A Picture of Health

Why Health Policy Matters

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2012
HOT ISSUES
IN HEALTH CARE

Legislative Conference
Cheyenne Mountain Resort · Colorado Springs

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The Next Three Days: Goals

- Heighten awareness of **your important role** in health policy.

- **Broaden** and deepen your **understanding** of specific **health-related issues**.

- Introduce a "**systems thinking**" approach to health policy solutions.

Why Health Policy Matters

Urgency of Health Policy
- The **problems**
- **Dynamics**: State and Federal Initiatives

A New Era
- The Affordable Care Act (**ACA**)
- Colorado's **decade of investment**

Today's Hot Issues
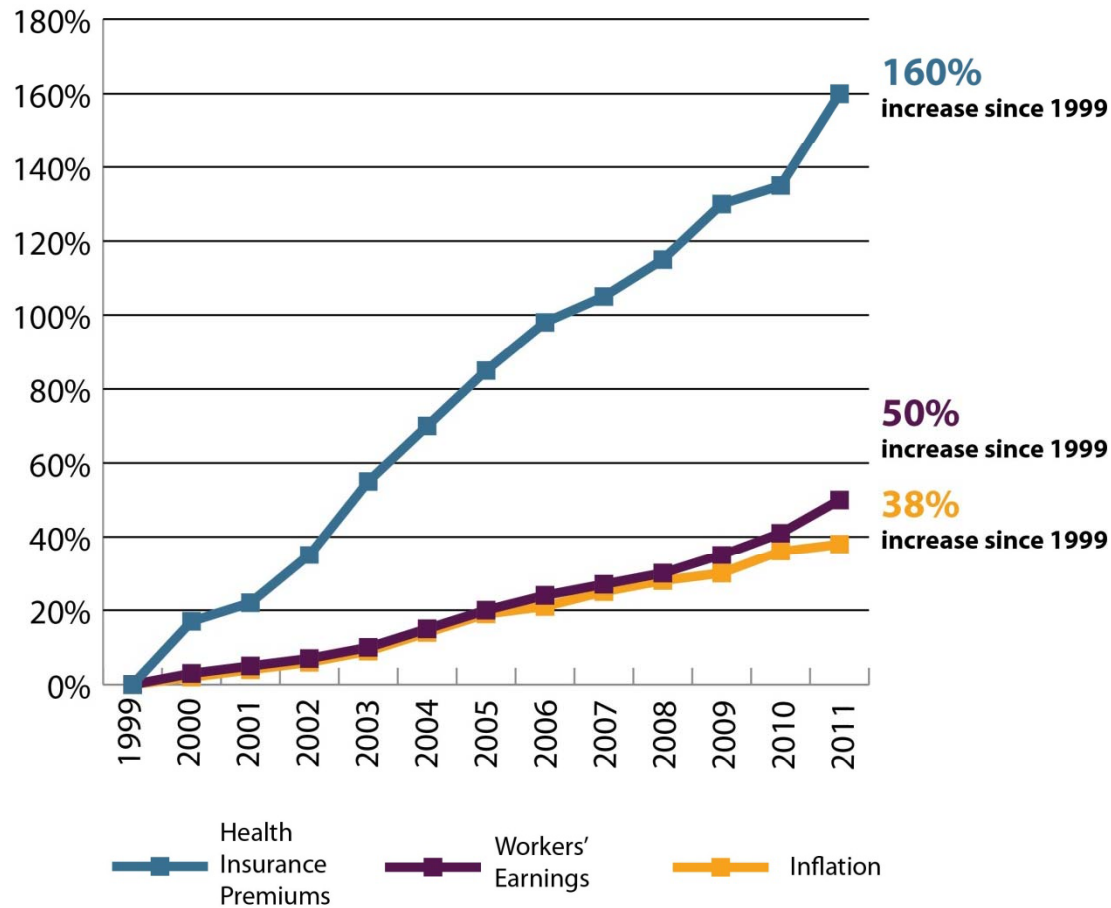- **What** they are
- **Why** they matter

Three Takeaways

- Your leadership **matters**.

- Health policy decisions are increasingly **data-informed** and **data-driven**.

