

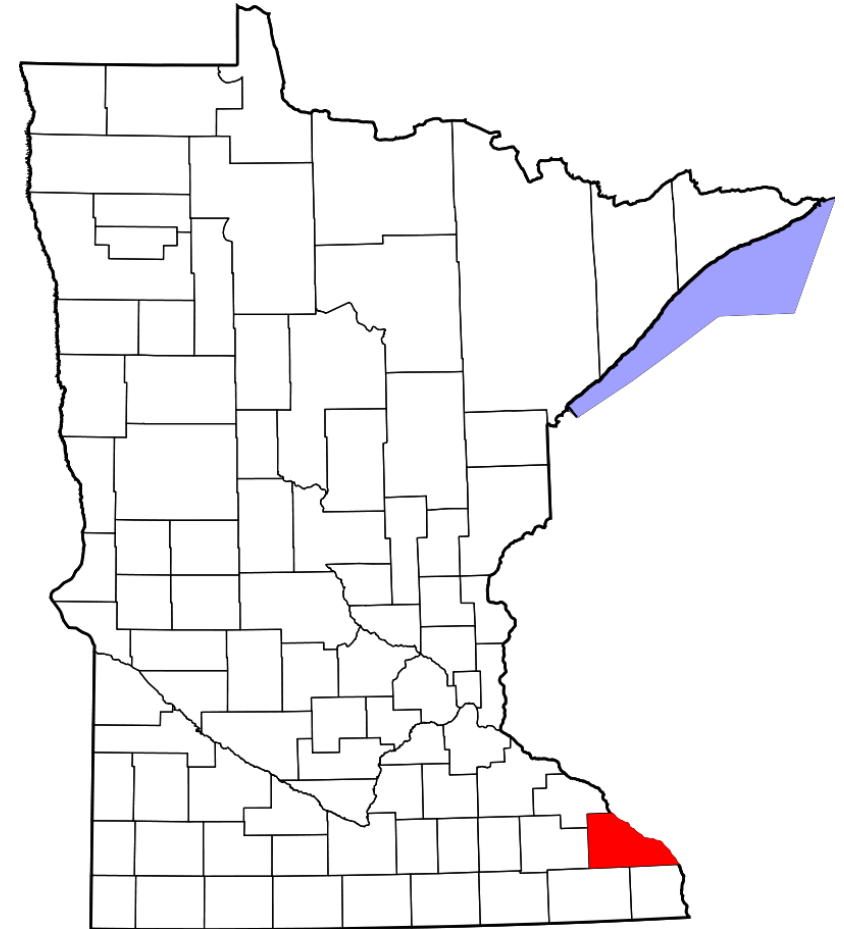
AN EVIDENCE BASED APPROACH TO COMMUNITY-BASED CARE COORDINATION:

