Get Connected.
Get Smart.
Get Ready.
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.
Urgency of Health Policy
Problem One: Escalating Costs

- Health Insurance Premiums
- Workers' Earnings
- Inflation

160% increase since 1999
50% increase since 1999
38% increase since 1999

Problem Two: The Quality Chasm

1999
- 44,000 to 98,000 die in hospitals each year from preventable errors
- Sixth leading cause of death in U.S.

2012
- 30 percent of health spending unnecessary
- 75,000 deaths a year could be averted with better quality care
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

<table>
<thead>
<tr>
<th>1900</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Influenza and pneumonia 202.2</td>
<td>1. Heart disease 192.9</td>
</tr>
<tr>
<td>2. Tuberculosis 194.4</td>
<td>2. Cancer 185.9</td>
</tr>
<tr>
<td>3. Gastrointestinal infections 142.7</td>
<td>3. Chronic airways disease 44.6</td>
</tr>
<tr>
<td>4. Heart disease 137.4</td>
<td>4. Cerebrovascular disease 41.8</td>
</tr>
<tr>
<td>5. Cerebrovascular disease 106.9</td>
<td>5. All accidents 38.2</td>
</tr>
</tbody>
</table>

Source: Centers for Disease Control and Prevention
A Brief Civics Lesson
A Primer: Federal and State Initiatives

Federal Initiatives and Funding
- Defining the “What”

State Models of Innovation
- Finding the “How”
# 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
# 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
### Accountable Care Organization (ACO) Shared Savings
- 27 selected, reviewing 150 more applications

### Pioneer ACO
- Physician Health Partners in Colorado, 31 others

### Dual Eligible State Demonstrations
- Colorado one of 15 states selected to submit proposals

### State Innovation Models (SIM) Grant
- Colorado application pending
Innovation Leads to Scale

Academic Research
- Adverse Childhood Experiences Study

Demonstration Project
- Comprehensive Primary Care Initiative

Pilot Program
- Medicare ACO

CMS Initiative
- Medicare Shared Savings Program
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

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?
Colorado – A Decade of Major Investment

- IT and infrastructure
- Data and analytics
- Collaboration
- Bottom Line: Millions of Dollars
The Past Decade of Big Investments

- **2004:** Quality Health Network
- **2008:** Colorado Telehealth Network
- **2009:** ARRA HITECH Act
- **2009:** Meaningful Use
- **2010:** All Payer Claims Database
- **2010:** COHRIO
- **2012:** Statewide Data Analytics Contractor (SDAC)
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**?

<table>
<thead>
<tr>
<th>Insurance markets</th>
<th>Colorado’s Role</th>
<th>Populations</th>
<th>Reform Efforts</th>
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<tr>
<td>• Public</td>
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<td>and Waiver</td>
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**Colorado’s Role**

- Departmental
- Safety net providers

**Populations**

- Seniors
- Medicaid Expansions

**Reform Efforts**

- Payment
- Block Grants and Waiver
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?
Three Takeaways

• 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.