

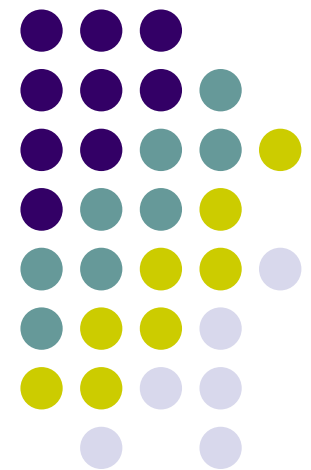
Responding to Community Health Needs within the Framework of The Affordable Care Act

Community Health Concerns, A New Paradigm

The Hilltop Institute's 5th Invitational Symposium
University of Maryland,
Baltimore County, MD
June 28, 2011

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“Protect, Prevent, Live Well”



Some Things Are Just True



**“If you always do
what you always did
then.....
you’ll always get
what you always got”**

Moms Mabley

Just To Remind Everyone: What We Always Got



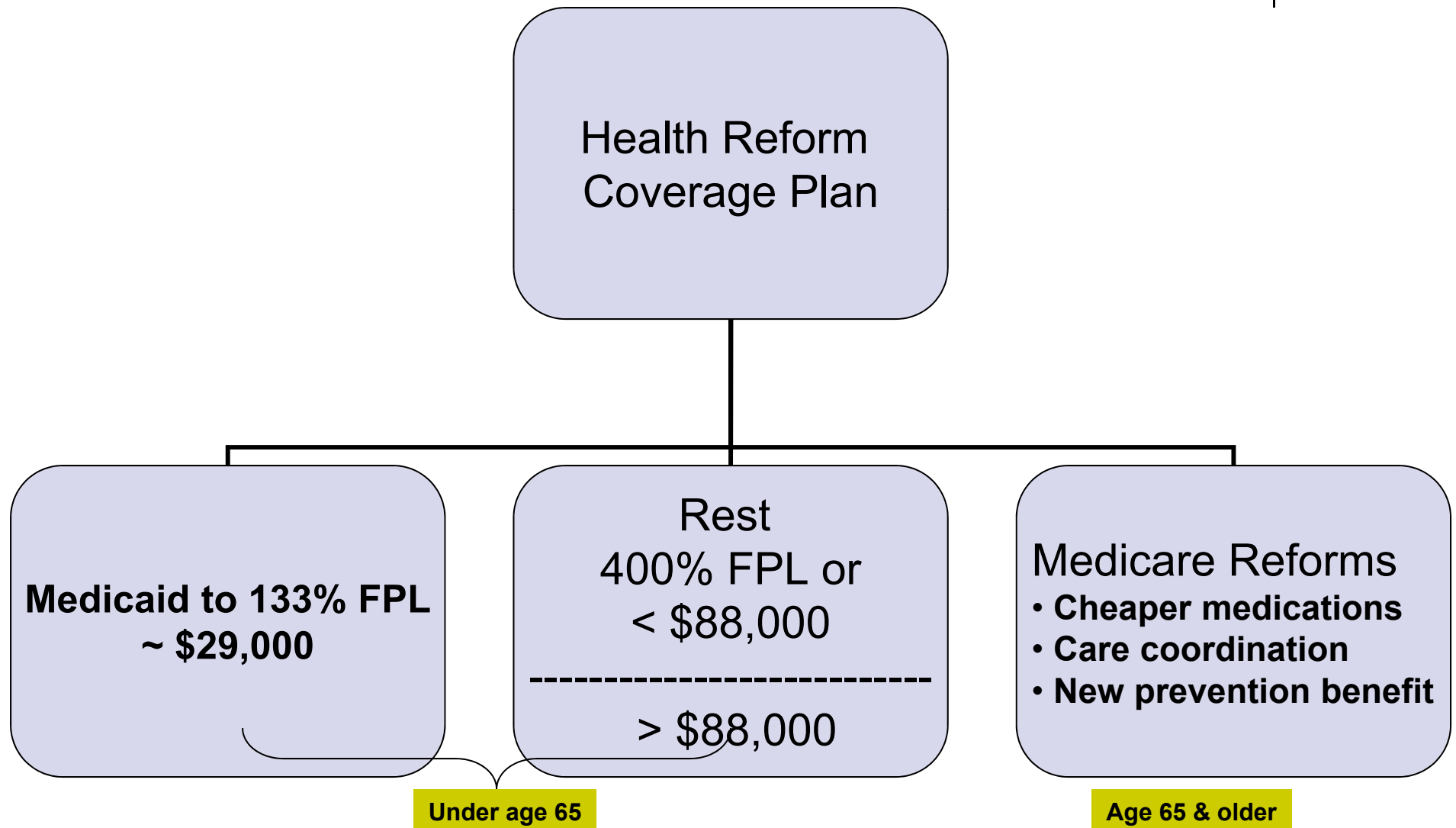
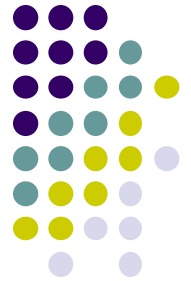
- **Costs**
 - Unaffordable to individuals
 - Excessive growth in overall costs
- **Quality & safety concerns**
 - Uneven & inconsistent
 - Disparities in outcomes
 - Preventable medical errors
- **Access**
 - Rising un/underinsured
 - Less provider availability
- **Inadequate use of Health IT**
 - Clinical information
 - Program management
- **Sickness versus wellness**
 - Under investment in public health
 - More focus on disease end of process

