

September 23, 2022

Finger Lakes Region Community Forum NYS DOH 1115 Waiver Amendment Proposal NY Health Equity Reform Waiver (NYHER)





Goals for Today's Forum



- 1) Welcome & Opening Remarks
- 2) 1115 NYHER Waiver: A Quick Refresher
- 3) The Final Proposal What's Changed?
- 4) What Happens Next?
- 5) Regional Preparation What Can You Do?
- 6) Open Discussion / Q & A



Welcome & Opening Remarks

Wade Norwood, Common Ground Health



1115 Waiver: A Quick Refresher

Reducing health disparities, advancing health equity, and supporting the delivery of social care.

New York Health Equity Reform (NYHER) Waiver



- Address Health Disparities
 Exacerbated by the COVID-19
- Fully integrate social care and health care into the fabric of the NYS Medicaid program
- > \$13.52B over 5 Years
- Incentive Dollars
- Potential Start Date 1/1/23

1115 Waiver Amendment Proposal Framework

Strategy #1

Building a more resilient, flexible, and integrated delivery system that reduces health disparities, advances health equity, and supports the delivery of social care

Strategy #2

Developing and **strengthening Transitional housing** services and alternatives for the homeless and long-term institutional populations

Strategy #3

Redesign and strengthen system capabilities to improve quality, advance health equity, and address workforce shortages

Strategy #4

Creating statewide digital health and telehealth infrastructure



Our Region's Feedback to NYS & Recommendations (5/20/22 Letter)

Community-Driven, Flexible Implementation

Leverage Existing Assets & Infrastructure

Geographic Regions

Support for Community-based Organizations

Transparent & Flexible Measurement

Children Family & Educational Sector

Special Populations

Focus on Prevention

New York State Department of Health Office of Health Insurance Programs (OHIP) Waiver Management Unit 99 Washington Ave. Suite 1208 Albany, NY 12210

May 20, 2022

Dear OHIP Waiver Management Unit:

We, the undersigned, respectfully submit the following testimony to the New York State Department of Health's ("Department") request for public comment in regard to the draft Strategic Health Equity Reform Payment Arrangements: Making Targeted, Evidence-Based Investments to Address the Health Disparities Exacerbated by the COVID-19 Pandemic proposal ("draft proposal").

Most Frequent 1115 Health Equity Waiver Amendment Public Comment Themes

In addition to overwhelming support for the waiver amendment, the top themes of feedback included:

Criminal Justice

Behavioral Health SMI/SUD

Disability Population Funding

COVID Unwind Pool

I/DD Health Equity

Data Workforce VBP

HEROs and SDHNs

Telehealth
Child and Maternal Health
CBOs General
Primary Care

Housing

July 2022



Underscores Advancing Health Equity as the Core Goal

- Title Change: NY Heath Equity Reform Waiver
- Goal: Reduce health disparities, advance health equity, and support the delivery of social care
- **Defines Equity** "the idea that everyone has a fair and just opportunity to be as healthy as possible, which requires removing obstacles to health such as poverty discrimination and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments and health care." Robert Wood Johnson

Clarifies Inclusion of Key Groups & Providers in HERO Composition

- Children & Families with complex needs
- Tribal Nations
- Consumers with lived experience (including SMI, SUD, physical, intellectual and developmental disabilities)
- Older Adults
- Illustrative list only

Populations of Focus for HERO and SDHN Targeted Interventions

"...regional plan must include a needs assessment of the key communities in the region, including, but not limited to, underserved communities of color; older adult populations; persons with physical, intellectual and developmental disabilities; persons living with SUD; persons living with SMI; pregnant persons; children, including those with SED, and their caregivers; criminal justice-involved populations; and persons experiencing homelessness."

Broadens Types of Interventions to Extend Beyond Evidence-based Practices

- NYS acknowledges that there may be there may be instances where an intervention based on Promising Practices (or "Practice-Based Evidence") versus evidence-based could be appropriate.
- Will allow DOH to approve additional interventions on a pilot basis within the regions.

