

ADVANCING HEALTH-RELATED SOCIAL NEEDS IN NEW YORK



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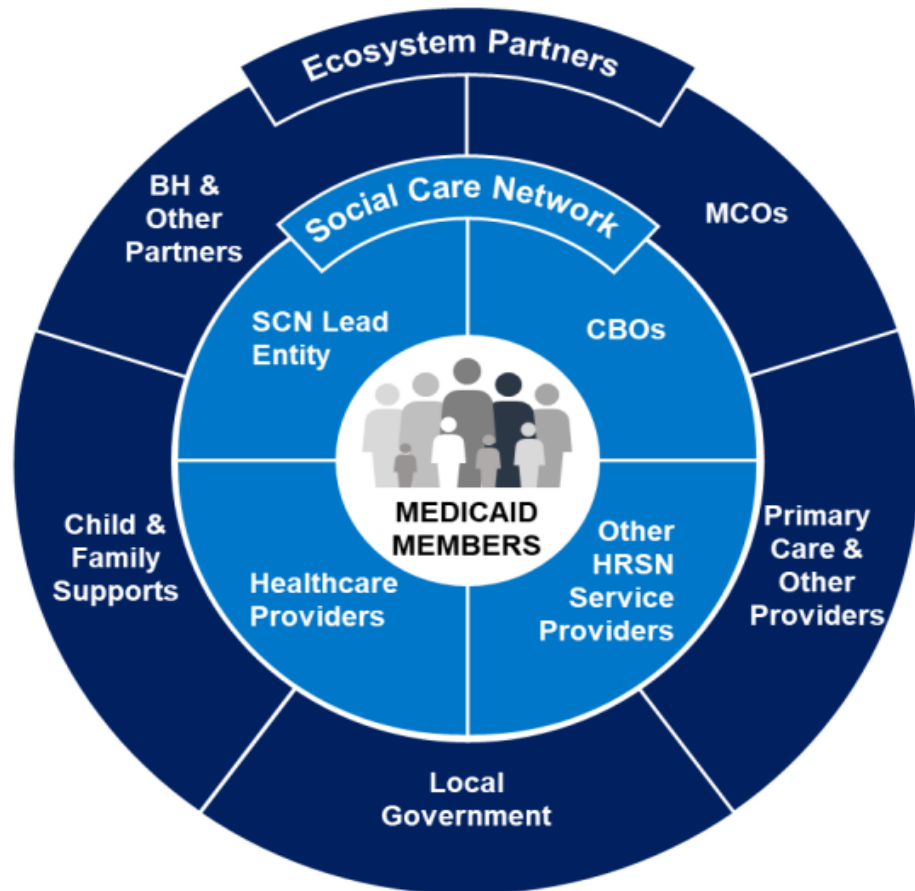


Medicaid 1115 Waiver Amendment - New York Health Equity Reform (NYHER) Overview

- Concept paper created in August 2021, CMS approved in January 2024 to address health disparities and systemic health care delivery issues that have been both highlighted and intensified by the COVID-19 pandemic.
- **Goals:**
 - ★ ○ **Health-Related Social Needs (HRSN):** Up to \$3.673 billion for building HRSN infrastructure, including the creation of new Social Care Networks (SCNs), and reimbursing for an array of HRSN services through the Medicaid program.
 - **Statewide Health Equity Regional Organization (SHERO):** Up to \$125 million for the creation of a SHERO to conduct regional health and HRSN data collection and analysis and, based on this, make recommendations on incorporating HRSN into value-based payment (VBP) arrangements in the future.
 - **Medicaid Hospital Global Budgets:** Up to \$2.2 billion to support certain safety net hospitals in Brooklyn, the Bronx, Queens, and Westchester County to transition their Medicaid reimbursement to hospital global budget models, in line with CMS's new AHEAD model.
 - **Strengthen the Workforce:** Up to \$694 million for workforce recruitment and retention efforts, including student loan repayment and training and education programs for individuals who make commitments to serve high-needs populations. Training and education will be funded through Workforce Investment Organizations (WIOs), which will recruit participants and provide ongoing support.

