OREGON HEALTH AUTHORITY

Braided Funding Scenarios

Three scenarios for how multiple Medicaid funding streams could come together to support members and communities

About braided funding

Braided funding uses multiple funding streams to pay for distinct pieces of a broader program or service.

- Funds remain distinct and are only used for their specific purpose(s)
- Administrative costs may be spread out across funding streams

The goal of braiding Medicaid community investment programs is to make it easier for Oregon Health Plan (OHP) members to get their health and social needs met.

Scenario 1: Community-based approach to addressing the needs of members with physical disabilities

Overview of example community

This community has a mix of urban and rural areas and a centrally-located, mid-sized city. Key characteristics include:

- A strong disability advocacy community, including a community-based organization (CBO) that helps individuals with disabilities access Supplemental Security Income (SSI).
- Transportation access can be challenging outside of the city.
- Traditional Health Workers are integrated into clinical settings and a few CBOs.

Coordinated care organization (CCO) offerings

The local CCOs provide a range of support to the community, and partner with many local organizations.

- Competitive grants offered annually from one of two CCOs in the region, including a recent investment to improve affordable housing accessibility.
- Non-emergency medical transportation (NEMT) covered service increases access to health care.
- CCO participates in community-wide collaborations led by local CBOs.

Scenario 1: Mario connects with supports and services

Mario

- 25 years old
- Lives by himself in rental unit
- Complex physical health condition, uses mobility device

Current context

- Eligible for Supplemental Security Income (SSI), currently seeking work
- Medicaid covers medical and prescription needs
- Apartment lacks accessibility features

Connecting Mario with supports and services

Case manager from his local clinic developed a plan to improve Mario's housing context and address social needs.

In lieu of services (ILOS)

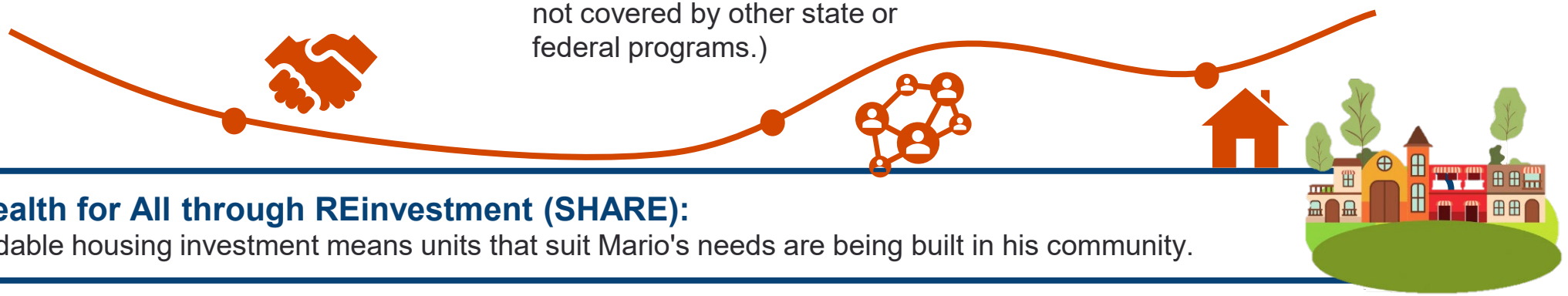
Traditional Health Worker conducts home visits to ensure well-being, screen for social needs and provide health education.

Member-level flexible services

- Wi-Fi and cell phone costs to communicate with health care providers and potential employers.
- Installation of accessibility features in current apartment. (Features not covered by other state or federal programs.)

Health-related social needs (HRSN) services

Risk of houselessness qualifies Mario for rental assistance to maintain housing (if individual meets clinical risk criteria).



Supporting Health for All through REinvestment (SHARE):
Accessible, affordable housing investment means units that suit Mario's needs are being built in his community.

Scenario 2: Wrap-around support for young people in life transitions

Overview of example community

Urban community with recent community-led economic development initiative.

Housing costs are rising as community evolves, so coordinated housing advocacy group is working toward an adequate supply of affordable rental units.

Public transportation is available and reduced-cost passes are available.

Culturally-specific organizations offer peer support groups and mentorship programs.

Coordinated care organization (CCO) offerings

The local CCO supports community-led collaboration and capacity building.

Investments in culturally-specific food access have supported the creation of robust systems and improved access for community members.

Information technology investments have improved connections between CBOs and health care providers.

CCO investments are guided by community identified priorities.

