

# INITIATING CROSS-SECTOR PARTNERSHIPS TO ADVANCE POPULATION HEALTH



## INTRODUCTION

**Social determinants of health** are the conditions in which people are born, live, work, play, worship, and age, all of which affect health and wellbeing. Complex issues like the social determinants of health are best **addressed** through collaborative partnerships instead of a single sector in a silo. Public health agency staff can initiate and develop cross-sector **partnerships** to collaborate with other governmental agencies on common goals and priorities, like access to affordable housing, public transportation, or healthcare services. Although initiating such partnerships can be challenging due to different operational realities and language across sectors, cross-sector alignment and coordination may **help** create the **community conditions** that allow everyone to be healthy. This report will share action steps that public health agencies can use to initiate and sustain a cross-sector partnership and highlight examples of successful public health collaborations with Medicaid, housing, and transportation agencies.

# BUILDING THE FOUNDATION

Public health agency staff can effectively prepare to engage with a cross-sector partner by first familiarizing themselves with how the other sector operates and identifying problems public health can help solve. The table below includes steps that state public health agency staff can take to begin establishing cross-sector partnerships.

## Establishing Cross-Sector Partnerships

### WHERE TO START

#### 01 Assess Your Internal and Existing Resources and Contacts



- Conduct an environmental scan to assess which internal public health divisions are already collaborating with Medicaid, transportation, and housing agencies (at the programmatic or leadership levels).
- Request introductions to cross-sector partners who may be interested in collaborating on social determinants of health- or equity-focused interventions. National membership associations, such as ASTHO, [NACCHO](#), the [National Association of Medicaid Directors](#), the [American Association of State Highway and Transportation Officials](#), and the [National Center for Mobility Management](#), may be helpful for identifying appropriate contacts.

#### 02 Research Your Potential Partner's Motivations and Needs



- Map key players at the federal, state, and local levels, and learn more about their decision-making processes, programmatic focus areas, and funding streams.
- Learn the languages of the Medicaid, transportation, and housing sectors. Join workshops and conferences to learn key definitions and understand other agencies' programmatic operations.
- Review state-level strategic plans related to [Medicaid](#), [transportation](#), and [housing](#) to identify areas of shared interest or shared priority populations or communities.
- Prepare an "elevator pitch" on what your public health agency can offer its partners, such as data analytics and visualization, community engagement strategies, or [examples](#) of community needs assessments.

#### 03 Center Health Equity in Policy and Program Planning



- Share health outcome data disaggregated by race/ethnicity that you and your partners can use to determine where to focus investments or interventions. For example, analyze Medicaid claims data by race/ethnicity to initiate a conversation with Medicaid about joint strategies to address disparities or ensure equitable care.
- Name racial equity as a public health priority when you frame your outreach or planning discussions to help facilitate connections between partnering organizations. Learn how Medicaid, transportation, or housing agencies are building racial equity into their policies and programs.
- Explore funding opportunities to invest in marginalized communities. To best connect with individuals with unmet health or social needs, consider partnering with community-based organizations, minority-owned businesses, or community members that have already built trust with marginalized communities.

#### 04 Identify Funding Opportunities that Could Catalyze a Partnership



- Search for possible joint funding opportunities to pursue with sister agencies. For example, the National Center for Mobility Management released a funding [opportunity](#) to address social isolation in older adults and is requesting expertise from eligible agencies, such as state departments of transportation and public health.
- Offer public health support for a partner agency's funding applications, such as by providing data on community needs or expertise on strategies for equity.

# SUSTAINING PARTNERSHIPS WITH MEDICAID, TRANSPORTATION, AND HOUSING AGENCIES

Cross-sector partnerships can begin with small-scale activities that create a trusting foundation for longer-term work. Early partnership activities could include expanding uptake of a public health service, providing public health review of a request for proposals, or initiating a data-sharing agreement. From there, public health agency staff can sustain relationships through regular correspondence, providing updates on relevant cross-agency projects, and sharing resources.

## Managing Cross-Sector Partnerships

### EXAMPLES OF CROSS-SECTOR PARTNERSHIP ACTIVITIES

#### 01 PRIORITY SETTING:

Executive leaders can set shared priorities between agencies or scale a promising partnership beyond a single program or bureau.



##### Medicaid:

Rhode Island's Medicaid agency received a Section 1115 waiver to create a health systems transformation program, through which Medicaid is allocating funds toward a state [social determinants of health investment strategy](#). The Rhode Island Department of Health informs the strategy's development and implementation, and its [Health Equity Zone](#) initiative provides infrastructure for connecting with community-based coalitions. One component of the strategy includes the Rhode to Equity project, which uses the [Pathways to Population Health](#) framework to foster upstream, cross-sector collaboration. The [Rhode to Equity teams](#) are made up of an accountable entity, a health equity zone, community-based organizations, and community members, who collaboratively develop place-based interventions to improve a specific health outcome.



