Addressing Social Determinants of Health at ProMedica

Linda Chambers
Associate Vice President
Rehab Services and SDOH Clinical Integration
TOGETHER,
TRANSFORMING HEALTH CARE FOR SENIORS
ProMedica and HCR ManorCare

TWO MISSION-DRIVEN ORGANIZATIONS,
ONE VISION

- NEARLY 70,000 EMPLOYEES
- 30 STATES
- $7 BILLION REVENUE
- HEADQUARTERED IN Toledo, Ohio
- 13 ACUTE FACILITIES
- 2,700 PHYSICIANS
- 600,000 LIVES COVERED
- 450+ POST-ACUTE FACILITIES

MARKET OPPORTUNITY

85+ Within 20 years, the 85+
POPULATION WILL DOUBLE.

OLDER ADULTS are expected to
OUTNUMBER CHILDREN for the
first time in U.S. history.

TOGETHER, WE WILL DELIVER...

- HIGH-QUALITY, PATIENT-CENTERED CARE
- A SEAMLESS AND COORDINATED EXPERIENCE
- CARE IN A SETTING THAT MEETS THE NEEDS
  OF THE PATIENT
- A NEW PERSPECTIVE THAT INCLUDES
  THE ROLE OF SOCIAL DETERMINANTS
  IN HEALTHY AGING
"THOUGH HEALTH CARE IS ESSENTIAL TO HEALTH IT IS A RELATIVELY WEAK HEALTH DETERMINANT"

McGinnis/Foege “Actual Cases of Death in the US”
JAMA November 1993
More people die of preventable diseases and complications in the U.S. than in any other developed nation.*

The United States spends more money per person on healthcare than any other nation with comparable incomes.

The United States has a significantly lower life expectancy than other countries that spend less on healthcare.

*Per 1000,000

## U.S. Healthcare from a GLOBAL PERSPECTIVE

### Exhibit ES-1. Overall Ranking

<table>
<thead>
<tr>
<th>Country Rankings</th>
<th>Overall Rank (2010)</th>
<th>AUS</th>
<th>CAN</th>
<th>GER</th>
<th>NETH</th>
<th>NZ</th>
<th>UK</th>
<th>US</th>
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<tbody>
<tr>
<td>1.00–2.33</td>
<td></td>
<td>3</td>
<td>6</td>
<td>4</td>
<td>1</td>
<td>5</td>
<td>2</td>
<td>7</td>
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<tr>
<td>2.34–4.66</td>
<td></td>
<td>4</td>
<td>7</td>
<td>5</td>
<td>2</td>
<td>1</td>
<td>3</td>
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<tr>
<td>4.67–7.00</td>
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<td>7</td>
<td>6</td>
<td>3</td>
<td>5</td>
<td>1</td>
<td>4</td>
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<tr>
<td>Quality Care</td>
<td>Effective Care</td>
<td>2</td>
<td>7</td>
<td>6</td>
<td>3</td>
<td>5</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Safe Care</td>
<td>6</td>
<td>5</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>2</td>
<td>7</td>
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<tr>
<td></td>
<td>Coordinated Care</td>
<td>4</td>
<td>5</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Patient-Centered Care</td>
<td>2</td>
<td>5</td>
<td>3</td>
<td>6</td>
<td>1</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>Access</td>
<td>6.5</td>
<td>6</td>
<td>5</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>2</td>
<td>6.5</td>
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<tr>
<td>Cost-Related Problem</td>
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<td>3.5</td>
<td>3.5</td>
<td>2</td>
<td>5</td>
<td>1</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Timeliness of Care</td>
<td>6</td>
<td>7</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Efficiency</td>
<td>6</td>
<td>7</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>Equity</td>
<td>4</td>
<td>5</td>
<td>5</td>
<td>3</td>
<td>1</td>
<td>6</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Long, Healthy, Productive Lives</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Health Expenditures/Capita, 2007</td>
<td>$3,357</td>
<td>$3,895</td>
<td>$3,588</td>
<td>$3,837*</td>
<td>$2,454</td>
<td>$2,992</td>
<td>$7,290</td>
<td></td>
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</tbody>
</table>

Note: * Estimate. Expenditures shown in $US PPP (purchasing power parity).
Source: Calculated by The Commonwealth Fund based on 2007 International Health Policy Survey; 2008 International Health Policy Survey of Sicker Adults; 2009 International Health Policy Survey of Primary Care Physicians; Commonwealth Fund Commission on a High Performance Health System National Scorecard; and Organization for Economic Cooperation and Development, OECD Health Data, 2009 (Paris: OECD, Nov. 2009).
PROMEDICA’S JOURNEY IN SOCIAL DETERMINANTS OF HEALTH

The beginning of ProMedica’s journey in social determinants of health

Community Health Needs Assessment
Healthcare Reform
ProMedica’s Mission, Vision & Values

Hunger as a Health Issue

Interventions

Food at Discharge
Provision of 1,234 meals at discharge

Food Redistribution
6,145 pounds of food has been packaged and distributed

Market on the Green
Local economic development
42,119

Food Clinic
50,000 people served

Financial Coaching
343 individuals served, 22% median increase in income

The Root Cause Coalition
ProMedica + AARP Foundation

$50 Million Ebeid Promise

National Social Determinants of Health Institute

Tenacious Problems

Food Deserts
Access to Affordable Housing
Infant Mortality

SDOH Screening 29,400 Total Screen

Food Screening 56,710 Screenings
Depression Screening 24,990 Screenings
Infant mortality 20,000 screens

