



CAST A **WI**

Enabling safety-net clinics to participate in value-based programs

Jane is houseless. At the age of 24, she is also a single mother of two young children. She lost her home to a fire in March 2022. She had no other option but to move into a motel room with her two children, her mother, and four siblings.

Jane didn't know, but there are resources available for individuals like her who find themselves in dire circumstances. Such resources include grocery deliveries, housing coordination, motel vouchers, and clothing replacement, but people like Jane do not know how to access these things. Jane is one patient among a large group that the system has left behind.

Safety-net clinics, such as Federally Qualified Health Centers, have been providing much-needed healthcare services to underserved communities for decades. These clinics have a vital mission—to provide care to those unable to pay—but they are often under-resourced. They are systemically understaffed and lack

financially because they operate on lower margins than other healthcare providers. As a result, the clinics are only able to provide reactive care as patients walk in the door, as opposed to proactive, preventative care by reaching out to patients outside of the clinic.

Medicaid health plans rely on their safety-net clinic networks, yet do not know how to properly support them either financially or operationally. Many programs for additional funding or reimbursements present implementation barriers, making it impossible for the clinics to participate. As a 2017 *RevCycle Intelligence* study from the Mississippi Delta points out, Medicare pay-for-performance programs can penalize safety-net clinics.¹ These clinics do not have the capital or workforce to invest in improving quality care and are thus penalized for participating in quality-based programs and receive few dollars. This increases health disparities and puts safety-net clinics at a further disadvantage.





DERNET

■ By Neil Batlivala

Value-based care programs provide a foundation to build an effective community health system. These programs require not just a financial structure that aligns clinical and social resources, but also provide significant implementation and support for safety-net clinics to access value-based dollars.

Addressing Barriers to Care

At Pair Team, our health tech-enabled company, we partner with safety-net providers and connect medical teams to underserved communities to provide high-quality care while addressing patients' barriers to care. The company provides hybrid, virtual, and community-based support. In California, Pair Team has enabled clinics to engage hundreds of their highest-need Medicaid patients in whole-person care while addressing social barriers. By improving care quality, we are on track to generate upward of \$20,000 per provider per year.

Community health workers backed by virtual care teams lead Pair Team's model. Together, they enhance care for patients by significantly increasing engagement and access with patients in home and community settings. This care model provides "whole-person care," addressing not just clinical health, but also behavioral and social needs. Pair Team's virtual care team members fill in the gaps caused by staffing shortages in the clinics. Alleviating staff and clinician workloads at safety-net clinics allows the teams to spend meaningful time connecting with patients and ultimately improves patient quality of life.

Telehealth Benefits

A silver lining from the COVID-19 pandemic is the adoption of telehealth services by the public. This broad adoption of digital health services increases hiring capabilities and supports clinics during physician shortages. Virtual care removes



the barrier of requiring the patient to go on site. Telemedicine also gets patients invested in their own health and increases participation in preventative services. Even though virtual care provides benefits to both clinics and patients, it is not a replacement for in-person appointments but rather a tool that complements in-person care and increases access to care overall.

Essential Partners

It takes a village to provide quality care for the most underserved patient populations. A strong network of community partners is also essential. After building a foundation for patient trust through the virtual care team, Community Health Workers (CHWs), and quality care at the clinic, it is important to connect patients with community resources (see “Local Heroes”). Pair Team breaks down barriers that often exist between primary care providers and community-based organizations caused by referring patients to overwhelmed agencies that lack resources to support the patient. Pair Team takes the patient’s social determinants of health into consideration, and their needs are integrated into their overall care plan.

Codified Workflows

Tech resources supporting the care teams build patient trust and increase access to care. Pair



Local Heroes

Another way to boost patient trust is by activating a team of Community Health Workers (CHWs). Because CHWs are local to the communities they serve, they have shared experiences and connections with patients. CHWs are cost-effective heroes who ensure adherence to care plans. Enlisting CHWs increases patient engagement and trust while also providing CHWs with a career path within their community and growing the CHW workforce.

Reference

1. J. LaPointe. 2017. Pay-for-Performance Models Hurt Safety-Net Hospital Finances. *Revcycle Intelligence*, October 25, 2017. Accessed September 30, 2022 at revcycleintelligence.com/news/amp/pay-for-performance-models-hurt-safety-net-hospital-finances.

Team has developed a tech platform driven by automation to codify workflows. The company gathers and analyzes data to understand how best to serve the patient. For example, Pair Team’s technology sends a monthly reminder to the care manager to follow up with the patient. This check-in allows the care manager to understand what medical and social needs the patient is experiencing and get ahead of those needs with the appropriate care plan. Using technology to support the social determinants of health risk adjustment allows for implementing preventative strategies and provides value-based care, which ultimately increases cash flow to partner clinics to support patients based on their social health needs.

Patients like Jane and safety-net

providers no longer need to be left behind. Technology combined with virtual care teams and a community support infrastructure gives safety-net providers the ability to participate in value-based care programs. These clinics earn additional revenue while increasing access to care for the most underserved populations and simultaneously reducing the total cost of care. [GRU](#)

Neil Batlivala is co-founder and CEO of Pair Team, a wraparound technology and care team that automates clinical operations and provides high-touch patient support for primary care clinics in the United States.