

# Texas MCO SDOH Learning Collaborative: Phase Three

---

Session 6: Community Health Workers and Maternal Health

September 9, 2022

*Made possible through support from the Episcopal Health Foundation*

# Agenda

- Welcome and Introductions
- HHSC Welcome
- Leveraging CHWs to Improve Birth Outcomes
- Supporting HUBs through VBP
- Q&A
- Next Steps and Adjourn



# Welcome & Introductions

# 2022 Texas MCO SDOH Learning Collaborative Sessions

- **Broader Learning Opportunities**

- Introduction to Health Equity (February 11, 2022)
- In-Person Meeting #1 (April 1, 2022)
- Federal Perspective: Dr. Dora Hughes (May 20, 2022)
- Introduction to the Pathway Community HUB Institute© Model (August 23, 2022)
- In-Person Meeting #2 (October 19, 2022)

- **Spotlight on Maternal Health**

- Maternal Health Care Delivery and VBP Models (July 28, 2022)
- Community Health Workers & Maternal Health (**TODAY**)
- Drivers of Health Interventions & Maternal Health (October 7, 2022)

# Today's Presenters



**Derek Anderson**  
Director of Community Health  
and HUB Director  
The Bexar County Community  
Health Collaborative



Elizabeth Lutz,  
CEO



**Elizabeth Lutz**  
CEO  
The Bexar County Community  
Health Collaborative



**Loretta La Point**  
Director of Health Promotion and Wellness  
Community First Health Plans

# Center for Health Care Strategies

Dedicated to strengthening the U.S. health care system to ensure better, more equitable outcomes, particularly for people served by Medicaid.

Together with our partners, our work advances:



**Effective models for prevention and care delivery** that harness the field's best thinking and practices to meet critical needs



**Efficient solutions for policies and programs** that extend the finite resources available to improve the delivery of vital services and ensure that payment is tied to value.



**Equitable outcomes for people** that improve the overall wellbeing of populations facing the greatest needs and health disparities.



# Opening Remarks

Jimmy Blanton, Director, Office of Value-Based Initiatives,  
Texas Health and Human Services Commission

# Maternal Care Workforce

Diana Crumley, Senior Program Officer, Center for Health Care Strategies



# Expansion of the Maternal Care Workforce for Additional Support & Culturally Congruent Care

- **Midwife** – licensed, clinically trained health care practitioner that assists women in pregnancy and childbirth ([White House Blueprint](#) definition)
- **Doula** - nonclinical birth worker trained to provide continuous physical, emotional, and informational support to women in the prenatal, birth, and postpartum periods ([White House Blueprint](#) definition)
- **Community health worker/promotor(a)** – frontline public health worker who is a trusted member of and/or have an unusually close understanding of the community served ([APHA](#) definition)
  - Can specialize in perinatal outreach and health education

# Examples of State Medicaid Agency Activities

- New State Plan Amendments
  - Adding doula and community health worker services as Medicaid benefits, usually as “preventive services” under 42 C.F.R. 440.130(c) (e.g., California)
- Managed Care Requirements & Flexibilities
  - Directing MCOs to develop initiatives to reduce maternal health disparities, expand team-based care approaches, or pay maternal health providers a certain way



# Pennsylvania: Maternity Care Bundled Payment

- Care Team should include:
  - At least one individual, such as a doula, community health worker, social worker, or peer recovery specialist, to coordinate the care of the pregnant woman to address other needs, including behavioral health, substance use disorder, and Social Determinants of Health
- Quality measures should include:
  - Social Determinants of Health Screening
    - Complete at least one (1) Social Determinants of Health screening using a Nationally recognized tool, during the episode duration with submission of G9919 (positive screening result) or G9920 (negative screening result) Procedure Codes. Claims must include appropriate ICD-10 Z-codes when relevant those determinant areas as defined by Social Determinants of Health.



# Florida: Managed Care Requirements & Flexibilities

- Plans required to provide:
  - “Quality enhancements” for pregnant and postpartum members, including home visits and counseling and educational materials for members missing appointments
- Plans can elect to provide:
  - Additional expanded benefits, approved by the state, such as:
    - Doula Services
    - Prenatal/Perinatal Visits



## Texas: UMCC Terms & Conditions Definition of Community Health Worker

***Community Health Worker*** means a trusted member of the community who has a close understanding of the ethnicity, language, socio-economic status, and life experiences of the community served.

