



AMHI Reform Workgroup: October 27, 2021, Prioritizing ADI and Rural Factor

AMHI Reform Project Team: Abbie Franklin, Ashley Warling-Spiegel, Elisabeth Atherly, Helen Ghebre

Agenda

- Housekeeping, review of norms and goals – 5 minutes
- Review priority matrix for SDOH/Medical risk based on survey responses – 30 minutes
- Review ADI and rural factor questions / discussion – 30 minutes
- Priority matrix – ADI and rural factor – 30 minutes
- Next steps and wrap up – 25 minutes

Housekeeping

- Please mute when you are not speaking
- Please participate with video
- Be engaged and present in the workgroup and limit distractions
- We encourage questions, comments, and discussion throughout the meeting
- Use “raise hand” to make sure everyone has an opportunity to speak
- Share your voice and ideas verbally
- Share resources in chat
- Meeting is being recorded for note-taking purposes, recording will not be made public

Group Norms



How we work together



Meeting Structure



Vision



Communication

- Results
- Minimize disruptions
- Access and resources
- Communication



Clarifying Points

- There is NO risk of too many variables with the funding formula model as currently built
 - All of the variables provided can be used and can have weights assigned
 - Too many variables was a risk that DHS and Forma ACS dealt with in building the model
- Values/weights placed on formula variables are being recommended by this workgroup and should be determined from a statewide perspective
 - Not all variables in the formula model must have a value/weight
 - May recommend non-inclusion for any variable in the model not seen as important
 - May place high value on some variables of high importance and low or no value on others of less importance

- Review priority matrix drafted from survey responses
- Finalize the priority matrix as a group, which has 4 options:
 1. Use only the top 2 SDOHs – this matches the responses from the March 2021 survey
 2. Set priorities for each of the SDOHs, and use that to develop specific weights for each one
 3. Use the “total SDOH” option built into the formula
 4. Use the “any SDOH” option built into the formula

