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Systems for Action

colorado school of public health

Connecting Vulnerable Seniors to Nutrition Assistance through a Managed Care Plan

Strategies to Achieve Alignment, Collaboration, and Synergy Across Delivery and Financing Systems

Research-In-Progress Webinar
September 29, 2021
12-1pm ET

Agenda

Welcome: **Carrington Lott, MPH**

Program Manager for Systems for Action

Presenters: **Lisa Dillman, PhD | Suzanne Kinsky, PhD | Qingfeng Liang, MS**

Benefits Data Trust & UPMC Center for High-Value Health Care

Q&A: **Carrington Lott, MPH**

Presenter

Lisa Dillman, PhD

BENEFITS DATA TRUST

Lisa Dillman, PhD, is Benefits Data Trust's first-ever Senior Research Manager. Before joining BDT, Lisa was the Director of Research and Evaluation at Philadelphia's The Franklin Institute — one of the leading science centers in the country — where she focused on managing its external research agenda, program impact research and evaluation, and visitor experience evaluation. In 2016, Lisa was awarded the Marcia Guttentag Promising New Evaluator Award by the American Evaluation Association and she currently serves on the editorial board of the New Directions for Evaluation journal. Lisa received her PhD in Education from the University of California, Los Angeles (UCLA) where she studied social research methodology, her MEd from Temple University, and her BA from the University of Pennsylvania.

Since joining BDT, Lisa has led the development of BDT's overall research agenda in coordination with staff across the organization, as well as external collaborators.

Presenter

Suzanne Kinsky, PhD

Suzanne Kinsky, MPH, PhD is the Director of Research Translation and Capacity Building at UPMC's Center for High-Value Healthcare, has nearly 20 years of experience implementing and evaluating both community- and clinically based health care initiatives. Her research interests include program evaluation and structural interventions to increase access to healthcare and improve health outcomes for vulnerable populations. In her current role, Dr. Kinsky conducts health services research to improve health care outcomes among UPMC members, including those enrolled in the CHC program. She also leads the dissemination of research and evaluation results by writing manuscripts for publication.

UPMC Center for High-Value Health Care

Presenter

Qingfeng Liang, MA, MS

UPMC Center for High-Value Health Care

Qingfeng Liang, MA, MS is the Program Administrator for the Data Analytics at the UPMC Center for High-Value Health Care. He has comprehensive knowledge on healthcare data analytics, program evaluation, and SAS programming. His MS is in Statistics and Computer Science from the University of Delaware.

Overview of Community HealthChoices

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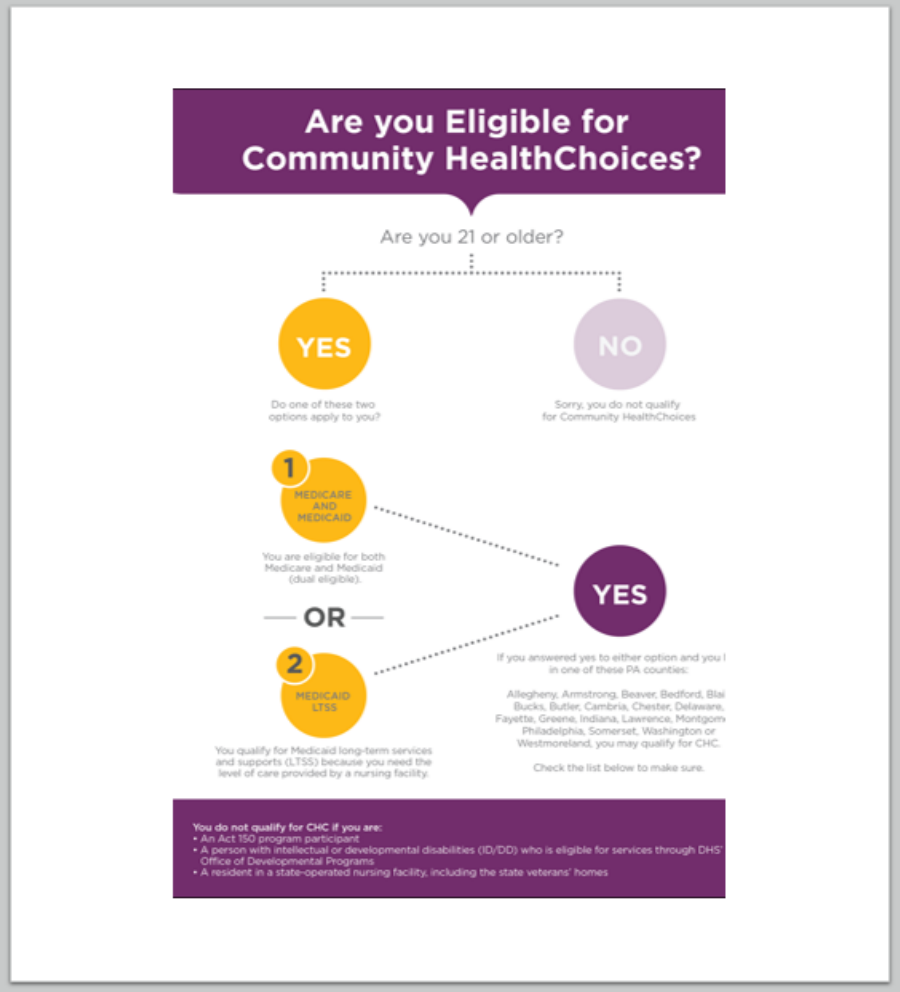
Eligibility Criteria

Community HealthChoices uses managed care organizations to coordinate physical health care and long-term services and supports (LTSS) for:

- older persons;
- persons with physical disabilities;
- Pennsylvanians who are dually eligible for Medicare and Medicaid.

