



Hennepin County Minnesota

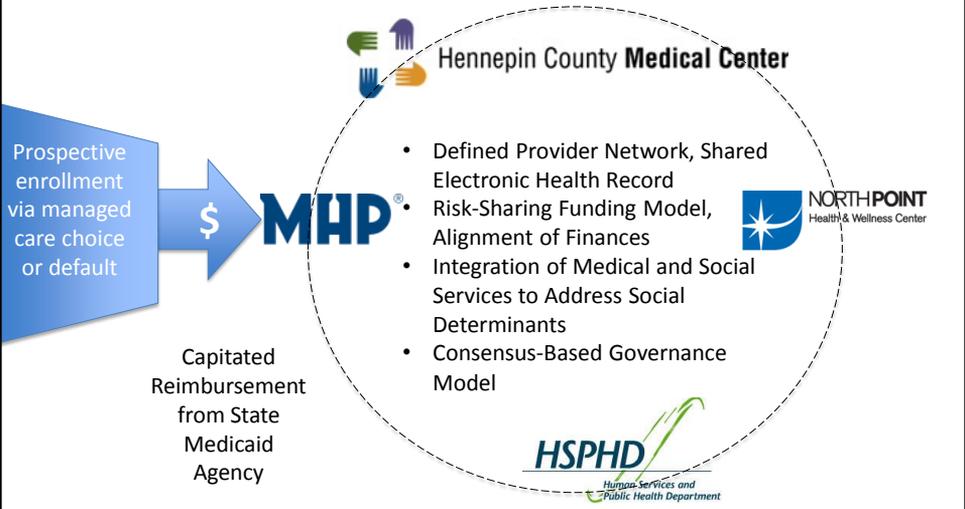
Hennepin Health

PEOPLE. CARE. RESPECT.

June, 2015

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What is Hennepin Health?



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Population Served

- Current Enrollment ~ 11,000 members
- Medicaid Expansion in Hennepin County
- 21 - 64 year-old Adults, without Dependent Children
- At or Below 133% of the Federal Poverty Level (\leq 75% prior to 2014)
- Not Certified as Disabled



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Population Characteristics

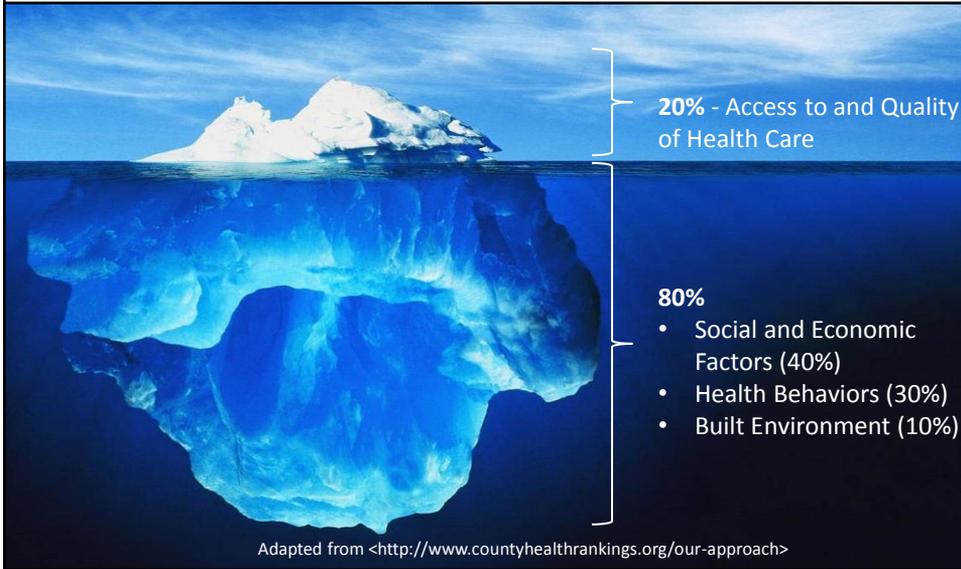
- 67% Male
- 63% Racial/Ethnic Minority
- Common Overlapping Issues:
 - Mental Health Conditions
 - Chemical Dependency
 - Homelessness/Unstable Housing
 - Chronic Physical Conditions
 - Lack of Social Support
- Frequent Use of the Emergency Department (ED) to Access Care



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Factors Influencing Health Outcomes



Premise

- Need to Meet Individuals' Basic Needs Before We Can Meaningfully Impact Health
- Social Challenges Often Result in Poor Health Management and Costly "Revolving Door" Care
- By Financially Aligning and Coordinating Systems, we can Improve Health Outcomes and Reduce Costs