PATHWAYS COMMUNITY HUB INSTITUTE (PCHI) MODEL IMPLEMENTATION IN WINONA COUNTY, MN



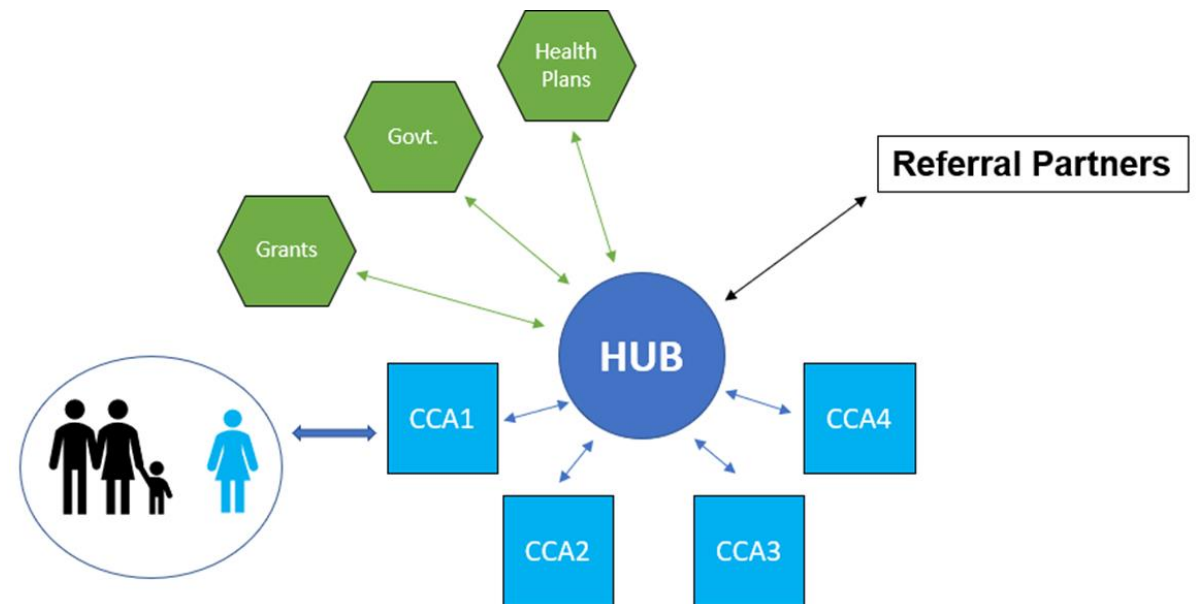
SESSION OBJECTIVES

- Participants will enhance knowledge and skills to:
 - Define the Pathways Community HUB Institute (PCHI) Model of care coordination
 - Describe examples of PCHI Model implementation and progress in rural Winona County, Minnesota
 - Explain what has been learned through the implementation process
 - Understand how to explore implementation of the PCHI Model in your community



PCHI MODEL OVERVIEW

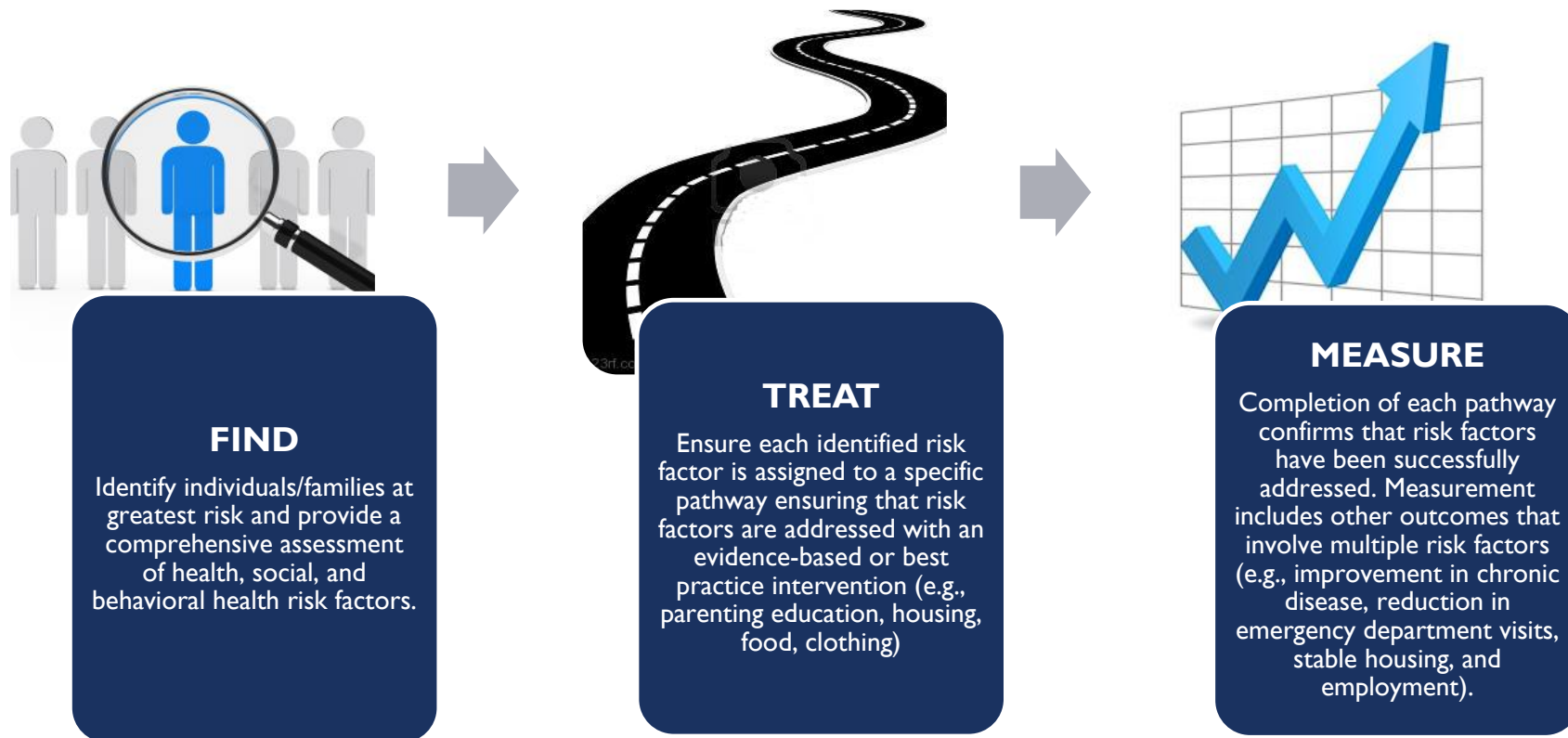
- A centralized community resource that utilizes community health workers to link individuals to health and social services
- Uses existing community resources more efficiently and effectively
- Uses shared metrics to identify and track risks
- Provides holistic care coordination = one worker for the whole family
- A sustainable structure of payments for outcomes
- Is owned by the community, directed by the community



