



KANSAS HEALTH INSTITUTE

Holistic Care Coordination: Focusing on the Whole Family

Kansas Association of Community Action
Programs: Kansas Conference on Poverty

July 2023



Welcome & Agenda

Learning Objectives:

1. Describe Holistic Care Coordination (HCC) in Kansas and its connection to social determinants of health.
2. Identify opportunities for Holistic Care Coordination (HCC) to better meet the needs of low-income individuals and families.
3. Discuss opportunities for health systems to increase collaboration with community-based organizations.



Hello!

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Analyst, Kansas Health Institute

Lead investigator for this research

Research Interests:

- Community-based participatory research
- Social determinants of health
- Equity-centered community engagement



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Who We Are



- Nonprofit, nonpartisan educational organization based in Topeka.
- Established in 1995 with a multi-year grant by the Kansas Health Foundation.
- Committed to convening meaningful conversations around tough topics related to health.



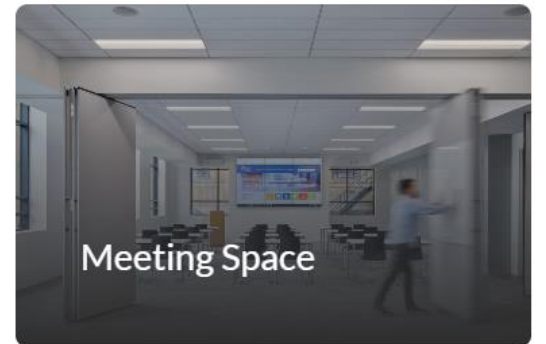
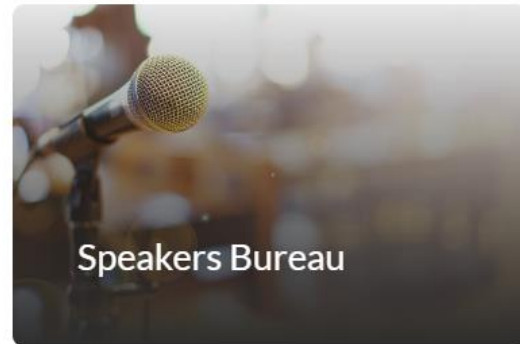
Our Vision & Mission

Healthier Kansans through effective policy.

Improve the health of all Kansans through nonpartisan research, education and engagement that support effective policymaking.



Our Services



<https://www.khi.org/services/>



Acknowledgments

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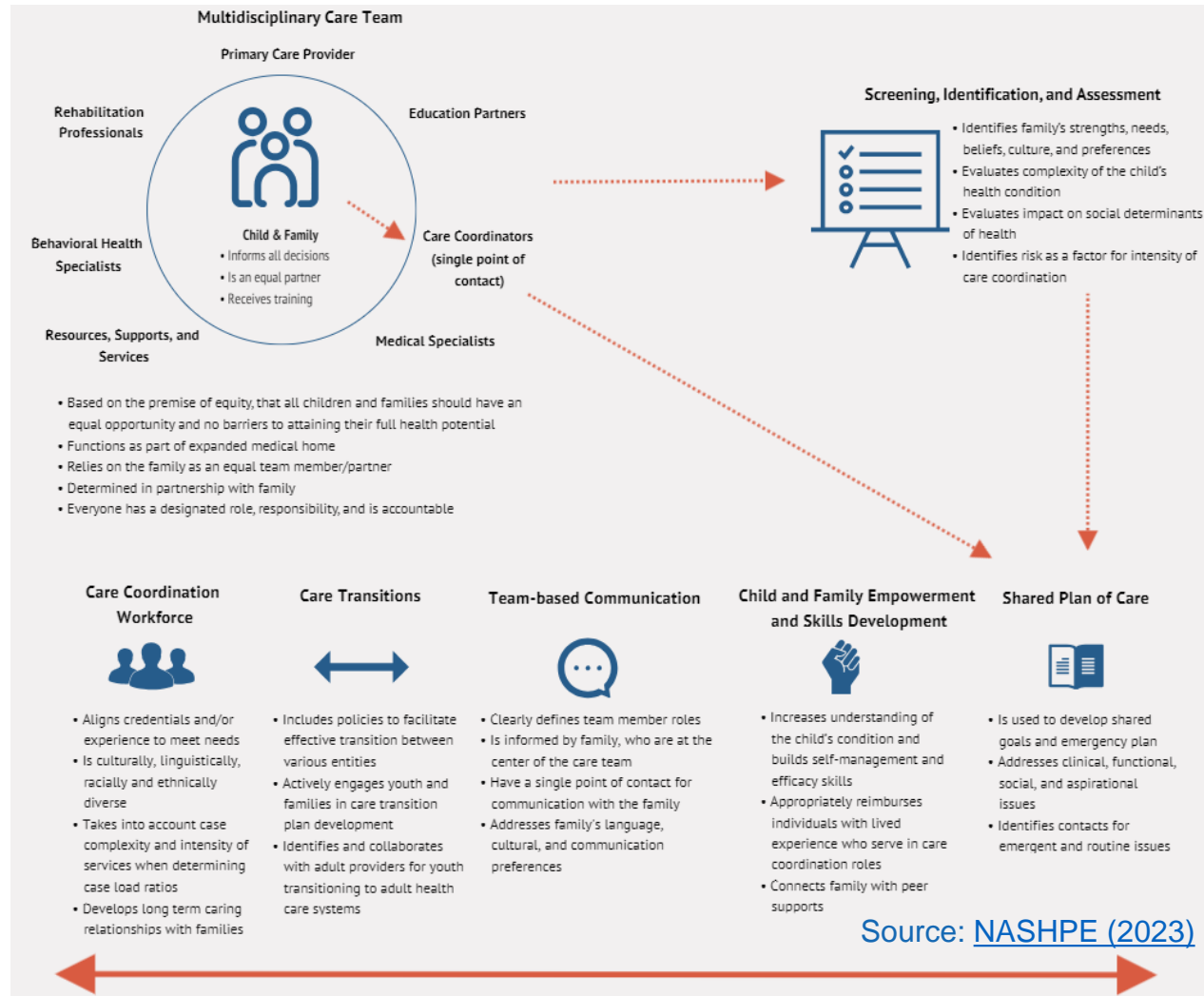
**What do you think about when you hear
the phrase *Holistic Care Coordination*?**