UPMC Community HealthChoices



UPMC Center for High-Value Health Care

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- Established in 2011 as a nonprofit research organization, owned by UPMC, housed within the UPMC ISD

- Goals:
  - Enhance visibility and promote innovation through **externally-funded research** that supports/ leverages ongoing work across the ISD
  - Support **innovation and growth** through a collaborative rapid cycle evaluation and learning process
  - Broadly **disseminate findings** through an active agenda of publication and presentations to spotlight UPMC's unique IDFS value proposition

Benefits Data Trust: What we do

Benefits Data Trust (BDT) helps people live healthier, more independent lives by breaking down barriers to public benefits access.

Data-Driven Outreach

Leverage government, healthcare and CBO data to identify and engage highly eligible individuals

Multi-Channel

Conduct proactive outreach across channels to maximize access points and meet people where they are

Person-Centered

Deliver high-quality, personalized, dignified application assistance at scale

Outcomes-Driven

Track enrollment outcomes to focus on highest impact interventions

Partnering with healthcare to address social needs

UPMC Community HealthChoices

BENEFITS DATA TRUST

In 2018, BDT and UPMC formalized a partnership to:

- Identify UPMC's CHC members who were eligible for but not receiving SNAP (the Supplemental Nutrition Assistance Program) by matching UPMC member lists with state lists;
- Conduct targeted outreach to these members via mail, directing them to BDT's contact center; and
- Provide comprehensive application assistance to members, including document assistance, follow up, and completion of the application on behalf of the eligible UPMC member.

