

# CBOs in Partnership

June 22, 2022

with each other, with healthcare, with community



# Overview of the Advancing Resilience and Community Health (ARCH) Project

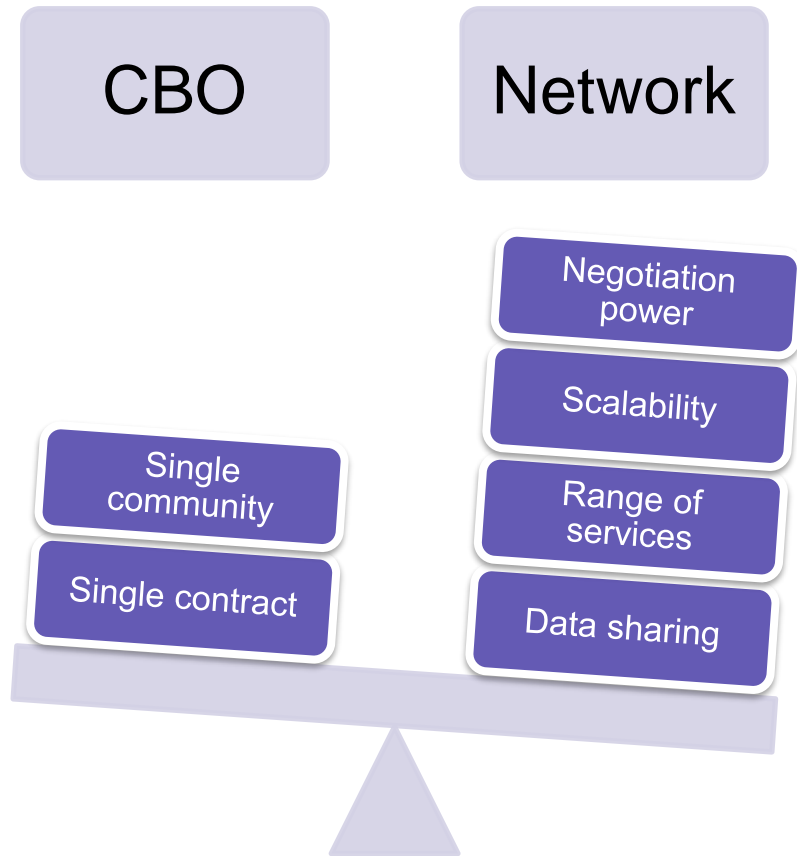
## *Hypothesis was...*

To effectively scale interventions and build a sustainable structure of financing and funding to address SDOH, we believe:

- CBOs that have formed a (formal or informal) network offer a scalable solution to address SDOH and are better suited to partner and contract with health systems/payors
- Payors are looking for a solution to address SDOH
- Networks lend themselves to sustainable and more equitable relationships

# The Case for Network – Healthcare Partnership

We asked: Can networks help tip the scales?



Thomas Jefferson Area Coalition  
for the Homeless  
(TJACH)

# Conclusions from CBOs: Are Partnerships and Networks Effective for Supporting SDOH?

1. Growing the number of financially viable partnerships between CBOs and healthcare hasn't gotten easier, even through networks
2. Networks can provide the critical glue that enhances the ability of a community to come together and respond in very effective ways but....
3. Contracting with healthcare is most likely for the best resourced organizations, which often means white-led
4. Networks are certainly important for influencing policy as the CBOs individually have a very hard time doing it on their own

# Health Institutions' Perspective\*: Defining and Orienting to SDOH

## POLICY LEVEL

What are we doing at the policy level to disrupt structural and societal factors that prevent people from thriving and being healthy?

## PHILOSOPHICAL LEVEL

How are we applying an equity lens to ensure people even have an opportunity to be healthy individuals?

