

Overview of Changing Health System Issues: Where Are We Now?

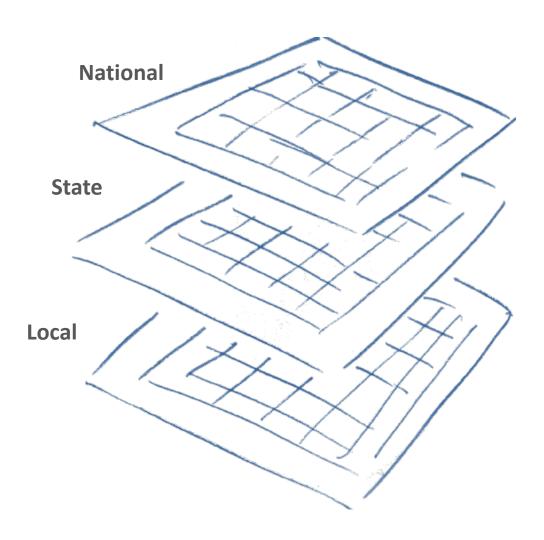
Karen Minyard, Ph.D. Georgia Health Policy Center





Strategic Alignment

Triple-Layer Chess



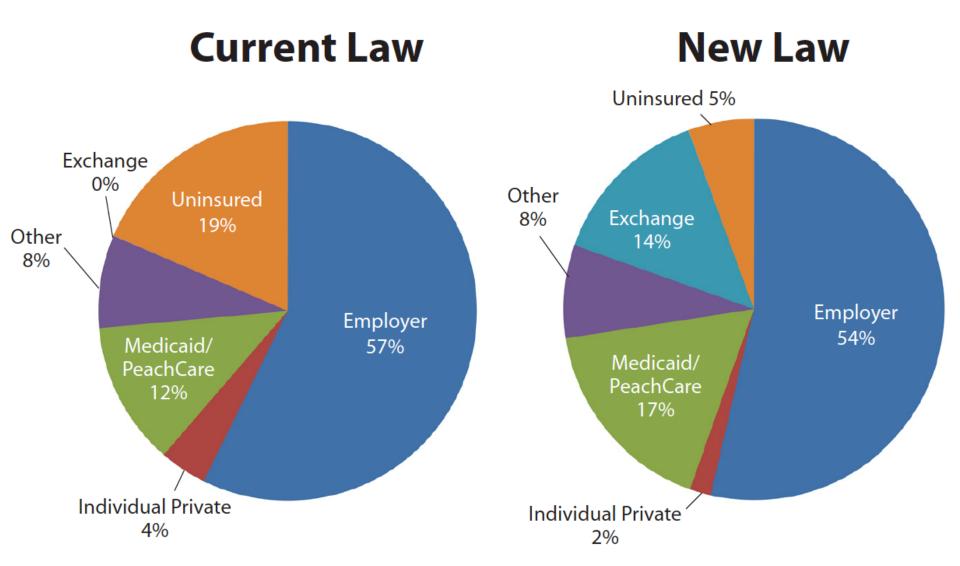
Health Reform

An overview of the impact of the Patient Protection and Affordable Care Act in the United States

