Alliance for the Determinants of Health
From Concept to Collaboration
Improve well-being, reduce healthcare costs, and be a model for change by addressing social determinants of health.

The Alliance Defined

Who: The Alliance was designed to address social determinants of health – those non-medical factors that affect health such as housing instability, utility needs, food insecurity, interpersonal violence, and transportation – of SelectHealth Community Care (Medicaid) members by connecting them to community resources.

What: The Alliance is based on the Accountable Health Communities model of awareness, assistance, and alignment currently under exploration by the Centers for Medicaid and Medicare Services. Awareness includes screening individuals for social needs; assistance includes navigation to resources; and alignment is ensuring the readiness and capabilities of social service providers to meet community needs.

When: The Alliance is a three-year demonstration. At the conclusion in 2021, successful components will be scaled to other Utah communities, and potentially other health insurance plans as best practices are shared nationally.

Where: The Alliance demonstration will take place in Washington and Weber counties in Utah.

Why: The Alliance for the Determinants of Health is a community collaboration formed to improve well-being, reduce healthcare costs and be a model of change by addressing social determinants of health.

How: The Alliance is the result of a collaborative effort from a wide spectrum of partners who are aligning goals, processes, policy, data, resources and outcomes to provide a comprehensive continuum of care for community members.

Zip Code Determines Health More than Genetic Code

<table>
<thead>
<tr>
<th>West Town – 84000</th>
<th>East Town – 84100</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School/College</td>
<td>71%</td>
</tr>
<tr>
<td>Below Poverty</td>
<td>24%</td>
</tr>
<tr>
<td>Household Income</td>
<td>$40,000</td>
</tr>
<tr>
<td>Life Expectancy</td>
<td>75.8</td>
</tr>
</tbody>
</table>

These are actual Utah communities with fictional names and zip codes. The data from these neighboring areas reflects the discrepancy a block or two can make in health equity. Residents on one side of the street may have a life expectancy on average of 10 years longer than their neighbors.
A look back at the inaugural work of the Alliance from conception to launch

Selection of Alliance geographies – Why Washington and Weber counties?

1. Size – A population of at least 2,000 SelectHealth Community Care members was needed to study outcomes and impact

2. Outcome Measures – These communities were identified to have higher than average factors that impact social determinants of health and healthcare costs like lower education and income levels, high emergency department usage, substance use disorders and behavioral health and chronic disease diagnosis

3. Community Readiness – A culture of community collaboration, strong intergenerational poverty or other innovative public health efforts, and a willingness for partners from other sectors to work collectively

In the fall of 2017, Intermountain CEO Marc Harrison stumbled into former Utah Governor Mike Leavitt on a plane bound for Chicago. As they chatted, they discovered they were working on many of the same problems: what are the best ways to help vulnerable populations live healthier lives? To keep the conversation going, they shared a cab ride to their event.

“He asked me why I returned to Intermountain Healthcare after 20 years away,” said Marc. “I told him I felt Intermountain was a model health system for the people we serve, and that our presence really, truly helps us understand populations in ways other people can’t.” The Utah Alliance for the Determinants of Health is the result of that conversation.”

– Marc Harrison, MD
Governor Gary Herbert expresses formal support of the Alliance

JANUARY 2018

JANUARY – MAY 2018

Lisa Nichols,
Intermountain Healthcare
Community Health Assistant
Vice President

Russ Elbel,
SelectHealth Medicaid
Program Director

“Where we see the Alliance benefiting us as the behavioral health provider is the opportunity it gives us to better engage the population we want to serve. It opens up new ways to reach out to those people we are confident we can help but are not accessing our services at this time.”

– Michael Cain,
Southwest Behavioral Health Center Clinical Director

Community Listening Tours
Interviews were conducted with key stakeholders in Washington and Weber to begin defining how goals, populations, interventions and data measurements could align to address social determinants of health. They also provided an opportunity to seek commitments for the local and executive steering committees as well as the state advisory committee. These in-depth discussions about community resources and readiness included leadership and input from the following:

- Local Health Departments
- Local Mental Health Authorities
- Federally Qualified Health Centers
- Human Services
- Public Officials
- Police/Justice Departments
- Schools and Universities
- Social Service Providers
- Advocacy Organizations

Social Determinants of Health

Primary/Secondary

Utility Needs

Income & Employment

Housing Instability

Health Behaviors

Transportation

Interpersonal Violence

Education

Food Insecurity

Family & Social Support

Governor Gary Herbert expresses formal support of the Alliance
Community Steering Committees Convene

Both Washington and Weber Alliance geographies are led by a local community steering committee that includes representation from healthcare, behavioral health, government, education, public health, advocacy and social services. These local steering committees are instrumental in shaping the Alliance interventions.

Washington County Co-Chairs

Michael Cain,
Southwest Behavioral Health Center Clinical Director

Amber Rich,
Intermountain Healthcare Community Partnership Specialist

Weber County Co-Chairs

Brian Bennion,
Weber Morgan Health Department Executive Director

Angela Choberka,
Intermountain Healthcare Community Partnership Specialist

Neighborhood Pulse Study

The study included 29 interviews with SelectHealth Community Care members or their adult caregivers living in Washington and Weber counties. Using an interview approach based on Intermountain’s Design for People™ methodology, three- to four-hour interviews took place in individuals’ homes and neighborhoods and covered a range of topics from childhood experiences to current living conditions. The emerging opportunities for improving the health and wellbeing of participants were:

1. build personal capacity,
2. enhance current basic resources (e.g. food stamps) with additional “life-bettering” supports to enable them to move toward better, healthier lives, and
3. build or strengthen social networks for ongoing support.

