

# Invest in Nonprofit Capacity and Community Voice to Help Medicaid Transformation Succeed

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**To the Editor**—Thank you for highlighting Medicaid transformation in your September/October issue. The spotlight is upon North Carolina. How we address social needs and their impact on health through the Healthy Opportunities Pilots can have significant influence here and nationwide.

We've long known that housing, personal safety, access to healthy food, and other needs impact health at the individual level, and that some communities experience greater barriers to addressing these needs than others. To this end, paying community-based organizations (CBOs) for the services they provide is past due.

But such dramatic change to how we pay for health does not come without complications. CBOs need to build infrastructure to succeed in this new environment, or we risk overwhelming them to the point of unsustainability. We have a responsibility to build a bridge between health care and nonprofits, large and small, that decreases disparities rather than exacerbates them.

First, we must avoid imposing our current health care model onto the social service system. Nominal compensation for each bag of food delivered or each client housed is inadequate. We must instead strengthen our CBOs and incorporate their contributions into calculations about how we pay for value. And CBOs must be organized and understand their worth in a value-based health care system so that community service providers can approach discussions about cost and reimbursement with payers from a position of power. We applaud the North Carolina Department of Health and Human Services for funding capacity-building as part of the Healthy Opportunities Pilots. In addition to enhancing finance and programmatic capacity, efforts should support developing partnerships between community organizations, health care providers, and payers, recognizing that gains in the shift to value and paying for health will result from the health improvements generated in part by CBOs.

Second, it's vital to elevate the perspectives of those most impacted by Medicaid transformation as our experi-

ence with it evolves. This can be done by engaging with individuals directly or ensuring there are avenues for individuals to give input to health care providers and nonprofits that are providing services. Ensuring that the nonprofits most connected to beneficiaries participate in shaping the transformation effort is also critical.

And finally, while it's imperative that we embrace the role of CBOs in improving health, we must confront the historic inequities that create barriers to good health to begin with. While addressing social needs at the individual level is critical, policy and system-level changes that address social determinants at the population level are the only path to sustained improvement in health. By explicitly and intentionally addressing community conditions, rather than simply adjusting payments to recognize CBOs' contributions, we will move closer to our goal of a North Carolina where everyone has more opportunity to be healthy and thrive. **NCMJ**

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