social Care Billing
3. Promote Community Care Hubs
• Increased attention on social drivers of health (SDOH)

• Need to ensure capacity exists within communities to effectively partner with health care to address health-related social needs (HRSNs), respond to increase in referral volume

• Community-based organizations (CBOs) are increasingly contracting with health care organizations to address health-related social needs
Contracting Workgroup Toolkit

Resource Guide
A Health Plan’s Guide to Developing CBO Contract Scopes of Work

Introduction
Health care organizations are increasingly contracting with community-based organizations (CBOs) and Community Care Hubs (CCHs) to address health-related social needs and provide person-centered services. CBOs are valuable strategic partners to health care organizations because of their community knowledge, the trust they have earned and their long history of delivering critical social care in people’s homes and communities.

Many CBO contracts are structured as vendor contracts for value-added services, care coordination, care navigation or community-based care management. However, as social care and other community-level services become covered benefits or formally approved as in lieu of services (ILOS) under Medicaid or Medicare, the amount of the payment and the payment methodology need to be considered. CBOs should keep in mind that there is no single “best” payment methodology that is appropriate in all situations.
Partnerships with Community-based Organizations: Opportunities for Health Plans to Create Value

Making the Case
5 Reasons Health Plans Should Work with CBOs and Community Care Networks

- Powerful Innovation Partners
- Trust with Members
- Efficiency in Coverage
- Return on Investment
- Securing Public Contracts

Special Payment Considerations for CBOs: *Addresses areas that CBOs/CCHs may differ from the healthcare sector*

- Differences in *billing/coding standards*
- Inclusion in *Medical Loss* can increase administrative burden
- Adaptation of non-traditional *contract payment structure*
- Potentially limited *risk tolerance*
- Allowing for *evolution in payment methodology* over time

Payment Models, Use Cases, and Examples: *Outlines the types, use cases, and real-world examples*

- **Four Major Payment Models**
  1. Fixed Price Contract
  2. Fee-for-Service
  3. Bundled Payment
  4. Capitation

- **Pay for Performance**
  1. Shared Savings
  2. Shared Losses
  3. Outcome Based Payment
  4. Performance Bonuses
Capitation and Shared Loss Example

In Virginia, BayAging, a community care hub, contracted with a Medicaid managed care plan to provide fully delegated care management for Medicaid enrollees. BayAging is paid on a PMPM basis. The parties also agreed to a value-based arrangement in which the CCH would share penalties if they failed to achieve state-required metrics and compliance elements. The penalties, which would be imposed by the state Medicaid agency, started at $1,000 for the first occurrence and increased in 5 percent increments for subsequent occurrences.

BayAging was responsible for achieving state-directed measures, including care plan development, documentation of discussion of person-centered care goals, reduction in all-cause hospital readmissions and vaccine administration.

When to use:
Capitation may be appropriate when the CBO

Payment Model Summary

<table>
<thead>
<tr>
<th>Feature</th>
<th>Fixed price contract</th>
<th>Fee-for-service</th>
<th>Bundled payment</th>
<th>Capitation</th>
<th>Pay for performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial risk to CBO</td>
<td>Low</td>
<td>Low</td>
<td>Medium</td>
<td>High</td>
<td>Medium</td>
</tr>
<tr>
<td>Financial risk to payer</td>
<td>Low</td>
<td>High</td>
<td>Medium</td>
<td>Low</td>
<td>Medium</td>
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<tr>
<td>Complexity for parties to establish price</td>
<td>Low-Medium</td>
<td>Medium</td>
<td>High</td>
<td>High</td>
<td>Medium-High</td>
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<tr>
<td>Cost/complexity of billing</td>
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<td>High</td>
<td>Medium</td>
<td>Low</td>
<td>Medium-High</td>
</tr>
<tr>
<td>Incentive for CBO to maximize volume</td>
<td>Low</td>
<td>High</td>
<td>Medium</td>
<td>Low</td>
<td>Low</td>
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<tr>
<td>Incentive for efficiency</td>
<td>Medium</td>
<td>Low</td>
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<td>High</td>
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<tr>
<td>Incentive for quality</td>
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Developing the SOW
Outlines recommendations for successfully negotiating core activities covered in contracts between healthcare-CBO/CCH contracts

**WHO**: population definition and project staffing

**WHAT**: service definition, timeline and workflows, prelaunch and evaluation

**HOW**: coordination and collaboration, data sharing and documentation, flexibility

SOW Checklist
Identifies core activities to be negotiated between healthcare-CBO/CCH contracts

Operationalizing Contracts: How Payers Can Improve Collaboration with Community-Based Organizations

Provides healthcare partners and payers methods for optimizing their relationship in five contracting areas:

- Establishing a shared vision
- Scoping
- Pre-launch activities
- Implementation and continuous improvement
- Contract renewal
Panelists

Kerry Tracey, Director of Social Programs, United Healthcare

Kathy Vesley, President & CEO, Bay Aging

William S. Massey, President & CEO, Peninsula Agency on Aging
Community Care Hub

BUSINESS MODEL

https://vaacares.com

Services addressing Health-Related Social Needs:
- Care transition support
- Care coordination
- Chronic disease self-management programs
- Health screenings and assessments
- Behavioral health supports
- Caregiver supports
- Veteran Directed Care
- Medication counseling
- Transportation assistance
- Housing assistance
- Insurance counseling
- Home care
- Falls prevention
- Meals & more

Bay Aging was selected by the Administration for Community Living (ACL) in 2021 to promote health equity and expand the alignment of health and social care by strengthening hubs’ ability to implement the federal No Wrong Door System and centralize contracting between health entities and community-based organizations. Bay Aging offers a free Learning Collaborative for organizations interested in becoming part of Virginia’s Community Care Hub network.
Operationalizing contracts: Improving contracting implementation and collaboration

Contracting to Align Health and Social Care Ecosystems:
A Webinar Series Sharing Leading Practices
Hosted by the Partnership to Align Social Care

December 12, 2023 | 12-1 pm

Register now: www.partnership2asc.org/contractingwebinarseries2023

Hear from speakers

Natasha Dravid
Senior Director, Camden Coalition

Stephanie Orlando
COO, Western NY Independent Living Center, Inc.

Nikki Kmicinski
Executive Director, Western New York Integrated Care Collaborative, Inc.

Dawn Odrzywolski
VP Medicare Programs, Independent Health
How to Get Involved in the Partnership...

- Sign up for our email list: [https://www.partnership2asc.org/sign-up/](https://www.partnership2asc.org/sign-up/)

- Follow the Partnership on social media: [www.linkedin.com/company/partnership-to-align-social-care](www.linkedin.com/company/partnership-to-align-social-care) [@partnership2asc](https://twitter.com/partnership2asc)

- Reach out directly to:
  - Support the Partnership
  - Ask about getting involved in leadership/workgroup activities
  - Share your expertise/experiences
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A National Learning & Action Network

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