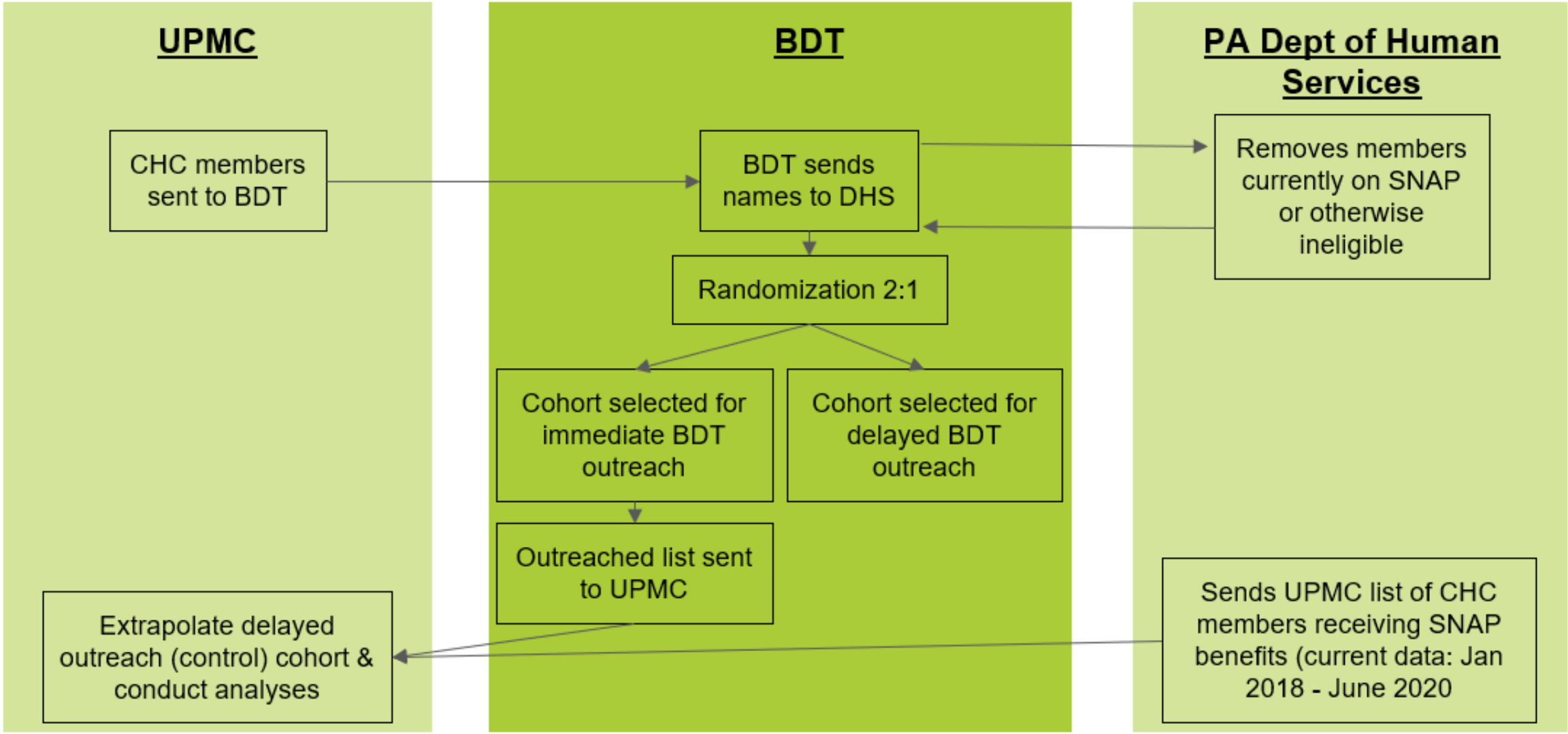
Research Design

- Waitlist design: 66% of CHC members randomized to immediate outreach (intervention group); 33% randomized to delayed outreach (control group)

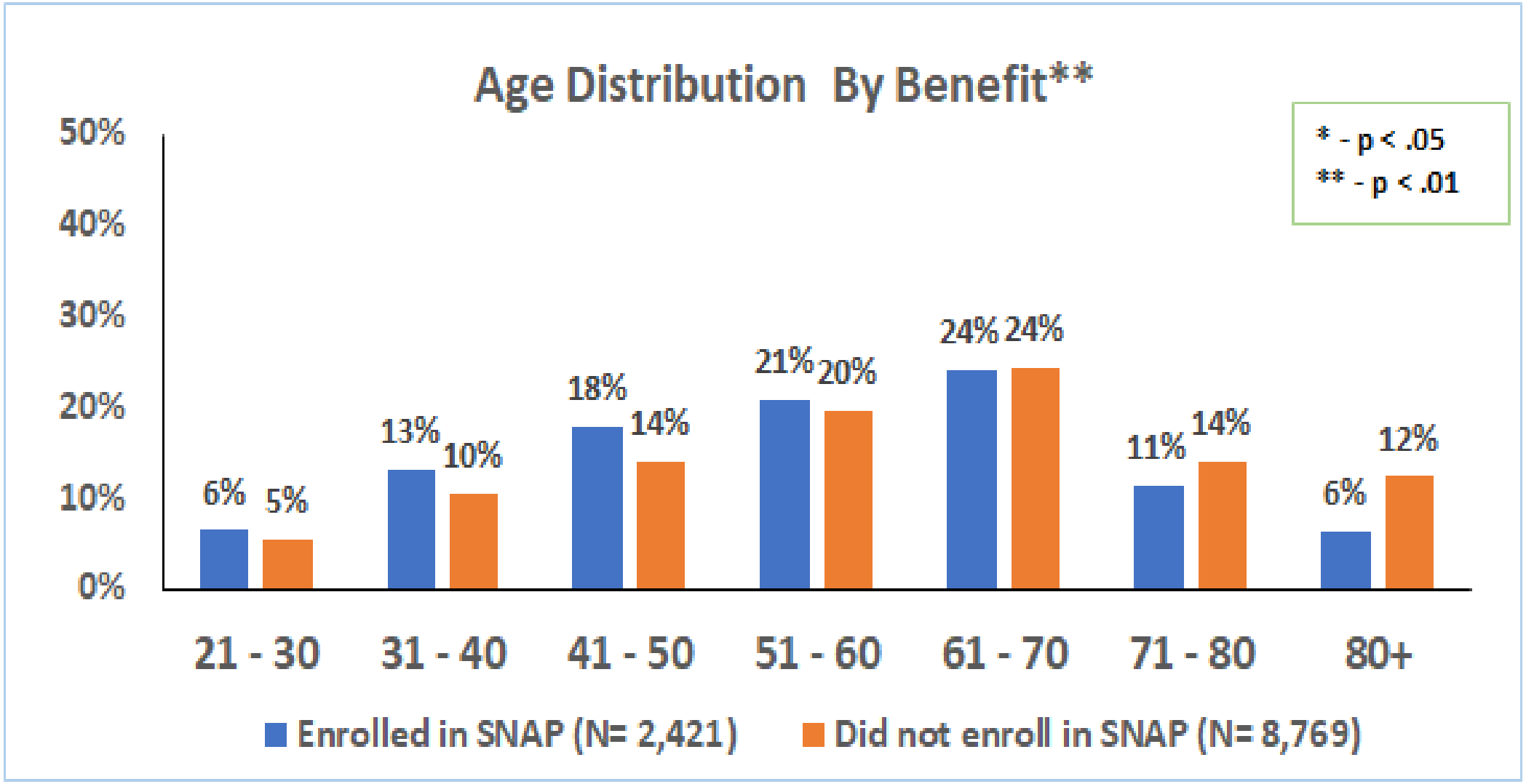
- Primary independent variable: SNAP enrollment

- Primary dependent variable: Hospital utilization within 12 months after SNAP enrollment
  - Secondary outcomes include quality and other utilization/cost outcomes (e.g., medication adherence, ED visits, cost of care)

