Beyond medical care
Emerging policy opportunities to advance prevention and improve health value in Ohio

Health Policy Institute of Ohio
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Objectives

• Awareness of emerging policy opportunities to advance prevention
• Compelling messages about the importance of prevention
• Navigate online evidence sources and distinguish between different types of sources in order to find what works
beyond medical care

Emerging policy opportunities to advance prevention and improve health value in Ohio
Emerging opportunities to advance prevention

Goal: Improve health value and health equity in Ohio

Stable investments in evidence-based upstream prevention
Community-based, primary prevention that addresses the social, economic and physical environments that shape our health

1. Change incentives within healthcare system
2. Leverage potential new sources of funding
3. Nurture cross-sector partnerships and perspectives

Inside the healthcare system | Balanced portfolio of strategies and financing mechanisms | Outside the healthcare system
Goal: Improve health value and health equity in Ohio

Stable investments in evidence-based upstream prevention
Community-based, primary prevention that addresses the social, economic and physical environments that shape our health
Going upstream to improve population health

Focus on wellness, with emphasis on primary prevention

Focus on treatment of specific diseases and conditions
Diabetes prevention example

**Optimal health**
- Healthy community environments: Access to healthy food and places to be active
- Healthy behaviors: Physical activity, healthy eating, no tobacco use
- Healthy weight

**Prediabetes**
Blood glucose or A1C levels higher than normal but not high enough to be classified as diabetes.
Risk factors include: overweight or obesity, lack of physical activity, tobacco use, high blood pressure, toxic stress and family history.

**Diabetes**
No cure, but disease management can help to control blood glucose levels and mitigate further complications.

**Downstream impacts**
- Heart disease
- Stroke
- Blindness
- Loss of toes, feet or legs
- Kidney failure

**Upstream**
Primary prevention strategies to help children and adults stay healthy, such as enhanced physical education and healthy food incentives for SNAP participants

**Secondary prevention strategies to stop or delay transition to type 2 diabetes**, such as Diabetes Prevention Programs (education and follow-up support from a trained lifestyle coach for healthy eating, physical activity and other behavior changes)

**Disease management strategies**, such as Patient Centered Medical Homes, case management and chronic care model (proactive, team-based care)

**Costs**
- $440 per-person cost of Diabetes Prevention Program
- $7,900 per-person cost of diabetes-related medical care
- $67,000+ per-person cost of dialysis
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Inside the healthcare system | Balanced portfolio of strategies and financing mechanisms | Outside the healthcare system
Out of balance

Factors that influence health

- Physical environment: 40%
- Clinical care: 20%
- Health behaviors: 30%
- Social and economic environment: 10%

State health agency spending in Ohio

- 94% Clinical care/treatment
- 6% Prevention


Emerging policy opportunities

1. Change incentives within the healthcare system
2. Leverage potential new sources of funding
3. Nurture cross-sector partnerships and perspectives
## Paying for value over volume through payment reform

### Increasing incentives for primary and secondary prevention

<table>
<thead>
<tr>
<th>Fee for service</th>
<th>Pay for performance</th>
<th>Care coordination payments</th>
<th>Bundled or episode-based payment</th>
<th>Global payment</th>
</tr>
</thead>
</table>
Leverage potential new sources of funding

Wellness trusts

Hospital community benefit for upstream prevention

Pay-for-success financing

Thank you
Nurture cross-sector partnerships and perspectives

Health and Equity in All Policies

Community integrators & backbone organizations
Recommendations for:

- State-level policymakers
- Healthcare leaders
- Philanthropy, employers, other private sector leaders
- Public health leaders, advocates, community-based prevention organizations
- Local-level policymakers
Paying for value over volume through payment reform

• Tie payment to risk-adjusted outcome measures, not just process measures
• Explore section 1115 waivers for community-based prevention
• Coordination between Medicaid managed care plans, local health departments, and community-based social service and behavioral health organizations
• ACOs (Accountable Care Organizations)
• Upstream PCMH (Patient Centered Medical Homes)
Wellness trusts