Health Reform

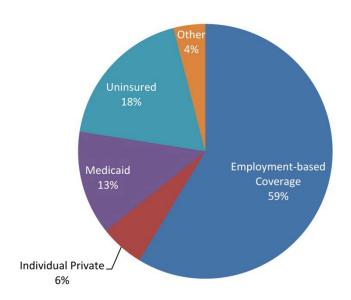
1. Sources of coverage

MOP Georgians with health insurance coverage

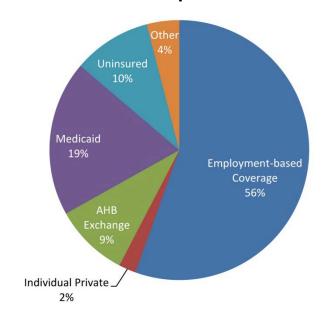


U.S. Coverage Scenarios

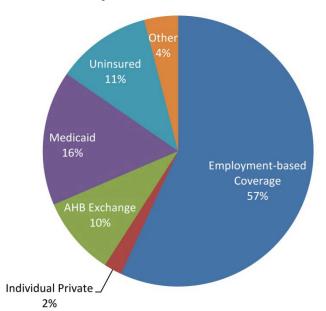
Baseline (Before Implementation) - 2014



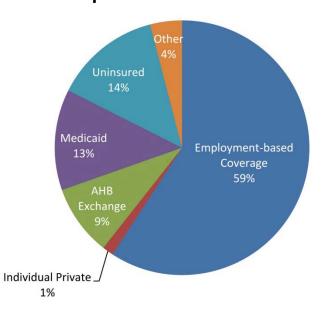
Full Medicaid Expansion - 2019



Partial Expansion of Medicaid - 2019



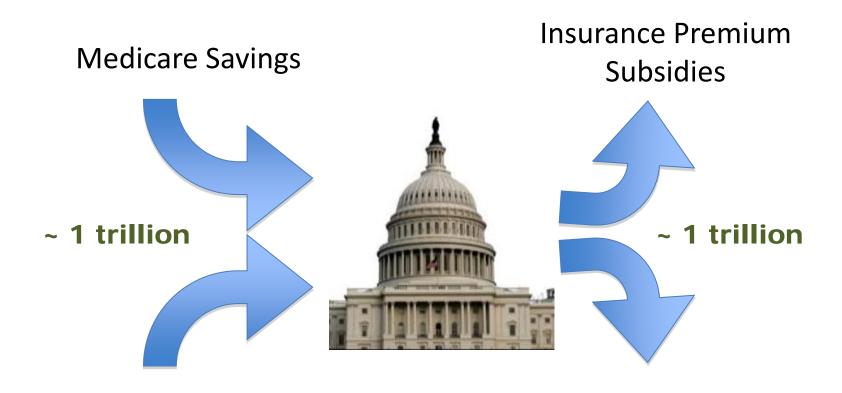
No Expansion of Medicaid - 2019



Health Reform

- 1. Sources of coverage
- 2. Financial Implications

funding and spending



Fees, Taxes and Penalties

Medicaid

Health Reform

- 1. Sources of coverage
- 2. Financial Implications
- 3. Major change components

Changes in Changes in **Improving Improving** Public Health Care Private Health Coverage Quality Coverage

Health Reform

- 1. Sources of coverage
- 2. Financial Implications
- 3. Major change components
- 4. Timeline

Coverage Expansions

Individual Mandates Enacted

Additional limits, fees, incentives

2010 2011 2012 2013 **2014**

Health Reform

- 1. Sources of coverage
- 2. Financial Implications
- 3. Major change components
- 4. Timeline

Forces
Shaping
Health
Care
Reform





Adaptive Challenges



Influence decisions



Educate others



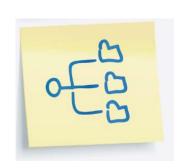
Strategically plan under uncertainty



Stay abreast of new information that emerges



Create new partnerships



Build capacity: workforce, information technology, and care coordination

GHPC Sustainability Framework



GHPC Sustainability Framework



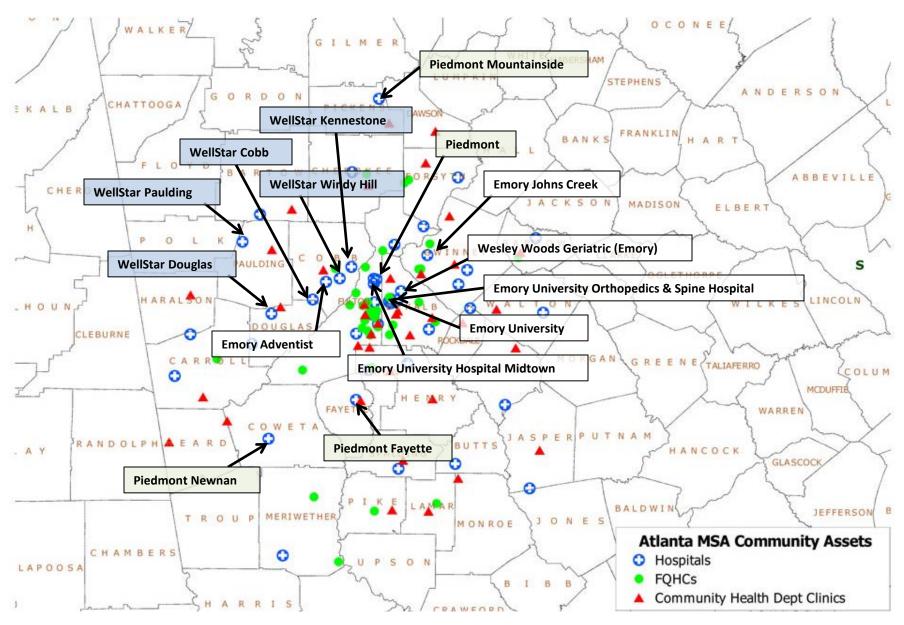
ARCHI

Atlanta Regional
Collaborative
for Health
Improvement



Joining Forces to Improve Health Outcomes in Metro Atlanta

Access Points – Community Assets Hospitals, FQHCs, and Community Health Department Clinics