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A Whole-Family Approach to Health



Holistic Care Coordination Toolkit

National Standard Domains

Learn more about [National Care Coordination Standards](#)



[Domain 1: Screening, Identification, and Assessment](#)



[Domain 2: Shared Plan of Care](#)



[Domain 3: Team-Based Communication](#)



[Domain 4: Individual and Family Empowerment](#)



[Domain 5: Care Coordination Workforce](#)



[Domain 6: Care Transitions](#)

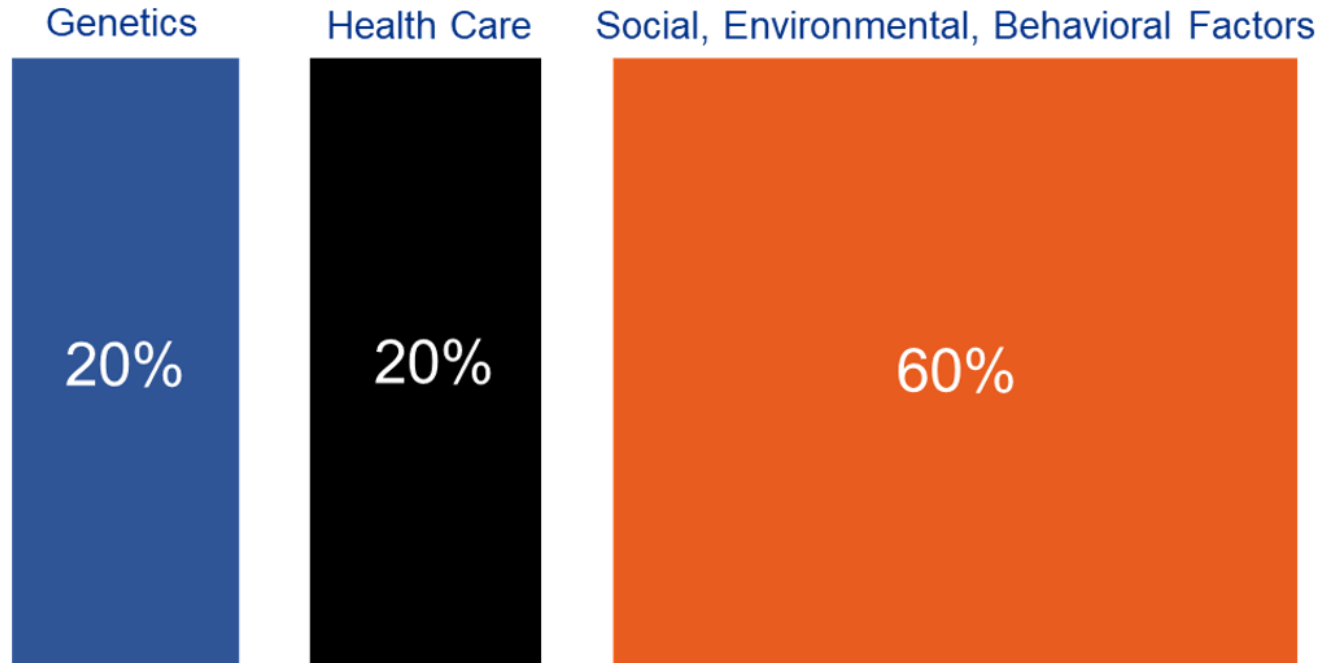
Source: [KDHE \(2023\)](#)



