Welcome!

Tuesday, October 3  2:30 pm

Michigan Premier Public Health Conference

Mission and Vision

- NMCHIR Mission: Improving population health, increasing health equity, and reducing unnecessary medical costs through partnerships and system change
- NMCHIR/CCL Vision: Healthy People in Equitable Communities, which includes A “Universally Accessible Comprehensive CHW Navigation System”

Debbie Aldridge, RN
Regional HUB Supervisor
231-633-9542
daldridge@bldhd.org
Back in 2016.....Build a more integrated, effective health system through collaboration between clinical care and public health.
OUR COLLABORATIVE APPROACHES

Learning Community
Supporting deep learning through dialogue, exploration, & co-creation.

Community Connections
Connecting adults, children, and families to community resources.

MiThrive
Bringing together cross-sector partners & residents to conduct a CHA & CHIP.

Behavioral Health Initiative
Strengthening behavioral health systems & promoting wellbeing and resiliency.
Six Local Health Department HUBs
Community Connections CHW Staffing

<table>
<thead>
<tr>
<th>HUB</th>
<th>CHWs</th>
<th>Coordination/Supervision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northwest HUB</td>
<td>4 CHWs (3.40 FTE)</td>
<td>2</td>
</tr>
<tr>
<td>Grand Traverse HUB</td>
<td>6 CHWs (5.15 FTE)</td>
<td>2</td>
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<tr>
<td>District Health Dept 10 HUB</td>
<td>13 CHWs (13 FTE)</td>
<td>3</td>
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<tr>
<td>District Health Dept 4 HUB</td>
<td>3 CHWs (3.0 FTE)</td>
<td>2</td>
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<tr>
<td>Central MI HUB</td>
<td>6 CHWs (4.8 FTE)</td>
<td>2</td>
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<tr>
<td>District Health Dept 2 HUB</td>
<td>2 CHWs (2.0 FTE)</td>
<td>2</td>
</tr>
<tr>
<td>HUB director/supervisor</td>
<td>1.0 FTE</td>
<td>2</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>34 CHWs</strong></td>
<td><strong>15 Coordinators/Supervisors</strong></td>
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COMMUNITY connections

A FREE PROGRAM
Connecting adults, children, and families to community resources

ADDRESSING SOCIAL DETERMINANTS OF HEALTH
Like food, housing, transportation, physical and mental health

THROUGH MULTIPLE CHANNELS
Phone calls, home visits, and office visits

BY PROFESSIONALS
Community Health Workers, Registered Nurses, or Social Workers
**COMMUNITY CONNECTIONS SCREENING & NAVIGATION PROCESS**

- **SDOH Screening**
- **Referral to Community Connections HUB**
- **Feedback to referral source**
- **Feedback is sent to referral source if requested and participant agrees**
- **HUB receives referral and initiates contact with participant within 3-5 business days**
- **If participant is successfully contacted and they agree to HUB services**
- **If screening positive, and participant wants a referral to the HUB (Screening Organization may provide their own navigation services).**

**Health Care Providers, CMHs, Dental Clinics, FQHCs, Schools Community Based Organizations**
EVIDENCE BASED PATHWAYS COMMUNITY HUB MODEL

- Adult Learning
- Behavioral Health
- Developmental screening and referral
- Education
- Employment
- Family Planning
- Health Insurance
- Housing
- Immunization Screening/Referral
- Lead
- Medical Home
- Medical Referral
- Medication Assessment/Management
- Pregnancy/Postpartum
- Tobacco Cessation

- Social Services:
  - Childcare
  - Clothing
  - Family Crisis
  - Financial Assistance
  - Food Security
  - Household Items
  - Legal Service
  - Translation
  - Transportation
  - Utilities
  - And more....

Pathway Community HUB Institute
www.pchi-hub.com
Community Connections Referral Mechanisms

• One paper referral form for the 31 counties
  • Secure Fax or Email; Snail Mail

• Web Based Portal

• Self referral

• Directly from provider EMR through Cerner

• Community Connections website:
  • https://northernmichiganchir.org/community-connections/community-connections-referrals/
Community Connections Referrals and Data

https://northernmichiganchir.org/community-connections/community-connections-data/

Data from January 1st, 2022 to December 31st, 2022

All HUB's Total Referrals: 3620

All HUB's Referrals by Age

All HUB's Referrals by Insurance

Data by Referral Source; Pathways met, and Pathways not met and why....
POWERFUL IMPACT

COST SAVINGS $3M in Medicaid Health Plan savings Jan 2016 - Jan 2021 by reducing ER visits by 23.5% and inpatient stays by 25.5%.