Patient Protection and Affordable Care Act

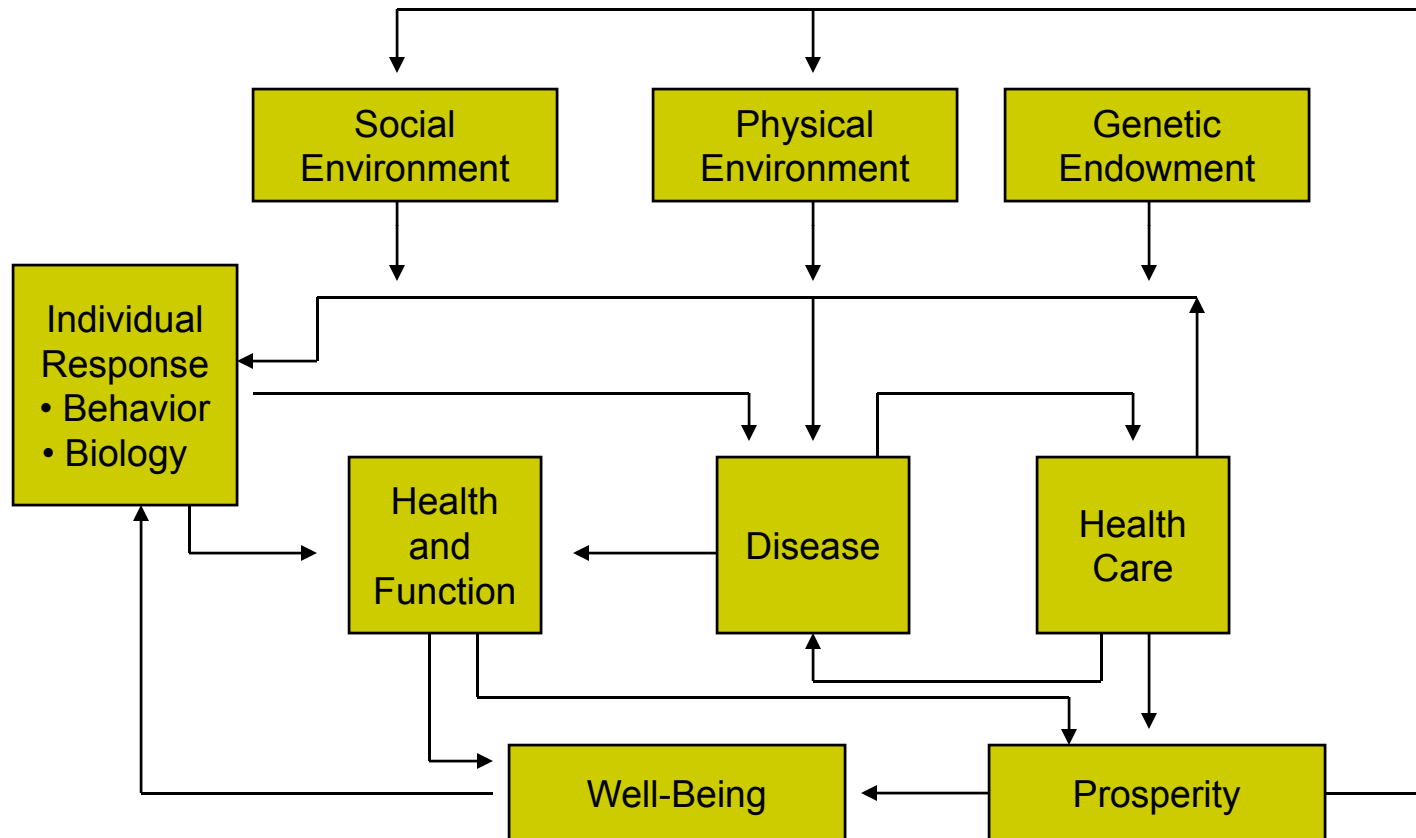


- Major health policy achievement
- Achieves 94% health coverage
- Major insurance reforms
- Promotes prevention & wellness
- Promotes primary care
- Increases value & quality for health dollar
- Reduces deficit by \$143 billion
- Increases affordability for many
- Supports modern HIT system

ACA Covers 32 Million More Nonelderly People



Achieving Individual Health: Is A Complex Process



Source: R.G. Evans and G.L. Stoddart, 1990. *Social Science and Medicine* 31:1347-1363; used with permission from Elsevier Science Ltd.

Health Is About The Environment In Which We Live



The environment plays a major role!!!

Health Is About Diet: The Tale of One Soda



- 17 teaspoons of sugar
- 250 calories
- 4 hrs bicycling

Solution:

- Reducing school consumption
- Increasing food choices
- Reducing access in vending machines



Health Is About Policy

Tobacco: Public Enemy Number One

- Tobacco remains the number one preventable cause of death
- Over 400,000 deaths
- Numerous morbidities
- Costs to everyone
- There are individual & community-based solutions
 - Health education
 - Cessation therapy
 - Clean air policy & laws



Health Is About Community Assets: Sedentary Lifestyle



BUT:

A study in New York City found that playgrounds in low-income areas had more maintenance-related hazards than playgrounds in high-income areas. For example, playgrounds in low-income areas had significantly more trash, rusty play equipment, and damaged fall surfaces (Suecoff 1999)

CDC website

ACA Public Health Provisions Summary



- Health promotion & disease prevention council
- Prevention Fund
- Community transformation grants
- Workforce capacity building
 - Commission
 - Scholarships & loans
 - Fellowships
- CDC research program
- Prevention task forces
 - Community preventive services
 - Clinical preventive health services
 - ACIP
 - HRSA guidelines
- Oral health promotion
- Breast feeding promotion
- Quality & accountability
- Data requirements
- CDC employer wellness assistance program
- Nutritional menu labeling
- Covers preventive services
- Immunizations
 - Adult program
 - Enhanced purchase
 - Reauthorized 317 vaccine program
- Promotes primary care
 - Increased reimbursement
 - School health centers
 - Health centers
- Health disparities focus
- Epidemiology - Laboratory capacity grants (ELC grant program)

Health Promotion & Disease Prevention Council



- Can provide the national leadership on goals to achieve health
 - Provide coordination and leadership at the Federal level with respect to prevention, wellness, health promotion and integrative health care in the U.S.
 - Develop a National Prevention Strategy that sets goals and objectives for improving health
 - Establish measurable actions and timelines to carry out the strategy
 - Make recommendations to improve Federal prevention, health promotion, public health and integrative health care practices