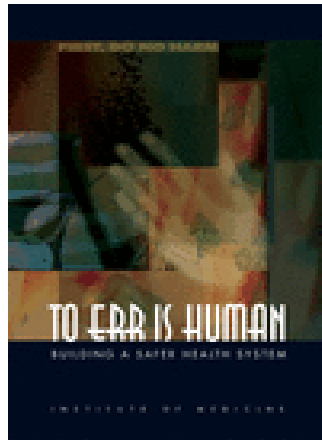- The time to act is now because Colorado's "**demographic clock**" is ticking.

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Urgency of Health Policy

Problem One: Escalating Costs

Sources: ftp://ftp.bls.gov/pub/suppl/empsit.ceseeb2.txt, ftp://ftp.bls.gov/pub/special.requests/cpi/cpiai.txt
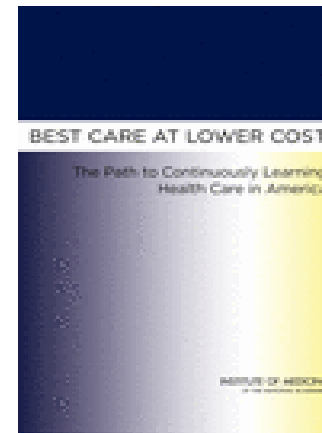
Problem Two: The Quality Chasm

1999

2012

- 44,000 to 98,000 die in hospitals each year from preventable errors

- Sixth leading cause of death in U.S.
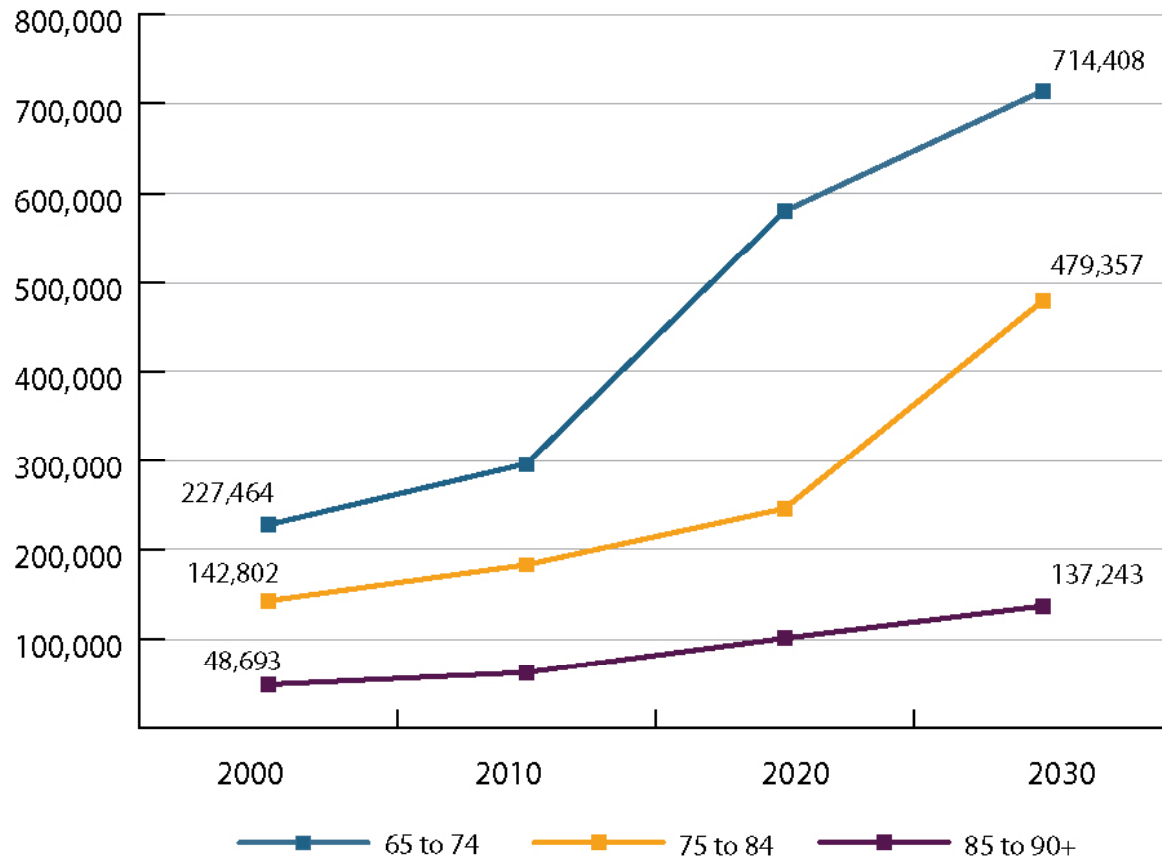
- 30 percent of health spending unnecessary

