Amida Care and EngageWell IPA Submit New York State’s First Level 2 VBP Arrangement Focused on HIV Population Health, for Shared Risk with Federally Qualified Health Centers

New York, NY (February 18, 2021) - Amida Care, New York’s largest nonprofit Medicaid Special Needs Health Plan (SNP), and EngageWell IPA, a network of health and social care providers committed to using harm reduction to advance the health and well-being of patients, announced today the submission of a Level 2 Value Based Payment (VBP) contract to the New York State Department of Health. The contract is New York’s first example of Federally Qualified Health Centers (FQHCs) taking on a more advanced role in the financing and management of quality care in a value-based environment for people living with HIV.

The groundbreaking arrangement focuses on a panel of patients living with HIV who are Amida Care members and receive their primary care services at Housing Works, an FQHC that addresses the dual crises of HIV and homelessness. The VBP arrangement is tailored to incentivize both higher levels of health outcomes (primarily focusing on higher levels of viral load suppression and 14 others clinical indicators) and reducing total cost of care. The arrangement includes several innovative features: a pre-payment capitation to Housing Works for the provision of primary care and behavioral health services, giving Housing Works maximum flexibility to place the patient at the center of their care; and the ability to provide social determinants of health (SDOH) interventions as managed care benefits—nutrition support that includes medically-tailored meals and food packages, as well as advanced medication management and adherence support.

“We are thrilled to be leading the way for innovative value-based payment design in New York State,” said Doug Wirth, President and CEO of Amida Care. “This arrangement will further align the health plan and providers to deliver high-quality care that improves population health for people with chronic conditions like HIV. It will advance goals to increase viral suppression, decrease avoidable, costly hospitalizations, transition members into coordinated primary and behavioral outpatient care, and provide access to nutritious food and other social supports that are essential for improved health outcomes. We are looking forward to the success of this model and are optimistic that this kind of fiscal arrangement will expand to include more providers.”

“As previous co-chair of the New York State VBP Social Determinants of Health (SDH) and Community Based Organizations (CBO) Subcommittee, this is exactly the kind of flexibility that we knew would be available to providers as New York State moved towards a value-based health care system,” said Charles King, CEO of Housing Works. “It is so exciting for Housing...
Works to be on this cutting edge, and I know that we will deliver higher-quality services and reduce total cost of care, now that the incentives are aligned for both provider and payer.”

“The infrastructure needed to succeed with this kind of arrangement is exactly why EngageWell IPA gathered a network of providers that all share the same goal—to offer coordinated, integrated treatment options that include addressing social determinants of health,” said Kevin Muir, Executive Director of EngageWell IPA. “Ongoing investment is needed to achieve long-term success.”

“This is an exciting day for the move to value-based health care in New York State,” said Jason Helgerson, founder and CEO of Helgerson Solutions Group (HSG), and former NYS Medicaid Director. “Arrangements like this put FQHCs—which we know serve challenging patient panels exceptionally well—in the driver’s seat and gives them the ability to course their own path to success. The capitated payment to the providers will enable them maximum flexibility, and I anticipate seeing more providers joining arrangements like this one. HSG is proud to have supported this contract negotiation.”