• Identify source or sources of funding
• Identify administrative body
• Considerations regarding goals, fund allocation, collaboration, community engagement and sustainability
Leverage hospital community benefit for upstream prevention

• Raise awareness of upstream prevention activities that can be reported as community benefit
• Devote some community benefit dollars to evidence-based primary prevention
• Collaboration between hospitals, local health departments and other community-based organizations
Pay-for-success financing

- Build knowledge and capacity
- Cultivate champions
- Identify private investors
- Identify projects
- Reduce barriers
Health and Equity in All Policies approach to decision making

• Build knowledge and capacity
• Embed HEIAP in grant requirements
• Identify situations where Health Impact Assessments could be encouraged or required
• Formalize agency collaboration
• Develop healthy community charters
Community integrators and backbone organizations

- Build knowledge and capacity
- Fund integrator/backbone functions
- Embed backbone role in grant requirements
- Sustain momentum through ongoing support
Key messages for talking about prevention policy opportunities

- Prevention, upstream prevention, community-based prevention
- Health value
- Health equity
- Opportunity
- Return on investment, cost-effective
- Partnership, partnerships
- Beyond medical care, beyond the doctor's office
- Health care vs. sick care
- Balanced portfolio of strategies

Stable investments in evidence-based upstream prevention

Community-based, primary prevention that addresses the social, economic, and physical environments that shape our health both inside and outside the clinical system.

Emerging opportunities to advance prevention and health equity in Ohio

Goal: Improve health value and health equity in Ohio

- Leverage potential new sources of funding such as:
  - Medicaid care management
  - Population Health
  - Medicare Advantage
  - Medicare Reimbursement

- Nurture cross-sector partnerships and strategies:
  - Greater collaboration between health and education, public health, transportation, and housing to decrease health care needs and reduce health disparities.
  - Integration of health care with social services.

- Inside the healthcare system
- Balanced portfolio of strategies and financing mechanisms
- Outside the healthcare system

Policy changes and new partnerships can move Ohio upstream. To identify actionable steps to improve Ohio's health, HIP brought together stakeholders to identify potential drivers of health improvement in public and private sectors.

Key words:
- Prevention
- Upstream prevention
- Community-based prevention
- Health value
- Health equity
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HPIO Guide to Evidence-Based Prevention
What are we talking about?

promising practice

recommended

emerging

best practice

model program

effective

proven program

evidence-informed

evidence-based
Where should we look for effective prevention strategies?
What works to prevent Ohio’s greatest health challenges?

- Tobacco use and secondhand smoke exposure
- Diabetes
- Food insecurity
- Drug abuse
- Infant mortality
Navigating sources of evidence

Evidence inventories

Evidence summary fact sheets
Audience

• Community health improvement planners (including local health departments, hospitals, ADAMH boards, Family and Children First Councils, managed care plans and others)

• Philanthropy and United Ways

• Legislators and other policymakers
HPIO mission

To provide the independent, unbiased and nonpartisan information and analysis needed to create sound health policy
HPIO thanks our core funders, who are helping advance the Health of Ohioans through informed policy decisions.

- Interact for Health
- Mt. Sinai Health Care Foundation
- The Cleveland Foundation
- The George Gund Foundation
- Saint Luke’s Foundation of Cleveland
- HealthPath Foundation of Ohio
- Sisters of Charity Foundation of Canton
- Sisters of Charity Foundation of Cleveland
- United Way of Greater Cincinnati
- Mercy Health
- CareSource Foundation
- SC Ministry Foundation
- United Way of Central Ohio
- Cardinal Health Foundation
Contact
Health Policy Institute of Ohio
10 W Broad St Suite 1050
Columbus, OH 43215
(614) 224-4950
astevens@healthpolicyohio.org