## FUNCTIONAL LEVEL

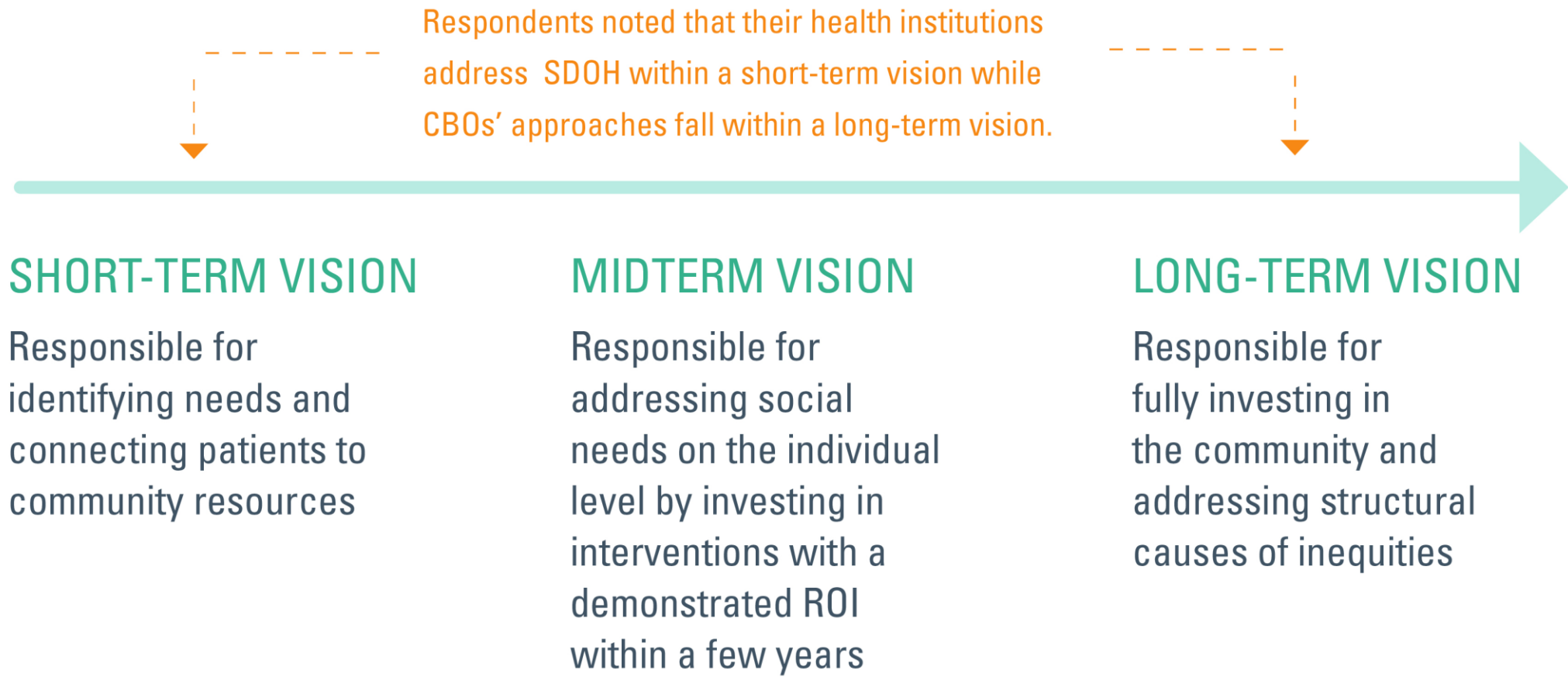
How are we helping families address health-related social needs at the individual level?

Respondents noted that their health institutions use the functional level to guide their SDOH activities.



\* To better understand the challenges health institutions faced in contracting with CBO networks, NFF partnered with Mathematica to conduct semi-structured interviews with seven leaders from five healthcare institutions that participated in the ARCH project.

# Health Institutions' Perspective: Addressing SDOH



# Applying an Equity Lens: What's the Cost?

Partnerships are expensive in time and money.

- Frequently neither HCOs nor CBOs have sufficient funds to cover the true, full costs of partnership. Neither business model is set up to support partnership, which requires flexible, unrestricted funds
- CBOs often share an inequitable burden of effort, which translates into a burden of funding
- **ARCH Example:** One network spent \$2M in two years trying to get a pilot contract off the ground to establish a 'sustainable' revenue stream
- **TAKEAWAY:** Both HCOs and CBOs may need to fundraise specifically to cover partnership work. Financial sustainability can't be a reason to partner
- **REIMAGINE SUCCESS:** Partnership could be a win across the board just not to the bottom line

# More Recent Example: Community Supports for CalAIM

## How MCPs and CBOs Partner for Streamlined Care

**Many of the hurdles experienced under the ARCH initiative are showing up in NFF's capacity building work around CalAIM**

Misalignment with managed care plans (MCPs), county, and state around how to meet the community needs

Lack of direct CBO voice at the planning and coordinating “tables”

Standard MCP contracting policies and practices oriented around compliance and legal protections; impedes contracting and collaborating with CBO partners

Lack of clarity about referral and authorization mechanisms, billing processes, and disagreement about the appropriate duration of services and related reimbursement rates to meet desired outcomes

### **Working capital needs as a result of contract payment delays**

Common experience for CBOs with government contracts, and likely challenging with MCPs

CDFI's have opportunity to play a role, but need to offer appropriately priced and flexible product



# Thank you

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