Why Holistic?

Reason #1.

Health happens outside the doctor's office.



Source: Bradley & Taylor, *The American Healthcare Paradox*.



Health Equity

New – 2022 RWJF Equity Graphic

EQUALITY:
Everyone gets the same – regardless if it’s needed or right for them.



EQUITY:
Everyone gets what they need – understanding the barriers, circumstances, and conditions.



Copyright 2022 Robert Wood Johnson Foundation

Source: [Robert Wood Johnson Foundation \(2022\)](#)

The “attainment of the highest level of health for all people.”

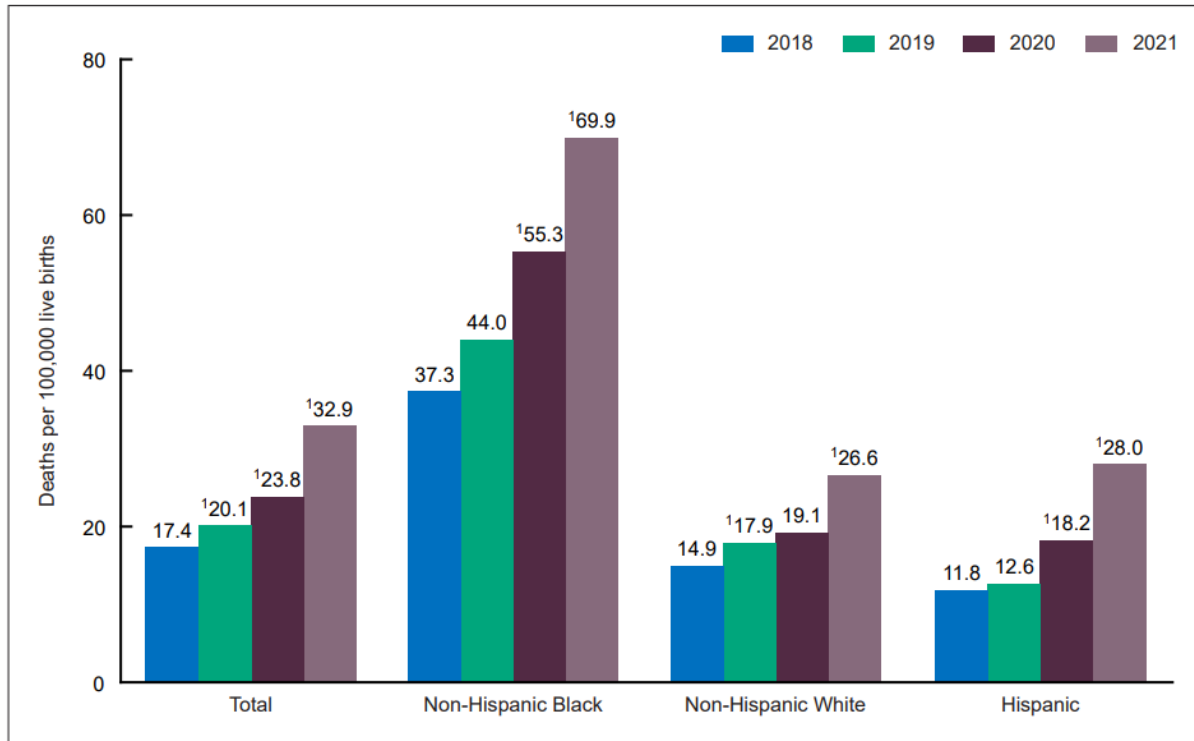
- Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities.