Outcome Based Contracts:

- Payors & HUB
- HUB & CCAs (care coordination agencies)

PATHWAYS COMMUNITY HUB PRINCIPLES



FIND: EVOLUTION OF REFERRAL CRITERIA

- **At inception:** Food insecurity
- **In response to COVID:**
 - Food insecurity
 - and/or Housing insecurity
 - and/or Mental health concerns
- **Current:**
 - Food insecurity
 - and/or Housing insecurity
 - and/or Mental health concerns
 - and/or 5+ emergency department visits in the past 12 months
- Criteria will continue to evolve



REFERRAL PARTNERS



Winona Health



WINONA FAMILY YMCA



TREAT: 21 EVIDENCE-BASED PATHWAYS

- Adult Education
- Developmental Referral
- Employment
- Family Planning
- Food Security
- Healthcare Coverage
- Housing
- Immunization Referral
- Learning
- Medical Home
- Medical Referral
- Medication Screening
- Medication Reconciliation
- Medication Adherence
- Mental Health
- Oral Health
- Postpartum
- Pregnancy
- Social Service Referral
- Substance Use
- Transportation



PATHWAYS

- One risk factor at a time
- Completion = Payment
- Finished Incomplete Pathway = Gaps

Medical Home Pathway

Client needs an ongoing source of primary care.
Start Date _____

Determine client's healthcare payment source:

- Medicaid
- Medicare
- Private Insurance
- Marketplace
- Dual Eligible (Medicare and Medicaid)
- Military
- Self Pay
- Other _____

Select healthcare provider and schedule appointment.

Provider _____
Appointment Date _____

Use Learning Pathways to document all education related to medical home.

Confirm that appointment was kept.

Completion Date _____
Supervisor Signature _____

Housing Pathway

Household member(s) need safe and stable housing. Answer housing questions below.
Start Date _____

Confirm appointment with housing organization.

Date appointment kept _____
Contact person's name _____
Contact person's phone number _____

Monitor housing progress at least every 2 weeks and record updates in Pathway notes.

