Flora M. Castillo, CHIE President, Pivot Strategies, LLC.

Community Transportation Association of America

Achieving the Triple Aim

- Improving Quality of Care
- Improving Health Care
 Utilization Patterns
- Improving Health Outcomes

- Improve access to preventive care
- Improve access to social services
- Improve the overall quality of life
- Lower healthcare cost trends
- Close gaps in care
- Improve the effectiveness of inpatients and ambulatory care
- Achieve population health outcomes
- Patient and member satisfaction

ACCESS TO RELIABLE TRANSPORTATION IS CENTRAL TO MEET PAYERS
AND PROVIDERS' GOALS

What drives health outcomes and optimal well being?

Psychosocial factors and personal choices account for 80% of health outcomes

Figure 1 Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment Income Expenses Debt Medical bills Support	Housing Transportation Safety Parks Playgrounds Walkability Zip code /	Literacy Language Early childhood education Vocational training Higher education	Hunger Access to healthy options	Social integration Support systems Community engagement Discrimination Stress	Health coverage Provider availability Provider linguistic and cultural competency Quality of care
	geography				

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

KFF HENRYJ KAISER

*Source: World Health Organization, Social Determinants of Health http://www.who.inf/social_determinants/en/

20%
Clinic Care

10% Physical Environmen

40%

Social & Economic Factors

30%

Healthy Behaviors

Impact of unmet health-related social needs and connection to health outcomes

- Nearly twice the rate of depression'
- 60 percent higher prevalence of diabetes'
- More than 50 percent higher prevalence of high cholesterol and elevated hemoglobin A1c, a signal of diabetes'
- More than double the rate of ER visits'
- More than double the rate of no-shows to clinic appointments'
- Unemployment and low income were tied to a higher risk of hospital readmission among patients with heart failure and pneumonia*
- Poor asthma outcomes are often inked to living conditions*
- Diabetes-related hospital readmissions can be tied to food insecurity*
 Source Commonwealth Fund 'Health Leads Study

Thought Leaders Drive Current SDOH Efforts

Healthy People 2020

"Create a social and physical environment that promotes health for all"

American Public Health Association

"Public Health is repositioning itself at the national, state and local levels to focus on social determinants of health"

Grantmakers In Health

"US Health Policy largely ignores the social determinants of health, despite evidence showing that residents of nations that have a higher ratios of spending on social services to spending on healthcare have better health and live longer"

Robert Wood Johnson Foundation

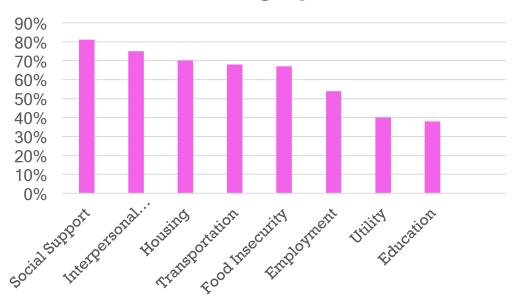
"Focus its work on the culture of health-the multiple factors that can lead to everyone in the US having the opportunity to live a healthier life"

Health Care System

"Medicaid Specific Initiatives- Multi-payer federal and state The Center for Medicare and Medicaid Innovation, Medicaid Delivery System and Payment Reform. Managed care plans, hospitals and

Providers are screening for non-medical needs

Hospital screening by social needs category



Source: Deloitte Center for Health Solutions 2017 Social Determinants of Health Hospital Survey

SDOH Focus will continue in Government Programs

State's delivery system or payment reform initiatives.

Managed Care Quality Initiatives (i.e. pay-for-performance and capitation withholds

Medicare Access and CHIP Reauthorization (MACRA)

Survey Themes for FY 2017 and FY 2018

			Ongoing Trends		What to Watch
	Eli دو ااند	•	ACA Medicaid expansion Initiatives to connect justice- involved individuals to coverage	•	State waivers to impose premiums and restrict eligibility (including work requirements)
	Managed Care	•	MCO carve-ins of complex populations and behavioral health services	•	MCO contracts focused on social determinants and value-based payment
	Lon _b Term Care	•	Expansion of community-based care	•	Focus on housing and direct co workforce shortages
	Provider Rates and Taxes	•	restrictions Continued reliance on provider taxes	•	States Lung MCO rate floors
	Benefits, Pharmacy, and Opioid Strategies	•	Benefit expansions for mental health and substance use Focus on cost controls for pharmacy	•	Growing adoption of CDC prescribing guidelines for opioids Pharmacy benefit management strategies for opioids



Source: https://www.kff.org/medicaid/report/medicaid-moving-ahead-in-uncertain-times-results-from-a-50-state-medicaid-budget-survey-for-state-fiscal-years-2017-and-2018/

Market and
Population
Driven
Partnership
Opportunities
will Continue

Uber's Pilot Program Brings Modern Transportation to Health Care

A new platform from the transportation giant has shown early promise at Mercy Health System in creating a cheaper, patient-centered way to transport patients.

Blue Cross and Blue Shield and Lyft Join Forces to Increase Access to Health Care in Communities with Transportation Deserts

Blue Cross and Blue Shield forges public-private partnership to mitigate the powerful effects of social determinants of health

UnitedHealth teams up with Lyft, USC, AARP Foundation on ride-hailing pilot for seniors

The program will target individuals older than 60 who have missed at least two doctors' appointments within the last 12 months—at least in part due to issues accessing transportation—and who have an upcoming appointment in the next three months.

United Hospital Fund of NY - News - President's Letter:

But particularly for disadvantaged populations, more is needed to improve health outcomes, as issues such as food insecurity, unstable housing, and inadequate transportation will derail even the most well thought out medical treatment plans

Path forward

Transportation is an enabler for achieving optimal well being

- Alignment with value-based care models will likely continue to spur partnerships and innovative solutions.
- Focus on Social Determinants of health is a nascent effort with no sustainable funding
- Develop pilot programs to build ROI case for reimbursement
- Emerging disruption models will create innovative person-centered options to meet needs
- Clinical-community partnerships are critical to both the "value equation" and increasing overall health