- 75,000 deaths a year could be averted with better quality care

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Problem Three: Colorado's Demographic Clock

The Aging of Colorado

By the Numbers
2000: 418,959
2030: 1,331,008
Increase: 218 percent

SOURCE: Colorado State Demography Office, population estimates, 2000-2030

Problem Three-A: From Acute to Chronic

Leading Causes of Death in the United States, 1990 and 2010

Number of deaths per 100,000

1900		2010	
1. Influenza and pneumonia	202.2	1. Heart disease	192.9
2. Tuberculosis	194.4	2. Cancer	185.9
3. Gastrointestinal infections	142.7	3. Chronic airways disease	44.6
4. Heart disease	137.4	4. Cerebrovascular disease	41.8
5. Cerebrovascular disease	106.9	5. All accidents	38.2

Source: Centers for Disease Control and Prevention
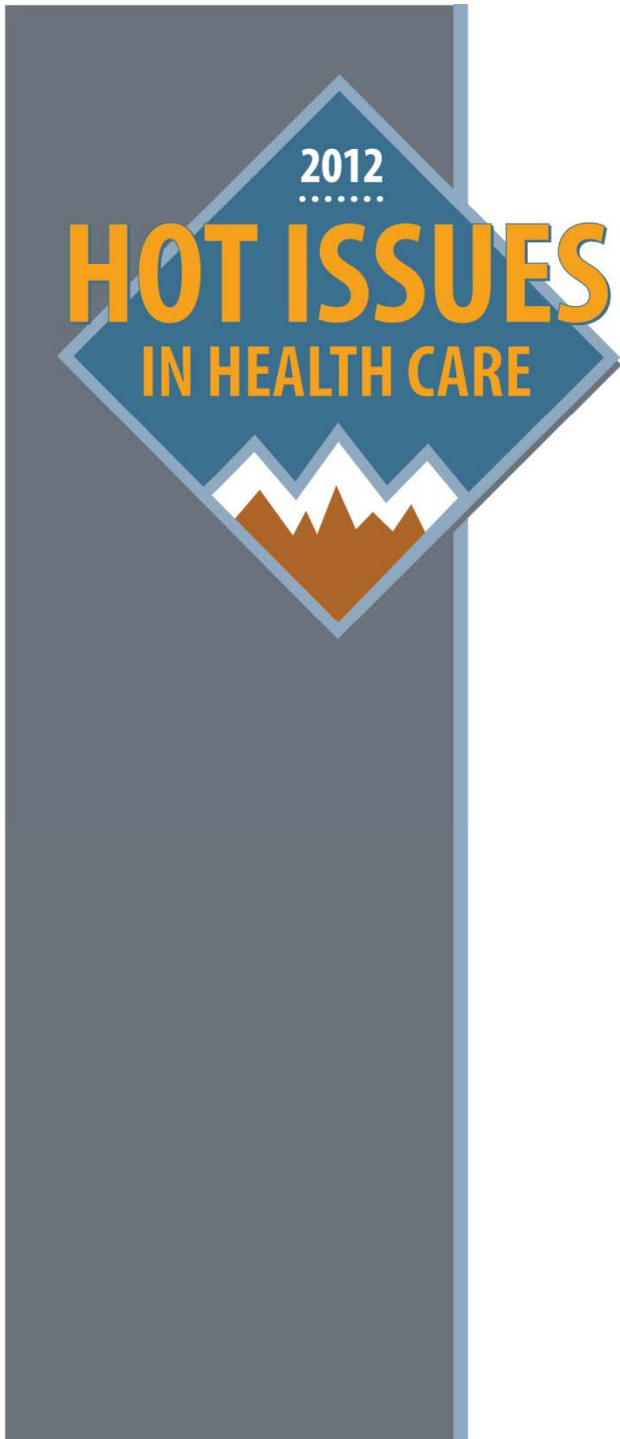
Approaches
and Solutions