Household member(s) moved into safe and stable housing on _____ (date)
Address _____

Household member(s) have maintained safe and stable housing for 30 days from move-in date.
Completion Date _____

CHW Signature: _____
Supervisor Signature _____

Progress Checks (dates)

Housing questions:

Homeless

- Living outside
- Living in shelter
- Living with family or friends
- Other _____

Eviction

- Too many people
- Drug-related
- Legal issue
- Criminal history
- Untidy home
- Unpaid rent
- Other _____

Has housing, but needs new housing:

Safety issues

- Environmental issues (infestation, mold, lead, temperature, noise)
- Crime
- Interpersonal Violence
- Fire or other natural disaster
- Other _____

- Too many for living space
- Financial/Poor rental history
- Legal or criminal issue
- Discrimination
- Disability
- Self-imposed (pets)
- Poor location to access services
- Other _____

MEASURE: TRACK PROGRESS WITH PATHWAYS

- Database with real-time participant data
- Track which pathways are completed well in our community and which are not
- See outcomes within each agency
- Share performance data with community partners to guide further action

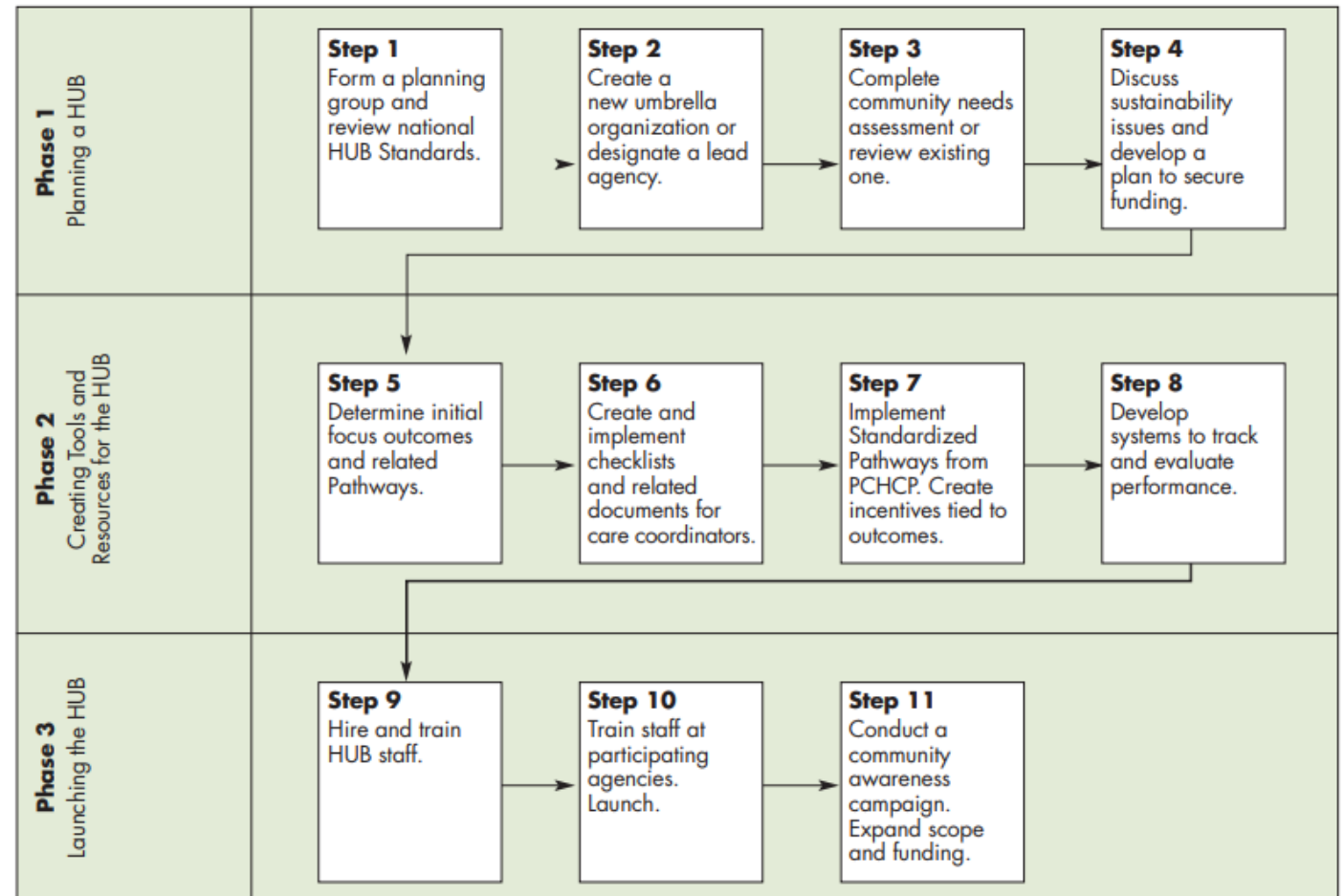


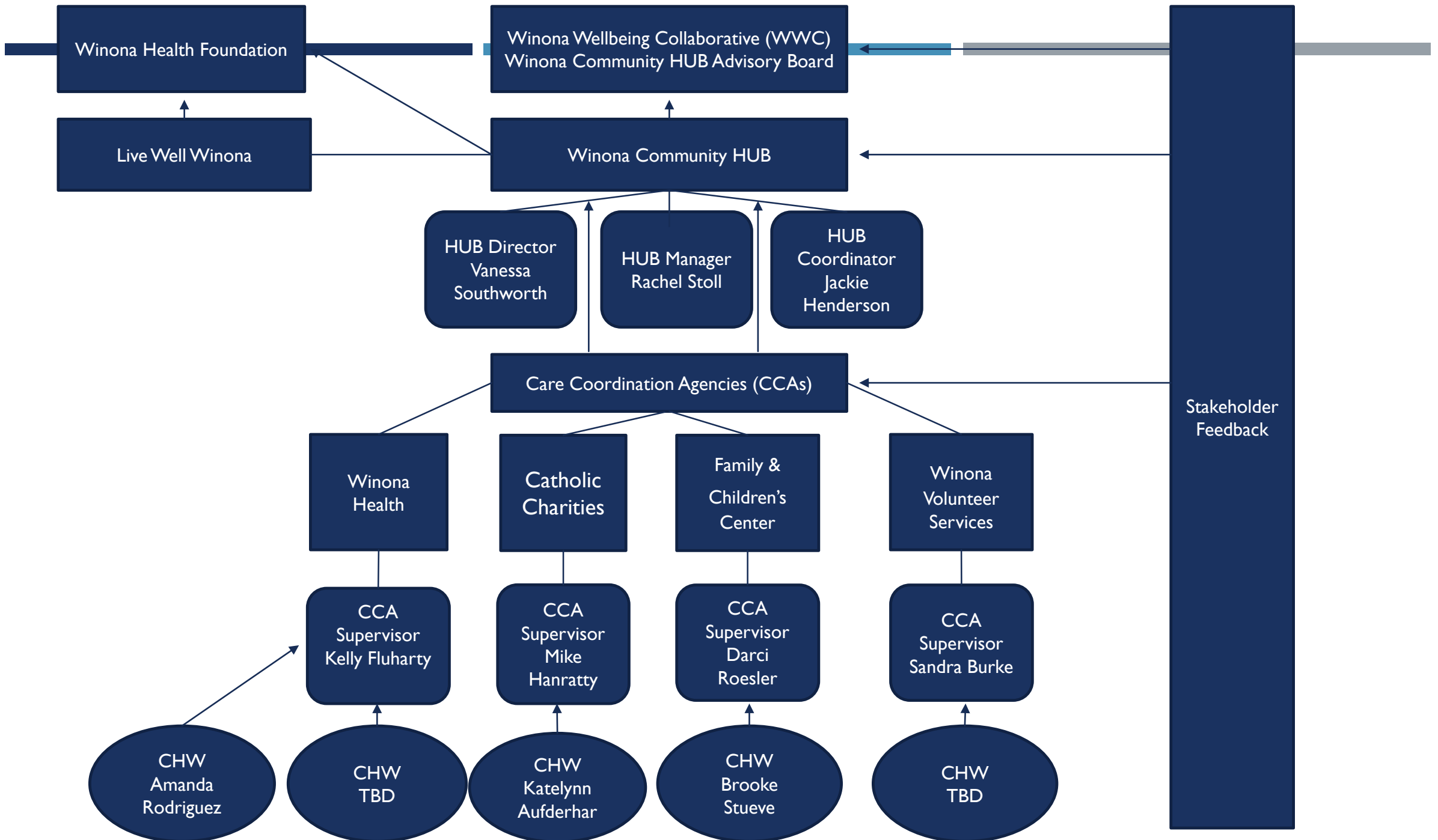
HUB PATHWAYS TRACKING: ALL PATHWAYS IN 2022

