From Partnership to Impact: How Multi-Sector Collaboratives Address Chronic Conditions

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Multi-Sector Collaboratives: Essential for Health and Economic Impact

Multi-sector collaboratives (public-private partnerships) are essential actors for addressing:



"Results show that a **science-based health collaborative** can improve outcomes while lowering costs."



"Overall, a large **community-wide QI initiative**, involving multiple different stakeholders, was associated with improvements in BP control and modest reductions in some targeted disparities."



"27 of the 30 studies showed **community health coalitions** having a positive impact."

San Diego: AMI hospitalizations down 22% vs. 8% in the rest of California; ~$86M saved

Rochester region: hypertension control up from 61.9% (2011) to 69.5% (2016)

Review of U.S. studies on prevention of chronic conditions, including diabetes and hypertension

Sources: Fremont A, et al., "One In Five Fewer Heart Attacks: Impact, Savings, And Sustainability In San Diego County Collaborative," Health Affairs 37(9), 2018; Fortuna RJ, et al., "A community-wide quality improvement initiative to improve hypertension control and reduce disparities," J Clin Hypertens 21(2), 2019; Shockley E, Amin A, Savaiano D, "The Impact of Community Health Coalitions On Preventative Health Outcomes: A Systematic Review," Proceedings of IMPRS 4(1), 2021 (abstract).

Lessons from Collaboratives: Organizational Structure and Partners

	Organizational Structure & Backbone	Partners
Rochester, NY	– Rochester Business Alliance acts as business initiator and strategic leader – Finger Lakes Health System Agency acts as the community convener – Common Ground Health provides analytics and data measurement	– Local businesses, providers, insurers, labor groups, community and faith organizations, United Way, minority consumer coalitions
San Diego, CA (Live Well)	– California Department of Managed Health Care and the University of California's Right Care Initiative act as the backbone organizations – San Diego County HHSA provides administrative and public-health infrastructure	– Medical providers, faith-based organizations, pharmacists, and community health workers – Live Well San Diego has grown to **600+ recognized partner organizations**
Atlanta, GA (ARCHI)	– Executive Leadership Team (Georgia Health Policy Center (GHPC), Atlanta Regional Commission, United Way) acts as the backbone organization, setting strategic direction and providing organizational support – Steering Committee works with leadership to align regional efforts with ARCHI priorities – GHPC convenes stakeholders and manages aligned grant-funded projects – 8 health systems meet biweekly	– **120+ organizations**, incl. Emory Healthcare, Grady Health System, Children's Healthcare of Atlanta, Georgia Department of Public Health – **Atlanta Hypertension Initiative (2023–present):** CDC Foundation, American Medical Association, Metro Atlanta American Heart Association, local health care and community organizations; AstraZeneca provides private-sector funding
Central & Eastern Michigan	– MiHIA, a nonprofit collaborative, acts as the regional backbone: convener, fiscal agent, planner – Funded by CMS through MDHHS Rural Health Transformation Program	– **65 partners** across health, education, and employers – Incl. CMU, Covenant, Dow, MyMichigan Health

Sources: ARCHI, State of Metro Atlanta Health 2024 Report (partner-reported outcomes); ARCHI, "Atlanta Hypertension Initiative"; CDC Foundation, "Atlanta Hypertension Initiative"; Common Ground Health and Greater Rochester Chamber of Commerce, "The High Blood Pressure Collaborative," Feb. 26, 2019; Bisognano et al., J Clin Hypertens 14(3), 2012; University of Rochester Medical Center, "Collaborative 'Rochester Model' Gets Spotlight for Hypertension Program," Jan. 30, 2012; American Heart Association, "Million Hearts Rochester"; Fremont et al., Health Affairs 37(9), 2018; Right Care Initiative (UC Berkeley), "San Diego University of Best Practices"; Be There San Diego, betheresandiego.org; San Diego Wellness Collaborative, "SDWC 2022–2024 Impact Report," 2024; Michigan Health Improvement Alliance, mihia.org.

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Lessons from Collaboratives: Examining Interventions and Impacts

	Interventions	Impacts and Recent Updates
Rochester, NY	– Hypertension registry of three health systems – Shared data on high-risk barriers – Screening and healthy eating efforts – Blood pressure advocates program	**2019 10-year Retrospective (2010–2018 data)** – Hypertension control **improved by 11%** – **81%** of patients with a BP advocate reached control (2012–2018) – Adults above 160/100 **down 41%** **170+ medical practices now track hypertension control and disparities by race, ethnicity and socioeconomic status**
San Diego, CA (Live Well)	– Shared best practices, monthly metric reviews – Confidential data sharing – Be There San Diego added a recommendation on organizational approaches to equitable atrial fibrillation care in 2024	**Health Affairs Study (2011–2016 vs. 2007–2010 baseline)** – AMI hospitalization rate down **22%** vs. **8%** in the rest of California – **3,826** AMI hospitalizations avoided – **$86M saved** in the first six years **Partners raised hypertension control from 78% to 80%, and from 80% to 82% among people with diabetes between 2022 and 2024**
Atlanta, GA (ARCHI)	– Share regional data to target action – CHW navigators and resource hub – Health and housing coordination – Atlanta Hypertension Initiative (2023-present): self-measured BP monitoring, CHW training and outreach, community education, clinical quality improvement	**State of Metro Atlanta Health 2024 Report** – **$5M+** in partner aid streamlined – **500+** people permanently housed – Hub partners: 39% lower ER/inpatient use – A1c **improved** for **82%**, BP for **72%** of poorly controlled patients **Atlanta Hypertension Initiative now has 90+ participating organizations; targets 500,000+ adults to reduce heart attacks, strokes and other cardiovascular events**
Central & Eastern Michigan	– "Bloom: Thriving Together" framework with 3 focus areas: strengthening families, revitalizing neighborhoods, optimizing health and care – Produce prescriptions at two health centers – CAREing Quick Response Team for care access	**Michigan Health Improvement Alliance (2022–2026)** – **$4M+** in regional funding secured (2022–2025) – **$1.5M** Rural Health Transformation subaward (2026) – **10**-county regional care collaborative **Webinar on preparing for 2027 Medicaid changes and value-based care**