COORDINATED SYSTEM Transformation of individual lives and the creation of more responsive & effective organizations and a more accessible, coordinated, service system.

EFFECTIVE COLLABORATION Unprecedented levels of cross-sector collaboration and increased recognition among local leaders of the role of social determinants of health in influencing health and other outcomes.

EXPENSE REDUCTION $1.21 in averted medical costs for every $1 of navigation services provided.

INCREASED SELF-EFFICACY 80% of clients who participated in the NMCHIR’s Community Connections CHW Program reported being able to help themselves in the future.

STRONG ROI Partnerships have provided $500K of base funding bringing in an additional $1M to local communities & reimbursement contracts.

WE’RE LISTENING

We asked clients about their experience with the Community Connections program. Here are the results from client surveys taken from August 2022 - July 2023:

95% Needs were met or exceeded:
We’re continuing to navigate resources with our clients. 95% have reported having their needs fairly met to exceedingly met by Community Connections!

98% Treated with respect:
Every client’s needs are unique and require special attention. 63 out of 64 clients reported having been treated with respect by Community Connections!

87% Client confidence:
We’re delighted when clients are empowered with the tools and confidence to find resources within their communities. In fact, 87% are fairly to extremely confident finding resources on their own after working with Community Connections!

80% Clients report monthly check-ins:
80% of participants in our client surveys reported having check-ins once a month or more, while 20% didn’t and we’re working on that!

It is our top priority to ensure that we connect with 100% of our clients monthly, if not more often!
MDHHS compared Medicaid Claims data for those who participated in Community Connections and had Medicaid Insurance.

Between 2016 – 2020:

• 23.5% overall decrease in Emergency Department visits
• 26.6% overall decrease in Inpatient visits
• 18% overall decrease in Per Member Per Month costs for the Medicaid Health Plans
CCL Steering Committee

Purpose

- “Steer” the work of the 31 county Community Connections Program
- Promote high quality CHW roles by sharing professional developments and training opportunities
- Work to assure a robust SDOH screening system in the region.
- Work to assure a seamless & aligned CHW services in the region.
Medicaid Health Plan Partnerships
5 Medicaid Health Plans

- SDOHs
- Dental Visits
- ED Use
- COVID Vaccines
- Well Child Visits
- Immunizations
- Pregnancy
- Lead

- Goal: To build a more integrated health system through collaboration between clinical care, community and public health
New Partnerships

• Community Health Workers (CHWs) in **School**
  Local elementary schools

• Community Health Workers in the **Hospital** Emergency Dept

• Community Health Workers at **Work**
  Great start- child care for workers
  Business grant to support new employees
  Others in discussion, hospital HR and tourism leaders
Partnership Community Information Exchange (CIE) Efforts:

• Partnership with the Northern Michigan Care Partners
  Goal:
  • Exporting SDOH Data out of Munson Cerner Millennium
  • Direct import into our Web Based Portal or Community Connections EHR.
  • Referral feedback back to Cerner

• Partnership with Advanced Health Technology Solutions/BCBSM
  Goal:
  • Matching SDOH need data with Admission/Discharge/Treatment (ADT) data to enhance inpatient care experience
  • ADT data is shared with providers who can then query for pathway services, get enriched ADT information and enhance their treatment/care coordination.
  • Designing our Pathway Technology documentation system to interface with other partners such as hospitals and MiHIN. (MHEF grant)
Funding partnerships with Physician Organizations, Area Agency on Aging, Delta Dental, Community Based Organizations

Grants (Federal, State & Local)

Medicaid Health Plans/Fee for Service Medicaid

Medicaid Outreach: Local Health Department Funding Mechanism

Advocacy Efforts: Legislator Education, Michigan Association of Local Public Health
Scaling up HUBs in your Community: Understanding your partners

Who is your CCL/CHW Network partners?
Physicians and Physician Organizations
Other CHW programs in your region
Partners in CHAI work
Scaling up HUBs in your Community

- Determining the model of care
- Staffing: CHWs (Supported by who? RN/SW/Coordinator/Supervisor)
- Equipment (Laptop; Cell Phone)
- Data Collection and Documentation; Sharing the data with your CHAI
THANK YOU!

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