Social care ecosystem

SCN Lead Entities will work closely with their Networks to identify and address HRSNs among Medicaid Members in each region, as well as work with a broader set of partners to help address the needs of Members.



Roles of entities within the social care ecosystem

Social Care Network

- **SCN Lead Entity:** Coordinate SCN to conduct HRSN screening and deliver services to ensure Member HRSNs are addressed
- **CBOs & other HRSN service providers:** Conduct HRSN screening, navigate Members to HRSN services, and deliver HRSN services
- **Healthcare (physical and behavioral health) providers:** Conduct HRSN screening and navigate Members to HRSN services

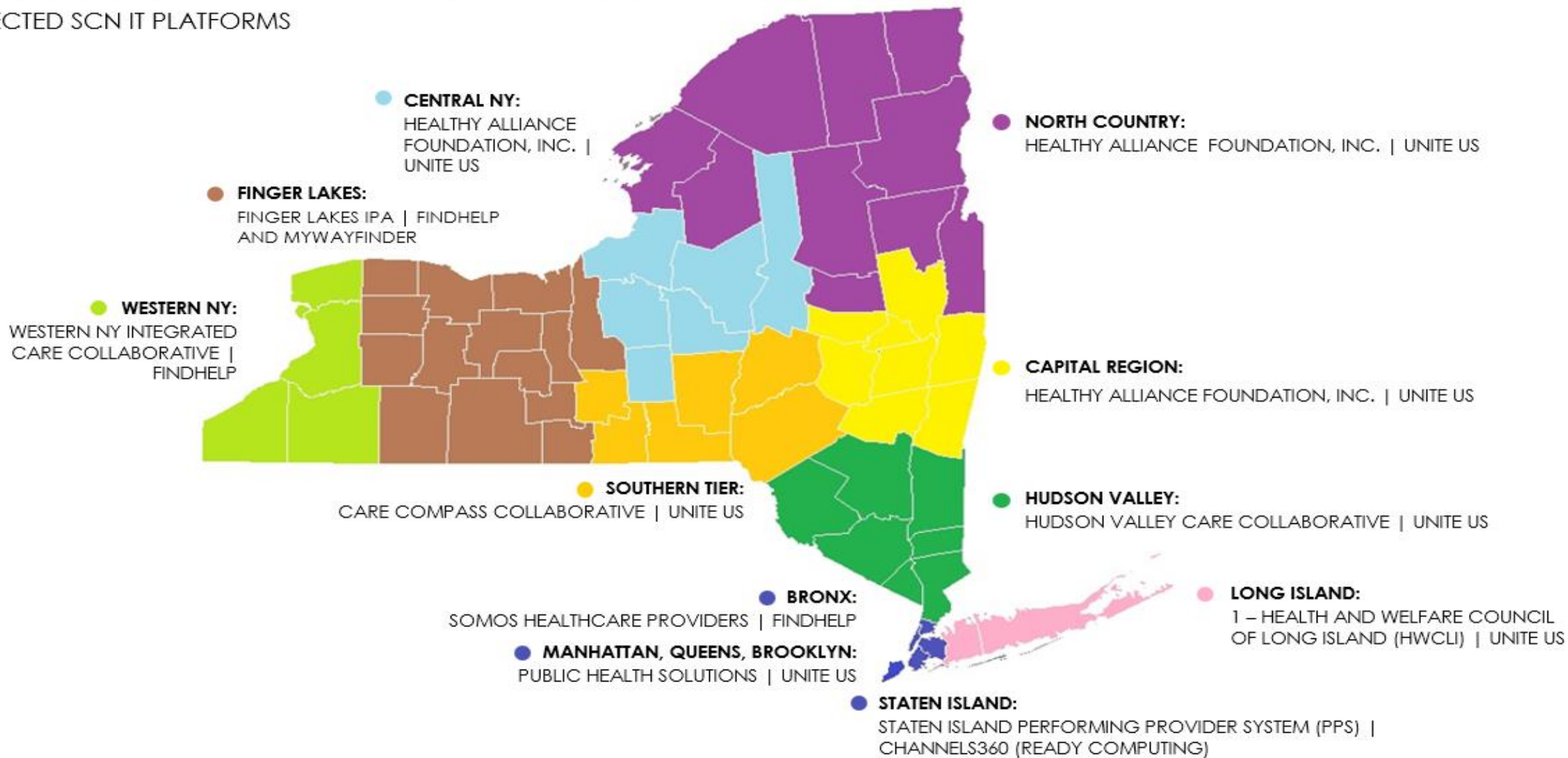
Ecosystem Partners

- **MCOs:** Refer Members to SCN and work with SCN to ensure all Members are screened for HRSNs
- **Other ecosystem partners:** Refer Members to SCN and coordinate with SCN on service navigation and delivery



AWARDED SCN LEAD ENTITIES

SELECTED SCN IT PLATFORMS



Introduction to HRSN care delivery

Vision

SCNs will consist of diverse and culturally competent network of HRSN service providers and will facilitate consistent, convenient access to services that meets people where they are in an equitable, customer-centered way.

Entities in the SCN ecosystem will work together to ensure that Members experience a seamless end-to-end process in their region for HRSN Screening, Navigation, and delivery of HRSN services.





SCNs' core responsibilities for HRSN care delivery

To achieve the vision, SCNs are responsible for a core set of responsibilities:

1. **Screen Medicaid Members** for HRSNs in a standardized, person-centered way
2. **Conduct Eligibility Assessments** for Members whose screening identifies unmet HRSNs and who request support
3. **Navigate Members** appropriately, including referrals to Enhanced HRSN Services or navigation to existing federal, state, and local services
4. **Deliver Enhanced HRSN Services** to eligible Members
5. **Develop Social Care Plans** that detail eligible Members' HRSNs
6. **Monitor to ensure delivery** of Enhanced HRSN Services and subsequent Referral closure

