

Bon Secours

Population Health Strategic Plan

Executive Summary

Please find attached the summary table of Bon Secours Strategic Transformation Plan. Over the past few years monies that have been distributed by the HSCRC have been utilized to form population health activities that are based upon community needs. Bon Secours' overarching goal has been to work collaboratively with partners towards our vision for Southwest Baltimore to become a vital, healthy community where residents will be empowered to take ownership of their health and will have the expectation of living full, healthy lives. Bon Secours has identified three focal areas: Healthy People, Healthy Economy and Healthy Environment. The Community Health Assessment report detailed for Bon Secours the need to provide services around access to care, outreach to high utilizers, substance abuse, assisting homeless with housing, and patient engagement. As such, Bon Secours has put into place the following programs:

1. Medical Home – In FY2014, Bon Secours repurposed its Family Care Center facility in order to establish a primary care clinic on its campus which functions as a medical home.
2. HEZ Activity – In FY2014, Bon Secours provided additional funding to the HEZ to support the Community Health Workers model of outreach to high utilizers, linkage to primary care, and continued care management for high utilizers with cardiovascular disease
3. Substance Abuse Programs- CIBS Next Passage Program, a 3-year program to integrate substance abuse and mental health services for individuals with co-occurring disorders. As well as expand the service offerings and nature of our outpatient behavioral health programs.
4. Specialized Case Management Program (SCMP) – In FY2014, Bon Secours secured funding to continue support of this program that assists homeless individuals with mental illness to secure housing, social services, and benefits support. Transportation services for SCMP patients to be transported between their home and the SCMP program is also provided.
5. Patient Engagement – In FY2015, Bon Secours secured grant support for Project Engage, aimed at reaching, engaging, and advancing high risk youth in the Park Heights/Pimlico neighborhoods. The primary service provided is behavioral health therapy.

Bon Secours seeks to further their population health efforts in a two-fold approach. First as a member of the West Baltimore Collaborative, Bon Secours is lending its current capabilities to the population health activities that are a part of the grant application. Secondly, Bon Secours sees the need to build upon the success of the HEZ program and thus applying to build the HEZ program. The clinical resources, family support services, housing and benefits services, work training programs, and data analytics infrastructure that BSBHS has developed will all be critical to the success of population health management efforts in this service area going forward.

In collaboration with multiple partners such as Chase Brexton, B'more Clubhouse, and Total Healthcare as well as the Johns Hopkins Collaborative, BSBHS seeks to prevent avoidable admissions by addressing behavioral/chronic health needs through working partnerships with these providers that will facilitate regular communications regarding high utilizers.

BSBHS is seeking to enhance and expand these population health intervention strategies by seeking additional funding through the HSCRC Care Coordination grant process. Through this effort, BSBHS and the West Baltimore Collaborative have targeted a patient population to create core competencies and immediate success. Utilizing resources such as CRISP to monitor population health efforts and the productivity of Care Management, BSBHS looks to scale these population health efforts further in the future. Once the programs are fully established, additional patient populations will be included into the programs across the broader BSBHS service area. Reinvestments will be made back into the programs to increase resources and enhance care management technologies.

BSBHS believes that the sum of these population health intervention strategies will have the direct result of decreasing readmissions, reducing unnecessary admissions, and ultimately decreasing the total cost of care in the BSBHS service area. We also believe these strategies, while improving the quality of care and health status of all patients in the service area will have the most significant impact on the Medicare population and therefore directly support the goals of CMS's three part aim and the new demonstration model in Maryland.

BSBHS will work diligently to monitor and manage its key care coordination intervention plans and population health performance metrics utilizing internal data, shared information with other providers and community partners as well as utilizing the resources of the CRISP health information exchange.