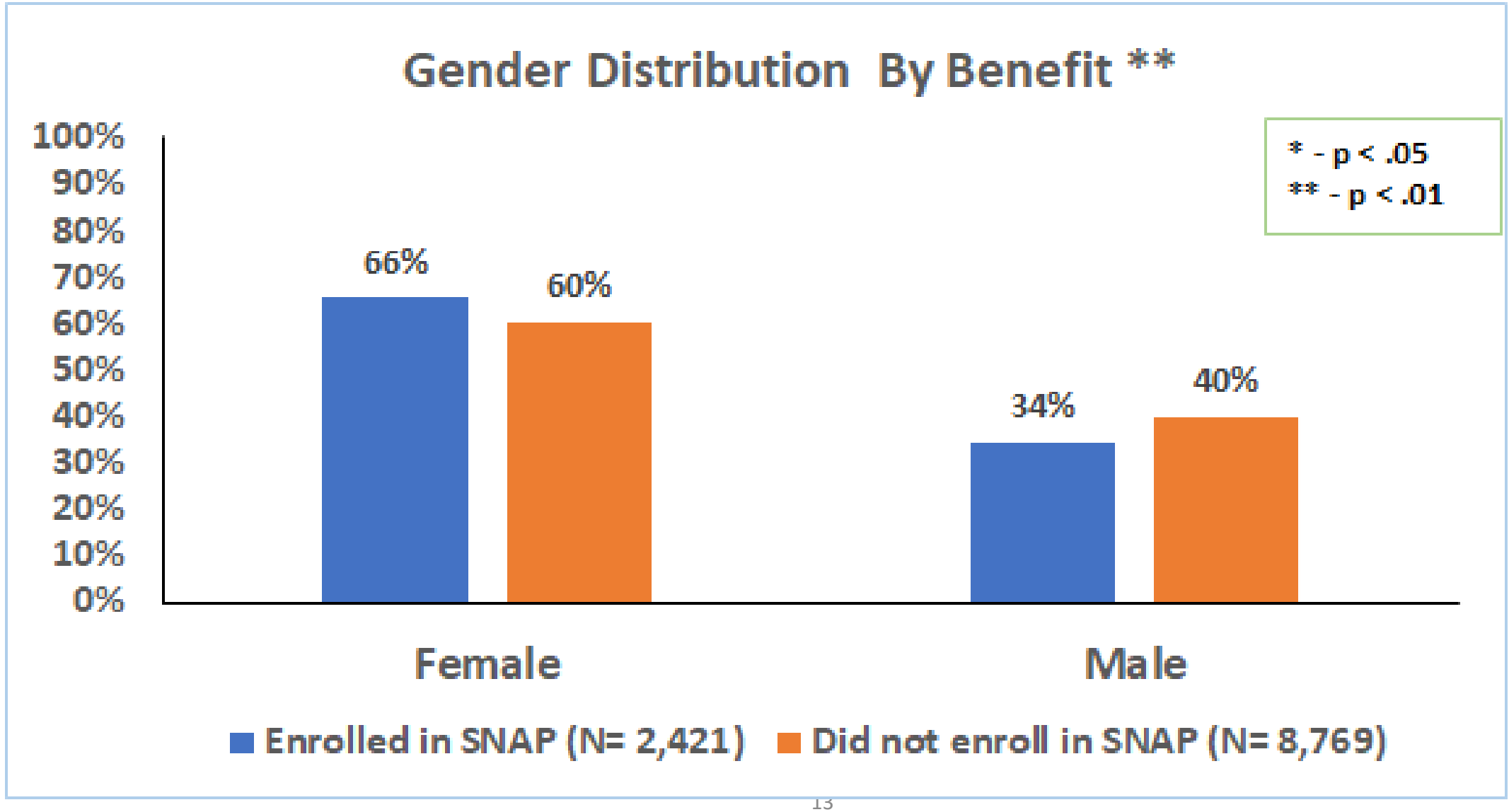
Research Data Flow



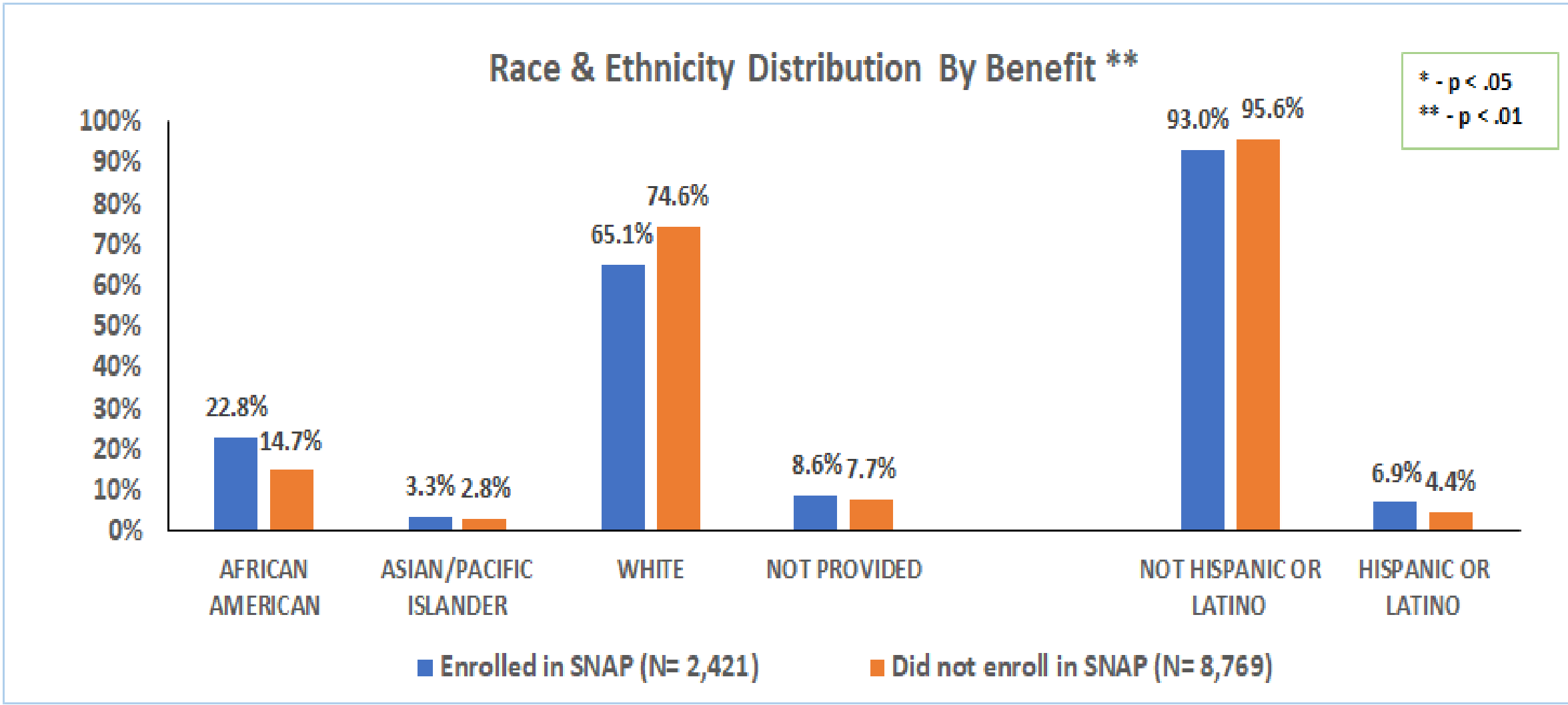
Younger CHC members were more likely than older