Aligning in Action: Northwest Ohio Pathways HUB

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Health is impacted by factors outside of the health care delivery system, including housing, education, poverty, employment, food availability, transportation, and safety. Recognizing that addressing these socioeconomic determinants of health is needed to meaningfully impact health inequities, a national policy shift is taking place. Government agencies, payers, and providers are all adopting a social determinants perspective. To effectively address these nonclinical needs, partners must work across sectors. Now, the question is how — what are the best practices for effectively aligning systems?

Aligning Systems for Health: Health Care + Public Health + Social Services, sponsored by the Robert Wood Johnson Foundation (RWJF) and managed by the Georgia Health Policy Center (GHPC), is focused on learning from stakeholders across the nation about effective ways to align these three sectors to better meet people’s goals and needs. Given variance in the local context, there is no single model or formula to align systems. However, Aligning Systems for Health seeks to understand commonalities that drive successful efforts to align sectors. This series examines how communities that describe their work as aligning systems are doing it around four core components of a theory of change that RWJF and GHPC are testing: purpose, governance, data, and sustainable financing mechanisms.

**Local Context**

The Northwest Ohio Pathways HUB is a certified Pathways Community HUB, a model recognized by the Agency for Healthcare Research and Quality as a data-driven approach to identifying and addressing risk factors at the individual and community levels. The Pathways Hub is an example of health care aligning with the social sector around an important public health issue — infant mortality.

The Northwest Ohio Pathways HUB is a data-driven care coordination and support system that connects low-income residents to needed medical care and social services to improve their overall health outcomes and quality of life. The Pathways HUB system relies on community health workers (CHWs) employed by clinics, social service agencies, and other community organizations (e.g., family centers, churches) to remove barriers so that people can better access needed care and services.

CHWs canvas the community for at-risk residents or take referrals, assess enrolled residents, and develop a comprehensive, outcome-driven plan that prioritizes health and social needs. The HUB system has 20 pathways for unmet needs, including health care, food, housing, and transportation. Organizations employing CHWs receive payments from Medicaid managed care plans when clients are successfully connected to services and meet outcome milestones.
The Northwest Ohio Pathways HUB has 15 full-time employees and 40 CHWs employed by 15 care coordination agencies. It began in 2005 to address infant mortality, which is a “huge problem” in Lucas County, Ohio, according to the HUB’s assistant director, Carly Salamone. Since its launch, the HUB has expanded to serve the northwest Ohio region (Henry, Huron, and Erie counties) and now addresses diabetes, heart disease, and other chronic conditions. However, today, about 60% of the Northwest Ohio Pathways HUB’s clients are pregnant, with another 30% of those of child-bearing age. Infant mortality remains the biggest priority.

**Purpose**

The pay-for-performance model serves to align all community care coordination agencies employing CHWs around shared goals and outcomes. Compensation is based on meeting specific measurable outcomes (e.g., clients attending prenatal care appointments, having stable housing, and delivering a healthy baby) that are achieved by completing HUB pathways. Medicaid managed care organizations and other funders pay set fees for successfully completing these pathways. In 2018, the top completed pathways included client education, social service referrals, and medical referrals.

**Data**

In 2018, the Northwest Ohio Pathways HUB had 40 CHWs working at 15 care coordination agencies serving 1,615 northwest Ohio residents. Data is critical not only for reimbursement for the HUB, but also for quality improvement, planning, and expanding partnerships.

Data comes from multiple sources: standardized data entered directly by the CHWs about their clients, the local health department for vital statistics information, and the Hospital Council of Northern Ohio, which conducts communitywide health assessments. The HUB combines data into a deidentified dashboard to track productivity as well as unmet community needs. Additionally, different agencies participating on the advisory committee bring their data to discussions to create a complete picture of the community. Payers receive reports tracking client risk factors and health and social outcomes based on the completed HUB pathways they pay for.