A community health worker, also called a promotor(a), helps people gain access to needed services, increase health knowledge, and become self-sufficient through outreach, Member navigation and follow-up, community health education and information, informal counseling, social support, advocacy, and more.



## UMCC 8.1.5.7 Member Education

- The MCO must, at a minimum, develop and implement health education initiatives that educate Members about:
  - Accessing OB/GYN and specialty care
  - Service Coordination and treatment for pregnant women and Members with Special Health Care Needs
  - Case Management for Children and Pregnant Women
- Per Texas Health and Safety Code § 48.052(c), MCOs may use certified Community Health Workers to conduct outreach and Member education activities.



## UMCC 8.1.12

### **Members with Special Health Care Needs include:**

Pregnant women identified as high risk, including:

- Pregnant Members age 35 and older or 15 and younger;
- Pregnant Members diagnosed with preeclampsia, high blood pressure, or diabetes;
- Pregnant Members with mental health or Substance Use Disorder diagnoses; and
- Pregnant Members with a previous pre-term birth, as identified on the perinatal risk report.



## UMCC 8.1.12.2

### Access to Care for Members with Special Health Care Needs

- The MCO must implement a systematic process to . . . enlist the involvement of community organizations that may not be providing Covered Services but are otherwise important to the health and wellbeing of Members.
- The MCO also must make a best effort to establish relationships with State and local programs and community organizations, such as those listed below, in order to make referrals for MSHCN and other Members who need community services:
  - WIC & SNAP
  - Healthy Texas Women & Family Planning Services
  - Nurse-Family Partnership



