Opportunities for Accountable Care Organizations with Community Based Organizations

Institute for Accountable Care
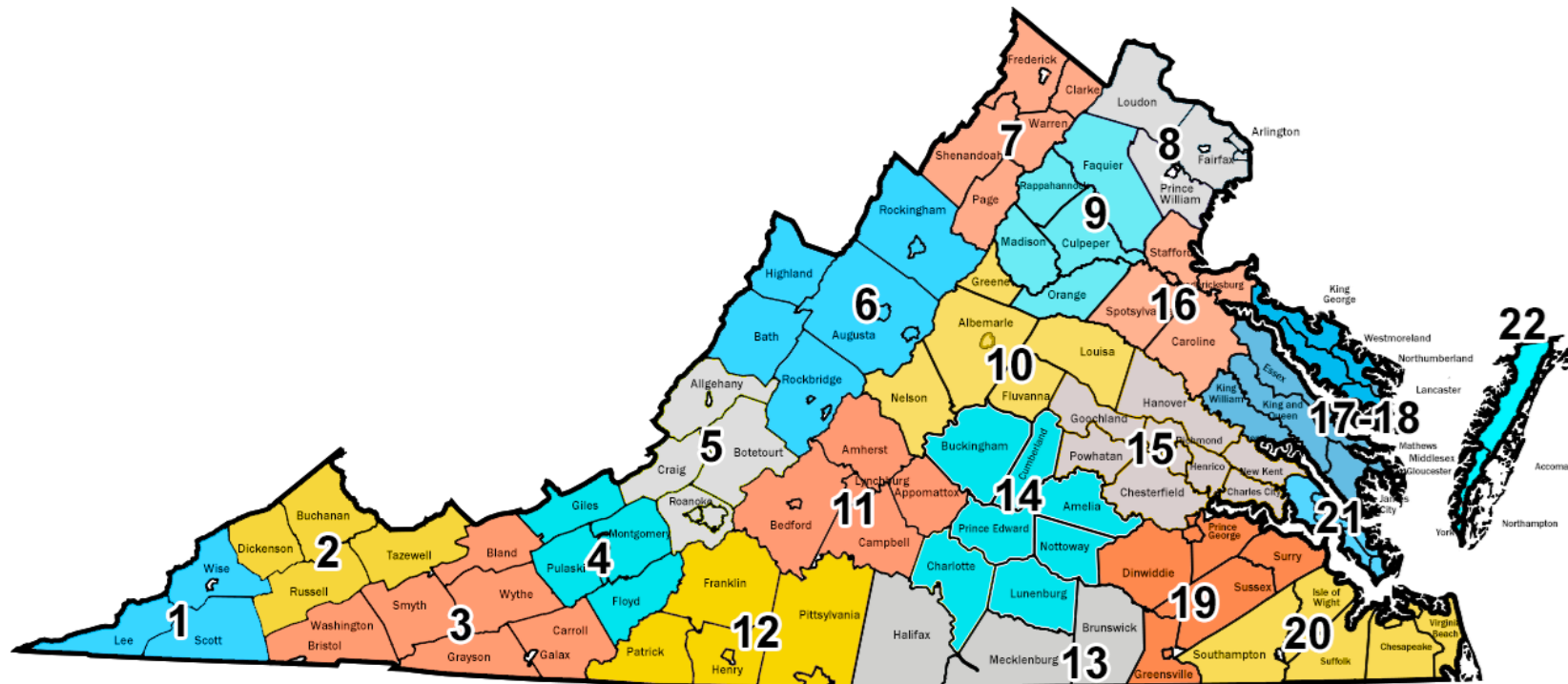
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Kathy E. Vesley

President & CEO

Bay Aging

VAAACares®

About Us – Bay Aging

- Area Agency on Aging (AAA) in Urbanna, Virginia
- 3 Major Divisions
- Evolved to Hospital, SNF, and AAA collaborative for CMS contracts
- Strategically changed revenues to health entity contracts

VAAACares® - One-Stop-Shop

- 100% Virginia AAA Support
- Offers major insurers and other healthcare providers a one-stop-shop for contracts
  - one contract, one referral site, one billing, one reimbursement and one source accountability
- Supports positive health outcomes and demonstrates lower costs
- Leverages AAAs 45-years of experience delivering quality services in people's homes
  - knowledge of community assets to address and help close gaps in social determinants of care

