



**The Denver  
Regional  
Accountable  
Health  
Community**

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# Welcome to the consortium!

## The Denver Regional Accountable Health Community

- \$4.51 million over five years from May, 2017
- DRCOG is the bridge organization

### Designed to:

- Identify and address the health-related social needs of Medicare and Medicare beneficiaries to improve quality of care and reduce health care costs.
- DRCOG is the **Bridge organization** to further improve health care quality and reduce costs by engaging partners to identify and address community-level gaps.





# Accountable Health Community goals

## Primary:

Integrate and align the screening and referral of Medicare and Medicaid beneficiaries from clinical care to community care.

## Secondary:

Reduce total health care costs and improve outcomes for community-dwelling beneficiaries by addressing unmet health-related social needs through April 30, 2022.





# Core health-related social needs



- housing stability and quality
- food security
- utility needs
- interpersonal safety (elder abuse, child abuse, domestic violence)
- transportation



# The consortium

## Clinical health partners

- Centura Senior Health First Clinic
- Denver Health ED
- Denver Health Pediatric Clinic
- Doctor's Care
- Dominican Home Health Agency
- STRIDE Community Health Center

## Behavioral health partners

- Aurora Mental Health Center
- Jefferson Center for Mental Health

## Community partners

- Brothers Redevelopment
- Energy Outreach Colorado
- Jewish Family Services
- Seniors' Resource Center
- Violence Free Colorado
- Volunteers of America
- Hunger Free Colorado

## Additional Partners

- CO Access
- CO Community Health Alliance
- Health Care Policy and Financing (HCPF)
- Telligen



# Schedule and core functions

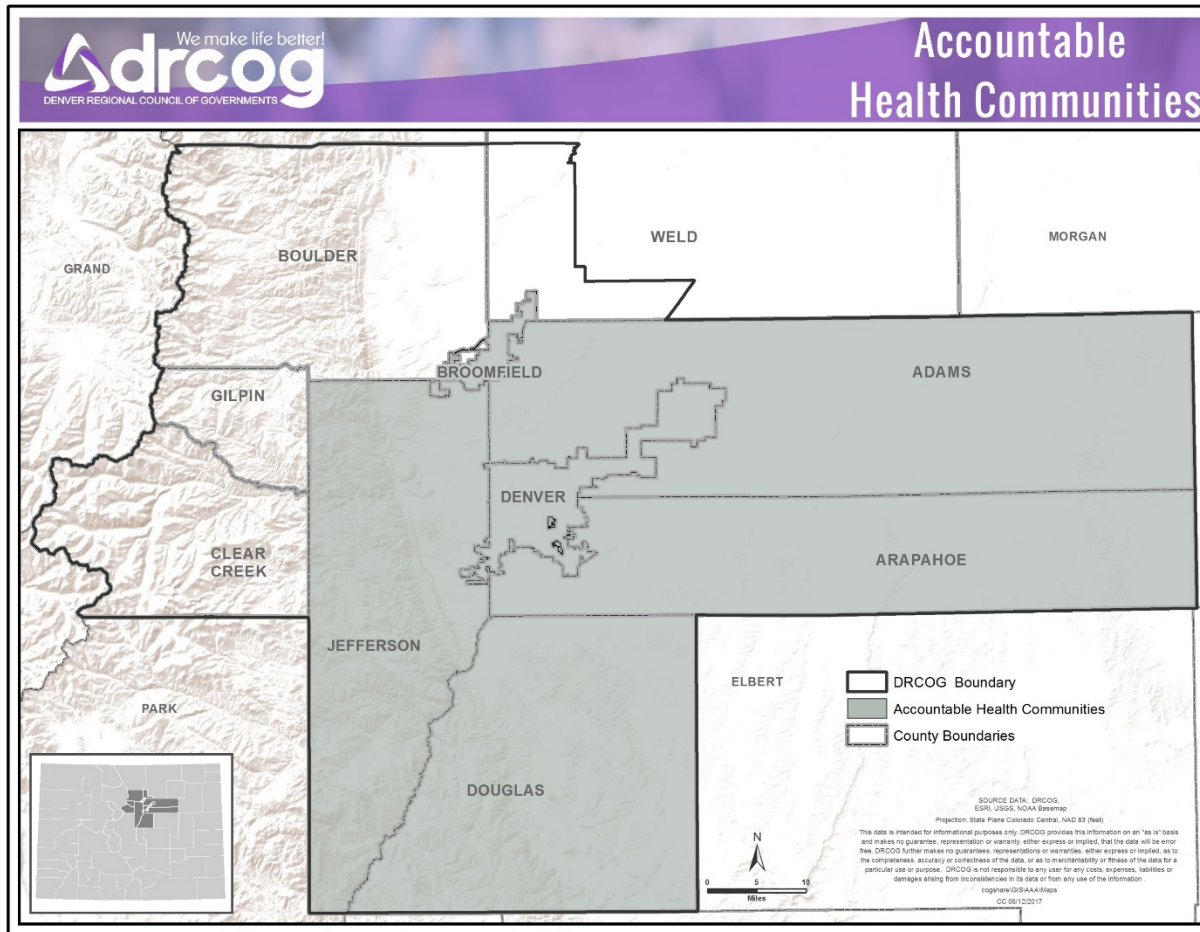
## Years two through five:

- Screen 75,000 people for health-related social needs in a clinical setting each year.
- Provide **navigation** services to 3,000 people each year.
- **Track data** and provide reports.
- Make referrals to community services consistent with care plans.
- Deliver community services.
- Conduct an annual **gap analysis** of community needs and resources.
- Implement a **quality improvement** plan.





# Accountable Health Community boundary





# Lessons Learned

- Core Needs:
  - Food Security 24%
  - Housing 13%
  - Transportation 12%
  - Utility Needs 8%
  - Safety 1%
- Households experience needs not individuals
- Lowering health care costs occurs at the community or population level
- The 5 social needs of the AHC aren't always the most important needs in an individual's life.
- The benefits of addressing social needs are realized in many places not just health care.





Thank you!

**QUESTIONS?**

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