ARCHI

Atlanta Regional
Collaborative
for Health
Improvement

Organizing Partners

- Atlanta Regional Commission
- United Way of Metropolitan Atlanta
- Georgia Health Policy Center

Core Funding

- Centers for Disease Control and Prevention
- Kaiser Permanente
- St. Joseph's Health System

ARCHI Steering Committee

- Atlanta Regional Commission
- Carter Center Mental Health Program
- Centers for Disease Control and Prevention
- DeKalb County Board of Health
- Fulton County Department of Health Services
- Georgia Association for Primary Health Care
- Georgia Department of Public Health
- Georgia Health Policy Center
- Georgia Hospital Association
- Grady Health System
- Kaiser Permanente
- Oakhurst Medical
- Philanthropic Collaborative for a Healthy Georgia
- Southside Medical Center
- St. Joseph's Health System
- United Way of Metropolitan Atlanta

ATLANTA REGIONAL COLLABORATIVE FOR HEALTH IMPROVEMENT SUMMARIZED TIMELINE

Multi-disciplinary
Steering Committee
formed and begins
meeting to discuss the
need for a more
collaborative
approach to
addressing critical and
systemic health needs
in Atlanta region.

Decision is made to focus on Fulton and DeKalb counties initially, with a view to expanding the collaborative to incorporate other counties over time.

Steering Committee studies community benefit requirement of ACA and begins talks with Fulton and DeKalb hospitals to consider the potential of a single collaborative health assessment.

Steering Committee
designs an
engagement process
and a series of
stakeholder meetings
that will focus on
understanding health
improvement
opportunities in Metro
Atlanta, and promote
collective action.

July 2012: first stakeholder meeting – 40 health providers and community partners discuss the potential of a collaborative approach and reviewed the Re-Think Health simulation model to assist in the development of community health priorities, the allocation of limited resources and the methods for capturing savings.

September 2012: second stakeholder meeting—52 health providers and community partners review quantitative analysis of health status and health indicators in Fulton and DeKalb.

October 11, 2012: third stakeholder meeting—56 health providers and community partners review qualitative data on both the health of residents in Fulton and DeKalb and on successful collaborations in metro Atlanta.

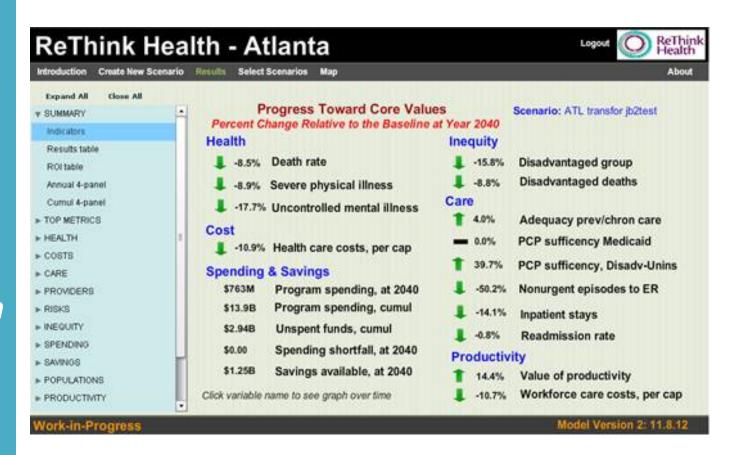
November 14, 2012: fourth stakeholder meeting, providers and partners work together to develop consensus priorities around which a collective implementation and investment strategy can be developed.