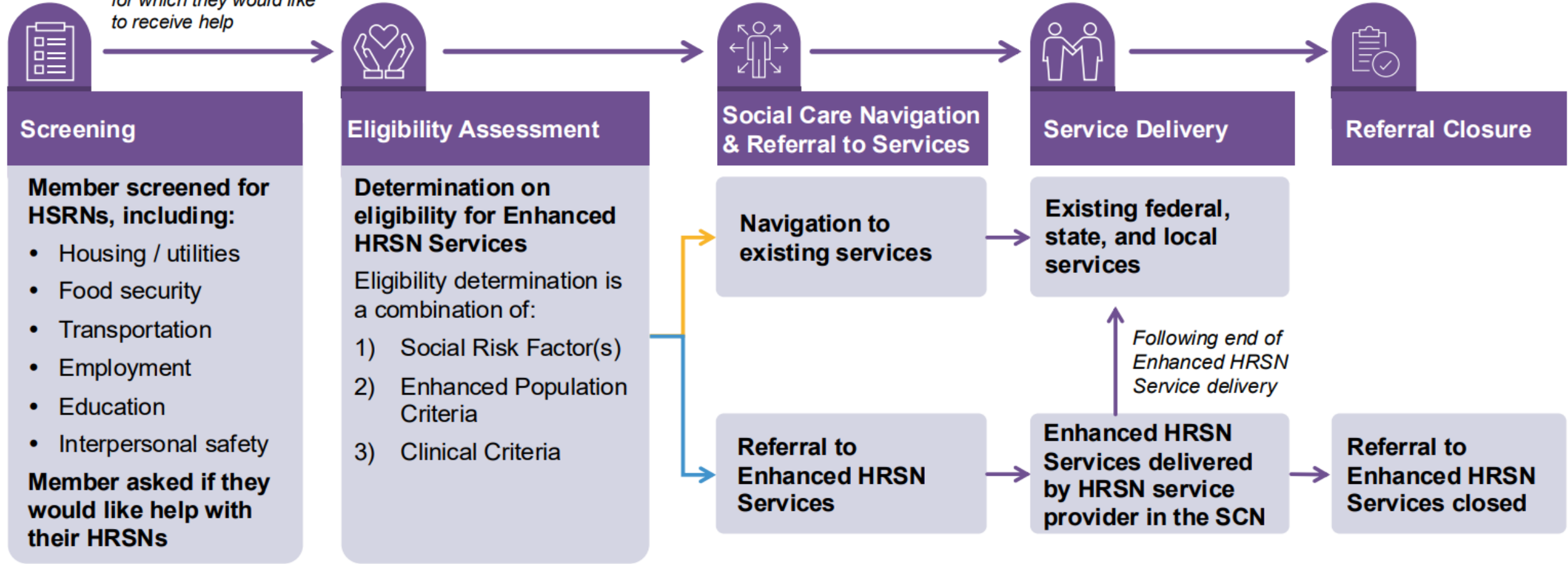
HRSN Covered Services

- **Screening:** Medicaid Fee-For-Service and Medicaid Managed Care Members are eligible for HRSN Screening using a NYS version of the AHC HRSN screening tool
- **Navigation:** Medicaid Fee-For-Service and Medicaid Managed Care Members are eligible for Navigation to existing federal, state, and local benefits and programs
- **Enhanced HRSN Services:** Medicaid Managed Care Members may also be eligible for the following covered Enhanced HRSN services, each of which has defined eligibility requirements, service limitations and restrictions, and allowable provider

 Care Management	 Housing Supports	 Nutrition Supports	 Transportation
<ul style="list-style-type: none">• Navigation to existing federal, state, and local benefits and programs*• Enhanced HRSN Services Care Management	<ul style="list-style-type: none">• Home Accessibility and Safety Modifications• Home Remediation Service• Asthma Remediation• Recuperative Care (Medical Respite)• Rent / Temporary Housing• Utility Setup / Assistance• Pre-Tenancy and Tenancy Sustaining Services• Community Transitional Supports• Housing Transition and Navigation Services	<ul style="list-style-type: none">• Nutritional counseling and classes• Medically tailored or clinically appropriate home-delivered meals• Food prescriptions• Fresh produce and nonperishables• Cooking supplies, (pots, pans, etc.)	<ul style="list-style-type: none">• Reimbursement for public and private transportation to connect to HRSN services and HRSN care management activities

HRSN screening and services: Member journey

If Member has HRSN(s) for which they would like to receive help



➔ Member does NOT meet Enhanced HRSN Service eligibility criteria
 ➔ Member meets Enhanced HRSN Service eligibility criteria



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Beyond SCNs – Key Technical Infrastructure Partners



- NYS DOH's Office of Health Services Quality Analytics exercises overall authority for the SHIN-NY enterprise
 - funding, regulation, policy, QE certification requirements, etc.
 - as permitted by regulation, names a State Designated Entity (NYeC) to operate & govern the SHIN-NY
- NYS DOH's Office of Health Insurance Programs (also referred to as Medicaid) developed the NYHER 1115 Waiver & is leveraging the SHIN-NY as a key component of that program model



- Federal & State-funded public health information exchange (HIE) enterprise comprised of two primary components:
 - Technology: *Statewide Data Infrastructure*
 - Governance: *SHIN-NY Policies & Procedures Statewide Collaboration Process*



- Provides strategic leadership, governance and operational oversight to advance, align, integrate, and advocate for the SHIN-NY
- Administers QE contracts
- Facilitates and proposes policy, technical standards, functionality, business operations, and innovation
- Operates the Statewide Data Infrastructure (SDI), including the Statewide Data Repository (a.k.a. SHIN-NY Data Lake) which is key to the NYHER 1115 Waiver Program as well as the technology that makes QE clinical data available statewide

Qualified Entities (QEs)