Source: [Healthy People 2030 \(2023\)](#)



Health Equity

Figure 1. Maternal mortality rates, by race and Hispanic origin: United States, 2018–2021



¹Statistically significant increase from previous year ($p < 0.05$).
NOTE: Race groups are single race.
SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.

Children and Pregnant Individuals

- Maternal mortality is rising.
 - Infant mortality is decreasing.
 - Kansas Infant Mortality Rate in 2021: 5.3 deaths per 1,000 live births
 - Non-Hispanic Black: 13.6 deaths per 1,000 live births
 - Hispanic: 5.2 deaths per 1,000 live births
 - Non-Hispanic White: 4.5 deaths per 1,000 live births
- Source: [KDHE \(2023\)](#)



Holistic Care Coordination in Kansas

Social Determinants of Health



Social Determinants of Health
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 Healthy People 2030

Where is this happening?

- *"No wrong door approach" - MCO (Interview)*
- Medicaid, private insurance, local health departments, federally qualified health centers (FQHCs), clinics, community organizations, nonprofits, schools, and more...
- *Head Start and Parents as Teachers*



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Holistic Care Coordination in Kansas



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Evaluation Components



Environmental Scan

Of literature and policies in Kansas and similar states around key research questions



Survey

With people coordinating care for children age 0-8 or individuals receiving prenatal and postpartum care



Interviews

With representatives of private insurers and Managed Care Organizations (MCOs)



English-Language Focus Groups

With parents and guardians of children age 0-8



Spanish Language Focus Groups

With parents and guardians of children age 0-8 and individuals receiving prenatal or postpartum care



Key Findings

High-Level Summary

- Opportunities to Improve Communication Between Patients and Care Teams
- Health Equity – Focus on Cultural Competency and Language
- Challenges with Billing for Holistic Care Coordination
- Capacity of Health Care System and Access to Holistic Care Coordination



Key Findings – A Deeper Dive

HCC and Poverty

- “The population that has the need for these services are often the most financially vulnerable. Billing or even discussion of billing will trigger obstacles to service provision.” – Local Health Department (Survey)
- *Value-added benefit* (Insurance companies/MCOs, interviews)
- Out-of-pocket medical costs

2023 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA	
Persons in family/household	Poverty guideline
1	\$14,580
2	\$19,720
3	\$24,860
4	\$30,000
5	\$35,140
6	\$40,280
7	\$45,420
8	\$50,560

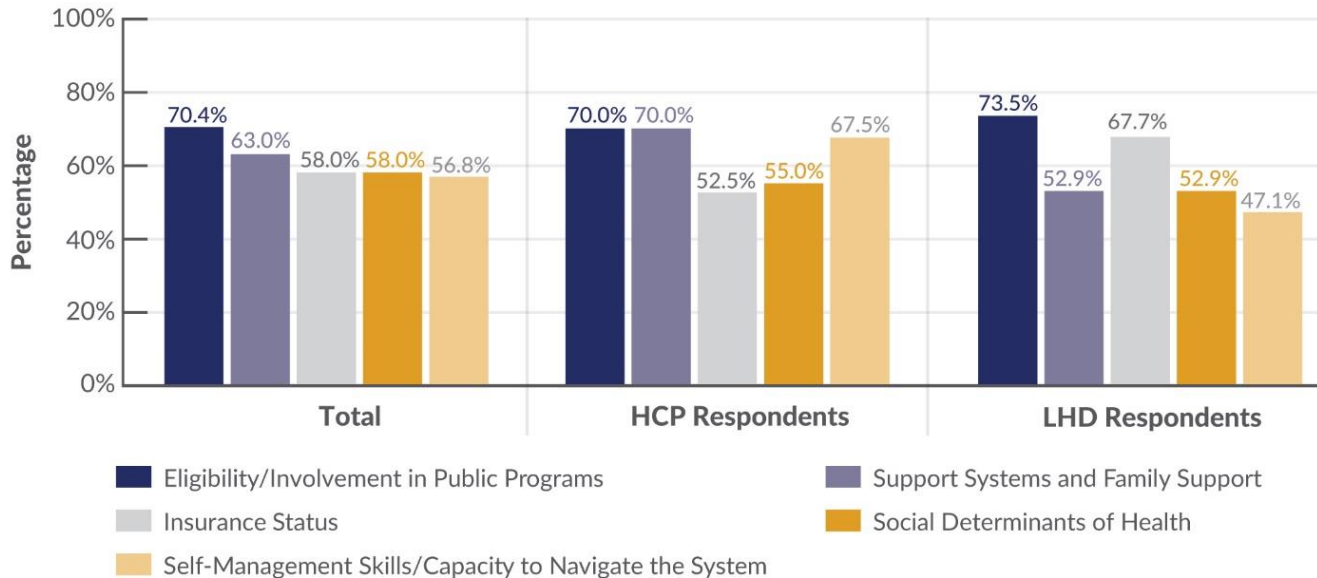
Source: [U.S. ASPE HHS \(2023\)](#)