A Brief Civics Lesson

A Primer: Federal and State Initiatives

Federal Initiatives and Funding
- Defining the "What"

State Models of Innovation
- Finding the "How"

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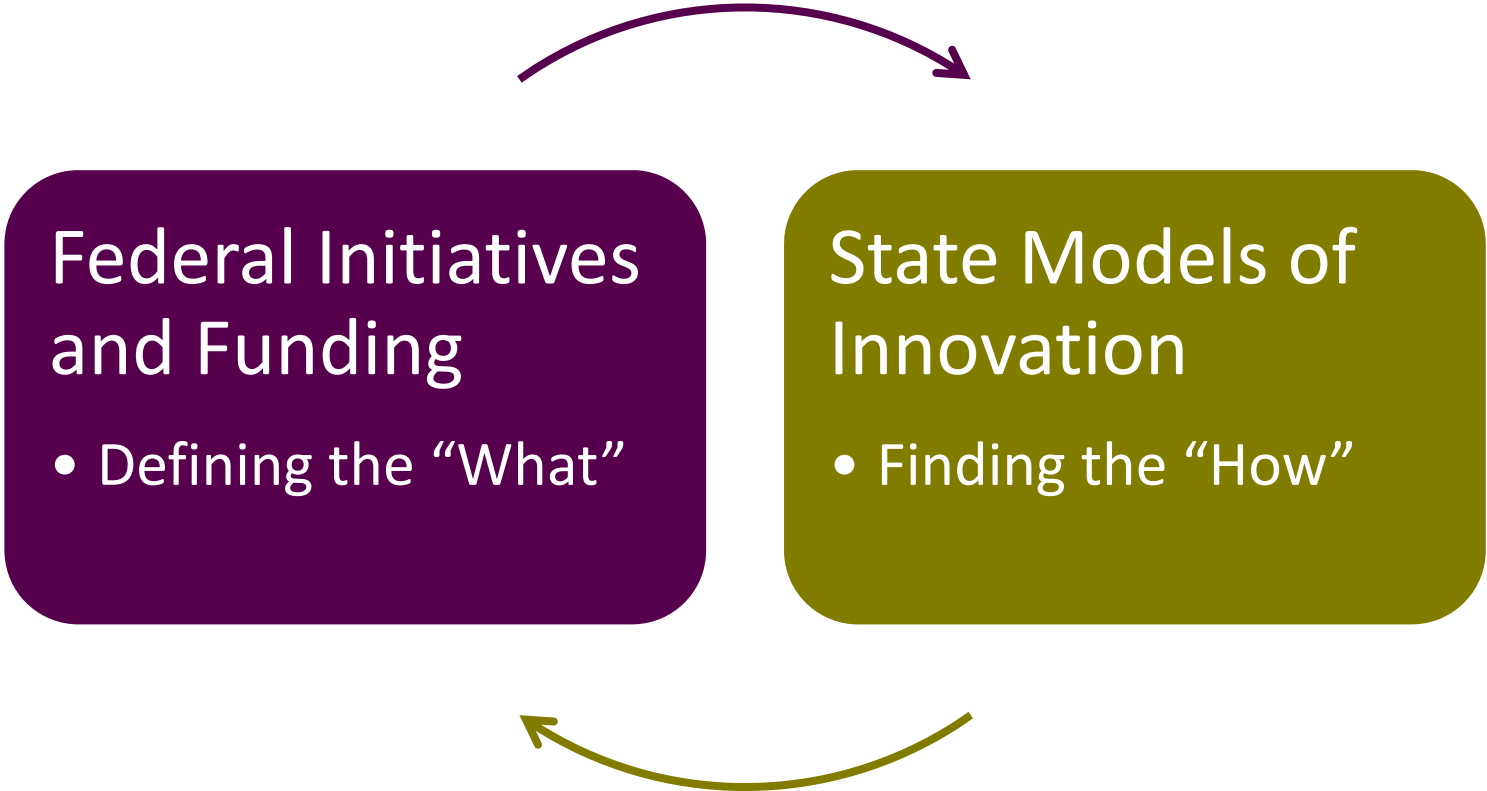
Federal-State Relationship: Big Ideas at Play

