

COLLABORATION IS KEY!

HOW WNY INTEGRATED CARE COLLABORATIVE IS ALIGNING A REGION



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KEY 1: THE CONCEPT



Erie County Senior Services, Niagara County Office for the Aging and a group of Community Based Organizations (CBO's) were awarded ACL's Learning Collaborative grant in 2013.

Health Foundation of Western & Central NY awarded group grants to explore business collaborative.



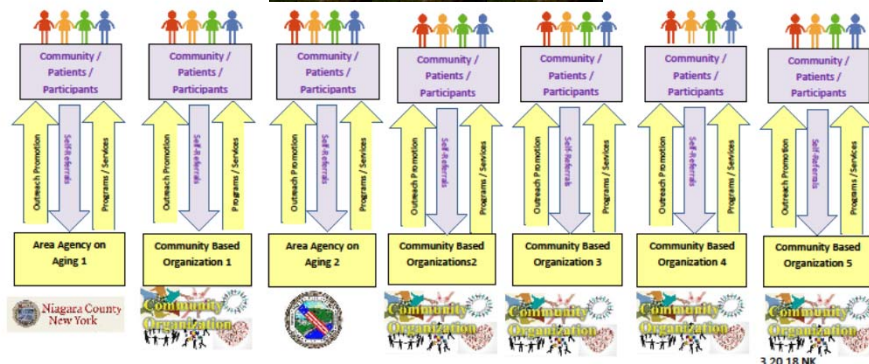


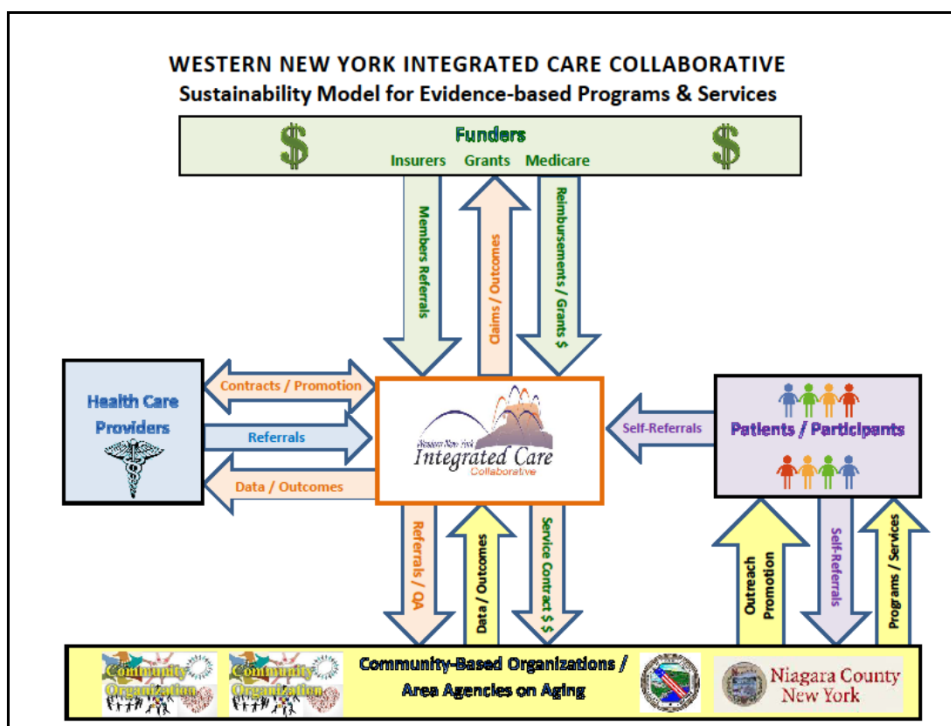
KEY 1: THE CONCEPT CONTINUED...