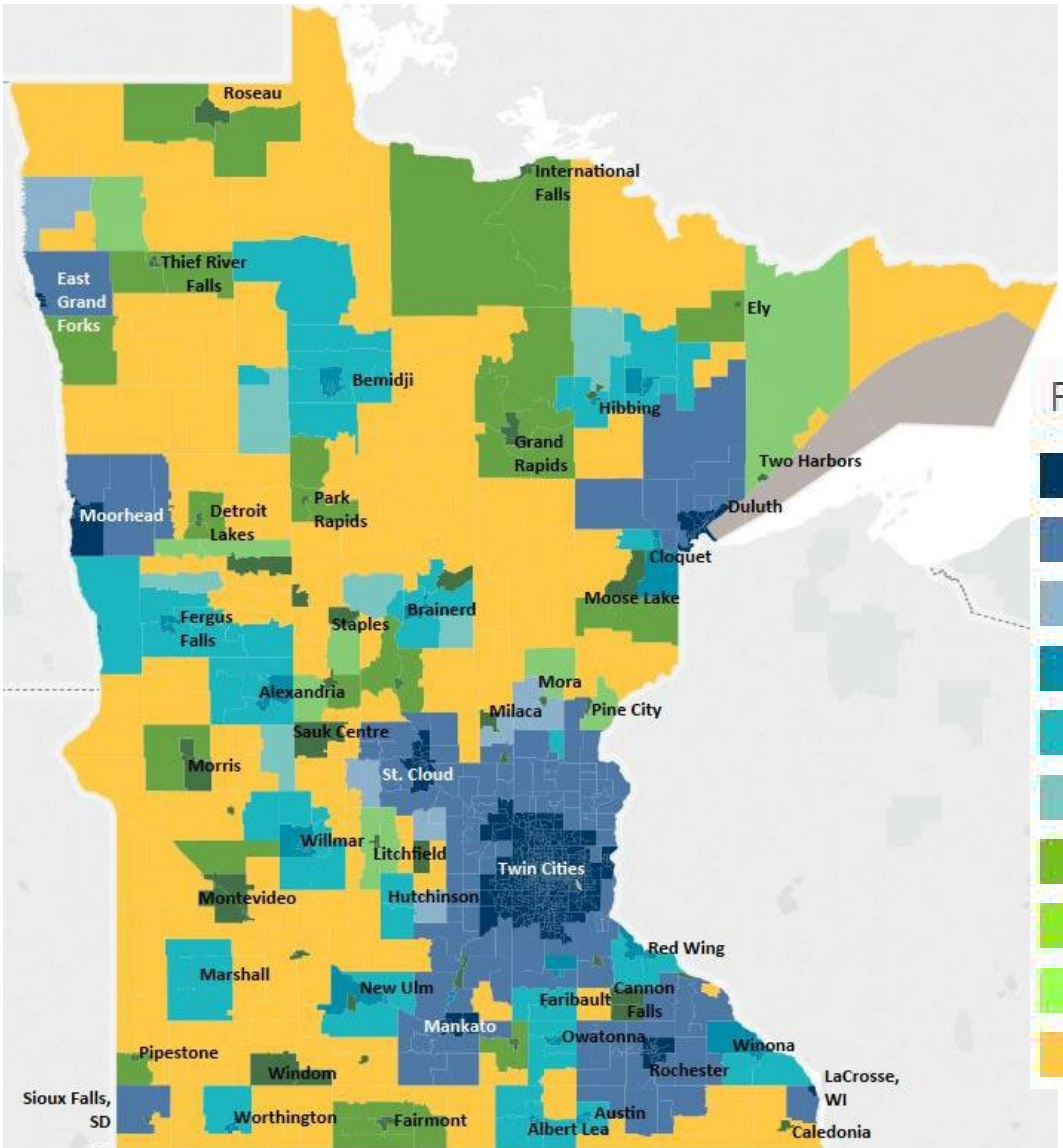
Discussion: Area Deprivation Index

- [Area Deprivation Index](#) (ADI) is a measure of neighborhood socioeconomic disadvantage that is vetted and reliably updated
- Includes factors measuring income, education, employment, and housing quality at the 9-digit neighborhood level
- Allows us to account for access issues that may be present in some areas of the state more than using population or SDOH alone
- Each AMHI is assigned a weighted ADI score reflecting the relative level of socioeconomic disadvantage calculated by averaging the neighborhood ADI scores in the region

Discussion: Rural factor

- The Minnesota State Demographic Center, Minnesota Department of Health, and Minnesota Department of Agriculture all define "rural" based on the [rural-urban commuting area \(RUCA\) codes](#)
- RUCAs classify U.S. census tracts using measures of population density, urbanization and daily commuting. RUCA codes 1-10 delineate metropolitan, micropolitan, small town and rural commuting areas based on the size and direction of the primary (largest) commuting flows.
 - MDH and HRSA use RUCA codes to distribute rural health grants
 - In Minnesota, RUCA 1-3 = Urban, RUCA 4-10 = Rural
 - Accounts for "rural" pockets within "urban" counties
 - For purposes of the formula, could average the RUCA codes so fully "rural" county has higher weight than county with "rural" and "urban" communities
 - Updated 5 year averages using American Community Survey data and US Census

Discussion: Rural factor, continued



Should we use RUCA codes 4-10 to define “rural” for purposes of the funding formula?

- Primary RUCA code
- 1: Urban, core
 - 2: Urban, higher commuting
 - 3: Urban, lower commuting
 - 4: Large town, core
 - 5: Large town, higher commuting
 - 6: Large town, lower commuting
 - 7: Small town, core
 - 8: Small town, higher commuting
 - 9: Small town, lower commuting
 - 10: Rural

Priority matrix: ADI and Rural factor variables

- Use priority matrix to set priorities for:
 - ADI score
 - Rural factor

Next Meeting

- Next meetings: 11/10
 - Review priority matrix with all variables plotted
 - Finalize this priority matrix to set final priorities for the entire formula
 - Run scenarios with the model and assign weights based on the priorities in the final matrix
 - Confirm recommendations for priorities and if applicable set specific weights on variables for the formula
 - Decision: Does the workgroup have other recommendations they'd like to discuss and include in the legislative report?
 - We have noted request for additional funds and phased approach for implementing formula-based allocations
 - If yes, group must commit to coming back for one more meeting before 11/30/21
 - Celebrate completion of the work on this particular task within AMHI Reform

Let's Check Our Goal

- What did we do and in what order?



- What did we learn? What are the key learnings and decisions from the activities we did?



- What will we do next? What questions will we answer next?



- How did this meeting go?
 - What worked well?
 - What would you like to see changed?
- Please be sure to complete the [post meeting survey](#) as soon as you receive it.
 - This helps us make improvements to the meeting structure.

Thank You!

AMHI Team

[MN DHS amhi.dhs@state.mn.us](mailto:amhi.dhs@state.mn.us)