Scenario 2: Mei ages out of foster care and accesses supports

Mei

- 18 years old
- High school grad, working as server
- At risk of houselessness, according to the department of Housing and Urban Development (HUD's) definition

Current context

- Hours were cut recently, and worried about making rent in a few weeks
- Concerned about mental health, experienced domestic violence as a child
- Aspires to be a social worker

Transition support for Mei

Mei attended a community event for young people interested in social work careers, where she got connected to a CBO that offers support for basic needs.

Independent Living Program

Oregon Department of Human Services' skill building program and case worker

HRSN services*

- Rental assistance
- Food assistance for healthy eating

Member-level flexible services

- Gym membership for physical and emotional health
- Support line for mental health needs

SHARE: Free transit passes for children and people with lower income, makes it affordable for Mei to get to and from work.

Community-level flexible services: Community Information Exchange (CIE) ensures easy, reliable connections are made between CBOs and health care providers.

*Mei is eligible for HRSN services because she is at risk of houselessness and has a clinical risk factor due to childhood domestic violence

Scenario 3: Community hub integrates care and services

Overview of example community

A diverse, mid-sized city and multiple rural communities.

- Continuum of Care coordinates housing resources in the city, hosts monthly convenings.
- Multiple CBOs offer affordable day care services and early childhood education in partnership with schools.
- Local community college offers job training and skill-building opportunities.
- Street outreach program serves community experiencing houselessness.

Coordinated care organization (CCO) offerings

Community Health Improvement Plan priorities include:

- Housing, including affordability, maintaining housing and improving quality of housing.
- Food access, including healthy, affordable food, culturally-appropriate food offerings and food security.
- Economic stability, including workforce development.
- Access to health care, including transportation to services and provider capacity.

Scenario 3: HelpCo community hub integrates care and services

HelpCo

- Established 30 years ago
- Trusted community space
- Wants to expand offerings

HelpCo's current offerings

- Community health outreach team offers connections to services and addresses basic needs
- Weekly farmers market accepts SNAP benefits
- Convening space offers regular events and services

Dani seeks services and job search supports from CBO

At risk of losing housing due to loss of low-wage job. Single parent with two young children.

SHARE

Traditional health workers: SHARE funds traditional health worker training. Outreach workers participate and become certified.

Job training program: Partner organization expanded to offer classes at HelpCo.

Housing: Renovations at local affordable housing complex increases quality, affordable options. Shelter operations funded during the winter.

Flexible services

Housing (member-level)
Rental assistance and funds for housing improvement.

Food (member-level)
Veggie Rx program expands farmers' market.

Wellness hub (community-level)
Early childhood education in partnership with school district.

ILOS

Traditional health workers: Certified traditional health workers offer educational opportunities and teach health promotion group classes.

HRSN services: Housing, nutrition and climate support for eligible OHP members.

Community capacity building funds (CCBF): As an HRSN services provider, HelpCo used CCBF funds to be able to track and bill for services using a community information exchange.

Getting started on braided funding

1. Start with end goal

Key questions

- Which community needs are we aiming to address, and for which populations?
- Will addressing these needs improve existing health inequities?

Resources

Community Advisory Council, community health improvement plans, data on community and member health inequities

2. Assess current state

Key questions

- What services, resources, and investments exist to address this issue?
- What are the gaps? Who are your key partner organizations on the issue?

Resources

CCO community partner assessments and asset maps; past flexible services, ILOS, SHARE program data and investment

3. Define CCO role

Key questions

- What role does the community want the CCO to play, and what role will partner organizations play?
- How can Medicaid programs like flexible services, SHARE or ILOS fill gaps?

Resources

Ideas from other CCOs (flexible services and SHARE webinars, peer groups), technical assistance resources online

Braided funding resources

- Braided and Blended Funding (National Association of County Health Officials)
- Braiding and Layering Funding to Address the Social Determinants of Health (Association of State and Territorial Health Officials)
- Coordinating Funding and Data to Address SDOH (Aligning for Health)
- Toolkit for Braiding Federal Funding to Expand Access to Quality Early Care and Education and Early Childhood Supports and Services (Office of the Assistant Secretary for Planning and Evaluation)

Contact and accessibility

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Transformation Center at Transformation.Center@odhsoha.Oregon.gov or 503-487-7409 (voice/text). We accept all relay calls.

Health Policy and Analytics Division
Transformation Center
Transformation.Center@odhsoha.Oregon.gov
https://www.oregon.gov/oha/hpa/dsi-tc/pages/index.aspx

OREGON HEALTH AUTHORITY