Key Findings – A Deeper Dive

HCC and Social Determinants of Health

Figure 4. Top Five Considerations Used to Determine if Additional Services Would be Beneficial to the Patient or Their Family



Note: Total Respondents = 81; Healthcare Provider Respondents = 40; Local Health Department Respondents = 34.
HCP = Healthcare Provider; LHD = Local Health Department; Respondents could select all that apply.
Source: Kansas Health Institute analysis of Survey of Care Coordination Providers.

“We know that behavioral health and medical care go hand-in-hand. And then we know that social determinants play a huge role in someone's outcomes, either, you know, medically or behaviorally or just in their life in general. And so we know and have recognized that all of these things are intertwined. And for us to separate them or try to separate them doesn't make sense.” – MCO (interview)



Key Findings – A Deeper Dive

HCC and Social Determinants of Health

“Pero quiero pensar que cuando tenemos a alguien que trabaja con nosotros, con cualquier coordinador, o promotora de salud, que son personas que están para estar como en la batalla con nosotros, decémoslo así. Están de la mano con nosotros.”

But I like to think that, when we have someone working with us, like a coordinator or health promoter, they are people who are there to fight the battle with us, let's put it that way, who are side-by-side with us. –Parent



Key Findings – A Deeper Dive

HCC and Social Determinants of Health



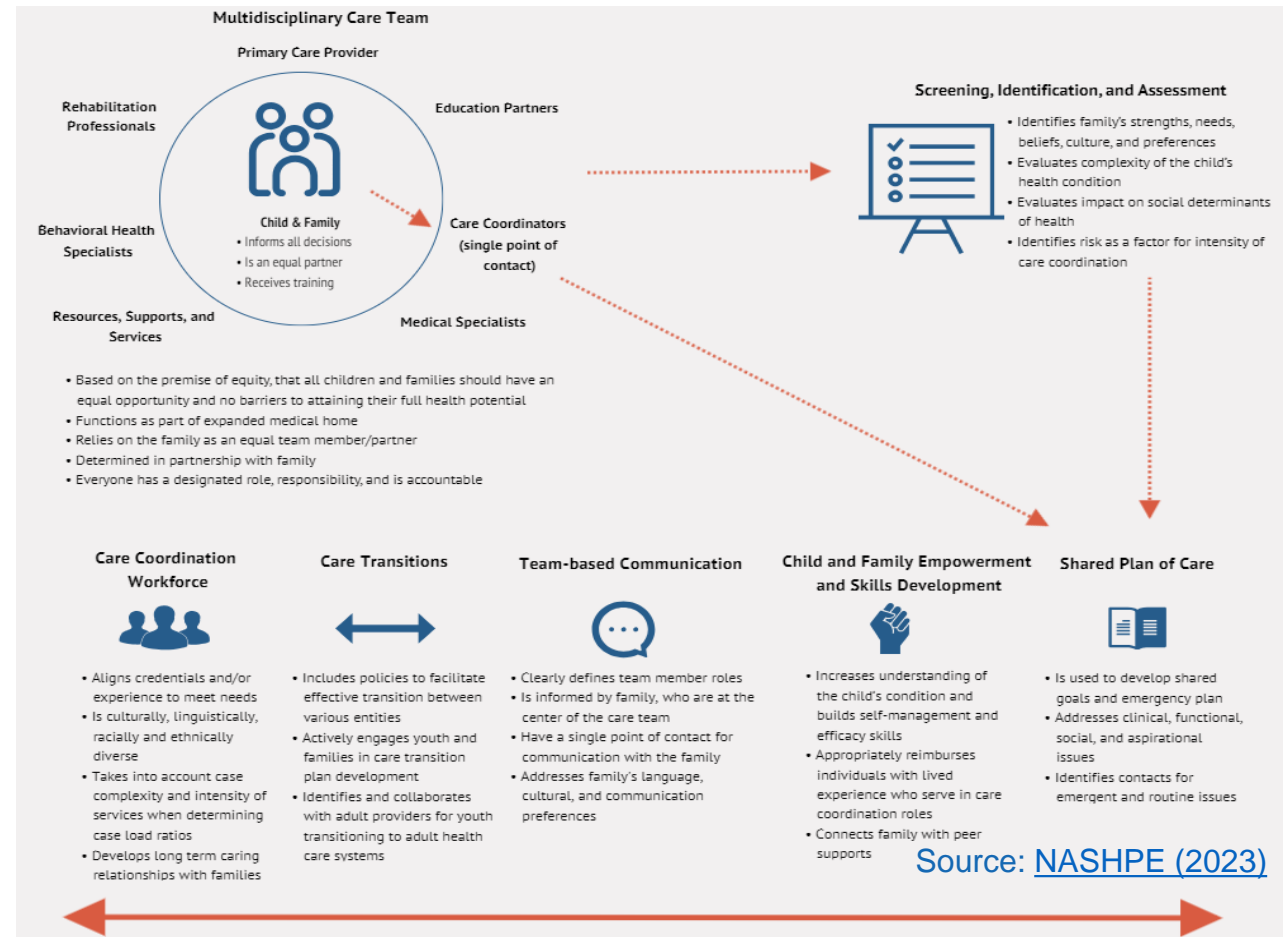
“Our social workers get very creative. You know, maybe the member can't pay the utility bill. Well, we can't just, you know, hand you cash for your utility bill. But maybe we help offset your grocery bill by having you go here and that frees up more money to pay your utility.” – Private insurance company