Headed by U.S. Surgeon General

National Prevention, Health Promotion & Public Health Council 2010 Report



Principles

- **Prioritize prevention and wellness**
- **Establish a cohesive federal response**
- **Focus on preventing the leading causes of death, and the factors that underlie these causes**
- **Prioritize high-impact interventions**
- **Promote high-value preventive care practices**
- **Promote health equity**
- **Promote alignment between the public and private sectors**
- **Ensure accountability**

Strategies For Effective Community-Based Interventions



1. **Policy Change**
2. **Systems Change**
3. **Environment**
4. **Communications and Media**
5. **Program and Service Delivery**

National Health Promotion Strategy

Council's Initial Areas of Focus



Diseases

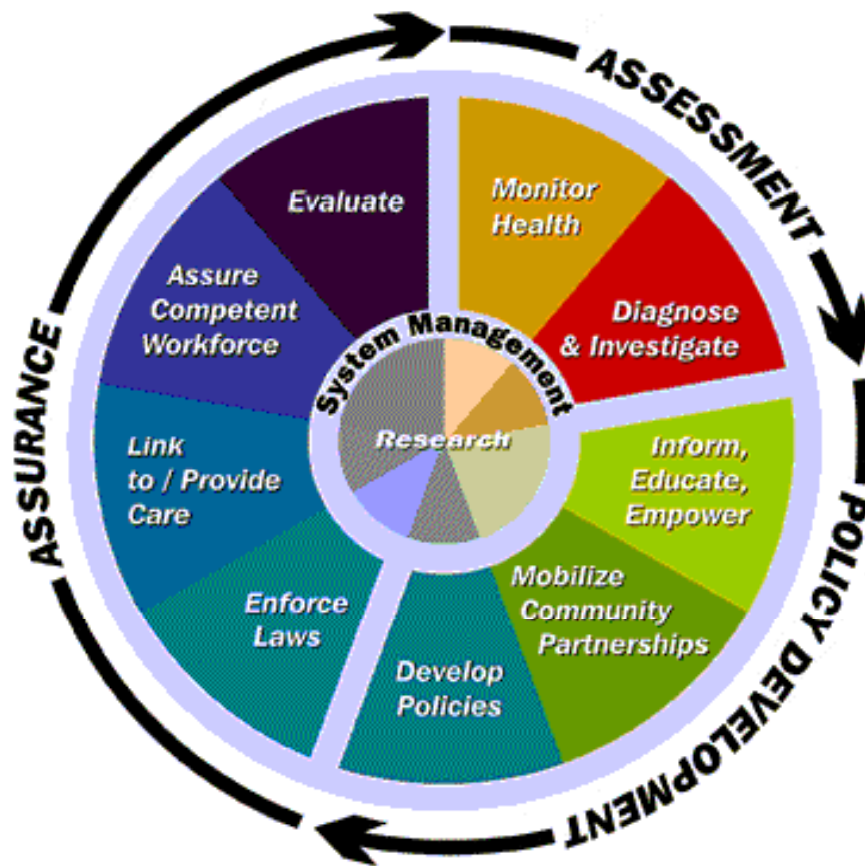
- Cardiovascular disease
- Cancer
- Lower respiratory disease
- Unintentional injury
- Behavioral health

Behaviors

- Tobacco use
- Nutrition
- Physical inactivity
- Early alcohol use/abuse

Next Report To Be Released Soon

Prevention & Wellness Fund



- Fund to expand and sustain a national investment in prevention and public health programs (Over FY 2008 level)
- Support programs authorized by the Public Health Service Act, for prevention, wellness and public health activities
- Funding levels:
 - FY 2010 - \$500 million
 - FY 2011 - \$750 million
 - FY 2012 - \$1 billion
 - FY 2013 - \$1.25 billion
 - FY 2014 - \$1.5 billion
 - FY 2015 and each fiscal year thereafter - \$2 billion

2010 Expenditures

Prevention & Public Health Fund



\$250 million to boost supply of primary care providers:

