



Building a Healthy Boston

February 8, 2019

Health Policy Commission
Attn: Catherine Harrison
50 Milk Street
8th Floor
Boston, MA 02109
Submission to: HPC-Certification@mass.gov

Dear Ms. Harrison:

Thank you for the opportunity to offer our comments on the Proposed 2019 Accountable Care Organization (ACO) Certification Standards. The Boston Public Health Commission (BPHC) is an independent public agency providing a wide range of health services and programs. Public service and access to quality health care are the cornerstones of our mission – to protect, preserve, and promote the health and well-being of all Boston residents, particularly those who are most vulnerable. BPHC respectfully offers the following comments:

- *Page 9-10, Population Health Management Programs Section*
 - We disagree with the suggestion that “A single program that addresses both Behavioral Health and Social Determinants” adequately fulfills the requirement. By suggesting this, it minimizes the importance of both behavioral health and social determinants. It perpetuates stigma. It implies that a program best suited to impact behavioral health concerns is the same as a program best suited to impact social determinants of health. It simply doesn’t place enough value on the significance of both areas individually.
- *Page 11-12, Proposed 2019 Supplemental Questions*
 - The Supplemental Questions for “adding to the evidence base” for “Behavioral Health Integration into Primary Care” should include questions with quantifiable responses and metrics. We suggest using a framework like the SAMHSA-HRSA Center for Integrated Health Solutions (https://www.integration.samhsa.gov/integrated-care-models/CIHS_Framework_Final_charts.pdf) to inform these questions. This supports criteria being applied without bias. As the questions are currently presented, it allows for interpretation and could enable practices to create programs that are ineffective, poorly implemented or do not meet established goals for integrated care. This is also applicable in the section for “Integrated, Innovative Care Models”. Certification should hold up a standard of quality rather than mere existence.
- *Page 12, Community Partnerships to Address Social Determinants of Health Section*
 - Early childhood is listed as a Social Determinants of Health. Please clarify the intention of this inclusion. We are concerned that early childhood development not be included as a social determinant of health, without qualification. A child being in their early development stage is not a condition that impacts one health like being food insecure or having housing instability. You may have meant to have included adverse childhood experiences (ACEs). We suggest the Healthy People 2020

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(<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/early-childhood-0>) highlighted factors: untenable stress, poverty, nurturing and stable parent/caregiver relationships, and access to quality early education and care.

- *Page 14, Proposed ACO Distinction Program - Health Equity*
 - We fully support this proposal. The concept of health equity captures the idea that no one should be hindered from achieving their full health potential due to social constructs including race and racism. The opportunity for every person to achieve his or her full health potential is widely and rightfully recognized as a fundamental human right. Despite this, health inequities by race and other factors still persist.
 - HPC should evaluate improvements in health equity by analyzing:
 - i.* Demonstrated quantitative change in a health outcome or relevant social determinant or measure of well-being, based on race and/or ethnicity,
 - ii.* Evidence of engaging the patient population at the heart of inequity and using the voice of patients to make decisions,
 - iii.* Measures of benefit and burden, including a review of unintended harm,
 - iv.* Action plan to ensure sustained practice changes, and
 - v.* Review of staff perception of improvements in health equity.
 - With regards to duration, we would recommend 3 years with a required check-in after 2 years to ensure the Distinction remains valid.

Thank you for your time and attention to these certification standards. If you have any questions regarding these comments, please contact Heather Gasper, Director of Intergovernmental Relations at 617-534-2288 or by email at hgasper@bphc.org.

Sincerely,



Monica Valdes Lupi, JD, MPH
Executive Director