

Date & Time	December 13, 2017 3:00-5:00PM	Meeting Title	Project Advisory Committee
Location	Morgan Stanley Children's Hospital Room Tower 103 (Just Past Security) 3959 Broadway, New York, NY 10032	Facilitator(s)	Ana Garcia & Andrew Missel
WebEx	https://nyp.webex.com/join/anm93 20video.nyp.org	Conference Line	Dial: 415-655-0001 Access Code: 732-014-814

Meeting Objectives	Facilitator	Time	Start	End
Welcome PAC Committee Members	Ana Garcia	10 min	3:00	3:10
State of the PPS Address: CBO-NYPH Collaboration CBO Impact Grant AHC Social Determinants of Health Grant	Isaac Kastenbaum	20 min	3:10	3:30
Housing in NYC & Linkages between Health & Housing	Henie Lustgarten	10 min	3:30	3:40
Health & Housing Efforts at NYP	Patricia Hernandez	10 min	3:40	3:50
 Discussion: Community Housing Needs What kinds of housing situations are common amongst your clients? To what organizations do you refer? Available resources What changes or resources would help? 	Henie Lustgarten, Patricia Hernandez	50 min	3:50	4:40
Identify Next Steps on Housing for the Committee 1. Continue Conversation at Next Collaborator Symposium (March 2018?)	Ana Garcia, Henie Lustgarten	20 min	4:40	5:00

Action Items				
Description	Owner	Start Date	Due Date	Status
Share list of PPS independent/community practice physicians	Andrew Missel	9/13/17	9/20/17	Complete
Contact Dr. David Albert for any info desired on available CTTS tobacco trainings	Andrew Missel	9/13/17	9/20/17	Complete
Offering smoking cessation and available services in other languages – reach out to NYP as needed	Andrew Missel	9/13/17	9/20/17	Complete



Project Advisory Committee Membership			
1199 SEIU	Isabella Geriatric Center		
ACMH	JCC of Washington Heights		
ARC Ft. Washington Senior Center	Lenox Hill Neighborhood House		
ArchCare	Lutheran Social Services of New York		
Argus Community, Inc.	Methodist Home for Nursing and Rehabilitation		
ASCNYC	Metropolitan Center for Mental Health		
Blythedale Children's Hospital	Metropolitan Jewish Home Care		
Broadway Housing Communities	New York State Nursing Association		
Carter Burn Center	New York State Psychiatric Institute		
Charles B. Wang Community Health Center	Northern Manhattan Improvement Corporation		
Coalicion Mexicana	NYC Dept. of Health & Mental Hygiene		
Columbia Community Partnership for Health	Senator Adriano Espaillat		
Columbia University Medical Center	Pace University		
Community Board #1	Palanque Associates		
Community Healthcare Network	Project Renewal, Inc.		
Community league in the Heights (CLOTH)	Realization Center		
Community Service Center of New York	Riverdale Community Center		
CORNER Project	St. Mary's Healthcare System for Children		
Dominican Women's Development Center	Stanley Isaacs Center		
Fajardo Bienvenido (Independent Physician)	United Methodist		
Fountain House	Upper Manhattan Mental Health Center		
Fort George Community Enrichment Center	VillageCare		
Harlem United / Upper Room AIDS Ministry	Visiting Nurse Service of New York		
Hebrew Home	Volunteers of America		
Hostos CUNY	Washington Heights Business Improvement District		
Inwood Community Services	Weill Cornell Medicine		
Iris House	YM & YWHA of Washington Heights		



NYP PPS Update

Project Advisory Committee December 13, 2017



NYP PPS: NYS Update

Current Time Period: DSRIP Year 3, Quarter 3 (ends 12/31/2017)

Time Remaining: 2 Years, 3 months (ends 3/30/2020)

NYS Focus:

- Regulatory modernization (post-acute coordination, BH-PC integration, telemedicine, cardiology service CON process)
- Value-Based Payment (training, roadmap)
- P4P support (data analytics, cross-PPS alignment)
- Sustainability Planning

Recent Updates / Awards

- All Equity Infrastructure Payment (EIP) funds received
- DY3Q2 reporting just finished. DY3Q3 reporting starting in January 2018

NYP PPS Pivot Update

Population Line	Lead / Support PM	Focus	Status
NYP Adult Medicine QI	Elaine Fleck, MD Felicia Blaise Julie Chipman Andrew Missel	ScreeningsImproving billingAccess	Live
NYP Pediatrics QI	Connie Kostacos, MD Adriana Matiz, MD Maura Frank, MD Maria Burke	ScreeningsAccessImproving billing	Live
NYP Sexual Health	Pete Gordon, MD Sam Merrick, MD Steve Chang	Improving billingContinued metric improvement	Live
Collaborator Provider QI	Matt DeMasi	PCMHConnectivity w/ HospitalSUD Network	Live
CBO/Social Determinants	Mary Hanrahan Patricia Hernandez	HousingNowPow & Healthix RolloutEmbedding CBOs in EDOpioid programming	Live
Transitions / High Utilizers	Isaac Kastenbaum Leslie Chiu Brian Youngblood	ED roles reconfigurationCPEP cell phone distributionDischarge communication	Live