- **Creating additional primary care residency slots: \$168 million**
 - Training more than 500 new primary care physicians by 2015
- **Supporting physician assistant training in primary care: \$32 million**
 - Supporting the development of more than 600 new physician assistants
- **Encouraging students to pursue full-time nursing careers: \$30 million**
 - Help over 600 nursing students attend school full-time
- **Establishing new nurse practitioner - led clinics: \$15 million**
 - Operation of 10 nurse-managed health clinics & assist with training nurse practitioners
- **Encouraging states to plan for and address health professional workforce needs: \$5 million**
 - Help states plan and implement innovative strategies to expand their primary care workforce by 10 - 25 percent over ten years

2010 Expenditures

Prevention & Public Health Fund



The \$250 million for prevention and public health to:

- Community and Clinical Prevention: \$126 million
 - Support federal, state and community prevention initiatives
 - Integrate primary care services into publicly funded community-based behavioral health settings
 - Obesity prevention, fitness and tobacco cessation
- Public Health Infrastructure: \$70 million
 - Support state, local, and tribal public health infrastructure
 - Build state and local capacity to address infectious diseases
- Research and Tracking: \$31 million
 - Data collection and analysis
 - Strengthen CDC's Community Guide & the Task Force on Community Preventive Services
 - Improve transparency & public involvement in the Clinical Preventive Services Task Force
- Public Health Training: \$23 million
 - Expand CDC's public health workforce programs & HRSA training centers

2011 Second Year (\$750 Million) ACA Prevention & Wellness Fund



- **Community Prevention (\$298 million):** Promote health & wellness in local communities, including efforts to prevent & reduce tobacco use; improve nutrition & increase physical activity; and coordinate & focus efforts to prevent chronic diseases.
- **Clinical Prevention (\$182 million):** Improve access to preventive care, including increasing awareness of the new prevention benefits provided under the new health care law. Increase availability & use of immunizations, and help integrate behavioral health services into primary care.
- **Public Health Infrastructure (\$137 million):** Help state and local health departments meet 21st century challenges, including investments in information technology & training for the public health workforce to detect & respond to infectious diseases and other health threats.
- **Research and Tracking (\$133 million):** Collect data to monitor the impact of the Affordable Care Act on the health of Americans & identify and disseminate evidence-based recommendations on important public health challenges.

