Health Enhancement Community Initiative

Design Group: Governance and Decision-Making

July 19, 2018
Today’s Objectives

• Provide a brief overview of the Health Enhancement Community (HEC) Initiative to orient the Design Team

• Obtain feedback on initial principles and parameters for:
  • HEC geographies
  • HEC structure and governance
A Health Enhancement Community (HEC) is a cross-sector collaborative entity that:

• Is accountable for reducing the prevalence and costs of select health conditions and increasing health equity in a defined geographic area

• Continually engages and involves community members and stakeholders to identify and implement multiple, interrelated, and cross-sector strategies that address the root causes of poor health, health inequity, and preventable costs

• Operates in an economic environment that is sustainable and rewards communities for health improvement by capturing the economic value of prevention
Key HEC Priority: Sustainability Strategy

Central to the HEC financing strategy is developing arrangements with payors, purchasers/employers, the health care sector, and other sectors to capture savings or other economic benefits that accrue to them and reinvest in HECs.

- Defining the details of the HECs will help identify where savings and other economic benefits will accrue
- Financial modeling will show what the magnitude of the opportunity is to reinvest.
## Key Design Questions

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<tr>
<th>DOMAIN</th>
<th>DESIGN ELEMENTS</th>
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<tr>
<td>Boundaries</td>
<td>Define the best criteria to set geographic limits.</td>
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<td>Focus and Activities</td>
<td>Define what HECs will do to improve health and health equity and appropriate flexibility/variation.</td>
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<td>Health Equity</td>
<td>Define approaches to address inequities and disparities across communities</td>
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<td>Structure</td>
<td>Define how HECs will be structured and governed and appropriate flexibility/variation.</td>
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<td>Accountability</td>
<td>Define the appropriate expectations for HECs.</td>
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<td>Indicators</td>
<td>Define appropriate measures of health improvement and health equity.</td>
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<td>Infrastructure</td>
<td>Define the infrastructure needed to advance HECs (HIT, data, measurement, workforce).</td>
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<td>Engagement</td>
<td>Define how to ensure meaningful engagement from residents and other stakeholders.</td>
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<td>Sustainability</td>
<td>Define financial solution for long-term impact.</td>
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<td>Regulations</td>
<td>Define regulatory levers to advance HECs.</td>
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<td>State Role</td>
<td>Define State’s role.</td>
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Multidirectional Flow of Information and Input to Support Decision Making

Reference Communities
- RC #1
- RC #2
- RC #3
- RC #4

FINAL HEC PLAN
- Healthcare Innovation Steering Committee
- Population Health Council

Other Stakeholders
- Community
- Groups
- Employers
- Payers
- Providers

Office of Health Strategy/SIM
Department of Public Health
Jointly administer and lead initiative

HMA
Planning support and subject matter expertise to develop strategy and draft summary plan
Key Design Issue: HEC Boundaries/Geography

Establishing geographic boundaries for each HEC is necessary to determine a service area for:

- Implementing interventions
- Establishing clear accountability
- Measuring population health outcomes
- Rewarding and sustaining success through financing models
Strawperson Design Principles for HEC Geographies

• HEC propose geographies and then an iterative process with the State
• Statewide coverage
  • No HEC gaps
• No overlapping boundaries
• Minimum population – Threshold TBD
  • To be able to measure changes and minimize risk
• “Rational” boundaries
  • To avoid cherry picking
  • Needs to be functional
Potential Variation in HECs’ Geographic Configurations: EXAMPLES

- Existing Community Collaborative = HEC
- Existing Community Collaborative + Additional Communities = HEC
- Multiple Existing Community Collaboratives + Additional Communities = HEC
HECs will need to have capabilities to perform functions that most community collaboratives have not had to do previously or as precisely before.

HECs will need to:

• Implement interventions that can achieve and demonstrate reduced prevalence and costs and improved outcomes
• Coordinate, manage, and monitor multi-pronged strategies and interrelated programmatic, systems, policy, and cultural norm activities among multiple cross-sector partners
• Use data to manage and report on defined performance measures
• Manage risks
• Govern and distribute implementation funds and financing
Structure and Governance: Key Question

• What should be required vs. what HECs should be able to determine for themselves for their governing structures?

• Other Design Groups are tackling the questions of health priorities, interventions, measurement, infrastructure, financing, etc.
HEC Formation and Formalization

• Goal is to have **focus + flexibility + speed to action**
  • **Focus:** Create a reasonable and reliable governing structure and process that enables them to perform the required HEC functions
  • **Flexibility:** Create a structure that is effective within a HEC’s particular community context (e.g., populations, partners, external structures, etc.) and that can adapt as needed
  • **Speed to Action:** Create a structure that enables a HEC to quickly progress from structural decisions to identifying and implementing strategies
FOR DISCUSSION: HEC Structure and Governance Elements

What should HECs should be required to demonstrate or develop vs. have the flexibility to determine? Examples:

• Transparent governance structure with clearly delineated roles, responsibilities, and decision making authorities and processes
  • New legal entity? MOUs or other formal agreements? Bylaws?
  • Cross-sector governance bodies?
  • Backbone organization(s)?
  • Other?
FOR DISCUSSION: HEC Structure and Governance Elements

• Defined and ongoing mechanisms to:
  • Meaningfully engage and include community members and stakeholders in planning, design, implementation, and evaluation
    • Requirements for inclusion?
  • Support multi-directional communication processes
    • Requirements for process or structure?

• Structures that ensure:
  • Performance management: Identified structure?
  • Financial management: Identified structure or fiscal agent?
  • Fair funds distribution: Define before HEC formation?

• Others?
Final Thoughts/Words of Wisdom?
Next Design Team Webinar

• Based on your feedback, will present a strawperson design for structure and governance for final feedback
• Discuss the design of state-level structure to support HECs