# Leveraging CHWs to Improve Health Outcomes

**Derek Anderson, DrPH**, Director of Community Health, Bexar County  
Community Health Collaborative



*“To improve the health status of the community through collaborative means.”*

**Derek Anderson, DrPH**  
**Director of Community Health; HUB Director**  
**The Health Collaborative**

# History and Mission



Assessing  
Community  
Health Needs

2000



Community  
Health Plan

2018



2010

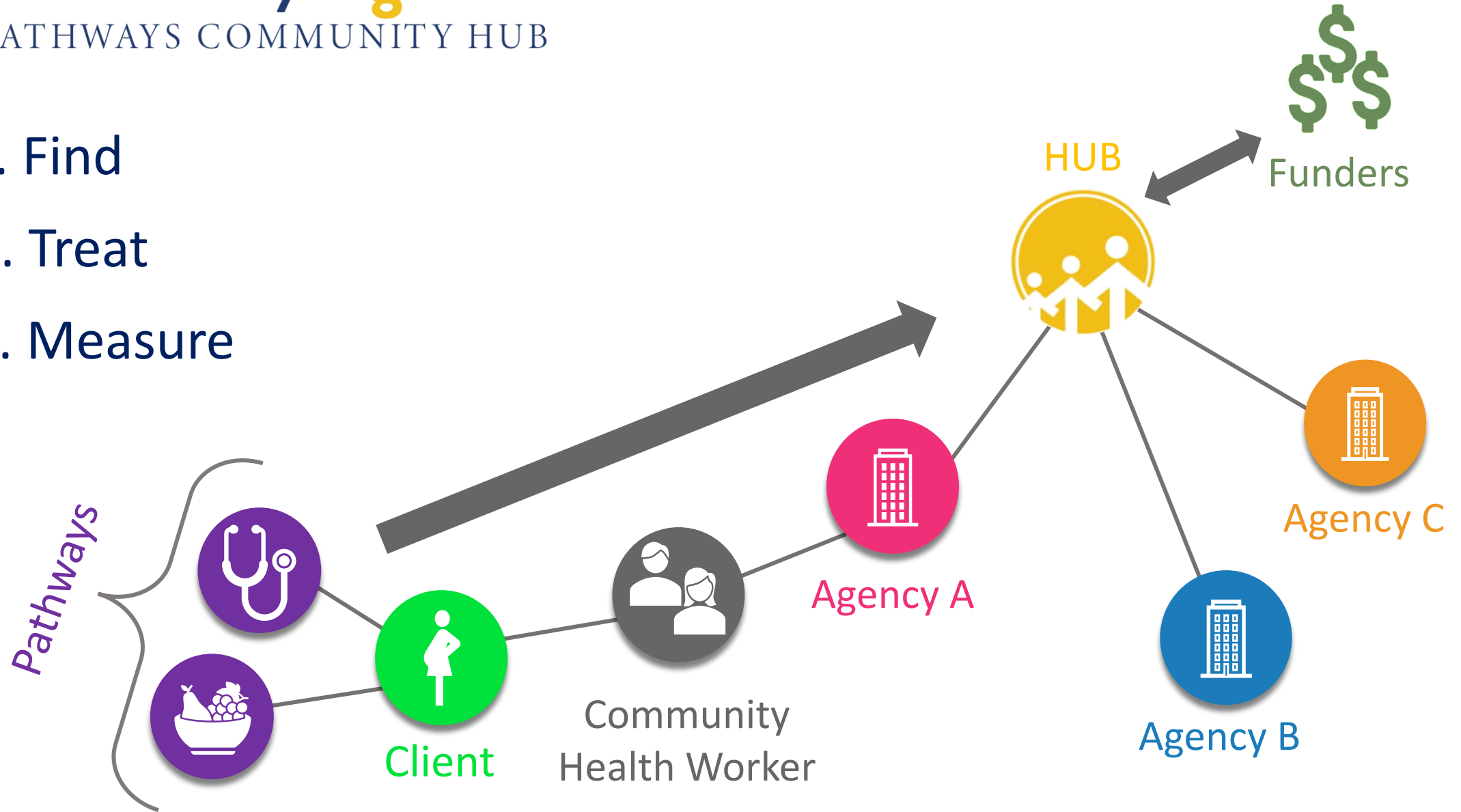
1997



# Grow Healthy Together

PATHWAYS COMMUNITY HUB

- 1. Find
- 2. Treat
- 3. Measure



# Current Literature on the HUB Model



↓ Poor birth outcomes

↓ Low birth weight<sup>1,2</sup>

- 60% reduction<sup>1</sup>

↓ Preterm birth<sup>2</sup>

• Positive predictors of birth outcomes<sup>3</sup>:

- Social Service Referral Pathway
- Frequent Prenatal visits



↓ Neonatal Intensive Care Unit admissions<sup>4</sup>



↑ Cost savings by averting poor birth outcomes

↑ > \$5 return for every \$1 invested in Pathways HUB model<sup>1</sup>

↑ 236% ROI for every dollar invested in HUB intervention<sup>4</sup>

# Local Programmatic Impact



2,801 total referred clients

682 pregnant referrals

- Hispanic
- Low-income
- Single
- Age: 29



83 births

- 70 normal birthweight
- 13 Low birthweight



Community First Health Plan  
Superior Health Plan

San Antonio Metro Health District (Contract)

Bexar County Commissioners (Contract)

Methodist Healthcare Ministries of South  
Texas Inc. (Grant)

United Way (Grant)

Blue Cross and Blue Shield of Texas (Grant)

Humana (Grant)

# Local Maternal and Pre-/Postnatal Efforts

## Community Room



## Baby Bumps and Brunch





Elizabeth Lutz

Executive Director

[elizabeth.lutz@healthcollaborative.net](mailto:elizabeth.lutz@healthcollaborative.net)

(210) 481-2573 ext. 102

[www.growhealthytogether.com](http://www.growhealthytogether.com)

Derek Anderson, DrPH

Director of Community Health/HUB Director

[derek.anderson@healthcollaborative.net](mailto:derek.anderson@healthcollaborative.net)

(210) 481-2573 ext. 124

[www.growhealthytogether.com](http://www.growhealthytogether.com)



# Supporting HUBs through VBP

**Loretta La Point**, Director of Health Promotion and Wellness, Community  
First Health Plans



**COMMUNITY FIRST**  
**HEALTH PLANS**

**Social Determinants of Health  
(SDoH)**

# Bexar County Collaborative and Pathways HUB

- Board of Directors
- First Managed Care Organization (MCO) to contract
- Community Health Needs Assessment