Adds Focus on Prevention

 Prevention, earlier intervention, and the potential impact of adverse childhood experiences and protective factors across the age spectrum

Criminal Justice Involved

 Expanded health conditions for criminal justice involved populations to qualify for pre-release services

<u>Prioritizes Additional Funding for Social Determinant of Health Networks</u> (SDHNs), CBOs, and Networks

- VBP incentive pool will use a fee schedule to pay CBOs
- More funding allocated to SDHNs to support essential infrastructure / capacity building need for CBOs
- CBOs that cross geographic areas will not be limited to only one SDHN

Example Social Care Benefits Reimbursed under Waivers

Service Name	Unit Of Service/Payment	Rate or Cap
Fruit and Vegetable	Cost-Based	Up to \$210 per month ⁵
Prescription	Reimbursement Up	
	to A Cap	
Healthy Food Box (For	One food box	• Small box: \$89.29
Pick-Up)		• Large box: \$142.86

Reimbursement for	Cost-Based	Up to \$102 per month
Health-Related Public	Reimbursement Up	
Transportation	to A Cap	
Reimbursement for	Cost-Based	Up to \$267 per month ⁶
Health-Related Private	Reimbursement Up	
Transportation	to A Cap	

Housing Navigation, Support and Sustaining	PMPM	\$400.26	(Advanced Model)	
Services				

Violence Intervention	PMPM	\$168.94	(Advanced Model)
Services			

North Carolina Healthy
Opportunities Pilots
referenced in NYS's
Waiver Proposal

Excerpts from Fee Schedule

Source: https://www.ncdhhs.gov/media/14071/open



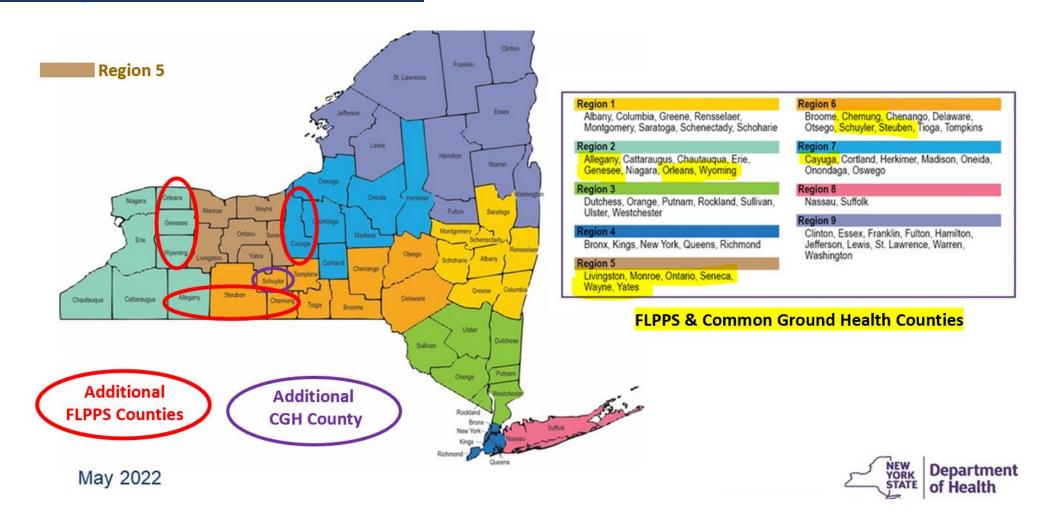
Value Based Payment

- Quality measures will include stratification by race and ethnicity, and optional measures for sub-populations
- More specific examples of VBP for BH and FQHCs
- Advanced VBP Global Payment Models more refined
- More detail on payment bundles

NYS will NOT select social care/closed loop referral IT Platform for use across State

- State will leverage SHIN-NY (Statewide RHIO platform) for referral and social care need data for the statewide data repository and sharing across entities
- Platforms communities are currently using for screening and referral will be qualified and approved by State for interoperability
- NYS will select social needs assessment tool for use among all participating entities ("Uniform Social Needs Assessment")

Geographic Regions Not Yet Finalized





Regional Preparation

Our Region is Very Well Positioned to Achieve Waiver Transformational Goals



And...achieving those goals will require:

- Meaningful participation of community-based organizations in providing and scaling innovative, culturally responsive services that eliminate disparities in health outcomes for key populations
- Meaningful engagement of MCOs
- Ongoing evaluation and other mechanisms to ensure accountability for results
- Leveraging and building on existing infrastructure, community-wide initiatives, and partnerships

What can you do now?



Networks

- Determine where you fit in and align with partners
- What networks are you part of?
- Who are your partners and what are your referral patterns?



Health Equity & Social Care

- How does your organization support health equity for patients/clients?
- How do you conduct SDOH screening?
- What services do you provide that help achieve the Waiver goals?
- What new partnerships might you need to develop?



Workforce

- What are the barriers to recruiting and retaining your community-based workforce?
- What are the regulatory barriers that impede your workforce?
- What are your training/pipeline/recruitment challenges?

What can you do now?