Pathway	Initiated	Finished Incomplete	Completed	Median Duration Days	# Clients with PW	% Clients with PW	Percentage Completed
P2-Social Service Referral	400	109	195	11	110	26	64
P2-Medical Referral	330	61	201	10	88	20.8	77
P2-Learning	187	2	182	1	60	14.18	99
P2-Housing	86	33	17	96	82	19.39	34
P2-Mental Health	81	29	21	64	78	18.44	42
P2-Employment	66	27	15	70	61	14.42	36
P2-Substance Use	59	17	10	19	55	13	37
P2-Transportation	55	13	14	47	50	11.82	52
P2-Oral Health	54	15	9	47	53	12.53	38
P2-Medical Home	45	14	11	59	43	10.17	44
P2-Food Security	35	9	13	65	31	7.33	59
P2-Adult Education	28	14	1	247	27	6.38	7
P2-Medication Screening	19	7	7	1	19	4.49	50
P2-Health Coverage	11	4	3	7	11	2.6	43
P2-Immunization Referral	4	3	1	22	4	0.95	25
P2-Medication Adherence	3	3	0	-	2	0.47	0
P2-Family Planning	2	0	1	40	2	0.47	100
P2-Postpartum	1	0	1	30	1	0.24	100
P2-Pregnancy	1	0	0	-	1	0.24	0

PHASES AND STEPS OF BUILDING A PATHWAYS COMMUNITY HUB

- Started our Journey in 2016
- Hired first CHW in 2019
- Currently three CHWs in three Community Care Agencies





EXCITING PROGRESS

- First certified Pathways Community HUB in Minnesota
- First Pathways Community HUB to contract with two payers in Minnesota
- Awarded first round Regional Health Equity Networks Grant by MDH to serve the immigrant and refugee communities in Winona County
- An AmeriCorps site in collaboration with Winona County Department of Public Health with a project focused on participant engagement in program evaluation and improvement
- Awarded second round Regional Health Equity Networks Grant by MDH to serve the immigrant and refugee communities in Winona County and establish a participant advisory committee



Certified June 2022-March 2024



AmeriCorps

SUSTAINABILITY

- Community Support
- Workforce
- Financial
 - Ability to bill for all services, including Systems Navigation
 - Ability to bill for innovative models such as the Pathways Community HUB Model, which bills for outcomes versus fee for service
 - Sustainable rates



WHAT WE ARE WORKING ON: QUALITY IMPROVEMENT

- Quality Improvement efforts launched in 2022
- Continuous Systems Improvement Training from Winona Health CSI team
- Addition of .5 FTE due to Stratis Health Building Healthier Communities grant



**Building Healthier
Communities**

Funding by Stratis Health, supporting efforts to build a culture of quality in health care.

WHAT WE ARE WORKING ON: PARTICIPANT FEEDBACK



- AmeriCorps position shared with Winona County Department of Public Health to focus on stakeholder feedback
- Participation at community events
- Participant surveys
- Participant advisory committee

WHAT WE ARE WORKING ON: HEALTH EQUITY

- Regional Health Equity Networks Grant
 - Collaboration with Project FINE
 - Collaboration with Engage Winona
- Participation in Community Health Improvement Plan (CHIP) workgroup focused on health equity
- Increasing our ability to gather feedback from HUB participants



LEGISLATIVE ADVOCACY

- MN CHW Alliance Legislative Action Committee
- MDH Cultural and Ethnic Communities Leadership Council Legislative Workgroup
- Agenda
 - Systems Navigation vs. Care Coordination
 - Removal of Eligible Provider Requirement





QUESTIONS?





THANK YOU!

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