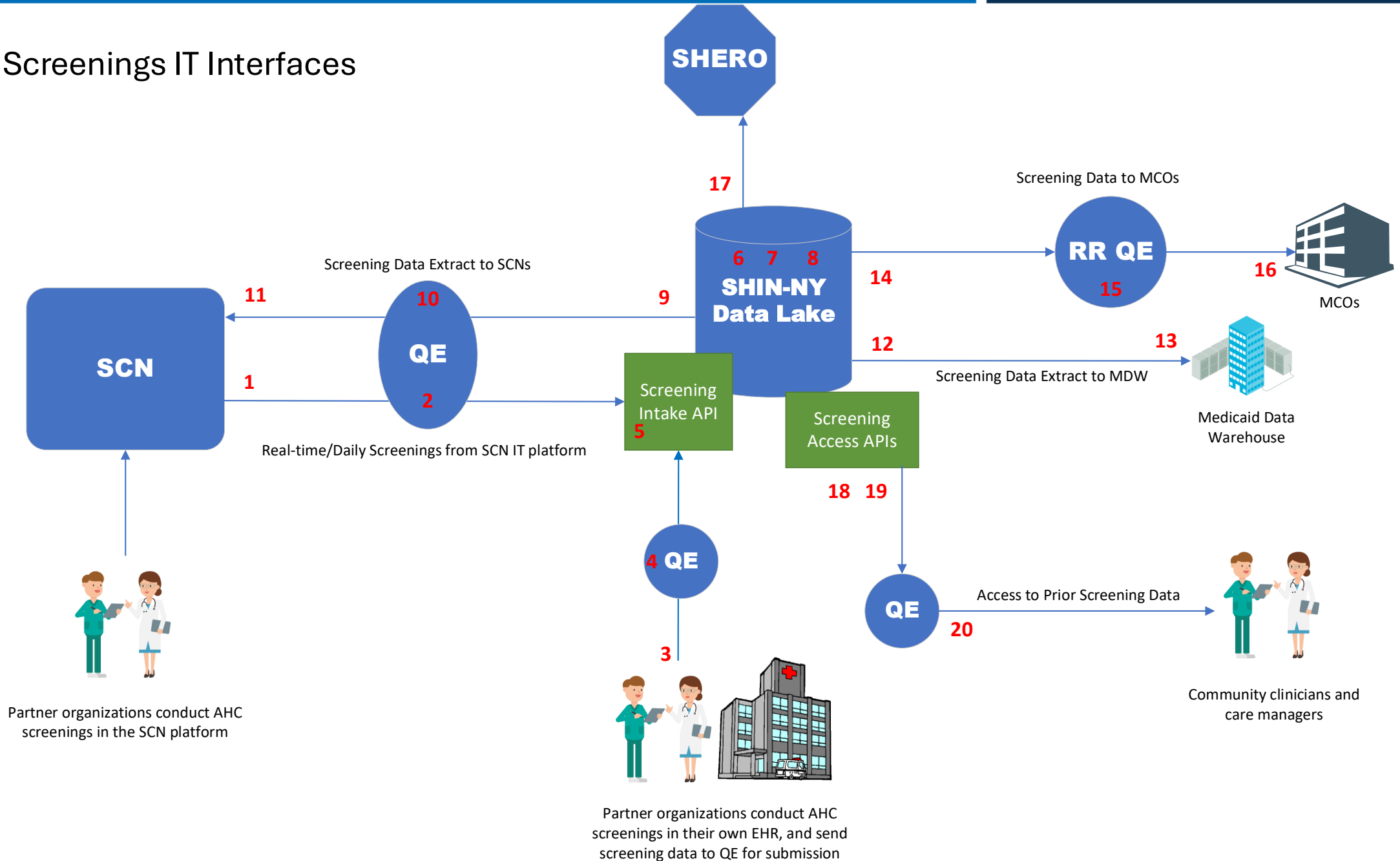


- QEs connect organizations across the healthcare sector to exchange real-time clinical data within communities & statewide
- Collaborate and support community partners
- Meet SHIN-NY certification & performance goals and comply with State requirements
- Contribute data to the SDI