Community Transformation Grants

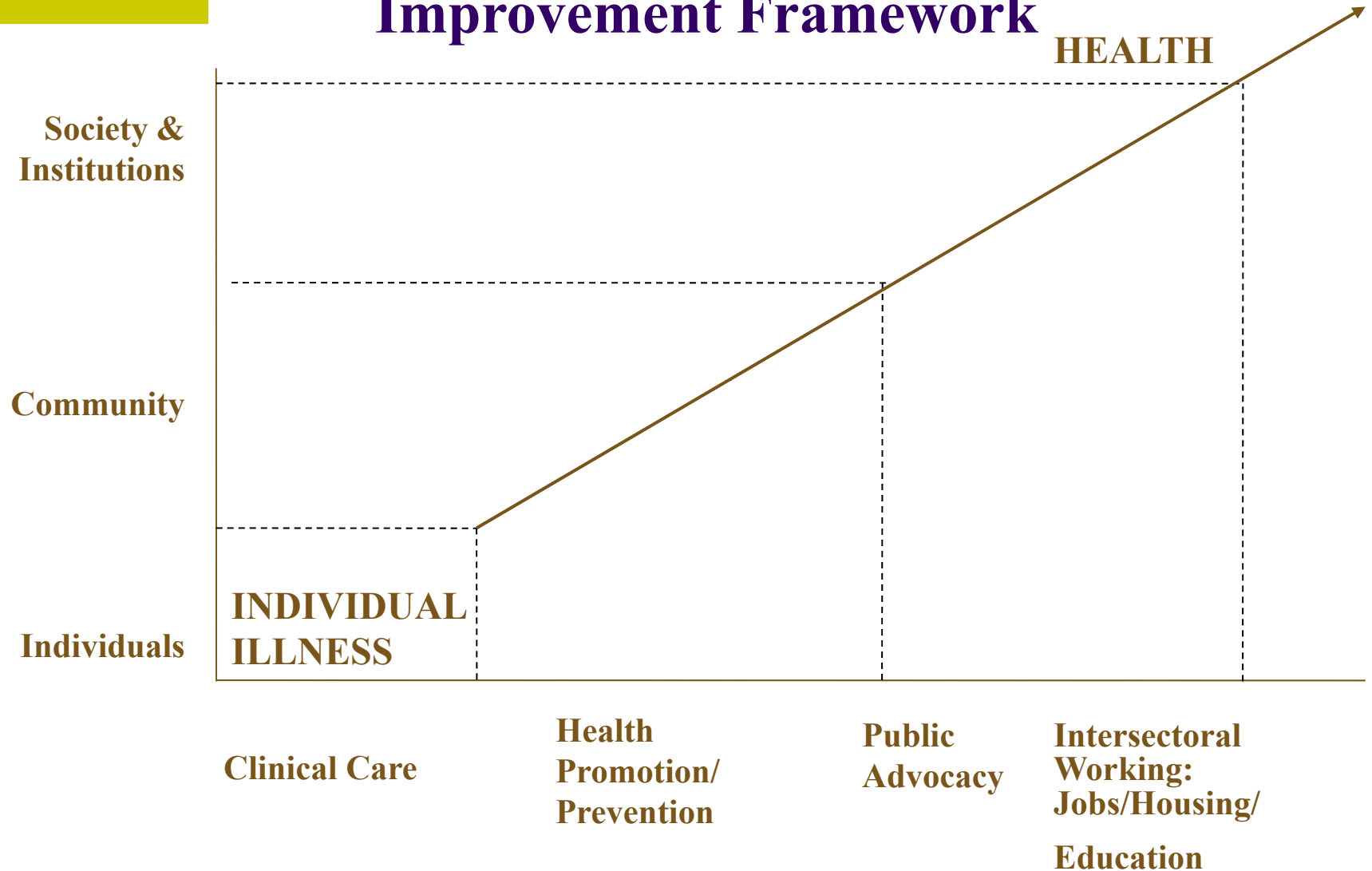


- CDC awarded competitive grants for the implementation, evaluation, and dissemination of evidence-based community preventive health activities to:
 - Reduce chronic disease rates
 - Prevent the development of secondary conditions
 - Address health disparities
 - Develop a stronger evidence-base of effective prevention programming
- Activities may focus on creating:
 - Healthier school environments
 - Infrastructure or programs to support active living
 - Access to nutritious foods
 - Smoking cessation and other chronic disease priorities
 - Worksite wellness
 - Healthy options in food venues
 - Reduced disparities and addressing special population needs
- Includes evaluation & reporting requirements.



TARGET OF INTERVENTION

Community Health Improvement Framework



TYPE OF INTERVENTION

Imagine A Future Where



- **We as a nation strive to be The Healthiest Nation**
 - Set targets & address our efforts to achieve them
- **Practitioners know**
 - Health status of their individual patients
 - Health status of their entire patient panel
 - Who got their vaccinations; who did not & why
 - Who's blood pressure is controlled; who's is not & why
 - Who can't exercise & what social determinates prevent it
- **Clinicians & health systems partner with public health & others to implement community-based interventions that address the major health problems for their patients & communities**



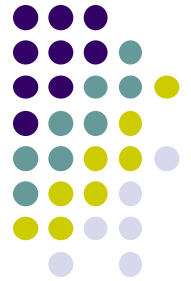
Where Do We Start? Strategic Partnerships