The Triple Aim

- Coordinated Care
- Payment Reform

Integrated Approaches

- Cross-disciplinary teams
- Multi-payer initiatives
- Public-private partnerships

Community Emphasis

- Local control
- Local solutions

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Feds and States: The What and the How

Innovation Challenge

- Denver Health
- Upper San Juan Health Service District

Partnership for Patients

- More than 175 Colorado hospitals, clinicians, patient advocates

Colorado Health Benefit Exchange

- One of 16 states, plus DC, that have started

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Feds and States: The What and the How (Part 2)

Accountable Care Organization (ACO) Shared Savings	Pioneer ACO	Dual Eligible State Demonstrations	State Innovation Models (SIM) Grant
• 27 selected, reviewing 150 more applications	• Physician Health Partners in Colorado, 31 others	• Colorado one of 15 states selected to submit proposals	• Colorado application pending

Innovation Leads to Scale

Academic Research	Demonstration Project	Pilot Program	CMS Initiative
Adverse Childhood Experiences Study	Comprehensive Primary Care Initiative	Medicare ACO	Medicare Shared Savings Program

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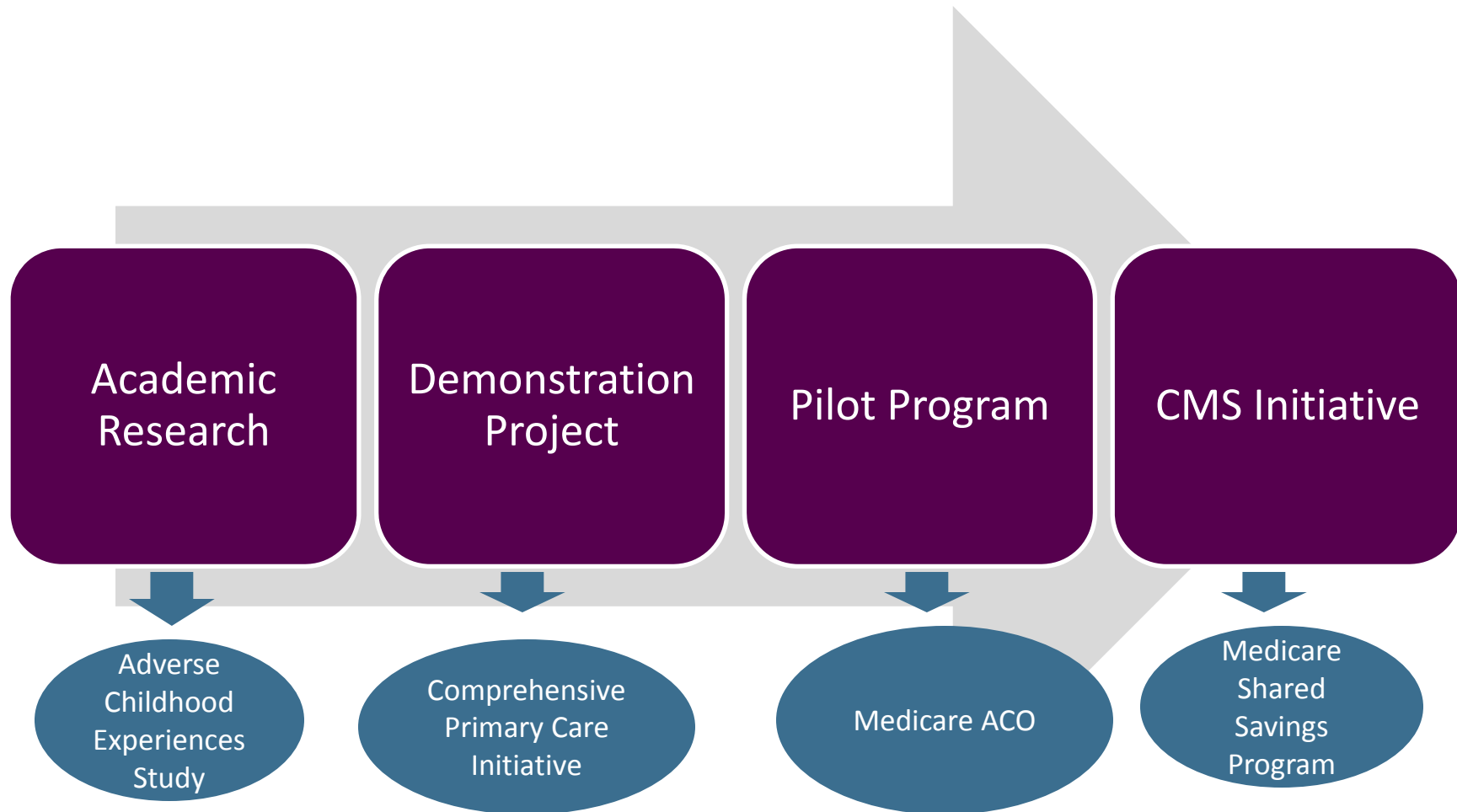
A New Era
in Health Policy