Key Findings – A Deeper Dive

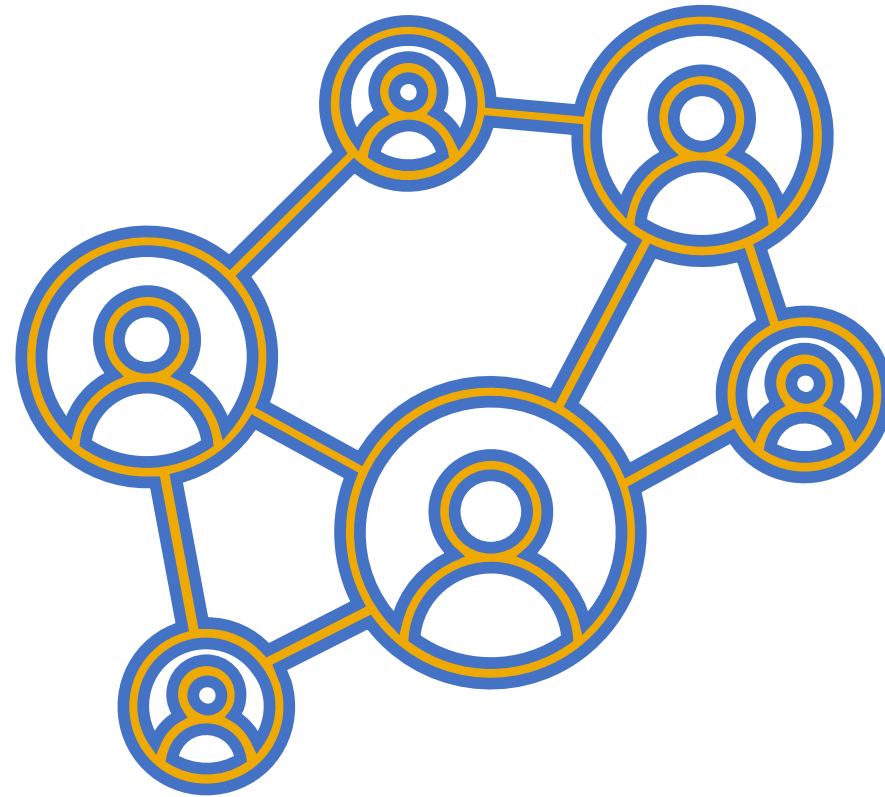
Opportunities for Improvement

- Communication
- Cultural competency and disability-friendly services
- Network of resources and connectors (*referral network*)



Key Findings – A Deeper Dive

Expanding the Care Team





What other opportunities do you see for improving holistic care coordination?



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What opportunities do you see for your organization?



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THANK YOU!

Any Questions?



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