# NCIOM Task Force on Accountable Care Communities

January 24, 2018

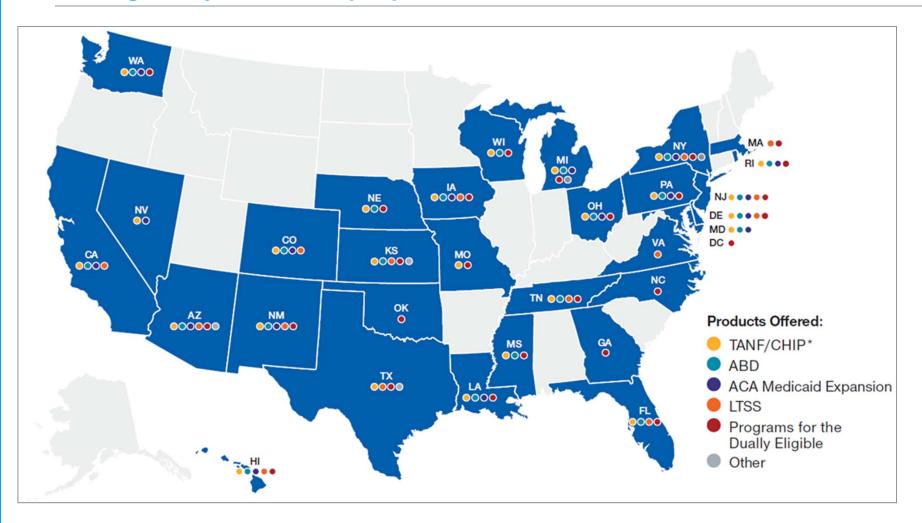
Kevin Moore VP of Policy Health and Human Services United Healthcare Community & State



## **UnitedHealthcare Community & State**



Serving nearly 6.4 million people\*\*



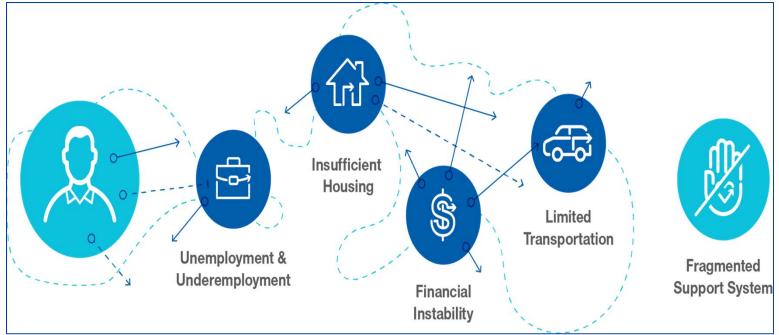
\*Includes programs serving TANF and/or CHIP populations \*\* Approximation

### **The Problem**



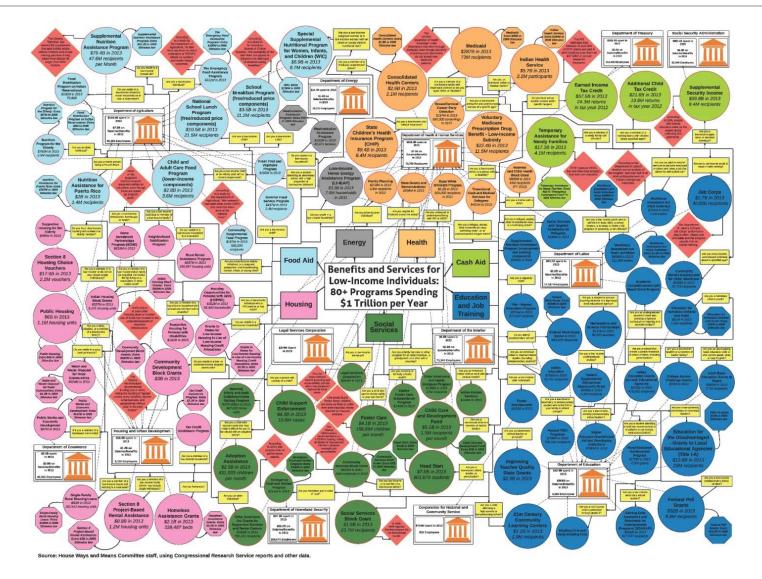
#### Individuals with complex health needs and histories of housing instability face an array of problems which drive up health care costs...

...and the financial resources and delivery systems to address them are fragmented and misaligned.



### The "Solution(s)"?





### Why is housing important?



Health Care Spend and Utilization Comparison Homeless Compared to non-Homeless Members in Maricopa County, Arizona

Emergency Room use... 9x higher

Hospital admissions... 6x higher

Health care spend... 3x higher

	# of Members	Total ER Visits	Avg. ER Visits	Total Admits	Avg. Admits	Total Paid	Average Paid
Not Homeless	305,196	187,433	0.61	50,790	0.17	\$1,163,643,237	\$3,813
Homeless (Z59.0)	185	1,008	5.45	195	1.05	\$2,230,321	\$12,056

Proprietary information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

### The Challenge? Supply v. Demand...



	Surplus (Deficit) of Affo Available Units at or b		H{whphd#Drz#tafrph#HOL,#12#bpr# pruh#wkdg#63 (#ri#DPI#ru#wkh#			
North Carolina	- 196,339		sryhuv #jxghdqh#zklfkhyhu#u# kljkhul			
<b>USA Totals</b>	-7,386,799					
			dable and Available Units per Households at or below ELI			
	North Carolin		46			
	USA Tot	als	35			
	% Within Each Income with Severe Housing Co at ELI					
North Carolina	68%					
<b>USA</b> Totals	71%					
Source: http://nlihc.org/sites/default/files/Gap-Report_2017.pdf						

Proprietary information of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group.

### **CMMI Accountable Health Communities Grant**





- Identify and address health-related social needs of Medicare and Medicaid beneficiaries
- Analyze the impact to health care quality, utilization, costs, and experience
- Waianae Coast and Honolulu
- April 1, 2017-March 31, 2022
- Goals:
  - 75,000 screenings per year
  - Provide tailored, streamlined referral and navigation services
  - Align the efforts of communitybased organization partners
  - Perform continuous quality improvement and gap analysis

### **UHC in the Tar Heel State**



#### - Major Food Banks in NC:

Provided more than 200+ UHG volunteer hours and more than \$100,000 total to date in donations in addition to more than 50 tons of health food options, refrigeration unit, coolers and cookbooks

#### - CBO / Community Brainstorming Session:

Convened 38 CBOs statewide to listen and gain insight into food insecurity – creating impetus to develop \$75k Community Grants program

#### - Community Grants:

Selected 3 grantees through our community grants program to receive \$25k each: SHFB and MANNA food banks, and OIC (FQHC)

#### - Whole Kids Community Gardens:

UHG and Whole Kids Foundation provided a grant to support 22 community gardens across NC to support education and healthy eating

#### - Mobile Food Market Pilot:

Partnered with Advanced Community Health FQHC, Interfaith Food Shuttle (Food Bank), LabCorp and a transportation vendor to offer fresh and healthy food and nutrition education on a weekly basis to targeted diabetic patients



Kevin Moore VP Policy, Health and Human Services UnitedHealthcare Community & State Kevin.Moore@uhc.com