Affordable Care Act: As Social Policy

- **Medicaid will insure** the poorest among us

- Most Americans **must have health insurance**

- **Experiment** to control costs at best quality

  - Accountability at level of provider

  - Payment reform

  - Keeping us well

Colorado: Ahead of the Game

RECOMMENDATIONS FOR HEALTH REFORM IN COLORADO

Blue Ribbon Commission for Health Care Reform
JANUARY 2008

208 Blue Ribbon Commission:

- Every legal resident to have **Minimum Benefit Package**

- **Cover uninsured** to reduce overall premiums

- Increase use of **prevention** and chronic care management

- Provide **medical home** for all Coloradans

- Consumer choice through a "**connector**"
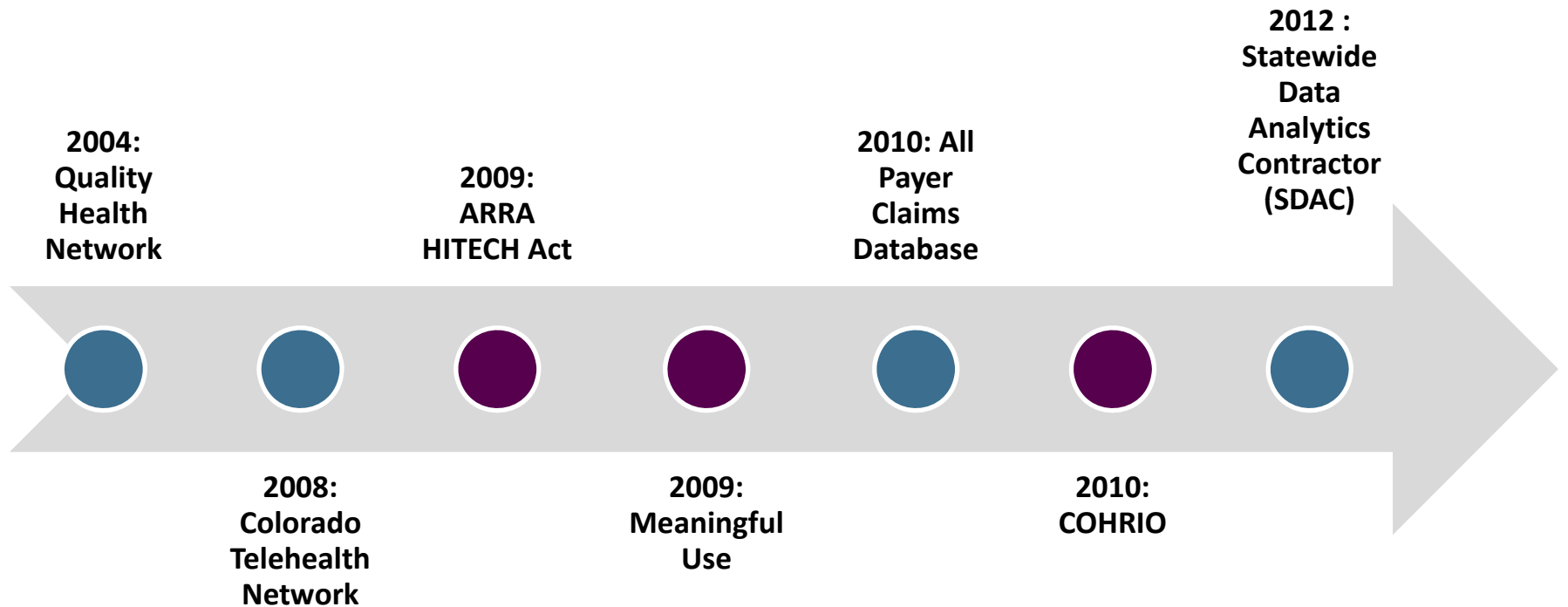
Sound Familiar?