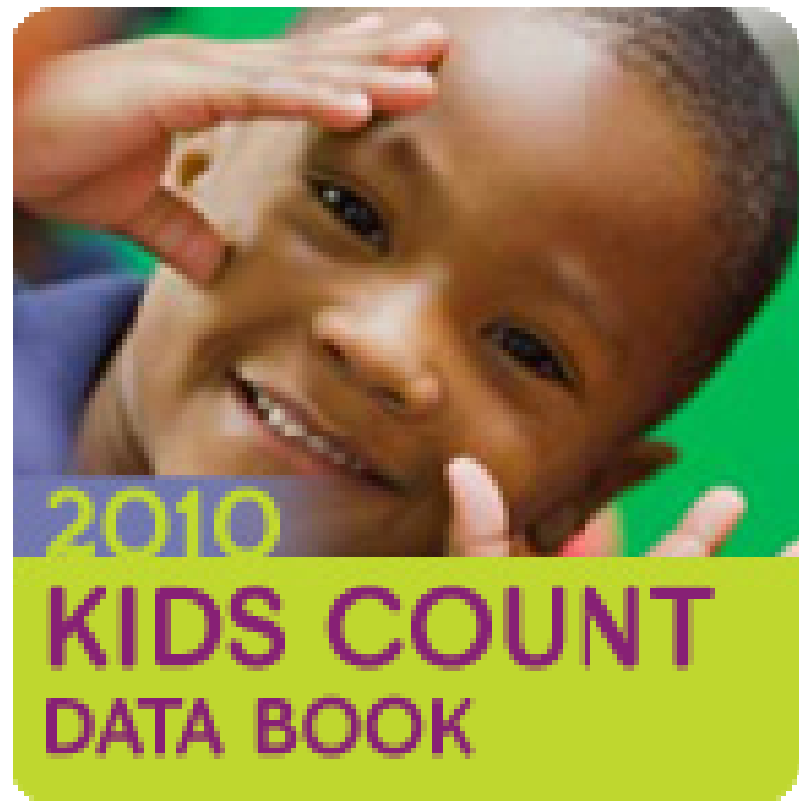
- Regional health information organizations (RHIOs)
- Accountable Care Organizations (ACOs)
- Community benefit efforts

Public Health Departments, Hospitals, Clinics, Individual Providers, etc.

Make Data-Driven Decisions: The Key To Transformation



- Health leaders as change agents
- Public health has a lead role to oversee accountability of the entire health system
 - Must have strong data system infrastructure
 - Data must be useful at functional levels
- HIT & data systems must support transformation
- Adequate resources essential



Health Data Infrastructure



- Health data tracking needs to cross all agencies & systems
 - HHS – CDC, AHRQ, CMS
 - Transportation
 - Housing
 - Commerce
 - CPSC
 - State & local agencies
- Strategic investments need to be made
 - Vital records at state level
 - State-based data integrity systems/people
 - Local public health HIT & linkages to private systems
 - Data security

Promote Accountability: Goals & Rankings



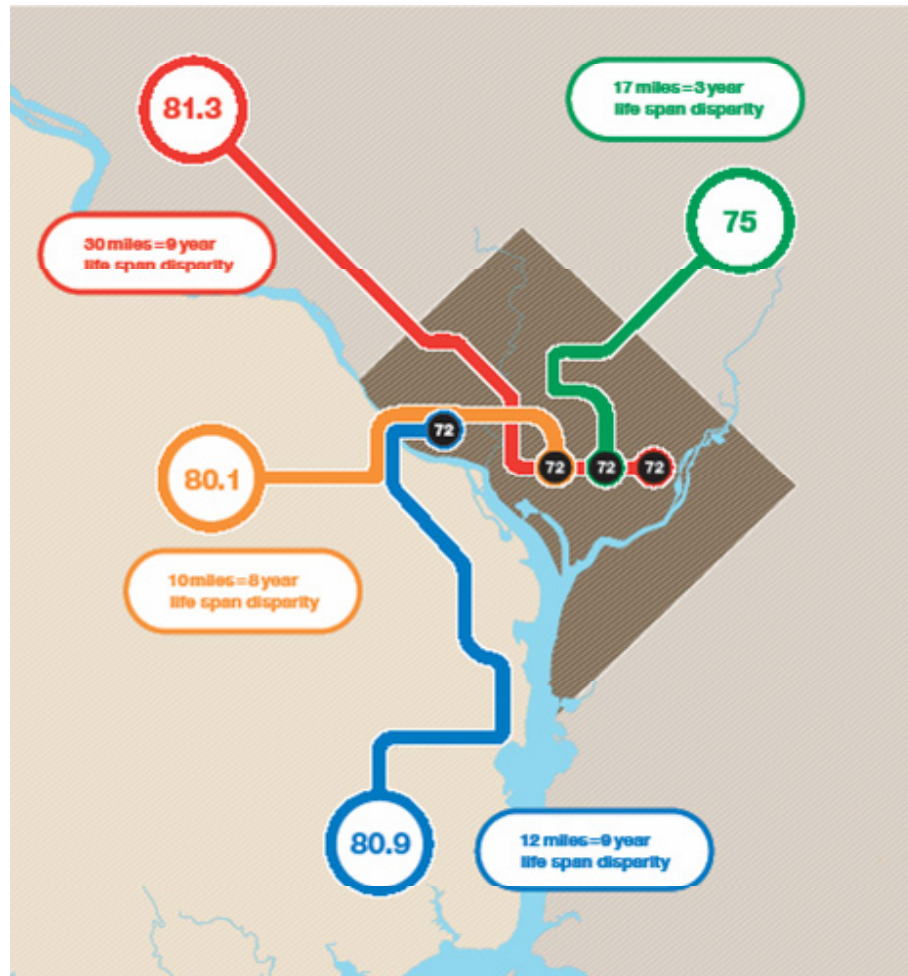
- Rankings
 - County Health Rankings
 - Commonwealth Fund
 - America's Health Rankings
 - Kids Count
 - AHRQ State Snapshots
 - Commission to build a Healthier America
- Goals & Data
 - Healthy People 2020
 - Federal, state & local data