Stay Informed

- Read summaries of the Waiver
- Participate in your network's Waiver discussions and <u>ask questions</u>
- Continue to participate in Community Forums
- Begin to educate your Board

Understand Your Value

- What data do you collect and how do you use to inform your work?
- How do you measure the impact/value of your services overall and by the populations you serve?
- What is your full cost structure for services (including essential administrative costs)?
- How do the services you provide keep people-in the community and improve health outcomes?
- Understand how potential VBP and/or payment mechanisms could apply to your network and your services





What Happens Next?

Waiver Timeline

NYS
Submitted
Final Proposal
to CMS

September 2

CMS Deemed
Proposal
Complete

September 15

Federal
Comment
Period

to
October 19

NYS Public
Forum on
Overall 1115
Waiver

September 28

(Written comments through October 10)

NYS-CMS
Contract
Negotiations

October-November NYS Target
Start Date

January 1

Our Region's Next Steps

New Finger Lakes Region

Site with Waiver

Materials and

Information

September 26

Continued Advocacy
with NYS on Geographic
Region Definition for
Finger Lakes Region

Next Finger Lakes Region
Community Forum

Early December

(Earlier if new information is available)



Open Discussion & Q&A

Please continue to use chat for comments/questions.



Thank You!







Reference Slides

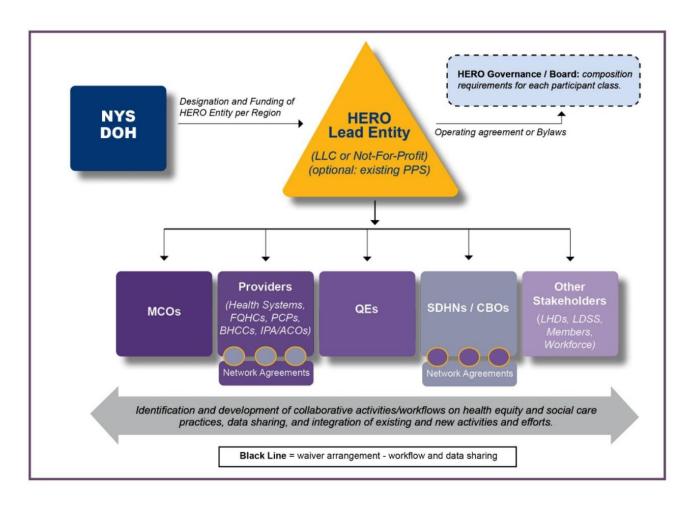




Structures that Support the Waiver: What you should know

HERO - Health Equity Regional Organizations

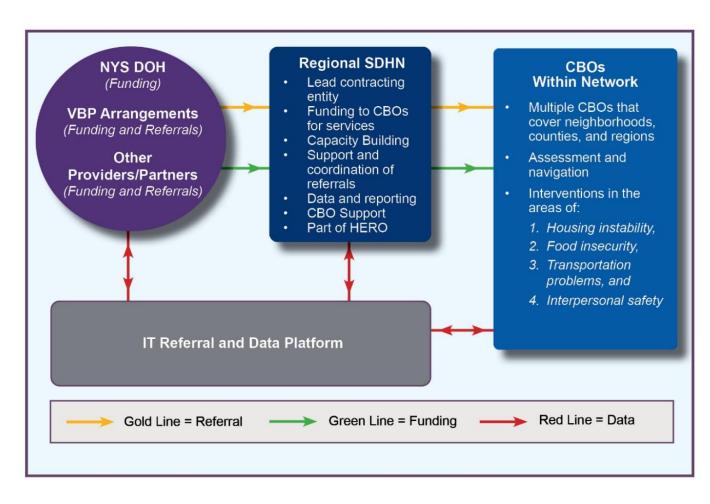
- Overall governance w/inclusive structure
- Create comprehensive regional plan and set priorities for health equity
- Conduct Uniform Social Needs Assessment as determined by NYS
- Select health equity measures
- Build consensus around VBP approach and intervention design
- Centralize data collection and aggregation in partnership with RHIO
- Advance VBP models



Structures that Support the Waiver: What you should know

SDHN - Social Determinant of Health Networks

- Organize CBOs to deliver interventions to achieve equity
- Lead contracting entity and funding conduit for CBO services
- Provide support to CBOs to build the capacity needed deliver and scale services and meet contract requirements
- Coordinate a referral network
- Integrate social care service providers with clinical provider networks
- Screen Medicaid enrollees for social care issues and make referrals
- Data and reporting
- Part of HERO



NYS Allocation of Waiver Funds