members to enroll in SNAP after outreach



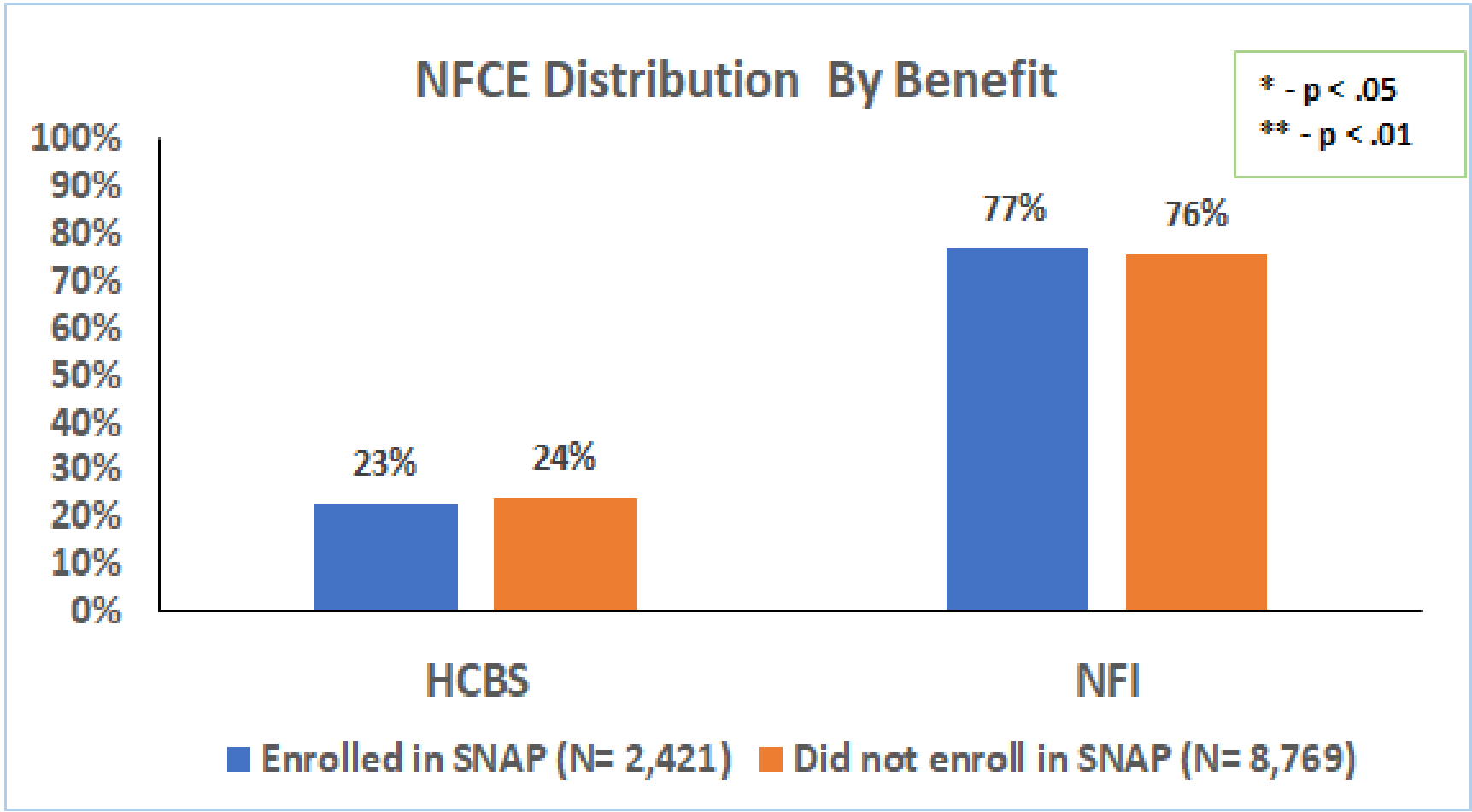
Women were more likely than men to enroll in SNAP after outreach