Accountability Is Essential



- Must include all stakeholders
 - Individuals
 - Practitioners
 - Public health
 - Business
 - The general public
 - Resources allocators
 - Policy makers

Why Does The Public Tolerate Disparities Like This?



Red Line between Union Station in Washington and Shady Grove in Montgomery County, Md. are 17 metro stops spanning 30 miles and an estimated nine year difference in life span.

Orange Line between Metro Center in Washington and East Falls Church in Arlington County, Va. are nine metro stops spanning 10 miles and an estimated eight year difference in life span.

Green Line between Gallery Place in Washington and Greenbelt in Prince Georges County, Md. are 11 metro stops spanning 17 miles and an estimated three year difference in life span.

Blue Line between Foggy Bottom in Washington and Springfield-Franconia in Fairfax County, Va. are 10 metro stops spanning 12 miles and an estimated nine year difference in life span.



Try To Close An Unneeded Firehouse



- If you want to see public engagement
 - Try cutting the budget of a fire department
 - Try closing a fire station
 - Try even moving it
- Always a political price to pay unless done VERY carefully



An Example!

Imagine A Future Where The Public Demands Accountability



RANK	STATE
1	Vermont
2	Massachusetts
3	New Hampshire
4	Connecticut
5	Hawaii
6	Minnesota
7	Utah
8	Maine
9	Iowa
10	Florida
11	Nevada
12	Washington
13	Colorado
14	Iowa
15	Oregon
16	North Dakota
17	New Jersey

RANK	STATE
18	Wisconsin
19	Wyoming
20	South Dakota
21	Maryland
22	Virginia
23	Kansas
24	New York
25	Montana
26	Idaho
27	Arkansas
28	Alabama
29	Illinois
30	Michigan
31	Arizona
32	Delaware
33	New Mexico
34	Ohio

RANK	STATE
35	North Carolina
36	Georgia
37	Florida
38	Indiana
39	Missouri
40	Texas
41	South Carolina
42	Tennessee
43	West Virginia
44	Mississippi
45	Alabama
46	Oklahoma
47	Nevada
48	Arkansas
49	Louisiana
50	Mississippi

Why are we first?

**Hold stakeholders accountable
for health outcomes**

Why are we last?

Some Want To Go Backward



- There have been several attempts to dismantle health reform law
- The Prevention and Public Health Fund has already been attacked
- There are more plans to undermine America's core health system (Medicare & Medicaid)
- Yet transforming our communities through engagement at the population level is well underway

**But.....We must go forward:
The health of our communities is at stake!**

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