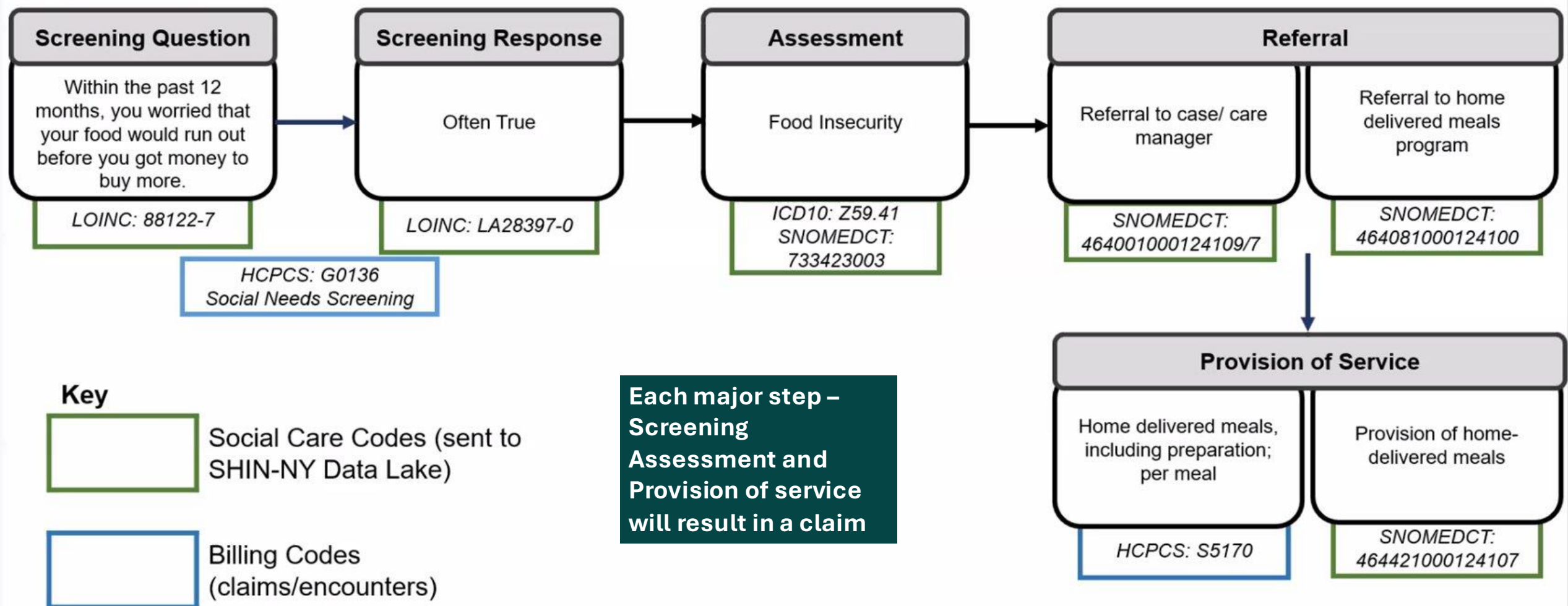
- Non-profit that offers statewide technical services to QEs
- Runs a statewide service for the validating, transforming and posting of 1115 waiver data to the SHIN-NY Data Lake

HRSN Screenings IT Interfaces



Example Mapping: Screening to HRSN Service

food insecurity



Each major step – Screening Assessment and Provision of service will result in a claim

Key

Social Care Codes (sent to SHIN-NY Data Lake)

Billing Codes (claims/encounters)

Health-Related Social Needs Projects and Timelines

April 2023:
Bronx RHIO receives CIVITAS/Gravity Pilot Award for technical assistance on behalf of the SHIN-NY.

November 2023-Present: SHIN-NY project starts to support sustainable technical infrastructure for contributing screening data to the SHIN-NY Data Lake in FHIR.

January-August 2024:
Built infrastructure to exchange screenings, assessments, referrals and provision of service in Gravity standards.

Summer 2023: NYeC kicks off two pilot tracks.
Track 1: SHIN-NY screening exchange support.
Track 2: DOH Gravity Project Support.

January 9th, 2024:
Waiver is approved and released

Interoperability Workgroup for 1115 SHIN-NY FHIR Implementation Guide Feedback.