Common themes among participants were:

- Prevalent behavioral health conditions
- Unidentified substance use disorders
- Housing instability – frequent moves, evictions, temporary housing
- Multiple unmet social needs
- Multiple generations experiencing unmet social needs
- Unemployment as a determinant of health
- Uncoordinated social service support
**Lead Community Health Workers Hired for both Alliance Communities**
CHWs are a key part of assisting Alliance participants and work closely with community partners to navigate participants to community resources that improve overall well-being. A lead community health worker and an AmeriCorps member were hired for both communities. CHWs bridge cultural and linguistic barriers and build trusted relationships; they are trained in motivational interviewing and local resources. The CHWs are employed by the Association of Utah Community Health, a not-for-profit primary care association, that has successfully piloted CHW programs in the state.

**Plans announced to add pediatrics to the Alliance**
The original scope for the Alliance focused on adult SelectHealth Community Care members and as enthusiasm for the demonstration grew, there was resounding support for including pediatric members (ages 0-18). This inclusion of pediatrics is backed by strong correlation between social determinants of health and early childhood development as well as school readiness. The pediatric model includes training for trauma informed care and screening for safety within the home.

**Community Inventories**
Interviews were conducted with community-based organizations to inventory current social resources and gaps. These findings were important in understanding how financial investments can be most beneficial in addressing local social needs, improving community infrastructure as well as benefiting individuals.

**Formation of Financial Distribution Committee**
The Financial Distribution Committee consists of two members of each Community Steering Committee and three members of the State Advisory Committee. The Financial Distribution Committee is responsible for approving formal recommendations from the Community and Executive Steering Committees and determining appropriate recipients and award amounts.

“"I am a firm believer in the power of partnerships. These ongoing discussions provide partners the ability to identify and work on issues and gaps we may not even be aware exist in our systems. The public we serve doesn’t always possess the voice to make organizations aware of the issues and gaps they are experiencing daily. These collaborative partnerships create accountability in our system of care. It helps to close the gaps that can determine if a person experiences success or failure.”

---

Kevin Eastman,
Weber Human Services Executive Director
State Advisory Committee Convenes
The Advisory Committee provides technical expertise and state-level perspective. It includes representation from the Governor’s cabinet, Department of Human Services, Association for Utah Community Health, Utah Department of Health, Leavitt Partners, Utah Hospital Association and others. The Committee is co-chaired by Lieutenant Governor Spencer Cox and Mikelle Moore, Intermountain Healthcare Senior Vice President of Community Health.

Social Determinants of Health Symposium, Washington D.C.
Intermountain Healthcare joined the Orrin G. Hatch Center for Civility and Solutions to conduct a symposium on the social determinants of health in Washington, D.C. Dr. Marc Harrison, President and CEO, and Mikelle Moore, Senior Vice President of Community Health, presented on the Alliance and healthcare innovations. The symposium also included remarks from Deputy Administrator and Director of the Innovation Center with the Centers for Medicare & Medicaid Services, Adam Boehler, as well as the Secretary of the U.S. Department of Health and Human Services, Alex M. Azar II, who spoke on the importance of addressing social determinants and designing models that connect individuals to social services.

Interagency Collaboration for Social Detox Services
In both Washington and Weber counties, law enforcement, local mental health authorities, recovery specialists, local homeless shelters, and Intermountain Healthcare worked out plans to offer social detox services to the public. The social detox beds are housed at Lantern House in Ogden and Switchpoint Community Resource Center in St. George. Social detox is short-term, non-medical treatment, and beds at each shelter are dedicated for people who are in an intoxicated state or withdrawing from alcohol or drugs, but medically stable. The individuals in social detox are required to remain on site for 72 hours and are engaged daily with opportunities for substance use treatment, coaching or other interventions.

“There is a significant need in our community for social detox. The number of homeless individuals who are publicly intoxicated and then have no safe place to go except incarceration is alarming. Social detox provides a unique opportunity for these individuals to receive treatment options, which is vital if we, as a community, are going to make any headway on addiction recovery especially for individuals who need a support system in their lives.”

– Carol Hollowell, Switchpoint Community Resource Center Executive Director
Alliance Executive Committee Convenes

The Executive Committee is responsible for Alliance work structure, strategy, goals and objectives, resource allocation recommendations, policy positions and external communication. It consists of members of the local steering committees, SelectHealth, Leavitt Partners and Intermountain leadership. The Committee is co-chaired by Mikelle Moore, Senior Vice President of Community Health, and Scott Whittle, MD, SelectHealth Medical Director.

Selection Committee Unanimously Selects Unite Us as Digital Platform

A team of internal and external experts ranging from care transformation to care management devoted hours to analyzing and selecting a digital platform that will be used in Alliance communities with potential to scale statewide. This platform will be a vital tool to coordinate and track social service referrals and to measure success. A key consideration in the selection process was the ability for users to make closed-loop referrals and allow organizations to communicate digitally despite varying software and electronic records. The Alliance is funding the digital platform and subsidizes the service for other community organizations.

Community Health Worker Model Testing in Community Settings

Leading up to the holiday break, CHWs made introductions to key community partners and began shadowing teams at Federally Qualified Health Centers — Family Healthcare in Washington County and Midtown Community Health Center in Weber County. Workflows for both of the FQHCs and the Local Mental Health Authorities — Southwest Behavioral Health and Weber Human Services were developed. The testing phase began with screening for social determinants of health needs and referrals to CHWs and community resources.

Accepted into Data Team for the National Quality Forum

The National Quality Forum (NQF) is a not-for-profit unifying organization dedicated to evidence-based improvements in healthcare. Intermountain Healthcare was accepted as a participating member of their social determinants focused initiative that brings together thought leadership and expertise to eliminate disparities. NQF is committed to fast-tracking the integration of social determinant data into clinical practice, address and identify current challenges, and share successful approaches to integration.