Overview of Evidence-Based Coordinated and Transition Care
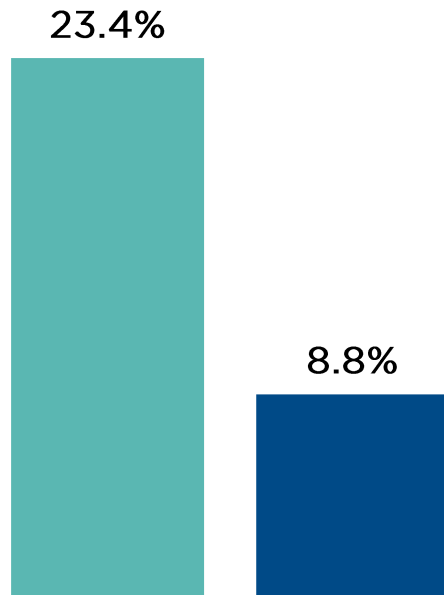
Example: Blend and Braid

Components

- Assessment
- Medication Reconciliation and Self-Management
- PCP Appointment Adherence
- Red Flags
- Patient Centered Record

Incorporate

- Chronic Disease Self-Management Education
- Fall Prevention
- Diabetes Self-Management Education
- Healthy Ideas
- Advance Care Planning
- Telehealth / Tele-education

Other Services

- Transportation
- Nutrition / Meals on Wheels
- Personal and Companion Care
- Emergency Services i.e. fuel assistance
- Environment Home Modifications & Repair
- Friendly Caller Program
- Adult Day Services

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BAY AGING
DIGNITY AT EVERY AGE
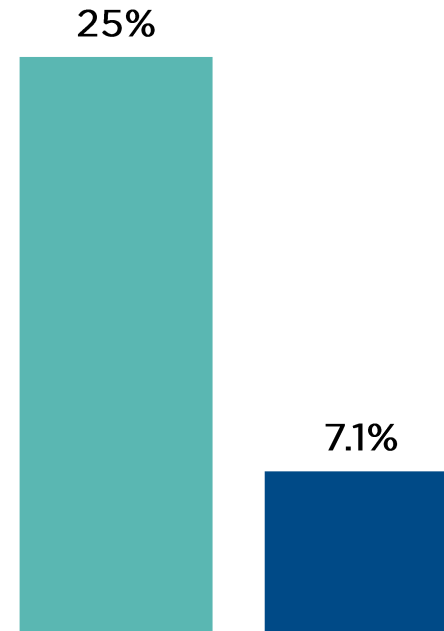
Care Transitions Reduction Pilot – Highest Utilizers

Outcomes for 89 Enrollees (Medicaid, Medicare, and Self-pay)

43 of the 89 Enrollees had 100% Decrease Utilization

Prior to Enrollment		Post Enrollment
63 ED Visits	→	0 ED Visits
35 Hospital Admissions	→	0 Hospital Admissions

35 Enrollees Reduced Utilization by 56.1% With no 30-Day Readmissions

11 Enrollees Readmitted Within 30-Days of Discharge

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DIGNITY AT EVERY AGE

Why Partner with a CBO? – ACOs, Physician Groups, Health Plans

- Cost Effective
- Patient Satisfaction
- SDoH Expertise
- Already engaged in the community & in homes
- Blending & braiding opportunities – Gravity Project – Moving to more reimbursements from CMS

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DIGNITY AT EVERY AGE

How to Partner with a CBO – First Steps

- Identify needs and potential partners
  - ALERT: Don't believe everything you hear from referral platforms
- Build relationships – CONVERSATIONS
  - ALERT: Not "just another vendor"
- Share service needs and discuss reimbursements – STRATEGY!
  - ALERT: Resource constraints mean some services require reimbursements
  - ALERT: Share responsibility for identifying financial models & agree on contract terms
    - Medicare
    - Grants
    - Medicaid
    - CAPGI & other collaborative strategies
    - Strategic approach to partnering with MCOs and other plans

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How to Partner with a CBO – Next Steps

- Outline workflows "on the street level" –
  - ○ ALERT: Ensure capacity, need for volume in contracts, how to demonstrate value
- Identify referral process, data and security issues, etc.   Establish standards before software.
  - ○ ALERT: Don't tell me you already bought into a platform!
    - ▪ Closed loop does not guarantee outcomes!
  - ○ ALERT: Sophisticated CBOs may not join SHARPS – We operate a business!
    - ▪ Need patient data to perform quality services and determine outcomes
    - ▪ Need to access EHR to input data – for your benefit & to prove the ROI
    - ▪ Need one-stop billing & accountability
- Establish regular conversations and reviews
  - ○ ALERT: Hubris is not your friend!

THANK YOU!
Questions? Comments?

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