OUR REACH

FACTS

YMCA Locations: 2,700

YMCA Locations in Communities where household income is below the national average: 58%

Communities Served: 10,000

States: 50 plus District of Columbia and Puerto Rico
THE Y’S OPPORTUNITY IN A CHANGING HEALTHCARE LANDSCAPE

Past

Acute Health Care System

- High quality acute care
- Accountable care systems
- Shared financial risk
- Case management and preventive care systems
- Population-based quality and cost performance
- Population-based health outcomes
- Care System integration with community health resources

Present

Coordinated Seamless Health Care System

- High quality acute care
- Accountable care systems
- Shared financial risk
- Case management and preventive care systems
- Population-based quality and cost performance
- Population-based health outcomes
- Care System integration with community health resources

Future

Community Integrated Health Care System

- High quality acute care
- Accountable care systems
- Shared financial risk
- Case management and Preventive care systems
- Population-based quality and cost performance
- Population-based health outcomes
- Care System integration with community health resources

COMMUNITY INTEGRATED HEALTH

Evidence-based Interventions
Ys are discovering, developing, and disseminating research-tested, high-fidelity health interventions to improve health.

Capacity Building
Y-USA is engaging Ys from the earliest stages to ensure they have the staff, competencies, and relationships necessary to implement evidence-based programs.

Compliance
Y-USA is helping YMCAs and other community-based organizations comply with privacy laws and health care regulations.

Health Equity
Y-USA infuses principles of equity into services to ensure everyone has the opportunity to live their healthiest lives, and that underserved populations have access to health-promoting resources.

Shared Physical Spaces
Ys are exploring the value of shared spaces with health practices, rehab and cancer centers, primary care within Y facilities, retail programming space with health care systems, clinical facilities at camps, and other health services.

Healthier Communities Initiative
Across 247 communities, Ys have used a collective impact model to implement policy, system, and environmental changes so that healthy choices are the easy choices for all.

Community Health Navigation
Ys help individuals develop the relationships necessary to manage health by conducting home visits, spreading awareness of recommended preventive services, and helping connect people to health care exchanges and marketplaces.
Building the pool of the 21st century
## DELIVERING OUTCOMES AT SCALE: THE YMCA’S DPP

### By The Numbers

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants attending at least one session</td>
<td>51,164</td>
</tr>
<tr>
<td>Completer’s average year-end weight loss</td>
<td>5.5%</td>
</tr>
<tr>
<td>Average physical activity minutes per week</td>
<td>162.5</td>
</tr>
<tr>
<td>Y associations delivering program</td>
<td>249</td>
</tr>
<tr>
<td>States where the program is available</td>
<td>47</td>
</tr>
<tr>
<td>Total program sites</td>
<td>1,699</td>
</tr>
<tr>
<td>Trained Lifestyle Coaches</td>
<td>4,334</td>
</tr>
<tr>
<td>Low income participants*</td>
<td>21.9%</td>
</tr>
</tbody>
</table>
Y-USA’S CMMI-FUNDED HEALTH CARE INNOVATION AWARD PROJECT

The YMCA’s award

- Goal: Demonstrate cost savings by delivering the YMCA’s DPP to Medicare patients in 17 markets from 2013-2016

- In 2012, Centers for Medicare & Medicaid Innovation (CMMI) launched Health Care Innovation Awards
- Aim was to fund the country’s most compelling ideas to spur better health, improved care and lower costs
- $1 billion was set aside in funding
- 3,000+ organizations applied
- Rigorous expert panel review led to 107 awards in 2012

- $11.8M award over 4 years
  - Y-USA Admin
  - TPA Reimburses local Ys
  - Ys recruit Medicare enrollees with community partners
HISTORIC RESULTS

- When compared with similar beneficiaries not in the program, Medicare estimated savings of $2,650 for each enrollee in the Diabetes Prevention Program over a 15-month period, more than enough to cover the cost of the program.
MEDICARE INNOVATION

By Maria L. Alva, Thomas J. Hoerger, Ravikumar Jeyaraman, Peter Amico, and Lucia Rojas-Smith

Impact Of The YMCA Of The USA Diabetes Prevention Program On Medicare Spending And Utilization

ABSTRACT The YMCA of the USA received a Health Care Innovation Award from the Centers for Medicare and Medicaid Services to provide a diabetes prevention program to Medicare beneficiaries with prediabetes in seventeen regional networks of participating YMCAs nationwide. The goal of the program is to help participants lose weight and increase physical activity. We tested whether the program reduced medical spending and utilization in the Medicare population. Using claims data to compute total medical costs for fee-for-service Medicare participants and a matched comparison group of nonparticipants, we found that the overall weighted average savings per member per quarter during the first three years of the intervention period was $278. Total decreases in inpatient admissions and emergency department (ED) visits were significant, with nine fewer inpatient stays and nine fewer ED visits per 1,000 participants per quarter. These results justify continued support of the model.
INTEGRATION WITH APMS

• Oncology Care Model
  • LIVESTRONG® at the YMCA
  • Improved incentives for improved outcomes for beneficiaries diagnosed with cancer
  • Support and Navigation activities

• Cardiac Care / Cardiac Rehab Bundled Payment
  • Cardiac Rehab Shared Space
  • Blood Pressure Self-Monitoring Program

• Comprehensive Joint Replacement Bundled Payment
  • Moving For Better Balance Program – supporting knee replacement beneficiaries during days 61 – 90 of a bundled payment episode
**Y-USA’S MSO: CAPTURING OPPORTUNITY**

Authorized plan for Y-USA to **assume functions of a Management Services Organization ("MSO")** -- providing administrative, business, and technology services to local Ys to enable them to receive third party payment for the delivery of the YMCA’s DPP and other chronic disease prevention programs.

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### Existing Structure

<table>
<thead>
<tr>
<th>Local Ys</th>
<th>Chronic Disease Prevention Program Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Program delivery</td>
<td>• Train Ys to deliver DPP</td>
</tr>
<tr>
<td>• Track participant outcomes in technology system</td>
<td>• Management and administration support</td>
</tr>
<tr>
<td>• Raise funds to assist with sustainability in absence of 3rd party payors</td>
<td>• Coordinate with existing TPA for technology support</td>
</tr>
<tr>
<td></td>
<td>• Provide reporting technical assistance to Ys for reporting to partners, CDC, etc.</td>
</tr>
</tbody>
</table>

### New Additional Structure

<table>
<thead>
<tr>
<th>Healthy Living Department MSO</th>
<th>Contracts with vendors for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employs staffs for:</td>
<td>• Technology platform</td>
</tr>
<tr>
<td>• Payor Engagement</td>
<td>• Billing / revenue cycle management</td>
</tr>
<tr>
<td>• Contracting</td>
<td></td>
</tr>
</tbody>
</table>
THANK YOU