The Role of the NYS Qualified Entities (QEs)

Data Collection & Aggregation

- HRSN data from regional SCN(s) & their selected vendor
- HRSN data from healthcare providers & their EMRs
- Contribute HRSN data collected with the SHIN-NY data lake
- Make HRSN screening & other data in the statewide data lake visible to providers that query their local QE
- Implement data checks for data quality & completeness

Support Data Exchange with MCOs

- Provide files to SCN identifying Medicaid beneficiaries eligible for enhanced waiver services (Enhanced Member Services File or ESMF)
- Provide files to SCN of the entire Medicaid roster in their region (Medicaid Eligibility File or MEF)

Trusted Advisor & Community Partner to SCN & NYeC

- Work alongside SCNs to ensure healthcare providers are implementing approved HRSN screening tool, and can send that data to their QE
- Leverage their experience with connecting to data sources to quickly identify and share any potential barriers to success

Regional Support for Statewide Infrastructure

Prior to NYS 1115
Waiver Approval

QE Collaboration calls with the Gravity Project

- Development of specifications to share screening, referral, & assessment data

Implementation of New Data Workflows

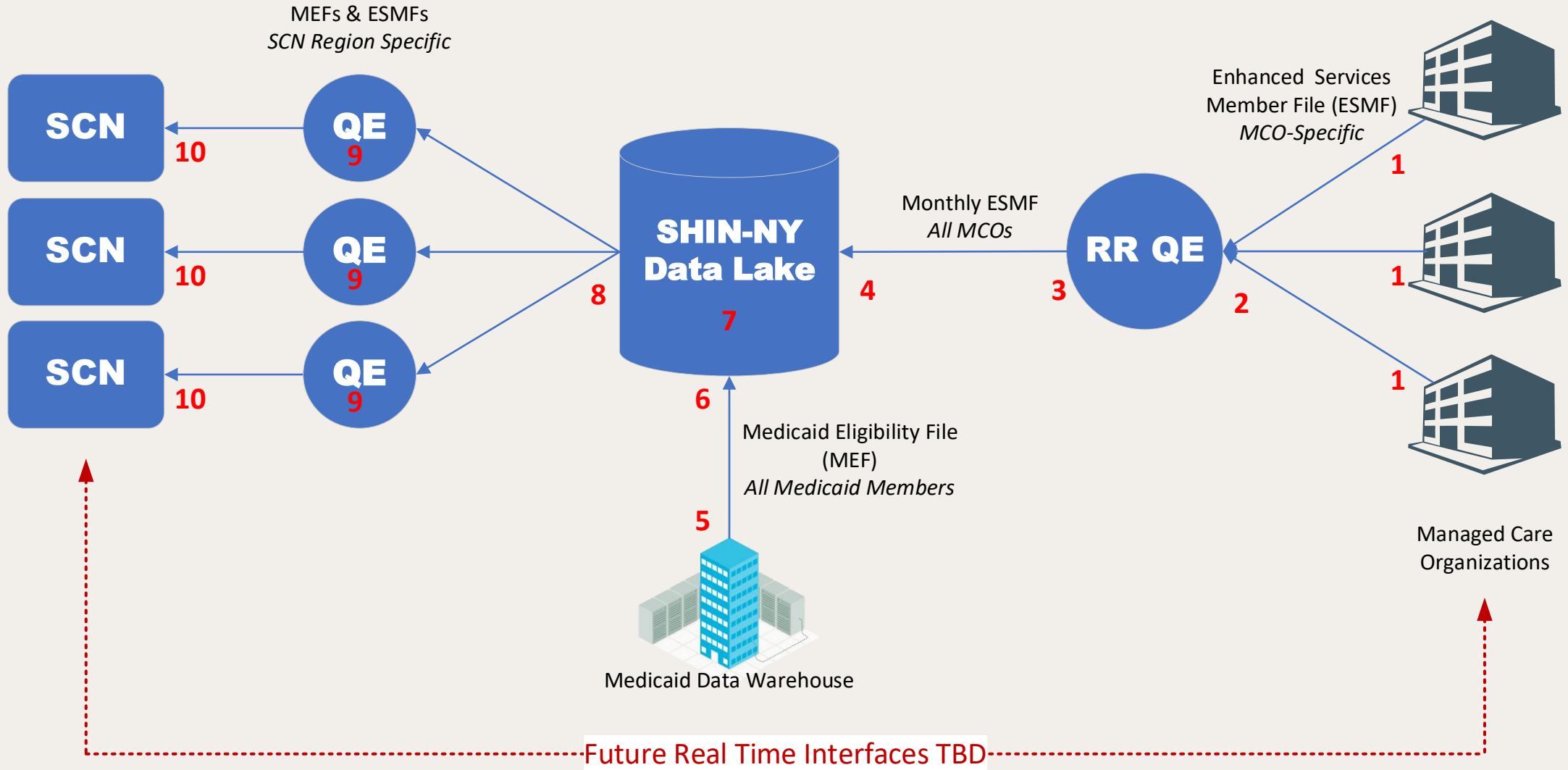
- Establishment of processes to send screening data to SHIN-NY data lake in different formats
- Establishment of test API query to the SHIN-NY data lake from the QE portal

