

To: Amy Katzen, Rhode Island Executive Office of Health and Human Services

From: Beth Marootian, Director, Strategy and Business Development

Cc: Nancy R. Hermiz, VP Medicaid; David Burnett, Chief Growth Officer

Re: Response to Public Comment Request: Accountable Entity Program Year 2 Requirements

Date: September 16, 2020

Neighborhood Health Plan of Rhode Island is pleased to respond to the Executive Office of Health and Human Services (EOHHS) Proposed Health System Transformation Project Social Determinants of Health Investment Strategy. We provide the comments and recommendations below with the intent to strengthen the outcomes associated with the proposed SDOH Strategy.

- 1. Project Strategy**– Neighborhood encourages EOHHS to extend the SDOH investments and responsibilities with providers beyond the AEs. Neighborhood is extremely concerned with the additional time and burden placed on the AEs and their providers given the AEs focus and commitments for Year 3 is in place through the HSTP Project Plans.

The addition of this significant undertaking will likely distract and diminish the time needed by the AEs and MCOs to focus on opportunities to identify and work on cost savings opportunities. Distracting our ability to realize the quality and savings goals of the program.
- 2. Project Vision** – Neighborhood applauds EOHHS and HEALTH for recognizing the role of SDOH in health care. However, the proposal would be stronger if the impact of racial biases and inequality in health care were more prominent in the state’s vision and approach. To break systemic racism in health care EOHHS will need a determined and focused effort that could benefit from the HSTP resources earmarked under this initiative.
- 3. Project Metrics and Timeline** – the proposal would greatly benefit from clearly articulated metrics. Metrics will inform and help to define the true purpose of each proposed investment. EOHHS should rely on quantifiable and measurable metrics instead of process measures, which tend to be more subjective. Neighborhood recommends adding an overall project timeline to understand when EOHHS intends on starting and ending each investment.

4. **Project Scope and Priorities** – Neighborhood highly recommends eliminating 2-3 of the proposed investments to reduce the participation and implementation burden on the AEs. The proposal fails to include the funding EOHHS is allocating to each investment, which would assist in understanding potential priorities. Neighborhood recommends launching, learning and evaluating: Rhode to Equity and Community Health Teams (CHTs). Further, we recommend the development of CHTs managed directly by providers and AEs.
5. **Rhode to Equity** – Neighborhood endorses the Rhode to Equity investment however, we highly recommend holding off AE and MCO participation until the Program Year 4. Commitments and projects for Program Year 3 have already been made and the AEs and MCOs are well underway carrying out the requirements in the HSTP Project Plans as well as our collective focus on the Outcome metrics and Quality Improvement.
6. **Community Information and Referral Platform (CIRP)** – Neighborhood does not support the use of HSTP funding to develop the CIRP. As discussed at the recent AE Advisory Committee meeting, the launch and oversight of an IT project by EOHHS is highly risky and well beyond the importance for EOHHS to focus on Medicaid policy development and not direct services. Neighborhood strongly encourages EOHHS the business case for the CIRP including the revenue sources for long-term sustainability of the CIRP platform.

We look forward to continuing this effort to develop and enhance the Social Determinants of Health strategy with EOHHS to improve the health of the members we serve.

Thank you,

Beth

Beth Ann Marootian, M.P.H  
Director, Strategy and Business Development