The Social Service Business Case for Healthcare

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What determines health outcomes

- Genetics: 20%
- Health Care: 20%
- Social, Environmental, & Behavioral: 60%

Health and Social Care Spending as a Percent of GDP

Source: OECD Social Expenditures database (SO CX), OECD Health data 2018.

Data: Expenditures reflect the latest (2013-2016) available data for combined public and private spending. To avoid double counting, social care expenditures reflect total social spending in SO CX excluding health spending included in SO CX, while health care expenditures reflect total health spending in OECD Health Data excluding long-term care (social), health promotion with multi-sectoral approach, and gross fixed capital formation.
Worse Outcomes for US Despite Higher Healthcare Spending

Source (for Obesity Rate and Adults with Multiple Chronic Conditions graphs): OECD Health Data 2018.
Source (for Adults with Multiple chronic conditions graphs): 2016 Commonwealth Fund International Health Policy Survey
Social Determinants of Health: A Quick Overview

- Economic Stability
- Neighborhood and Physical Environment
- Education
- Community and Social Context
- Healthcare System
- Food
- Health Outcomes

Case Management in the Field: Cliff’s Story

True Molina Stories: Cliff
Establishing Supports Prior to Release

ISSUE: 60 year old male released from prison after 28 years with no family or support system to return to and a total personal savings of $75.

ENGAGEMENT: Case manager worked with jail pre-release program to engage individual and educate him about his benefits, and conduct a comprehensive health assessment which revealed indications for Hep C, Asthma, and Depression.

COORDINATION: Case manager arranged for assisted living with a housing partner, connected the individual with a multi-disciplinary care team, and provided transportation to attend treatment, all prior to release. Molina continues to support his progress towards health and independence.
ISSUE: During a period of incarceration longer than 30 days, Medicaid coverage is suspended and any work carried out by a plan prior to the release date is not covered.

COORDINATION: Care coordinators were deployed to coordinate medical and behavioral healthcare services (including medications), secure housing and employment, and connect inmates to familial and social supports upon release.

REDUCED RECITIVISM: Engaged participants had lower jail-recidivism rates (16%) as compared to non-participants (40%). For the 125 participants, an average of $7,854 per member per month savings were generated.
Spotlights From the Field

Avoidable Utilization

$4,079 in savings (per patient per month)

Blood-Sugar Levels

$5,177–7,857 in savings (per patient per month)

Patient Adherence

$3,423 in potential savings (per patient per month)

Source: The Commonwealth Fund