More African-American, Asian Pacific Islander, and Hispanic individuals enrolled in SNAP after outreach as compared to White and non-Hispanic individuals



No difference in SNAP enrollment by Nursing Facility Clinical Eligibility (NFCE) Status



HCBS = Home & community-based services

NFI = Nursing facility ineligible

SNAP enrollees had slightly lower chronic disease burden, but likely not clinically significant

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Mean Charlson Comorbidity Index (CCI)

SNAP enrollees = 3.02

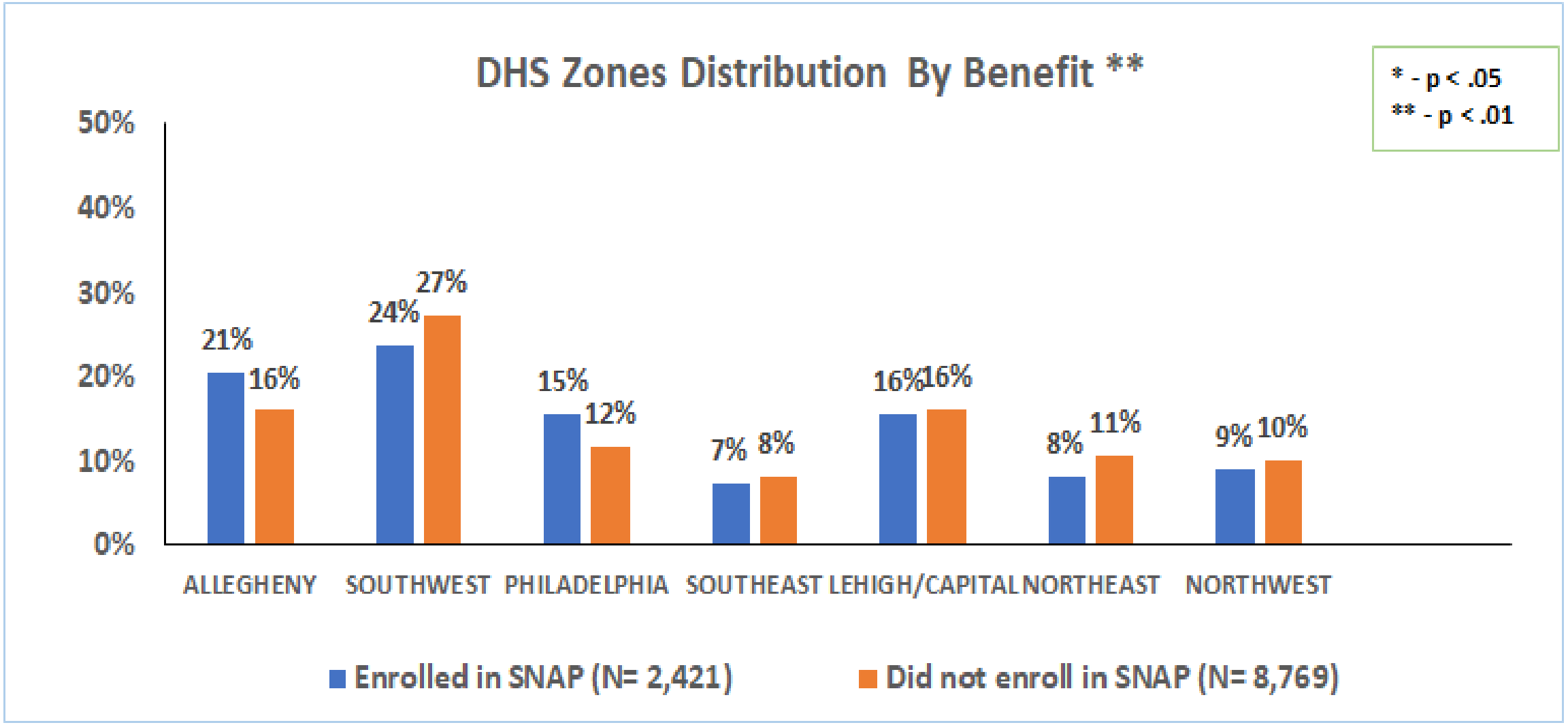
Non-SNAP enrollees = 3.22

About the Charlson Comorbidity Index (CCI)[1]