Sources: ARCHI, State of Metro Atlanta Health 2024 Report (partner-reported outcomes); ARCHI, "Atlanta Hypertension Initiative"; CDC Foundation, "Atlanta Hypertension Initiative"; Atlanta Hypertension Initiative, "Atlanta Hypertension Initiative Convening," Oct. 8, 2024; Common Ground Health and Greater Rochester Chamber of Commerce, "The High Blood Pressure Collaborative," Feb. 26, 2019; Common Ground Health, "Hypertension Control Rates"; Bisognano et al., J Clin Hypertens 14(3), 2012; Adams, B., "Public Health Campaign Targets Rochester Neighborhoods…," WXXI News, Jan. 22, 2016; Fremont et al., Health Affairs 37(9), 2018; Be There San Diego, "Our Impact"; San Diego Wellness Collaborative, "SDWC 2022–2024 Impact Report," 2024; Michigan Health Improvement Alliance, "Home," mihia.org; Michigan Health Improvement Alliance, "A Perfect Storm: Getting Ready for Medicaid Changes and Value-Based Care," LinkedIn post.

Characteristics of Effective Collaboratives

What Collaboratives Share

Common Agenda

The collaborative brings together leaders from health care, business, education and other sectors around one specific, measurable goal: improving blood pressure control for adults in the Finger Lakes region. The communitywide initiative grew out of the broader work of Greater Rochester Chamber of Commerce's health care planning team, which has been recognized nationally for its role as a "public health leader."

Shared Measurement

The nation's first communitywide high blood pressure registry tracks hypertension control rates for adults in the nine-county Finger Lakes region. Based on de-identified clinical records from nearly 200 medical practices, and more than 200,000 patients, the registry data are collected and analyzed twice a year. The registry tracks high blood pressure improvement based on socio-economic status and race/ethnicity at the practice, county and regional level.

Clinical Support

Specially trained practice improvement consultants—all physicians from the Rochester region—meet with health care professionals at their office to review the registry's hypertension data and identify areas for improvement. Such customized outreach is an effective, convenient way for providers to improve patient outcomes and stay up-to-date on evidence-based approaches to treating high blood pressure.



Community Engagement

Social gathering places are ideal for creating a culture of health. Churches have coordinators who help congregants make healthy choices and implement practice changes in their congregations. Barbershops and salons have community health educators who offer blood pressure monitoring and consultation. Volunteers offer free high blood pressure screenings at community events, and blood pressure kiosks make self-monitoring more convenient.

Communications

Multi-media campaigns encourage residents to "know their numbers" and to develop a "reminder" to help make taking daily medication a habit. Customized full-color posters made for congregations and workplaces are part of the My Reminder project, delivering encouraging tips from a trusted colleague or church member. An e-newsletter keeps coalition participants engaged and updated on the campaign's programs.

Backbone Organization

As a recognized leader in collaborative health transformation, Common Ground Health provides the analytical and management support for the collaborative. The health planning agency brings the technical expertise required for handling sensitive electronic medical records along with the trusted relationships needed to implement community interventions.

Shared Agenda	Backbone Organization	Shared Measurement	Complementary Activities	Continuous Communication
Align public health, business, healthcare, faith-based and community leaders on common health, economic priorities	Recognized backbone organization to provide analytic, management, and other support for sustained successful collaborative	Use shared health, economic and other data to understand local issues, costs, equity and social drivers, and to guide engagement and action; includes clinical support	Coordinate distinct partner roles, break down silos and use trusted relationships to reach all residents	Review progress and learn

Source: Common Ground Health and Greater Rochester Chamber of Commerce, "The High Blood Pressure Collaborative," February 26, 2019.

Our Focus

FTI's Center for Healthcare Economics and Policy brings advanced economic modeling, research-based methods and validated data sources to inform analyses and assist clients (business, collaboratives, health systems, health plans, government) proactively to assess drivers of poor health, their economic and health impact at the community level, and opportunities and benefits from collective action. We focus on:

- Demonstrating the value of population health and economic wellbeing
- Health and economic metrics for impact and action
- Interventions and organizations for sustained improvements in health and wellbeing

Selected Resources



Hypertension budget impact model: tools to demonstrate the value of action



Presentation to the value & access committee of the national forum: economic impact of health



FTI journal: what business leaders need to know about the benefits of a healthy workforce



Nashville, TN | Nashville region health competitiveness initiative



Buffalo/ western NY | the economic impact of poor health on our WNY community



Health & economic impact of covid-19 – health collaboration to address health disparities



National forum for heart disease & stroke prevention's mid-year presentation: mobilizing faith-based and trusted community leaders in buffalo, New York to improve blood pressure control in underserved communities

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