##### Housing:

Wisconsin's legislature formed the [Interagency Council on Homelessness](#), which is chaired by the governor, to end homelessness in the state. [Priorities](#) include directly investing in housing assistance, expanding case management, and "silo-busting" between state agencies and housing providers. The council requires participation by eight state agencies and four Continuum of Care organizations, effectively setting homelessness as a shared, multi-year priority across agencies.

#### 02 DEDICATED STAFF TIME FOR PARTNER ENGAGEMENT:

Staff-level relationships are critical to identifying opportunities for and operationalizing partnerships. Some agencies fund liaison positions to do this work, while others support staff time for regular participation in cross-agency workgroups and advisory bodies.



##### Medicaid:

The Rhode Island Department of Health created a memorandum of understanding with Medicaid to hire liaison staff who connect programmatic efforts between both agencies.



##### Transportation:

A representative of the Maryland Department of Health attends monthly [Bicycle and Pedestrian Advisory Committee](#) meetings to share a public health perspective.



##### Transportation:

The Delaware Division of Public Health participated in a cross-agency coalition with the Delaware Department of Transportation, Delaware Office of State Planning Coordination, and 75 other state and local agencies. Initially [formed](#) as part of a CDC grant requirement, the coalition has expanded to conduct land use reviews and health impact assessments. The Division of Public Health provides equity considerations and encourages transportation planners to consider availability and safety of active transportation options, nutrition, and transportation accessibility for individuals of all socioeconomic statuses.

# SUSTAINING PARTNERSHIPS WITH MEDICAID, TRANSPORTATION, AND HOUSING AGENCIES

(Continued)

## Managing Cross-Sector Partnerships

### EXAMPLES OF CROSS-SECTOR PARTNERSHIP ACTIVITIES

#### 03 DATA SHARING:

Public health agencies have robust data analytics expertise and often break out data by race and ethnicity, while other sectors may not. Public health agencies can offer to create data visualizations or can interpret other sectors' data in new ways.



##### Medicaid:

The Colorado Department of Public Health and Environment (CDPHE) initiated a data sharing agreement with Medicaid to receive quarterly data on diabetes prevalence and Diabetes Self-Management Education and Support (DSMES) program utilization. CDPHE staff identified regions with low DSMES use and provided education to regional care coordinators who were unaware that DMES was a Medicaid-covered benefit. CDPHE staff also created a dashboard of the quarterly data that included annual changes and participation by gender and race and presented it to Medicaid staff, which has prompted additional ideas for collaboration and policies to increase DSMES uptake.

#### 04 ALIGNMENT ON PERFORMANCE METRICS:

State agencies may have a priority or performance metric that aligns with a core public health service or program and can create an opportunity for collaboration.



##### Medicaid:

The Texas Department of State Health Services' (TXDSHS) Asthma Control Program and Texas Medicaid program had similar **performance metrics** for reducing asthma-related hospital and emergency room visits. In addition, TXDSHS staff identified Medicaid as the primary payer of both inpatient and outpatient care for pediatric asthma, which offered a window of opportunity and business case for building a relationship. Following an initial introduction between TXDSHS and Medicaid staff, the agencies participated in a CMS asthma control learning collaborative together. Future areas of collaboration may include developing an asthma risk stratification tool that could be used by managed care organizations to address disparities and creating syndromic data visualizations.

#### 05 SUBJECT MATTER EXPERTISE:

Public health agencies have deep knowledge of community engagement, equity, and health promotion strategies that can be useful to other agencies. For example, Medicaid agencies may value public health expertise on integrating equity into Medicaid managed care organization procurement processes. Public health agencies could also offer input in public transportation planning as it relates to social isolation, food insecurity, or physical inactivity.



##### Housing:

The Rhode Island Department of Health contracts with [HousingWorks Rhode Island](#) to provide subject matter expertise and collaborate on an annual [Housing Fact Book](#) to inform environmental health content.



##### Medicaid:

The Rhode Island Department of Health offers a health equity perspective to inform the state Medicaid agency's managed care organization procurement process and request for applications planning.

## FUTURE VISION: TRANSFORMATIVE CROSS-SECTOR PARTNERSHIPS

As the United States recovers from the impact of the COVID-19 pandemic, public health is in a moment of **unprecedented change** in which it can either rebuild the same public health and healthcare systems that existed prior to the pandemic or work collaboratively across sectors and with communities to affect the conditions that create health and well-being. In addition to the cross-sector activities referenced in this report, public health leaders are recognizing the opportunities to move from **transactional to transformative** partnerships. **Transformation** would represent a shift from short-term, small-scale changes that leave the broader systems intact to cross-sector efforts that:



**Involve changes in values, roles, and approaches to work in multiple institutions.**



**Allow the community or people affected to define the problems and desired solutions.**



**May have a long-term horizon to implement.**



**May involve some degree of experimentation to discover new strategies.**

Public health agencies are making significant strides in building cross-sector collaborations to build healthy environments that encourage healthy behaviors, remove barriers to health and well-being, and focus on reducing health disparities. The practical realities of how to operationalize and scale partnerships from a single program or project into system-level or community-wide change will continue to be important challenges for public health leaders and their partners to explore.