NYP PPS Governance Committees Update

Committee	Frequency	Current Focus
Executive Committee	Monthly	Review of PPS FinancesFunds FlowPPS strategy, cross-PPS alignment
Finance	Monthly	Review of PPS FinancesFunds FlowAlignment of PPS investment to PPS revenue
Clinical / IT Operations	Monthly	 Population Line monitoring / advisement Cross-Population Line alignment Workforce development
Cultural Competency & Health Literacy	Ad-Hoc	Training developmentDisparities dashboard development

Recent Funding Opportunities

1. CMMI Accountable Health Communities Social Determinant Screening and NowPow Referral Rollout [Due 12/7]*

- Washington Heights & Inwood Focus
- Implement universal social determinant screening across clinical settings (NYP and community)
- Support CBO social service providers to meet identified needs (\$30K total)
- Support rollout of NowPow platform to support bidirectional referrals

2. PPS CBO Impact Grant [Due 12/22]

- One-year, no funding limit open funding opportunity
- Prioritizing non-Medicaid billing CBOs
- Focused on driving improvement in (1) primary care engagement, (2) behavioral health engagement, and (3) appropriate ED use

Other Collaboration Efforts Currently Underway

- 1. Embedding CBOs / community providers in emergency department
- 2. Substance Use Provider Network -> focus on training, regulatory navigation, and cross-provider workflows
- 3. Opioid treatment collaboration opportunities to start in 2018
- 4. NowPow broader rollout in 2018 to all PPS members*
- 5. Continued Healthix rollout throughout 2018 to all PPS members

Why Housing?

Patients' personal housing circumstances are the most frequently:

- Cited reason for representation/readmissions from qualitative interviews with frontline staff
- 2. Identified area of opportunity for improving assessment
- 3. Identified area of opportunity for improving frontline staff knowledge of resources and eligibility
- 4. Identified area of concern by community advocacy (Northern Manhattan Agenda, Community Boards, etc.)

And to-date, PPS investment in this area has been minimal.

Questions?

Housing in NYC & Linkages between Health & Housing

Henie Lustgarten President, Bronx Health & Housing Consortium Inc.

Thinking about Health & Housing

- 1. Housing Categories Overview
- 2. Health Facilities Overview
- 3. Inter-Relationships
- 4. What's Happening

Housing Categories in New York: Menu Overview

Building Type	Ownership	Payment	Requirement	Program Type	Service
Single family	Private	Direct	HRA 2010	Shelter-types	Behavioral health
Single room occupancy (SRO)	Organization common ground	Partly subsidized	HUD, homeless	Transitional housing	Social services
Apartment building	City, NYCHA	Fully subsidized/ vouchers	Other	Permanent supportive housing – scatter site or congregate	Disabilities, domestic violence

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Health Facilities Overview

- Community-based primary and specialty care.
- Hospital-based clinics, day treatment.
- Hospital-based inpatient beds:
 - Medical-Surgical;
 - Psych.
- Institutional/short- and long-term facilities.

What is the Problem?

- Health and housing affect each other.
- Homelessness and housing instability are growing; not enough really affordable housing.
- Hospitals are under pressure to serve only people who require hospital-level care.
- Few alternatives.

The New Revolution in Housing & Health (1/2)

Recognition that health and housing need to work together

- Health builds/supports housing:
 - MRT, United Health, St. Barnabas, HHC
- Examples:
 - Consortiums;
 - Cross-organizational health and housing efforts;
 - Housing specialists in EDs;
 - Homeless outreach teams and hospital relationships;
 - Housing teams in hospitals.

The New Revolution in Housing & Health (2/2)

- Health Homes receive homeless premiums.
- Housing providers learn about health and provide health services,
 e.g. medications management, aging in place programs.
- Development of respite programs.
- Housing Rx.
- ICD homeless codes.



Thank You!

