



# Addressing Inequities with Whole–Person Primary Care

Webinar by Primary Care Collaborative  
Sponsored by Samueli Foundation

# Health equity is foundational to Oak Street's mission

## From the communities we choose to serve...

- **>90%** of centers are in medically underserved census tracts, with average income 100-300% below FPL
- **100%** of counties served are designated mental health provider shortage areas
- **>80%** of COVID-19 vaccines administered in high SVI communities

## ...to the investments we make...

- **Nearly \$350M** of care center investment in 2021
- **35-50 jobs** in the community for each new center opened
- **55%** of our workforce identifies as Black or Hispanic/Latino
- **58%** of all managers and leadership are female

## ...to our approach to care delivery

- **92%** of Oak Street Health patients have been screened for SDOH
- **>23,000** referrals to address SDOH needs
- **77%** resolution of identified SDOH needs based on screening

# Care model deep dive: Every Oak Street center has integrated behavioral healthcare.

## Mental Health in the US<sup>1</sup>

**1 in 5**

US adults who experienced a mental illness in 2020

**>17 million**

US adults who experienced delays or cancellations in mental health appointments

## At Oak Street Health

**All patients**

screened for behavioral health at initial visit and annually

**All centers**

provide access to behavioral health care

**Collaborative care**

Behavioral health is not stigmatized or siloed; it is a part of whole-person care at OSH

1. National Alliance on Mental Illness, 2020 data  
2. Oak Street Health patient data following 6-month study, May 2021

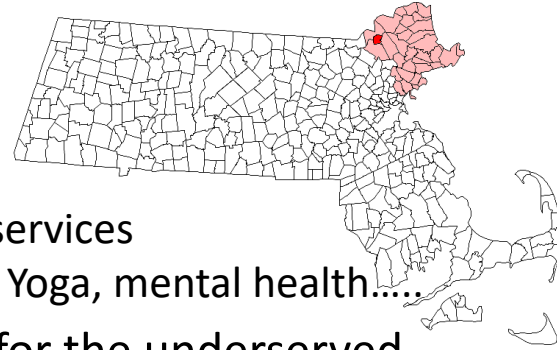
3. JAMA 2002, "Collaborative Care Management of late-life depression in the primary care setting"; Primary Care: Clinics in Office Practice 2012



**43%**

OSH patients seeing a significant reduction in depressive symptoms through Oak Street collaborative behavioral health care model<sup>2</sup> vs **19%** of patients in traditional behavioral health care model<sup>3</sup>

# ICGMV Supports



- Lawrence, MA
  - A poor community in the state?
  - Low access to integrated health services
  - Exercise, Acupuncture, Massage, Yoga, mental health.....
- Kronos Health – private practice for the underserved
- Non-Profit Organizations
  - Provide services on locations to improve mental and physical health for the community
- Group Visit Model proliferation
  - Support and Training for providers ([www.ICGMV.org](http://www.ICGMV.org))
  - Patient centered with mental health benefits



# We support 30 weekly groups

Innovative pay model : 70% value based, 30% direct contracting

- Acupuncture groups (5)
- Massage / Osteopathic Manipulation (4)
- Chronic Pain (2)
- Yoga (5)
- Suboxone (2)
- Diabetes (1)
- Mental health (4)
- Pediatric Empowerment (4)
- Exercise (4)
- Nutrition (functional medicine)



# Unparalleled Cultural Diversity



Queens County,  
New York  
“The Worlds Borough”

Most Culturally  
Diverse of the 3,000  
Counties in the USA

Population  
2,300,000

Almost 50% of the  
Population was Born  
Outside the Country

Estimated 250,000  
Undocumented  
Individuals

Estimated 15-20%  
Uninsured

People Come From  
Over 120 Countries

Over 135 Spoken  
Languages

Receiving Hospital  
for Patients Coming  
from JFK Airport

Multiple Ethnic  
Neighborhoods

Richmond Hill Queens  
“Little Guyana” →  
60,000 People and  
Largest Concentration  
of Guyanese Individuals  
Outside of Guyana



# **MediSys** *Health Network*





# Thank you for attending!

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