Financial Model: Impact

	Before Hennepin Health / Traditional Health Care	With Hennepin Health
Method of Paying Providers for Care	Fee-for-Service (<i>Volume</i>)	Total-Cost-of-Care (<i>Value</i>)
Health Plan <---> Provider Financial Incentives	Opposed	Aligned
Remaining Funds if Financially Successful	Health Plan Margin	Reinvestment to Further Improve the System
Services Offered to Patients	Medicaid Benefit Set (<i>Rigid</i>)	Medicaid Benefit Set + Care Coordination + Targeted Social Service Interventions (<i>Flexible</i>)

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Care Model: Care Coordination

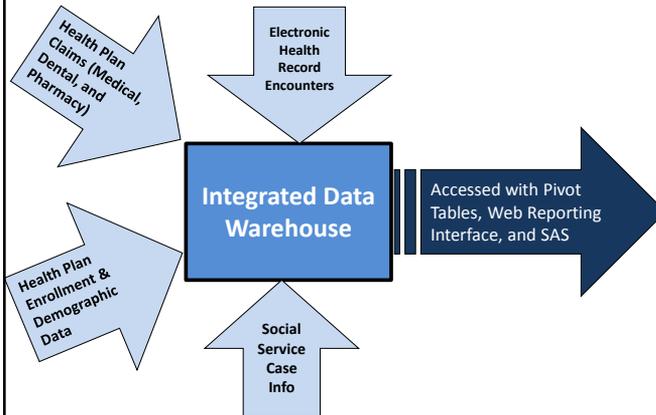
- Based on a Primary Care Medical Home with a Strong Community Health Worker Role Inside and Outside the Clinic
- Referral to “Ambulatory ICU” Clinic for Most Complex
- Supplementing Clinic Care Coordination with Targeted Behavioral Health and Social Service Interventions
- Documenting and Communicating in Shared Electronic Health Record (EHR)



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Analytics Model: Integrated Data Warehouse



Analytics Opportunity:

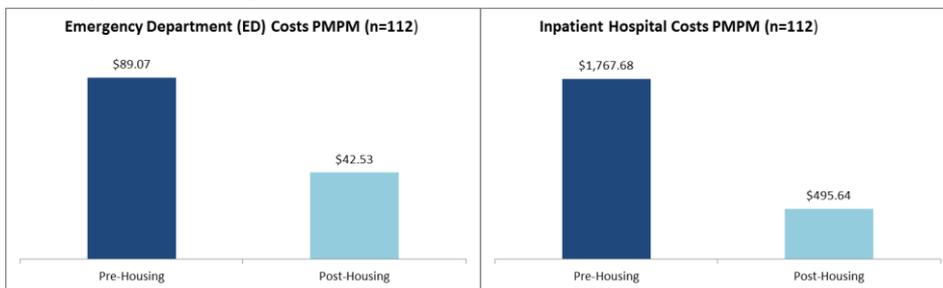
- Fill in clinical gaps by combining EHR and claims
- Real-time Rx picture
- Model how social service use relates to health care utilization

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Innovation Highlight: Housing Navigation

- Dedicated staff work to place medically complex Hennepin Health members in supportive housing available to them
- Resulted in considerable reductions in ED and hospital use post-housing

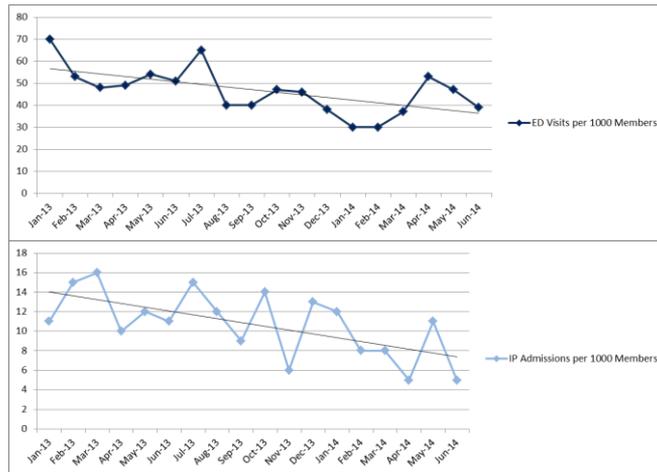


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Outcomes: Continuously Enrolled Members

Jan 2013 – Jun 2014 (n=932); Epic EHR Data



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Opportunities and barriers for HITPC to consider

- Laws (state and national) make two-way sharing of social services data with medical providers difficult
- Identity matching – introduces waste in the healthcare system and is a patient safety issue
- Payment systems that put dollars in caregivers' hands and allow creativity across settings
- Appropriate risk adjustment of payment rates for social determinants of health
- Electronic health records are designed to be transactional – one patient at a time – and for medical settings.
 - We need policies that incent vendors to develop systems that work for across social service, public health AND medical care?

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Thank You!



Videos, newsletter, and more information:
www.hennepin.us/hennepinhealth

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