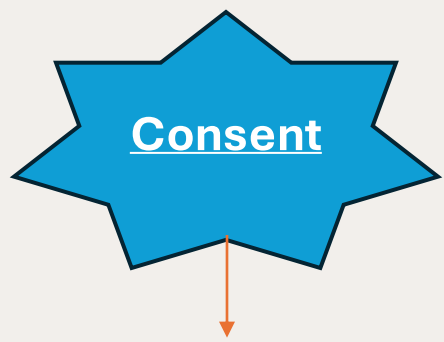


QUESTION & ANSWER



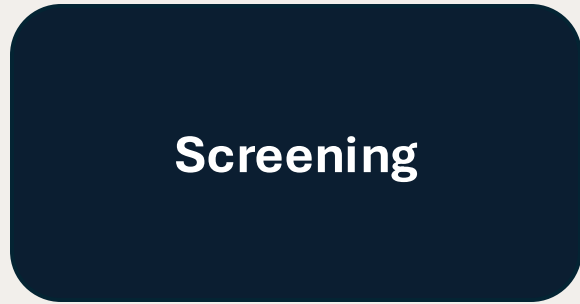
Medicaid Roster IT Interfaces





Consent Resource: Question "0"

¹Goal resource required in Year 3.



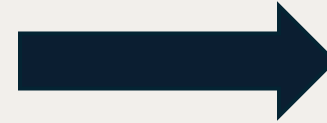
The act of a Member filling out AHC HRSN questions.

<u>Bundle</u>
<u>Consent</u>
<u>Patient</u>
<u>Sexual Orientation Observation</u>
<u>Organization</u>
<u>Location</u>
<u>Encounter</u>
<u>Observation</u>
<u>Questionnaire</u>
<u>Questionnaire Response</u>



An individual will discuss any positive risks further to diagnose a condition. Eligibility for enhanced HRSN services will be determined.

<u>Bundle</u>	<u>Eligibility Assessment Outreach Status and Date</u>
<u>Patient</u>	
<u>Sexual Orientation Observation</u>	<u>Eligibility Approval Questionnaire/Questionnaire Response</u>
<u>Encounter</u>	
<u>Organization</u>	<u>Eligibility Assessment Administrative Questionnaire/ Questionnaire Response</u>
<u>Practitioner</u>	
<u>Condition</u>	<u>Eligibility Assessment Member Questionnaire/ Questionnaire Response</u>
<u>Observation Assessment</u>	
	<u>Goal¹</u>



Individual is referred to service navigation or enhanced HRSN services.

<u>Bundle</u>
<u>Patient</u>
<u>Sexual Orientation Observation</u>
<u>Encounter</u>
<u>Organization</u>
<u>Practitioner</u>
<u>Service Request</u>
<u>Task</u>
<u>Referral Approval Questionnaire/Questionnaire Response</u>
<u>Referral Outreach Date</u>
<u>HRSN Outreach Date</u>