# **ATTACHMENT APR**

# DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM ACCOUNTABLE CARE ORGANIZATION (ACO) PY3 ANNUAL PROGRESS REPORT RESPONSE FORM

## PART 1: PY3 PROGRESS REPORT EXECUTIVE SUMMARY

## **General Information**

Full ACO Name:	Atrius Health, Inc.
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## Part 1. PY3 Progress Report Executive Summary

## 1.1 ACO Goals from its Full Participation Plan

The Atrius Health/Tufts Health Public Plans (THPP) Accountable Care Partnership Plan (ACPP) is leveraging the Delivery System Reform Incentive Payments (DSRIP) to meet the following goals:

- 1. Address Patient and Community Social Determinants of Health
- 2. Enhance Care Coordination and Utilization of Care in Right Setting to Improve Health
- 3. Manage Mental Health & Substance Abuse
- 4. Develop Effective Community Partnerships
- 5. Address Home-based Issues Affecting Chronic Disease
- 6. Increase Reliability of Chronic Disease Management to Improve Outcomes
- 7. Increase Effectiveness of Population Health Management for Patients with Gaps in Care
- 8. Establish and Maintain Infrastructure to Support Clinical Programs
- 9. Ensure Compliance of ACPP Programs

These goals are a priority for the ACO because they address the barriers to care faced by the MassHealth population. The socioeconomic and behavioral health factors which affect access to care must be systematically identified and addressed; this may include individual attention through intensive care coordination and additional support both in the practice and in the patients' communities. It is not possible to address the physical needs of some members of this population without first addressing their behavioral health needs. Atrius Health recognized that its prior resources were insufficient to fully address these concerns and has made these barriers a focus of DSRIP investment.

### 1.2 PY3 Investments Overview and Progress toward Goals

Atrius Health's DSRIP investment strategy emphasizes both existing infrastructure and targeted, incremental investments in personnel and resources that support the MassHealth patient population. In this third performance year, DSRIP investments have advanced the goals set forth in the ACO's Participation Plan by maintaining and expanding the programs and infrastructure that form the backbone of Atrius Health's approach to delivering high value care, despite COVID-19 challenges and some setbacks due to the pandemic.

The following four examples illustrate Atrius Health's progress in advancing the initiatives supported by the DSRIP funding in PY3. Atrius Health used DSRIP funding to:

- Ensure high-quality care delivery, care management, and care coordination for our patients despite
  the COVID-19 pandemic. ACO staff rescheduled patients for telehealth visits to avoid delayed and
  deferred care, outreached to at-risk patients to identify needs, and engaged in planning for COVID-19
  vaccination support to socially-vulnerable patients, all while dealing with pandemic disruption and
  burnout in their own lives.
- 2. Continue health-related social needs (HRSN) screening, pivoting to a patient portal-enabled screening process for adults when in-person care was highly compromised due to COVID-19. A collaboration between Quality and Performance Improvement teams, social work, IT infrastructure, and ACO medical leadership allowed for the rapid development and implementation of this initiative.
- 3. Support Care Facilitators, Community Health Workers, Case Managers, and Social Workers. These resources are an essential part of the care team, providing high-touch assistance to patients and their families with medical, behavioral, and social risks. Critical activities of these roles include identifying and addressing social barriers, making connections to community based resources, and supporting care integration with specialty providers. This year, despite COVID-19 challenges, these resources continued program operations, resuming integrated behavioral health case conferences with THPP and monthly high risk case reviews with selected Community Partners.
- 4. Develop, plan, and launch the Embedded Care Manager pilot. The planning team included support from Case Management, ACO Programs, and THPP.

# 1.3 Success and Challenges of PY3

Key ACO successes in PY3 include the following:

1. The COVID-19 global pandemic was the most significant disruption to healthcare delivery in memory. Without exaggeration, every facet of our clinical, operations, and business systems was upended, but our employees persevered and worked tirelessly to meet our patients' needs at every turn. The workforce substantially transitioned to working from home, with Medical Secretaries staffing phone queues from their living rooms and Case Managers managing transitions of care from newly-created home offices. Our clinicians adapted to rapidly changing clinical guidance, providing patient education and counseling and clinical care with the best-known clinical recommendations. To meet these challenges, Atrius Health rapidly established a centralized COVID-19 resource center, drive-through testing capabilities, and an employee health service.

We secured PPE to keep our clinicians, staff, and patients safe. We rapidly scaled our telehealth offerings, implemented payment policies that changed frequently – at times, on a daily basis. Atrius Health rapidly implemented a patient portal-enabled HRSN screening program for adult Medicaid patients, ensuring we could query the health needs of our Medicaid patients virtually and safely, responding to positive needs via locally-tailored tips sheets with resources and social work outreach. We rapidly designed and implemented an employee vaccination service, with patient vaccination planning underway at the end of 2020. These successes reflect the resiliency and creativity of our clinicians, employees, and patients and families.

2. In 2020, Atrius Health and THPP began an innovative initiative to optimize our ability to identify and engage patients in need of complex care management. Traditionally, the efforts of MCO-based care management and medical practice have been siloed and disintegrated, with data not shared in meaningful ways between the organizations. Our goals of this program include: increasing practice engagement with hard-to-reach attributed ACO members, reducing unnecessary ED and inpatient utilization among the target cohort, and promoting greater clinical integration across THPP and Atrius Health care management teams. Enablers of this model include direct access to the EHR and patient registries, joint management, and primary care based champions to support the initiative. We began with one embedded THPP care manager working at three of our sites with large MassHealth populations. Early returns of the program suggest the program has been effective with much greater identification and a 20% increase in patient engagement as compared to more traditional efforts.

## Challenges yet to be overcome include:

- 1. The flip side to the successes cited in COVID-19 response above is the disruption to patient care and employee wellness that continues into 2021. Care gaps persist, as some patients remain fearful of seeking care and with a considerable backlog of preventative screenings, well-care, and chronic disease care. Our employees continue to balance work and family, caring for children and elders during their workday, with commensurate increases in burnout among some. Our patients continue to experience new and deepened social needs due to lost or lessened work. Even as COVID-19 vaccination accelerates, bringing hope for change, real concern remains that those patients that may be left behind. It will require the highest level of creativity and collaboration of providers, health plans, civil society, and every level of government to meet these challenges in 2021 and beyond.
- 2. The recent pandemic exposed the stark inequities of our national health care system and of daily American life. These inequities have existed in plain sight, shaped through centuries of systemic racism, including here in Massachusetts. Across the Commonwealth, at every level in government, there are efforts underway to right these longstanding wrongs. Corporate America has joined these efforts, and at Atrius Health, we have too. We have long been committed to diversity, equity, and inclusion in our workforce and to providing culturally competent care for our patients, but in 2020, we sharpened our focus to create additional meaningful initiatives and programs. Our mission is unwavering: our goal is to provide the right care with kindness and compassion to everyone we serve. As a practice and as an ACO, we will build on the core values of our mission and together, will make a difference, in the careers of our staff and lives of our

patients. Our diversity, equity, and inclusion efforts focus on four key areas: workforce, workplace, patient care, and community. In 2020 we made strides and laid groundwork in each of these domains, but we do not pretend to have solutions to these deep challenges. Diversity, equity, and inclusion will reflect an important focus and challenge for some time.