

Meeting Patients Where They Are:

Strategies to Expand Health Care Access for
Vulnerable Patient Populations



Speakers



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Learning Objectives

Identify

Barriers and obstacles that prevent at-risk patients from accessing primary care services

Explore

Tactics used to increase patient engagement among unengaged patients

Understand

How to replicate patient engagement strategies across care settings to increase primary care utilization among vulnerable patient populations

Value-based care is a critical component in national efforts to improve access, equity and quality care for vulnerable patient populations.

Vulnerable populations are at **greater risk for poor outcomes** than the general population.

- More likely to receive **low-value care** (also known as unnecessary, overused, or inappropriate services)
- Racial and ethnic minorities insured by Medicare are more likely than whites to receive a **disproportionate number of inappropriate services**

Value-based care improves the health of vulnerable populations by **replacing low-value and low quality services** with high-value, high quality care.

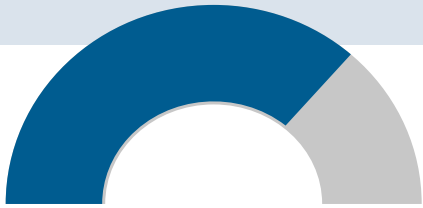
Components of Value-Based Care

- 1 Care centered on medical conditions
- 2 Measure outcomes & cost for every patient
- 3 Aligning reimbursement with value
- 4 Integration of systems for care effectiveness
- 5 Ensuring access to quality care
- 6 Health IT that supports value-based care delivery



By providing vulnerable patients with wraparound services and support, physicians can improve overall health outcomes, reduce costs of care, and mitigate factors that impact care utilization.

CHCAMS and Aledade tested this strategy in 2020 with a collaborative pilot that targeted Mississippi's Medicaid population during the height of the COVID pandemic.



70%

Of Mississippi's Medicaid population are **at or below the poverty level**



69%

Of Mississippi's Medicaid population are **racial or ethnic minorities**



51

Mississippi's **health system performance rating** on a national scale

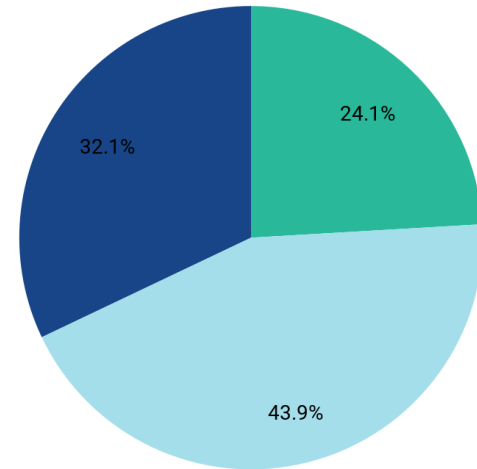


The largest challenge faced by the pilot program was the lack of strong patient-PCP relationships among vulnerable patients in Mississippi.

- Overall, **68%** of patients attributed to Aledade's MS Medicaid ACOs have established care with a PCP
 - Many patients have established care with non-Aledade PCPs
- Aledade **worked with payer partners** to ensure patients are accurately auto-assigned
- For the **32%** of patients without a primary care relationship, Aledade & CCHAMS developed a multi-faceted approach to patient engagement campaigns

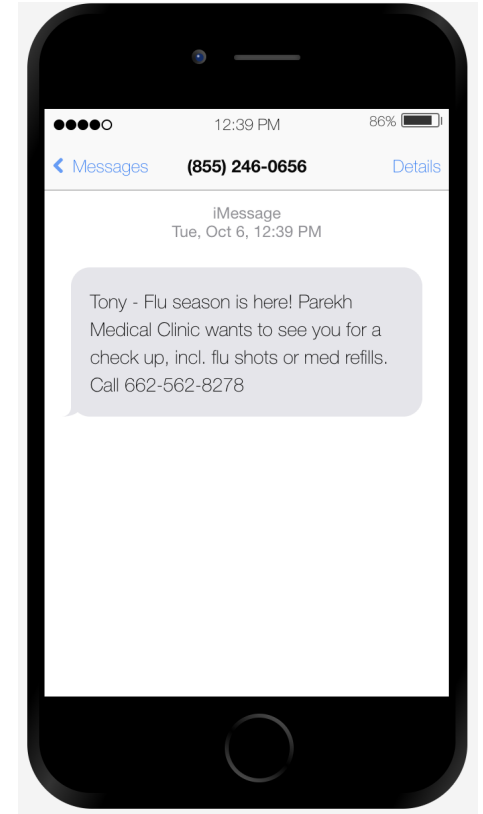
Aledade MS Attribution Breakdown

- Attributed patients who have established care with Aledade
- Attributed patients who have only seen non-Aledade providers this year
- Attributed patients without any visit or established relationship