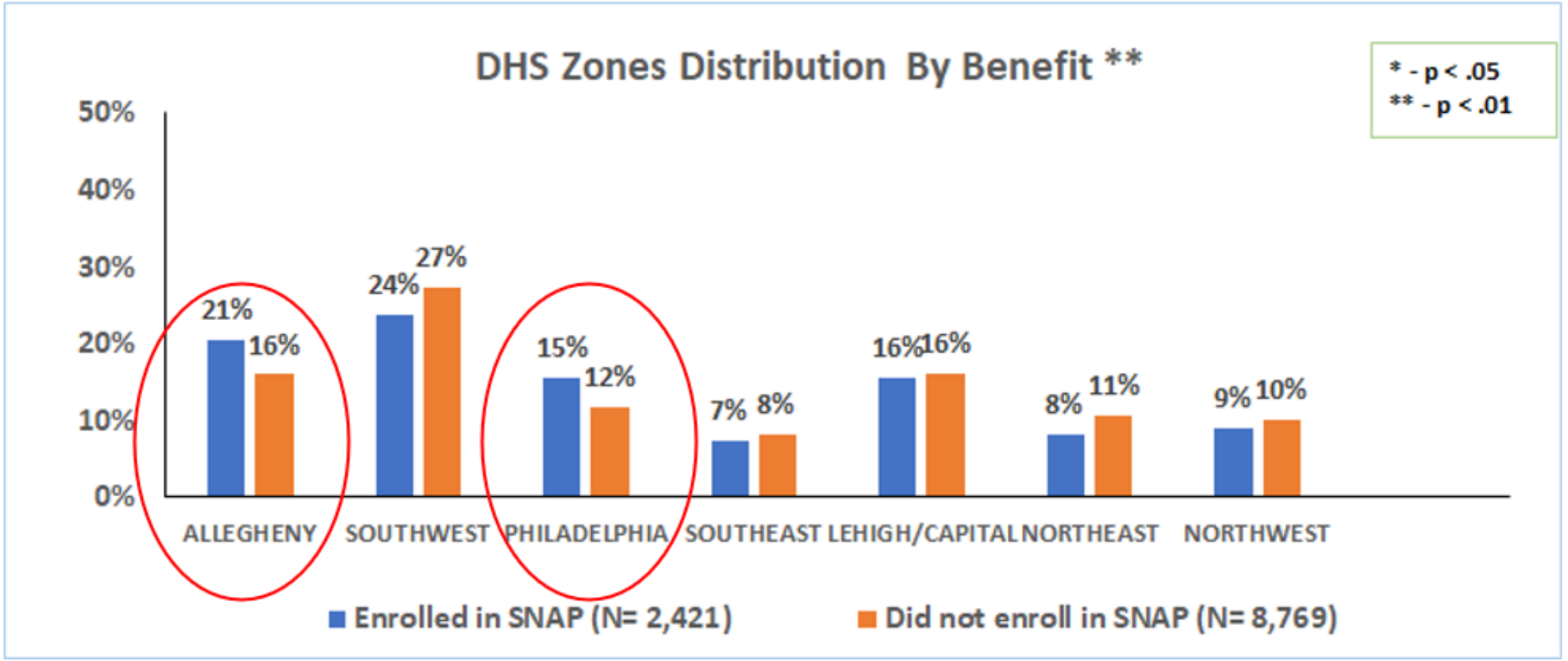
- Measure of chronic disease burden
- Predicts future mortality and health care costs
- Age-adjusted CCI adds 1 point for each decade>40

[1]Sundararajan, V., Henderson, T., Perry, C., Muggivan, A., Quan, H., & Ghali, W. A. (2004). New ICD-10 version of the Charlson comorbidity index predicted in-hospital mortality. *Journal of clinical epidemiology*, *57*(12), 1288-1294.