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20
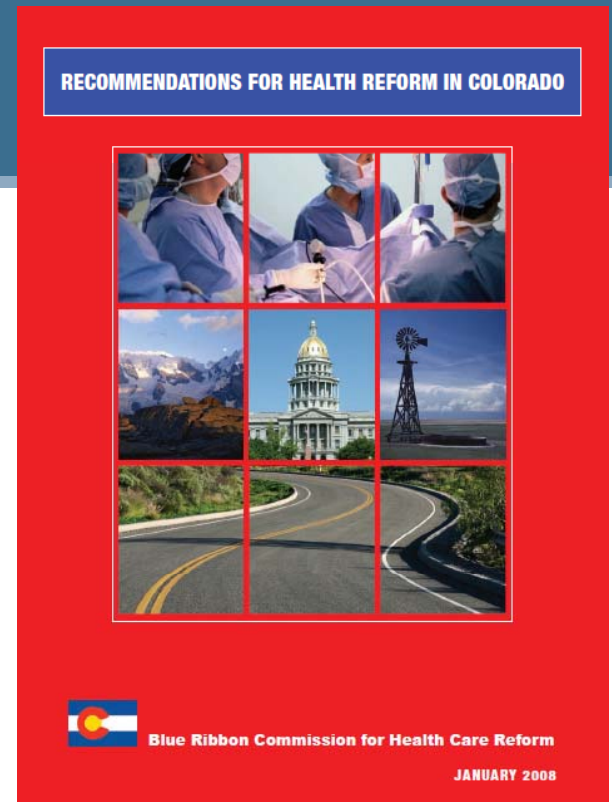
Colorado – A Decade of Major Investment

- **IT and infrastructure**

- **Data and analytics**

- **Collaboration**

- **Bottom Line: Millions of Dollars**

The Past Decade of Big Investments

2012 :
Statewide
Data
Analytics
Contractor
(SDAC)

2004:
Quality
Health
Network

2009:
ARRA
HITECH Act

2010: All
Payer
Claims
Database

2008:
Colorado
Telehealth
Network

2009:
Meaningful
Use

2010:
COHRIO

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Today's Hot Issues

Today, Tomorrow and Friday

Today: Health Policy "Boot Camp"

- **Structures** of health policy
- "**Need to know**" information about how Colorado health care works

Tomorrow: Hot Issues in Health Care

- Anticipated **2013 topics**
- Decisions in mind

Friday: Conversational Capacity

- Getting to **agreement**

What's In Store

- What's the **issue**?

- Where's the **debate**?

- What **policy levers** are available?

- Where is there **agreement**?

Insurance markets	Colorado's Role	Populations	Reform Efforts
• Public • Private • Exchanges	• Departmental • Safety net providers	• Seniors • Medicaid Expansions	• Payment • Block Grants and Waiver

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Legislative/Policy Levers

- **Services** provided

- **Populations** served

- **Location** of service

- **Reimbursement** levels

- **Providers** allowed

What This Conference is NOT!

Market Changes ⟷ Regulation/ Legislation

Personal Responsibility ⟷ Individual Mandates

Federal Decisions ⟷ State Decisions ⟷ Local Decisions

Key Questions in Evaluating Policies

- What's the "**Big Problem**" being addressed?

- **Who** is being served?

- What's the (relative) **need**?

- What **options** are available?

- Where's the "**locus**" of decision making?

- What are the **federal considerations**?

- What's the cost of **doing**? The cost of **not doing**?

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