*This report draws from a series of three calls held with state public health agency staff about promising strategies to build cross-sector partnerships with Medicaid, housing, and transportation agencies. The project and this publication were supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as a part of a financial assistance award for State Partnerships for Population Health, totaling \$150,000, with 100% funded by CDC/HHS. The contents are those of the author and do not necessarily represent the official views of, nor an endorsement by, CDC/HHS or the U.S. government.*

# APPENDIX:

## RESOURCES AND FRAMEWORKS FOR CONTINUED LEARNING

These compiled resources can help state public health agency staff build foundational knowledge of how other sectors operate. These items also share evidence-based strategies for addressing the social determinants of health, such as through CDC's Health Impact in 5 Years initiative.



### Medicaid Resources

#### [What Every State Health Official Should Know About Medicaid](#)

This virtual presentation identifies the "nuts and bolts" of how Medicaid operates, discussing eligible populations, mandatory and optional benefits, state and federal funding, and how changes can be made.

#### [The Aligning Roles of Medicaid and Public Health](#)

This ASTHO podcast shares perspectives on how public health officials and staff can best approach Medicaid partners and avoid policy and cultural miscommunications.

#### [Medicaid Provisions in the American Rescue Plan Act](#)

This Kaiser Family Foundation brief summarizes how the American Rescue Plan Act can allow flexibilities that increase Medicaid coverage, expand benefits, and adjust federal financing.

#### [Leveraging Public Health Assets in Medicaid Managed Care](#)

This ASTHO report describes the managed care life cycle and opportunities for public health to inform and support planning.

#### [Data Privacy, Data Use, and Data Use Agreements](#)

The CMS Innovation Accelerator Program brief offers considerations and elements to include when developing a cross-agency data-sharing agreement.

#### [Data-Sharing Considerations for State Public Health Departments and Medicaid Agencies](#)

This technical assistance brief outlines considerations in designing data-sharing agreements, best practices for data-sharing, and examples of jurisdictions that have set up effective data-sharing agreements.

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(Continued)



### Transportation Resources

#### **CDC Foundation Health Impact in 5 Years Field Lessons and Public Health Action Guide**

CDC Foundation's [field lessons report](#) (see page 52) and [public health action](#) guide outline how public transportation systems and public health can work together. Additional videos in this project include:

- [Everyone Wins with Public Transportation](#)
- [Moving Toward Better Health](#)
- [Public Transportation Boosts Health](#)

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#### **The Community Guide: Built Environment Approaches Combining Transportation System Interventions with Land Use and Environmental Design**

This Community Preventive Services Task Force report recommends built environment strategies that combine one or more interventions to improve pedestrian or bicycle transportation systems with one or more land use and environmental design interventions to increase physical activity.

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#### **Connecting Transportation & Health: A Guide to Communication & Collaboration**

Prepared by the American Association of State Highway Transportation Officials' Committee on Environment and Health, this brief offers a glossary of terms and strategies for communicating effectively between sectors.

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#### **Exploring the Intersection of Public Health and Public Transportation with Amy Conrick**

This recorded presentation provides an overview of federal transportation-related agencies and areas of shared interests between public health and public transportation.

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#### **Federal Transit Administration: Coordinating Council on Access and Mobility Federal Fund Braiding Guide**

This guide provides information to potential grantees as well as agency program managers on acceptable federal fund braiding arrangements on transportation-related projects.

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#### **Mobility & Equity Podcast Series**

This podcast discusses the intersection of mobility and equity.

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(Continued)



### Housing Resources

#### [Addressing Housing Challenges and Economic Insecurity During COVID-19](#)

This ASTHO podcast features the Delaware Division of Public Health, the National Alliance to End Homelessness, and National Community Action Partnership and describes how the pandemic has affected the need for housing and opened opportunities for creative solutions.

#### [Community Health and Economic Prosperity \(Executive Summary\)](#)

This January 2021 Surgeon General report identifies humane housing (e.g., housing with safe structures, affordable costs, diverse neighborhoods that is close to work, school, and recreation) as a vital condition that shapes health, wealth, and wellbeing.

#### [Housing and Health Partners Can Work Together to Close the Housing Affordability Gap](#)

This Center on Budget and Policy Priorities summary details the need for federal investment in housing affordability and collaborations between housing and healthcare partners to increase the availability of affordable housing.

#### [The State of the Nation's Housing \(2021\)](#)

This June 2021 report from Harvard University's Joint Center for Housing Studies highlights how the COVID-19 pandemic amplified inequities financial distress due to challenges in housing prices, stock, and demand.