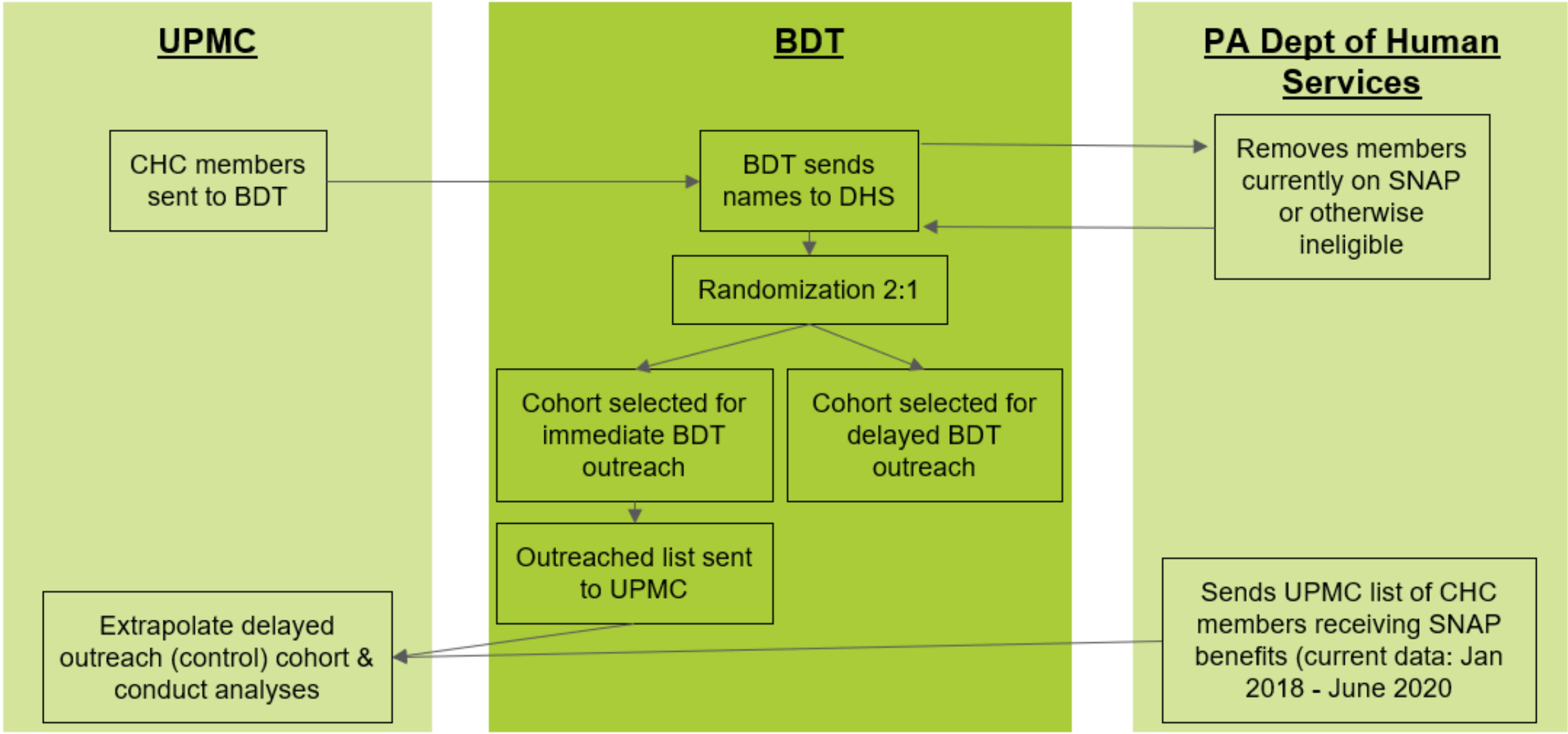
SNAP enrollment after outreach by CHC rollout region



Residents in predominantly urban areas enrolled at higher rates than other regions



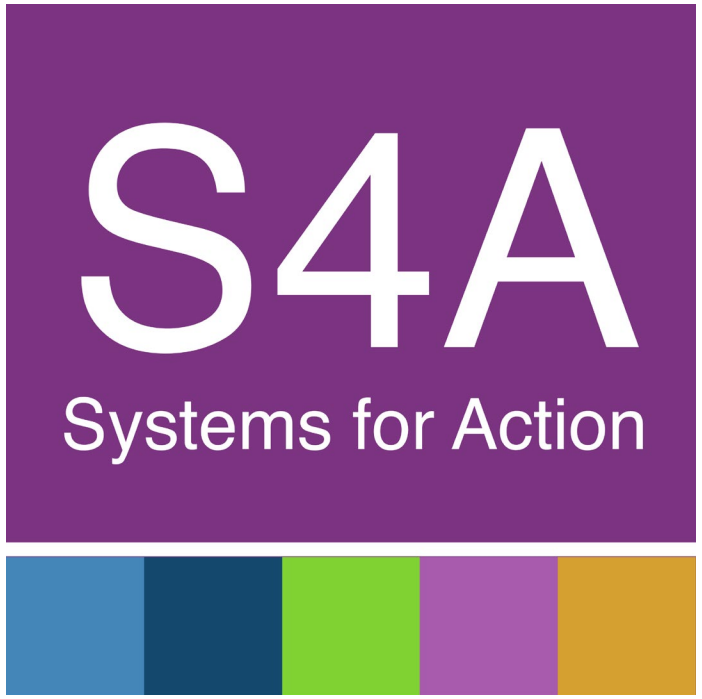
(Revisiting) Research Data Flow



Policy Insights

- Differences in SNAP enrollment based on:
  - Gender, race, ethnicity, geography
- No differences in SNAP enrollment based on comorbidities
- COVID:
  - Policy changes introduced that were intended to help states meet needs of increased COVID demand and need to maintain COVID protocols included:
    - Additional application flexibility
    - Substantially increased benefit amounts

Questions?



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One will be emailed to you.

Upcoming Webinars

Oct. 13 **Addressing the Health and Social Needs of Justice-Involved Young Adults**

Oct. 27 **Transit & Treatment: Effectiveness of Transit System to Improve Substance Abuse and Mental Health in Connecticut**

Register: https://systemsforaction.org/research-progress-webinars

Acknowledgements

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