**Financing**

The Northwest Ohio Pathways HUB uses a mixture of grants to sustain special projects and HUB infrastructure, as well as contracts with five Medicaid managed care plans that pay the HUB for the outcomes the CHWs achieve. The HUB then pays the organizations that employ the CHWs for the outcomes they have earned. The HUB is a pay-for-performance model. Care coordinating agencies are paid for services provided by the CHW and outcomes achieved with their clients. In order for this to occur, the HUB bills Medicaid Managed Care monthly for all services completed in the previous month for their individual members.

**Governance**

The HUB is housed in the Hospital Council of Northwest Ohio, a hospital association for the 18-county region of Northwest Ohio. The HUB was established out of a desire to fix the high rates of low-birthweight babies born in the community. The Hospital Council was selected as the host organization because of its neutral standing with all of the health partners as well as the success of CareNet Toledo/Lucas County, a charity care network for low-income residents who are uninsured but not eligible for public or private coverage.

While initially having a health care focus — a health care organization putting CHWs in the health systems, in the health department, and in the Federally Qualified Health Center — the Northwest Ohio Pathways HUB has spent the last five years building nontraditional partnerships with other entities (e.g., housing, transportation, community centers, churches) as a way to bring those previously unconnected to care into the health care system.

“When you have CHWs who are working in the health system, you’re really getting more residents who already crossed paths with the health system,” says Salamone. “The real question is how do we get people integrated into the health system who have never been there before or who have had bad experiences?”

The advisory committee is composed of medical professionals, plus representatives from Medicaid managed care plans, the Toledo Fire & Rescue Department, the city of Toledo, the Department of Neighborhood and Business Development,
local health departments, the homelessness board, the judicial system, police, local foundations, the March of Dimes, and others. Volunteers from the HUB’s advisory board also review applications from organizations wanting to become a care coordination agency that houses CHWs.

INSIGHTS FROM THE COLLABORATIVE

Salamone says one of the biggest keys to successful local alignment is relationships.

“You need to have good, established, long-standing relationships with your community partners to be able to go in and propose something like giving 25 housing choice vouchers to our families. That's not something that you can just walk in and demand of the city's housing authority.”

Salamone says another key ingredient is commitment — commitment of leadership and a commitment to collaborating.

“I think it comes down to leadership from each sector being on the same page — leaders who know that it is about the bigger mission, as opposed to the bottom dollar. It still takes years to build [alignment], regardless of how passionate everyone is about it.”

INSIGHTS FOR ALIGNING

- The Northwest Ohio Pathways HUB builds on a sense of urgency — the need to address high rates of low-birthweight babies.
- The HUB model is a great example of aligning with payers, which produces a sustainable funding stream for much-needed services.
- By employing CHWs with lived experience, the model is likely able to better meet peoples’ goals and needs through a strong community voice.

ALIGNING IN ACTION

All of the Northwest Ohio Pathways HUB’s partners have “bought into” the issue of infant mortality and understand that addressing it brings benefit to the community. Partners align their work so that all systems within the community are “moving in the same direction” and working together to break down barriers.

Nearly half of pregnant clients of the HUB had no transportation. With data about how a lack of transportation is a risk factor for infant mortality, the Northwest Ohio Pathways HUB applied for funding through the Federal Transportation Administration, in partnership with the Ohio Department of Transportation. This funding and a partnership with a local transportation company enabled the launch of the Baby and Me Ride Free program, which allows pregnant women and mothers with a child under age 1 to receive an annual bus pass for the transit system.

Another pregnancy risk factor is unstable housing. Working with local housing authority for a long time brought the issue of infant mortality to the forefront for them, so that infant mortality is now a priority in their strategic plan, and they have reserved 25 housing choice vouchers for pregnant women, or women with children under age 1. Pregnant HUB clients get priority for low-income housing.

ALIGNING SYSTEMS FOR HEALTH

Health Care + Public Health + Social Services

55 Park Place NE, 8th Floor
Atlanta, GA 30303
ghpc.gsu.edu/projects/aligning