

Texas MCO SDOH Learning Collaborative

Made possible by the Episcopal Health Foundation

January 19, 2021
12:30 pm – 2:00 pm CT

Recording Available [Here](#)

Exploring Strategies for Managing Costs Associated with SDOH Interventions

Session Summary with Notes and Resources

Welcome and Introductions (begins at 0:13 in this [recording](#))

Diana Crumley welcomed participants and provided an overview of the webinar. Shao-Chee Sim shared results from a recent [EHF survey](#) on MCO strategies to address SDOH during the COVID-19 pandemic. Diana then summarized state approaches to reporting and categorizing costs relating to SDOH interventions.

For general resources on state approaches within Medicaid managed care, see:

- [CMS State Health Official Letter #21-001 \(pp. 23-28\)](#), with a CHCS summary [here](#);
- [Addressing Social Determinants of Health via Medicaid Managed Care Contracts and Section 1115 Demonstrations](#);
- [Two modules of CHCS's Advancing Primary Care Innovation in Medicaid Managed Care toolkit: \(1\) Identify and Address Social Needs in Primary Care and \(2\) Promote Accountability for Medicaid Managed Care Organizations.](#)

For information on specific state approaches, see:

- [Oregon's guidance on health-related services](#);
- [New York's Value-based Payment Roadmap \(pp. 49-50\)](#); and
- [Community reinvestment requirements and incentives in North Carolina \(PDF pp. 196-198\)](#), [Arizona \(p. 210\)](#), [Ohio \(Attachment A, p. 129\)](#), and [Oregon](#)

As discussed in the question and answer session, Tennessee's recent [1115 demonstration](#) allows state "shared savings" (i.e., when the state underspends an "aggregate cap") to be used to fund "Designated Savings Investment Programs" that address social determinants of health.

Diana Crumley,
Center for Health
Care Strategies
(CHCS)

Shao-Chee Sim,
Episcopal Health
Foundation (EHF)

Health and Human Services Commission (HHSC) Update (begins at 21:12 in this [recording](#))

Jennifer Quereau, Senior Policy Advisor at HHSC, summarized results from a recent HHSC survey conducted as a part of the [DSRIP Transition Plan](#), and provided an overview of the federal definition of "activities that improve health care quality." In response to the survey, just over half of the MCOs stated that some additional guidance for reporting activities as quality improvement (QI) costs would be helpful. Those MCOs expressed interest in more detailed guidelines for allowable QI costs and examples, and opportunities for quick clarifications and meetings with HHSC staff.

Jennifer Quereau,
Texas Health and
Human Services
Commission (HHSC)

Actuary Perspective and Group Discussion (begins at 34:56 in this [recording](#))

Jeff Milton-Hall and Justin Birrell, actuaries at Milliman, provided an overview of common barriers to reporting SDOH-related initiatives, informed by interviews with Texas plans. The two

Jeff Milton-Hall,
Milliman

Justin Birrell,
Milliman

answered questions from the group, discussing risk adjustment and Z codes, among other themes.

For related resources, see:

- [*Enabling Sustainable Investment in Social Interventions: A Review of Medicaid Managed Care Rate-Setting Tools*](#)
- [*Risk Adjustment on Social Factors: State Approaches to Filling Data Gaps*](#)
- [*Investing in Health: A Federal Action Plan*](#) (p. 18, 21) (discussing potential MLR clarification and activities that can combat premium slide)
- The [Gravity Project](#) (convening broad stakeholder groups to identify and harmonize social risk factor data for interoperable electronic health information exchange)