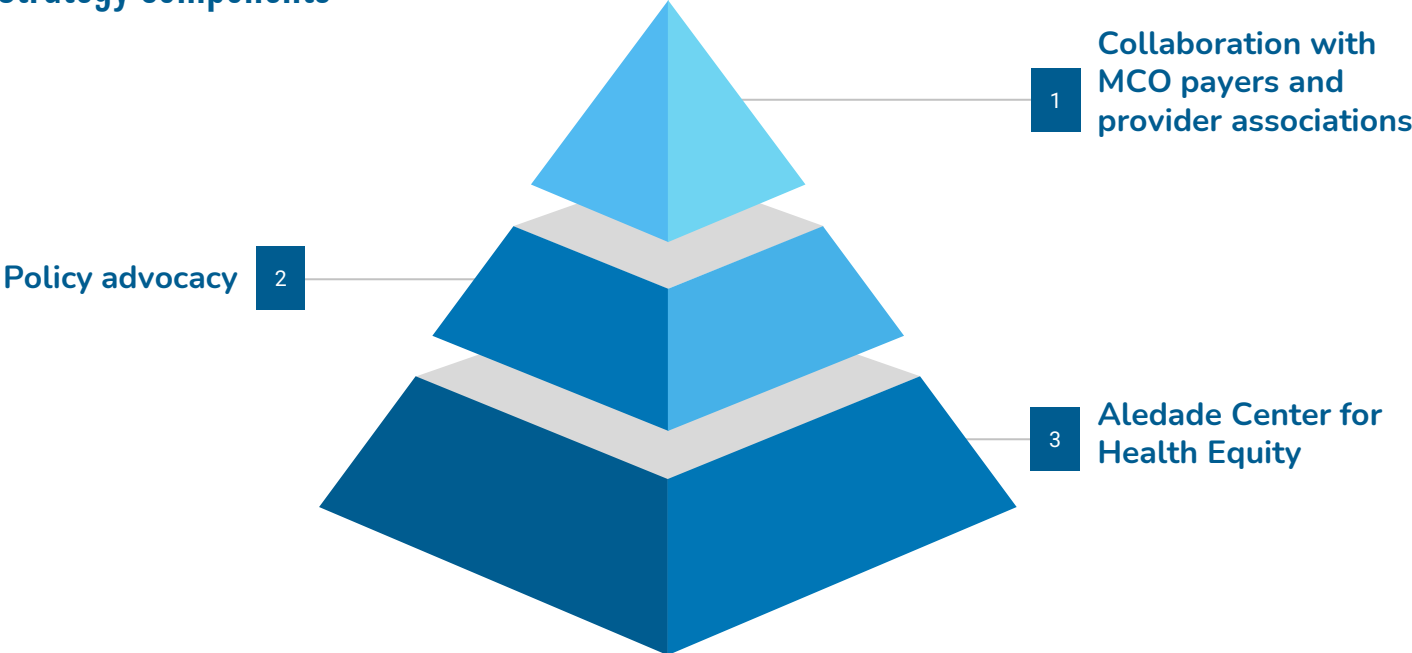
A strategic plan for patient outreach is critical to the success of efforts to engage vulnerable patient populations.

- Sent **15,000+ text messages** reminding patients with preventative screening gaps about diabetes care and cancer screening available
- Conducted **mobile medical unit events** located within rural geographic “hotspots” where patients are in greatest need of care and face barriers to access
- Organized **Airpods raffles** at 38 middle and high schools to encourage wellness visit completion
- Compiled a **social media toolkit** with resources for practice staff to engage children and patients with their Back to School campaigns



Advocacy for practices, clinics and health centers engaged in the delivery of value-based care is an important component of effective patient engagement efforts.

Advocacy Strategy Components



The pilot proved that when physicians are empowered with the right tools and resources to support vulnerable patients, outcomes improve and healthcare costs decline.

Results

- **106%** increase in primary care visits from 2019
- **76%** increase in annual primary care visits, most notably among school-aged children
- **32,000+** students across 38 schools received education about the availability of SBHCs and telehealth options for receiving primary and preventive care services throughout COVID-related school closures
- Primary care engagement and outreach delivered to **28,000+ patients** via postcards and texts
- Mobile medical unit deployed to deliver care in underserved communities



DR. ARENIA C. MALLORY
COMMUNITY HEALTH CENTER

MOBILE MEDICAL UNIT

October 20th from 9am - 3pm
Parked outside of Glendale Apartments

- Wellness check-ups
- Vaccinations
- Flu shots
- Medication refills
- EPSDT visits



Discussion & Q&A



Replicating Our Pilot

What steps were taken to build this strategy, and what were the roles and responsibilities of each engaged partner?



Overcoming Challenges

What were the biggest hurdles faced in the effort to improve patient engagement for these vulnerable patients, and how did you work together to overcome them?



Workflows

What adjustments were required at the clinical level to improve patient engagement for these vulnerable patients?



Measuring Success

What were the initial goals set for the pilot program, and how did the results achieved compare to those goals?