- **Focus was on:** Collaborative work, Network building and Evidence-based programming
- **Medicare reimbursements:** allow for sustainability
- **Goals:** Flexibility and a REGIONAL network
- **Western New York Integrated Care Collaborative was born.**



“OLD WAY” - WESTERN NEW YORK MODEL for Evidence-based Programs & Services





KEY 2: CHOOSING A "FIRST" PROGRAM



- 1) Erie Co. Senior Services and Niagara Co. OFA were already offering the Stanford(SMRC)-model Chronic Disease and Diabetes Self-Management Programs (CDSMP/DSMP).
- 2) Medicare was beginning to reimburse for DSMP!
- 3) WNYICC set goals to have DSMP become Accredited with AADE & seek Medicare reimbursement

AADE American Association of Diabetes Educators





KEY 3: THE COLLABORATIVE APPROACH

2014-2017




Erie Co. Senior Services (AAA)


- Designated Staff: A Wellness Team of 4 to grow programs, recruit and train peer leaders
- Collaborated with CBO's, Senior Centers and Providers



Niagara Co. OFA (AAA): teamed up with **Niagara Co. Dept. of Health** to facilitate DSMP with nursing staff




WNYICC Board: Board members comprised of well connected individuals from AAA's and established CBO's.



KEY 4: IMPLEMENTATION PHASE 1

2015-2017




Established 10 sites (Erie) / 7 sites (Niagara)

- Requirement of AADE Accreditation
- Established regular sites for familiarity
- Used already-established Senior Centers, CBO locations and Provider offices

Recruited & Trained Peer Leaders (on-going)

- 1st we needed Master Trainers – sent 2 to QTAC for training
- Recruited Volunteers – anywhere and everywhere
- Partnered with CBO's, MCO's and MD offices to have staff trained as Peer Leaders
- Erie Co. Wellness Team collaborated with Niagara Co. OFA/Dept of Health to streamline DSMP process and train Peer leaders





KEY 4: IMPLEMENTATION PHASE 1 CONT...

2015-2017



Promoted Programs with Enthusiasm!

- At Senior Centers, Libraries & community centers
- To Groups: churches, retired teacher groups, etc.
- At Health Fairs
- At Pharmacies, grocery stores, malls
- To Provider groups
- Joined health community coalitions (ie Erie Co. & Niagara-Orleans Co. Diabetes Coalitions, WNY Healthy Communities Coalition, Falls Prevention Coalition)

Worked on Accreditation Application



KEY 5: IMPLEMENTATION PHASE 2

Submitted application for DSME and



Achieved Accreditation -7/2016



2016-2018

Started meeting with Insurance Companies

Began to pilot DSMES Accredited Program

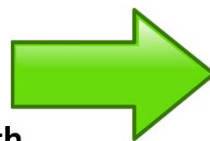
- Requires Referral from Medicare participants' Primary MD
- Added Medical Nutrition Therapy appointment before and after 6-week DSMP
- Used pilot to begin learning the process and begin obtaining outcome data.





KEY 6: IMPLEMENTATION PHASE 3

2017- present



- WNYICC received grant from the Health Foundation of Western and Central NY to hire full-time Director of Business Development
- WNYICC signed contract with Business Acumen Consultant, Tim McNeill
- WNYICC created an aggressive strategic plan for build out



KEY CHALLENGES



Resistance

- ❖ From internal staff, partner agencies
- ❖ Don't like change
- ❖ Don't understand importance of evidence-based programs to business development

Key Staff Turnover

Providers concerns

- ❖ How to get in front of Providers?
- ❖ Question creditability of program for their patients
- ❖ Need easy referral process!

Barriers to contracting with insurers

- ❖ Need outcome data!
- ❖ They want us to be Medicare Provider before setting up pilot
- ❖ They do not want to pay up front - they want to only reimburse





KEY CHALLENGES CONTINUED...



Referral Process is inefficient

How to make AAA's & CBO's see Value in partnering

- ❖ What's in it for them? For their clients?

Medical Nutrition Therapy

- ❖ Documentation is cumbersome and time consuming
- ❖ Training AAA Registered Dietitians

Accreditation Requirements are burdensome

Building Capacity – enrollment in classes is difficult

WNYICC business development challenges

- ❖ Small staff; "Everything takes time"



KEY 7: IMPLEMENTATION PHASE 4 HAPPENING NOW - 2018



1. **Developing Medicare billing plan**

2. **COLLABORATING**

- With Providers
- With AAA's & CBO's
- With Insurance Companies
- Creating IT platform

3. **Tracking Outcomes**

4. **Developing Value Propositions**



QUESTIONS?

Thank you,

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