

July 29, 2016

SOCIAL DETERMINANTS OF HEALTH SPOTLIGHTED IN HPC INNOVATION INVESTMENTS TARGETED TO HIGH-NEED, HIGH-COST PATIENTS

Massachusetts soon will incubate an exciting care team model for medically complex and disenfranchised patients utilizing emergency department services. Thanks to a [Health Care Innovation Investment](#) (HCII) grant awarded by the [Massachusetts Health Policy Commission](#) (HPC) on July 27, [MLPB](#) will join [Boston Medical Center](#) (BMC) and [Boston EMS](#) to pilot a **Community Health Advocate-driven** intervention in the [BMC Emergency Department](#) intended to improve patient health and reduce healthcare costs. The Investment Director for this initiative will be [Kalpana Narayan Shanker, MD, MSc, MSHP](#).

This investment is notable for several reasons. First, it is one of four funded HCII initiatives that are focused on **social determinants of health** and characterized as **Targeted Cost Challenge Investments**. We look forward to learning from and sharing best practices with our grantee peers ([list here](#)), each of which is projecting substantial, quantifiable return on investment in connection with planned interventions.

Second, the BMC innovation project in which MLPB will participate builds on key evidence-based interventions with national roots: the [CareOregon Health Resilience Program](#) and [medical-legal partnership](#) approaches. We are especially grateful to our MLP colleagues in Lancaster, PA and [National Center for Medical-Legal Partnership](#) Medical Director [Megan Sandel, MD, MPH](#) for important contributions to the [innovation evidence base](#).

Third, the BMC innovation design reinforces the centrality of employer-supported **Community Health Workers** (CHWs) — and related workforce roles — in meaningful strategies to transform healthcare delivery for people who are vulnerable to a range of health disparities. MLPB is proud to be a partner to CHWs deployed across Eastern Massachusetts and beyond, and to be supporting several projects and studies that rigorously measure the impacts of such interventions.

The first randomized controlled trial to test such an approach — **Project DULCE** — was published in the [July 2015 issue of Pediatrics](#), and its compelling findings can be found [here](#). In that pilot, MLPB was a partner to **Family Specialists** employed by [BMC Pediatrics](#) who provided a range of supportive services to low-income families with newborns. Intervention families had quicker access to **concrete supports like SNAP benefits and utility service, better adherence to recommended well-child checkups, and fewer emergency department visits**. MLPB is thrilled to be supporting a DULCE national demonstration project being led by the [Center for the Study of Social Policy](#), which replicates the DULCE model in 5 counties in California, Florida, and Vermont.

For more information about [MLPB](#), the HCII project with BMC, or strategies to bolster the healthcare and human services infrastructure that responds to social determinant of health, contact Samantha Morton, JD, at smorton@mlpboston.org or (617) 336-7500 ext. 455.

Our mission is to equip healthcare and human services teams with legal problem-solving strategies that promote health equity.

We are a fiscally sponsored program of [Third Sector New England, Inc.](#)

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