

**Wednesday, September 14, 2022 @ 12:00 p.m. ET**

Advancing Arthritis Public Health Priorities through National Organizations

- Collaborating with Community Resource Referral Platforms and Integrated Health and Social Care Networks – Follow up call with UniteUs Team

**UniteUs Team**

- Matt Hernandez – [matthew.hernandez@uniteus.com](mailto:matthew.hernandez@uniteus.com) - FL and MS
- Scotty Yeung - [scott.yeung@uniteus.com](mailto:scott.yeung@uniteus.com) - Pacific Northwest
- Adam Lewon - [adam.lewon@uniteus.com](mailto:adam.lewon@uniteus.com) - Midwest
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- Melissa Carr - [melissa.carr@uniteus.com](mailto:melissa.carr@uniteus.com) - Upper Northeast
- Brian Chmura - [brian.chmura@uniteus.com](mailto:brian.chmura@uniteus.com) - Brian wasn't on the call but he is the one who would be the best contact for MN and IL

**Participants**

Jasmine Franco (RI), Amy Ellings (WA), Trina Radske-Suchan (CHPcommunity – IA), Karen Tredinnick (Arthritis Foundation), Karen Day (VA), Shea Kelly (NY), Meredith Knowles (OR), Cherylee Sherry (MN), Mona Burwell (VA), Serena Weisner (OA Action Alliance), Shalu Garcha/Heather Murphy/Lisa Erck (NACDD)

**Call Summary**

- Link to the Unite Us website <https://uniteus.com/> and to a map of state networks <https://uniteus.com/networks/>
- Link to the Unite Us webpage with links to webinar recordings, white papers and resources <https://uniteus.com/knowledge-hub/>
- Link to upcoming events about Unite Us <https://events.uniteus.com/>

UniteUs is in 47 states as of today, with plans to be in all 50

UniteUs has touched over 2million lives; connecting people with services in the communities they live

75% of referrals happen within 4 days; 73% of needs are met

Five ways that UniteUs comes to market - Identify, Enroll, Serve, Invest, Measure (merger with NowPow and Carrot Health has helped with this)

UniteUs wants to use the data to tell the story; as well as to implement a payment system

UniteUs leverages proprietary data to proactively id the social care needs of individuals

- Predict, enroll, serve, measure, invest

- Enroll - Care coordination, proactive enrollment, assistance request fulfillment – UniteUs supports these to help take the burden off the care manager or care coordinator
- Serve – on the ground expertise (deploy 200+ person implementation team); technology platform (flexible and scalable platform); free access to tools for keeping their info up to date and sharing outcomes that they have for every patient (and also when patients can't be connected) which is built on the ground with local coordinators (people on the receiving end are the people enter data; if a CBO accepts a referral then they complete the outcomes for the patient – this should be easy and completed within a minute or so)
  - Definitely a partnership with CBOs, but have a local team that will monitor and measure
  - What is an action item for SHD partners? They could encourage local CBOs or local partners to join UniteUs and to claim their space. For SHD to get the data then there needs to be a more formal relationship.
  - Networks can be built to serve the customer that is being served
  - Best practice is to have a statewide network; in VA the statewide network is paid for by state dollars/government funds. Sometimes the partnership is from the top down and other times from the bottom up.
- Measure – track standardized social care delivery data; visualize key insights in curated dashboards; put findings into action to maximize network impact. UniteUs has an enterprise-wide identifiers so they can track people across states and networks. They track a social care history on individuals in the system to help tell the whole story picture.
- Invest – pay for interventions that drive outcomes
  - Technology – tie funding to services provided and create accountability
  - Services – identify where, who and what to fund. Sustainable social care funding; data to inform health impacts; refinement as we go – continue to assess and iterate while analyzing the value of social care.
    - This creates a streamlined process for tracking and a sustainable mode for funding
    - UniteUs can help the CBO create a revenue stream to assist with forecasting, future contracts, and future funding

Discussion on UniteUS statewide platforms that are available and other state organization leads --

- VA – state government used CARES Act dollars for the platform  
<https://virginia.uniteus.com/>
- WA – statewide and driven by CHPW/Kaiser/and others  
<https://washington.uniteus.com/>

- OR - Health Authority is leading the statewide effort through Medicaid organizations (direct contracts with 13 of 15 CCOs) <https://oregon.uniteus.com/>
- IA - Sync Health (Joy) has the lead for the state; Trina shared that she is working to join HIE with UniteUs through the HUB and also trying to find ways to work with 211 and others <https://iowa.uniteus.com/>
- NE - in every county of the state <https://nebraska.uniteus.com/>
- MD - used by Kaiser Permanente, military and others but changing a bit over the next 120 days <https://maryland.uniteus.com/>
- DC - working with DMV
- DE - Highmark is the major MCO and working with all but one health system <https://delaware.uniteus.com/>
- WV - HIE oversees but they are working through compliance issues, working with DOH and Veterans Admin <https://westvirginia.uniteus.com/>
- CT - CT Hospital Association and other partners make up a statewide presence; also working on relationships with government departments; have about 400 orgs involved <https://connecticut.uniteus.com/>
- RI - have about 300 orgs involved; provides access for hospitals and has relationships with ACOs; working with UnitedWay and 211 which is the coordination center in RI; state government leads platform <https://rhodeisland.uniteus.com/>
- NH - UniteUs had a former contract <https://newhampshire.uniteus.com/>
- ME - working on building out a network in this state

Follow up between participants and UniteUs leads will occur to discuss opportunities for collaboration