# Screening for and Addressing SDoH

## Strategy and Process

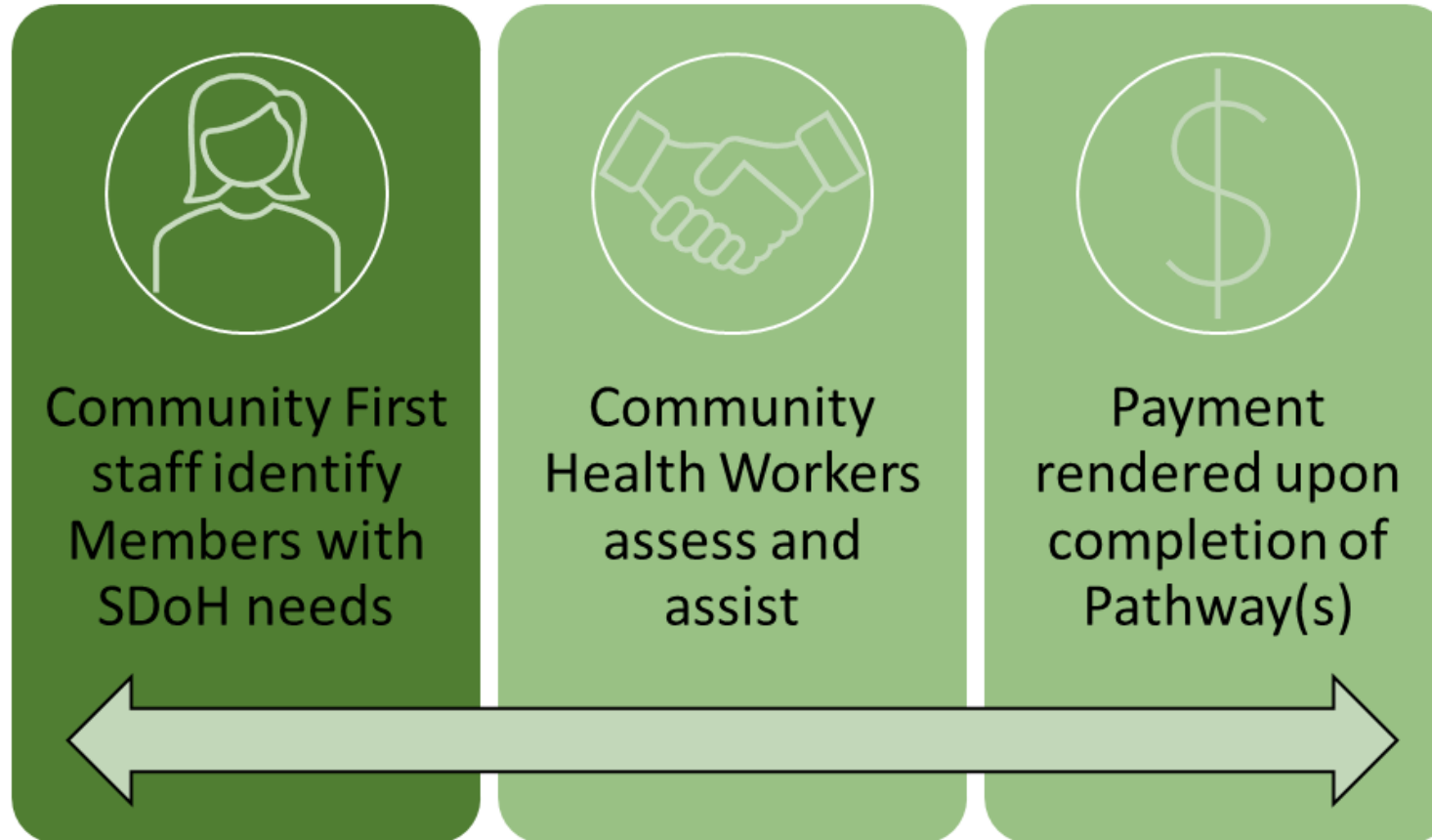
Community First Health Plans, Inc. (Community First) utilizes a strategy for addressing Social Determinants of Health (SDOH).

The strategy includes focusing on three levels:

- 1) Individual Member – Screen, Assess, Address , Follow Up, Monitor and Track Outcomes
- 2) Community First’s Enrolled Population – Screen, Assess, and Social Impact Investments
- 3) Community Level – Community Need’s Assessment, Social Impact Investment, Advocacy



# Value-Based Payment Model





Questions?

# Next Steps

## Stay Tuned for These Upcoming Sessions...

- Friday, October 7<sup>th</sup> – Texas MCO SDOH Learning Collaborative Webinar: Addressing SDOH as part of maternal health care
- Wednesday, October 19<sup>th</sup> – Texas MCO SDOH Learning Collaborative In-Person Meeting



# Visit CHCS.org to...

- **Download practical resources** to improve health care for people served by Medicaid.
- **Learn about cutting-edge efforts** from peers across the nation to enhance policy, financing, and care delivery.
- **Subscribe to CHCS e-mail updates**, to learn about new resources, webinars, and more.
- **Follow us on Twitter @CHCShealth.**