Catalytic Community Economic Investments
During this journey our community has joined us in investing in our region’s future.
Some of those projects include:

- Renaissance Hotel
- Claremere Center Expansion
- Partnership with the Arts
- The Harp House
- Mary Slagel
- Colony Development
- Marina District Development
- Fort Industry Square Development
- Adrian Michigan Angel Fund
- Delaine Industrial Park
- And more to come

= Totalling $760 M to Date

Stronger Communities

Join Us and Our Spood
Journey Continues
Domains of SDOH RISK

- Food Insecurity
- Financial Strain
- Intimate Partner Violence
- Training & Employment
- Housing Insecurity
- Childcare
- Behavioral Health
- Transportation
- Education
- Social Connection
- Utilities
<table>
<thead>
<tr>
<th>We do ...</th>
<th>But we don’t ...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask about and encourage exercise</td>
<td>Ask about safety in neighborhoods</td>
</tr>
<tr>
<td>Ask about and encourage people to lose weight</td>
<td>Ask about diet and ability to secure healthy food</td>
</tr>
<tr>
<td>Check vital signs</td>
<td>Screen for mental health</td>
</tr>
<tr>
<td>Check a child’s growth</td>
<td>Look for signs of toxic stress</td>
</tr>
<tr>
<td>Provide physical examinations</td>
<td>Ask about insurance information</td>
</tr>
<tr>
<td>Provide education to patients</td>
<td>Ask if they can’t read</td>
</tr>
<tr>
<td>Criticize patients who fail to show up for appointments</td>
<td>Ask if they have transportation</td>
</tr>
</tbody>
</table>
Social Determinants of HEALTH SCREENING

- Food Insecurity Screens: 970,572
- SDOH Screens: 118,030
- Screening employees through EAP

55% HAD POSITIVE NEEDS IDENTIFIED

- 39% of those screened had needs in four domains or more
- 87% of those screened had a high motivation score

TOP NEEDS:
- Financial Strain
- Behavioral Health
- Food
Impact of HUNGER ON HEALTH

• Hungry people are 2.9 times more likely to be in poor health and have a higher likelihood of chronic conditions.

• They are also 2.45 times more likely to be obese as a result of poor nutrition.

• Newborns are 1.81 times more likely to be underweight, often leading to lifelong development and chronic conditions.

• Experiences with hunger had a negative impact on the health of children 10 – 15 years later.

• Children who are hungry are 4 times more likely to need professional counseling.

• Hungry teens are 5 times more likely to commit suicide.
HUNGER in the U.S./Toledo

- 13% of U.S. households are food insecure
- 19.5% of U.S. households with children are food insecure
- 30.3% of U.S. households – single moms with children
- 31% of seniors cut or skip meals due to lack of resources
- 24% undocumented workers
- 91% people returning from prison
- Almost 75% of SNAP recipients are seniors, disabled or working parents
- SNAP benefits are often exhausted before the end of the month

More than 1 IN 5 FAMILIES with children EXPERIENCE FOOD HARDSHIP in Toledo
**AMBULATORY:** PCP writes a referral for patients that are identified as food insecure. Patients receive 2-3 days’ worth of healthy food for their household.

**ACUTE CARE:** Referral upon discharge. Patients receive box of food upon leaving hospital.

**FOOD RECLAMATION:** Food normally thrown away is reclaimed and provided to community hot feeding site.

**URBAN FARM:** Three-acre farm growing 20 fresh fruits and vegetables.

**HCR PILOT:** Food at discharge for SNF patients in Detroit and Flint markets.

**OF 4,000 MEDICAL PATIENTS COMPLETING SCREEN AND FOOD PHARMACY REFERRAL:**

- Reduced ED usage (3%)
- Reduced readmission rates (53%)
- Increased primary care visit rates (4%)
- Reduced pmpm (15%)
Connecting Clinical Outcomes
AND SDOH DATA

Moms who deliver Low-birth weight babies are …

• More than twice as likely to have domestic violence (24%) compared to all referred patients (12%)
• Almost twice as likely to report transportation needs (41%) compared to all referred patients (27%)
• More likely to cite house instability (40%) compared to all referred patients (27%)
• More likely to report using substances (24%) compared to all referred patients (14%)
PLACE MATTERS to Health
THE EBEID NEIGHBORHOOD PROMISE

- Catalytic, $50-million, 10-year commitment to neighborhood revitalization
- National neighborhood revitalization model focused on health
- CDFI Investment: Additional $45M loan pool for housing development, schools, business support
- Social infrastructure and capital development
PLACE-BASED, HEALTH FOCUSED

Financial Opportunity Center

- 100+ units of mixed-income housing
- Preservation + Development
SDOH Business Development and Consulting

- Consulting Services for organizations ready to address social determinants of health in their communities include:
  - Embracing an Anchor Mission
  - Developing your Organization’s SDOH Framework
  - Introduction to Development & Operations
    - Non-Profit Grocery Store
    - Food Clinic
    - Food at Discharge
    - Food Reclamation
    - SDOH Screen & Connect
    - Financial Opportunity Center
  - Customized Operations & Implementation Support
THANK YOU!