Contact Me: hlustgar@montefiore.org www.bxconsortium.org





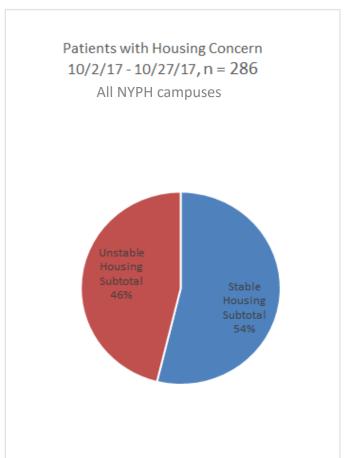
Health & Housing at NewYork-Presbyterian

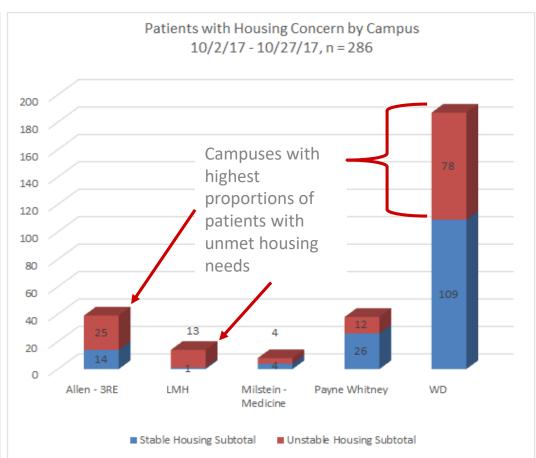
NYP PPS Project Advisory Committee December 13, 2017

NYP PPS Launches Health & Housing Workgroup

- Established September 2017.
- Includes Social Work Managers and front-line Social Workers from Lower Manhattan, Milstein, Allen, and the Westchester Division campuses.
- Goals:
 - Identify the volume of patients with housing instability who are currently in the hospital;
 - II. Streamline workflows and warm-handoffs with homeless outreach programs, shelters, supportive housing programs, and eviction prevention organizations;
 - III. Enhance Social Worker/Care Coordinator assessments and identification of patients in need of housing assistance;
 - IV. Develop housing training curriculum;
 - V. Collaborate with supportive housing providers on respite/transitional housing programs.

Initial Data Indicates Unmet Housing Needs in Upper Manhattan, Westchester, Lower Manhattan

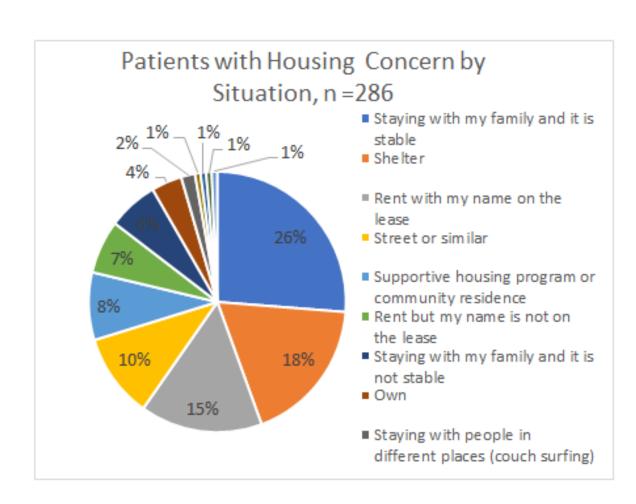




Digging Deeper into Housing Instability by Types of Housing Concerns

Top 5 most commonly reported housing situations:

- Staying with family, stable (26%);
- Staying in shelter (18%);
- Renting, name on lease (15%);
- Living on street, or similar (10%);
- Supportive housing or community residence (8%).



Next Steps for the Health & Housing Workgroup

- Refine baseline data on housing instability and types of housing concerns using length of stay data;
- 2. Align efforts with NYPH Care Coordination Length of Stay Committee;
- 3. Collaborate with Manhattan Outreach Consortium;
- 4. Develop proposal for respite program.

If you have additional questions about the Workgroup, please reach out!

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Discussion: Community Housing Needs

What kinds of housing situations are common amongst your clients?

To what organizations do you refer?

Available resources

What changes or resources would help?

Table 1. Types of Housing Instability and Related Health Conditions			
Housing Issue	Examples	Related Health Conditions	
Homelessness	 Total lack of shelter Residence in transitional or emergency shelters 	 Increased rates of chronic and infectious conditions (e.g., diabetes, asthma, COPD and tuberculosis) 	
		 Mental health issues, including depression and elevated stress 	
		Developmental delays in children	
Lack of affordable	Severe rent burdenOvercrowding	Stress, depression and anxiety disorders	
housing	Eviction or foreclosure	Poor self-reported health	
	Frequent moves	 Delayed or diminished access to medications and medical care 	
Poor housing conditions	Structural issuesAllergens like mold,	Asthma or other respiratory issues	
	asbestos or pests	Allergic reactions	
	Chemical exposuresLeaks or problems with	 Lead poisoning, harm to brain development 	
	insulation, heating and cooling	Other chemical or carcinogenic exposures	
		Falls and other injuries due to structural issues	

Source: Health Research & Educational Trust. (2017). *Social Determinants of Health Series: Housing and the Role of Hospitals.* Chicago: Health Research & Educational Trust.