Refuah Community Health Collaborative

DSRIP Oversight Panel Presentation

November 10, 2015

Presenter: Corinna Manini, MD Chief Administrative and Medical Officer

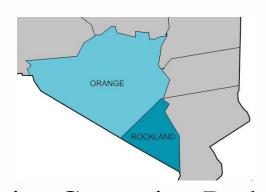


Agenda

- 1. Introduction to RCHC
- 2. Governance
- 3. Funds Flow
- 4. Collaboration
- 5. Cultural Competency & Health Literacy



Refuah Community Health Collaborative



- Three founding partners:
 - Refuah Health Center FQHC (lead)
 - Ezras Choilim FQHC
 - Good Samaritan Hospital
- Two counties; 39k patients
- 73 partner organizations
 - Community Health Centers (FQHCs)
 - Community-based OPWDD/mental health/OASAS providers
 - Social Service agencies
 - Community Hospital
 - Local Government Units
 - Other: nursing homes, home care, etc.

• Executive Governing Body 3/11 seats held by CBOs

Gail Golden

Associate Executive Director VCS Inc. & Rockland Immigration Coalition

Nolly Climes

President
JMHCA-Joint Membership of Health and
Community Agencies

Christopher Fortune

Executive Director
The Arc of Orange County

RCHC Executive Governing Body Membership

1.	Chanie Sternberg	Chair	FQHC - Refuah Health Center
2.	Joel Mittelman	Vice-Chair	FQHC - Ezras Choilim
3.	Deborah Marshall	Secretary	Hospital - Good Samaritan
4.	Sanjiv Shah, MD	Member	Physician
5.	Ann Nolon, MPH	Member	Health Home – Hudson River Healthcare
6.	Nolly Climes	Member	OASAS - Rehab Support Services
7.	Christopher Fortune	Member	OPWDD - Orange AHRC
8.	Uri Koenig	Member	LTC - Pine Valley
9.	Victor Ostreicher	Member	Home Care
10.	Cynthia Wolff	Member	Workforce Labor - 1199
11.	Gail Golden	Member	CBO - Rockland Immigration Coalition
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Initial Funds Flow

- Initial DY1 payment to partners (approved Oct. 2015)
 - Compensation for participation and engagement phase (PAC meetings, committees, etc.)
 - Three tiers of payment to partners
 - Additional contracting incentive



Funds Flow Overview

- Budgeted Payments to Partners
 - DY1 = 61%
 - DY5= 73%
 - Cumulative = 64%
- Projected DY1 Payment Timing
 - Initial Nov 2015
 - 2nd Feb 2016*
 - 3rd Aug 2016*

*Contingent on receipt of Equity funds and next Net Project Valuation payments



Collaboration: Local Government Units



- LGUs have a strong voice in our PPS.
- 4 of the 8 members of our Clinical Governance Committee (CGC) represent the senior leadership of the Departments of Health, Departments of Mental Health, and Departments of Social Services for the two counties we cover.



- The CGC sets the standards by which the PPS and its partners will achieve the clinical DSRIP goals.
- Therefore the input, buy-in and approval of county leadership ensures that our strategies align with the local priorities and Prevention Agenda.



Collaboration: Managed Care Organizations

Fidelis Care has been supportive of Refuah CHC from the earliest stages of DSRIP. Even for our application Fidelis drafted a formal letter of support to the state on our behalf.





Dr. Sanjiv Shah, Chief Medical Officer of Fidelis Care, holds the physician seat of our Executive Governing Body

Collaboration: Other PPSs

Examples of Hudson Valley regional and state-wide collaboration











Cultural Competency & Health Literacy

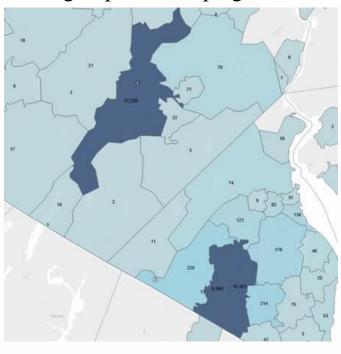
Workgroup Members:

- Bikur Cholim
- Catholic Charities Community Services of Orange County
- Center for a Tobacco Free Hudson Valley
- Community Awareness Network for a Drug-Free Life & Environment
- Ezras Choilim
- Jewish Family Service of Orange County
- Maternal Infant Services Network of Orange, Sullivan and Ulster Counties

- Mental Health Association of Orange -Cultural Equity Taskforce
- OASAS Blaisdell
- Refuah Health Center
- Rehabilitation Support Services
- Rockland Independent Living
- Rockland Paramedics
- Rockland County Department of Mental Health

Cultural Competency & Health Literacy Strategy

Workgroup is developing a formal, evidence-based CC/HL strategy



Initial conclusions:

- 93% of PPS patients are located in Spring Valley, Monroe and Monsey based on heat map data
- "Target" groups identified based on census data:
 - Orthodox Jewish (mainly Hasidic)
 - Black/African-American (mainly Haitian)
 - Hispanic/Latino (mainly non-Mexican non-Puerto Rican, Central American)
 - Asian (mainly South Asian)

RCHC is also participating in the state-wide Cultural Competency and Health Literacy Collaborative Workgroup, to share best-practices and ensure a cohesive approach.

Implementation of CC/HL Strategy

Rockland Independent Living, Inc.

2.c.i Patient Navigation Project "early adopter"

Partner has a robust navigation program in place addressing many social determinants of health; housing, food, transportation, enrollment, etc.

 Partner specializes in Haitian and Hispanic "target populations" (as well as disabled veterans and re-entry after incarceration) identified by our CC/HL workgroup

• Partner is a CBO with a trusted and well-established presence in the region. Partner will leverage knowledge of existing resources and relationships to create and maintain an online "resource guide"



Best Practices

- Capitalize on knowledge and experience of community based partners, include them in decision-making
- Capitalize on knowledge and experience of LGUs, include them in decision-making
- Take advantage of an "Early Adopter" model pilot program for each project
- Use an evidence-based Cultural Competency/Health Literacy strategy





