



Medicaid Redesign Team Waiver Webinar

***New York's Reinvestment Strategy
Bending the Cost Curve and Improving
Patient Outcomes***

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Program Agenda

Primary Care Expansion and Workforce Issues

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Redesign Medicaid in New York State



Primary Care Expansion



The “Landscape”

- New York State has the most expensive Medicaid program in the country – more than \$50 billion per year.
- Ranks 18th (it was 24th in 2010) out of all states for overall health system quality.
- Nearly 1 in 7 initial hospital stays results in a re-admission.
- About 2.3 million New Yorkers are “underserved” for primary care services in New York due to a maldistribution of physicians in certain geographic areas and specialties.



MRT Reform: Key Elements Related to Primary Care

- Care Management for All - Health Homes and Patient Centered Medical Homes
- Strengthening/Transforming the Health Care Safety Net
- Supportive Housing
- Health Care Workforce Training
- Health Exchange



Guiding Principles Going Forward

- Make “connected care” the standard for how care is organized and delivered. Need innovative delivery systems that put the patient first and focus on improving quality.
- Integrate new technologies and evidence-based care into service delivery to improve individual patient care across systems and payors. Focus on preventing illness and disease as well as helping those with chronic conditions.
- Take a more community-based approach to health care and health status and address the very basics of the social determinants of health – including socioeconomic status, education, food, and shelter.

Questions/Issues

- How do we expand and modernize primary care access?
What is the role of the following:
 - ✓ *New Delivery Models; Co-location of services; Integration of behavioral health into physical (primary care); Telehealth; and Health IT.*
- How should existing community-based health services and facilities be preserved and improved?
- What innovative funding models should be explored?

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Workforce Issues



*Ensuring the Health Workforce Meets the Needs in the
New Era of Health Care Reform*



The Emerging “Landscape”

- About 2.3 million New Yorkers are “underserved” for primary care services in New York due to a maldistribution of physicians
- ACA imperatives – individual mandate begins in 2014; will add over a million new insured patients into the system
- We will need additional health care workers to meet that need, as well as new types of workers.
- Need also to incentivize additional workers to work in underserved areas.



Where We've Been

- MRT Workforce Development;
- Incentives for Clinician Placement in Underserved Areas
 - *Federal Programs (NHSC, NELRP)*
 - *Doctors Across NY (DANY)*
 - *Primary Care Service Corps*
 - *Regents Physician Loan Forgiveness Award Programs*
 - *Limited Licensing/Visa Waiver Programs*
- Incentives for Training
 - *Health Workforce Retraining Initiative*

Questions/Issues

- What additional incentives would we need to assure the placement of appropriate health care workers in underserved areas?
- How would we disseminate information on incentives?
- What are the priority emerging health workforce titles on which we should be focusing?
- How should training funds be targeted?
- What changes should be implemented to training, credentialing, and scope of practice?

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Public Health Innovation

Integrating evidence-based public health prevention programs as part of the fabric of Medicaid – to achieve the triple aim of improved quality, better health and reduced health care costs.



Program Overview

- Statewide expansion of the successful Nurse-Family Partnership program which prevents pre-term births
- Medicaid coverage of home visits for environmental assessment for asthma;
- Home visits to promote childhood lead poisoning prevention and treatment;
- Pre-diabetes screening and interventions to prevent progression to diabetes; and
- Water Fluoridation



Nurse Family Partnership (NFP)

- Nationally recognized program to achieve improved health outcomes, promote self-sufficiency and parenting skills and result in reduced health and social service costs.
- This proposal will expand Medicaid coverage for all services under the NFP, and will expand coverage to the entire State, thereby offering all Medicaid pregnant women access to services proven to improve pregnancy outcomes and reduce health care expenditures.



Asthma Home Based Services

- Compared to the nation, New York has higher asthma ED and hospital discharge rates for all age groups; For 2005-2007, Medicaid accounted for 43% of the total asthma hospitalizations and incurred 37% of the total asthma hospitalization costs in NYS .
- This proposal will increase access to home environmental assessments and interventions to reduce exposure to asthma triggers that contribute to preventable exacerbations. Similar programs haven been found to result in health and financial benefits including a reduction in asthma hospitalizations and ED visits.

Diabetes Prevention

- More than 2 million New York State residents have diabetes, and diabetes prevalence has doubled in the last decade. Another 3.7 million to 4.2 (25-30% of the adult population) million New Yorkers are estimated to have pre diabetes
- Implementation of nationally recognized diabetes prevention programs in diverse community settings such as YMCAs, Federally Qualified Health Centers, faith based organizations, worksites, aging networks, hospital systems, health plans and independent living centers is proposed to delay and prevent onset of diabetes and reduce Medicaid costs.



Childhood Lead Poisoning Prevention

- Lead is among the most common environmental toxins for young children in New York State. 3,010 children were diagnosed with lead poisoning in New York State during 2008.
- Medicaid coverage of environmental investigations and care coordination is estimated to result in State and local savings through a reduction in the number of children exposed to lead and for those exposed, by ensuring prompt access to appropriate care and treatment.



Water Fluoridation

- Water fluoridation is the most cost-effective approach to reducing tooth decay
- A \$1 million investment is estimated to increase the number of children on fluoridated drinking water by 200,000 to 1.7 million children resulting in enhanced dental health and reduced Medicaid expenditures.

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Regional Health Planning

Program Overview

- **Dramatic changes in the delivery system:**
 - ✓ *Risk-based payment methodologies;*
 - ✓ *New care models;*
 - ✓ *Improved access to health insurance;*
 - ✓ *Emphasis on care coordination, patient engagement, and population health.*
- **Changes call for collaborative, regional health planning that:**
 - ✓ *Engages consumers, payers, providers and public health officials;*
 - ✓ *Is driven by rigorous data analysis;*
 - ✓ *Builds community consensus and strategic partnerships around health care and healthy communities*



Program Overview

- **Focus is on demand for and supply of health care, linked to quality and outcomes:**
 - ✓ *Alignment of health care resources with community needs; and*
 - ✓ *Promoting patient engagement, coordinated care, appropriate health care utilization and healthy communities.*

Defining the Regions

- **FACTORS:**
 - ✓ Regional identity;
 - ✓ Health care market considerations;
 - ✓ Consistency with other regional initiatives;
 - ✓ Planning infrastructure.

Open Issues

- **ROLE:** Convening stakeholders to develop data-driven solutions to address community health needs.
- **Possible Functions:**
 - ✓ Data collection and analysis; health disparities; quality and patient safety; aligning payment incentives; consumer and provider engagement; Access, CON review

Open Issues: *Governance*

- **Core requirements:**
 - ✓ *Neutrality*
 - ✓ *Accountability*
 - ✓ *Representation*



The Process

- NYSDOH's Public Health and Health Planning Council is examining regional health planning as part of its CON Redesign effort.
- Public meetings through December.
 - ✓ *September 5 meeting in Rochester dedicated to regional planning.*
- Report to be issued in December.



Contact Information

We want to hear from you!

MRT Waiver Website:

http://www.health.ny.gov/health_care/medicaid/redesign/mrt_waiver.htm

This website includes the documents referenced in this presentation, e-mail address and form to submit feedback, as well as instructions on how to enroll for the MRT listserv.

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