ARCHI partners work together to develop collective implementation and investment strategy

Preferred Scenario

ARCHI Process

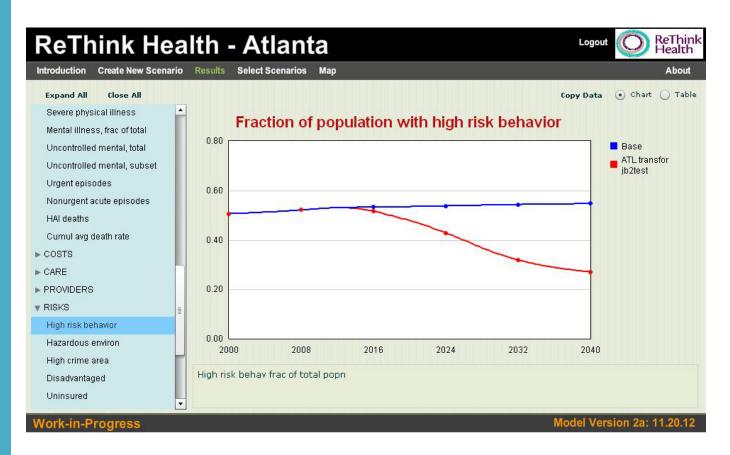
- Healthier Behaviors
- Family Pathways
- Coordinated Care
- Global Payment
- Capture and Reinvest
- Expand Insurance



Health Outcome Indicators



Health Outcome Indicators



Financial Indicators



Financial Indicators



ARCHI Next Steps

- Share model with stakeholders
- Community focus groups
- Steering committee planning
- Meet again in February

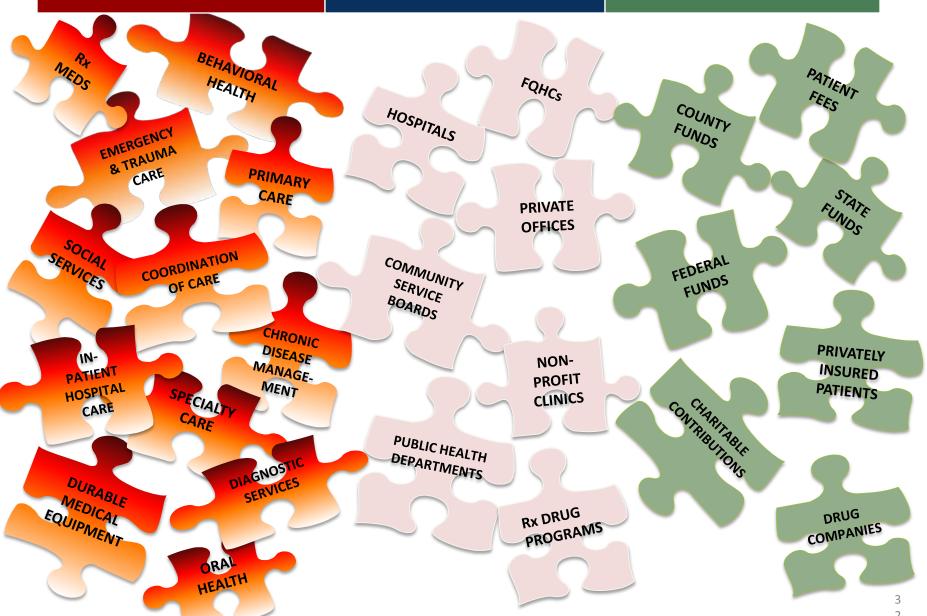
Grady Health System



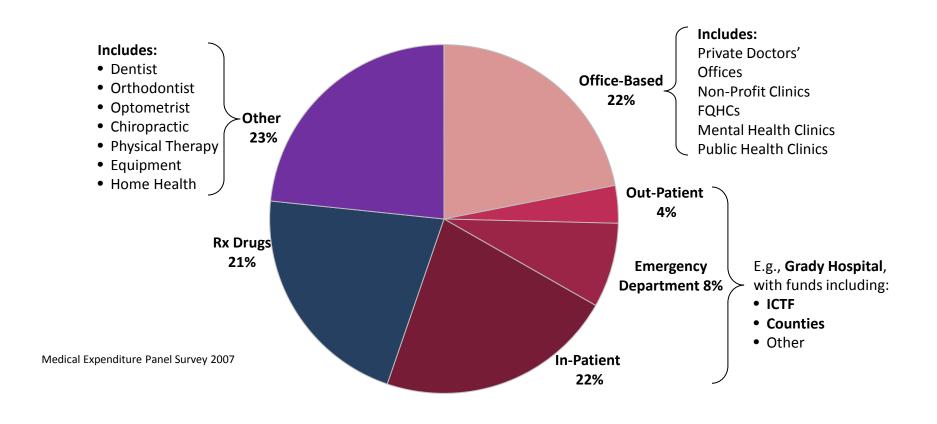
HEALTH CARE NEEDS OF THE UNINSURED

SAFETY NET PROVIDERS

FINANCING SOURCES

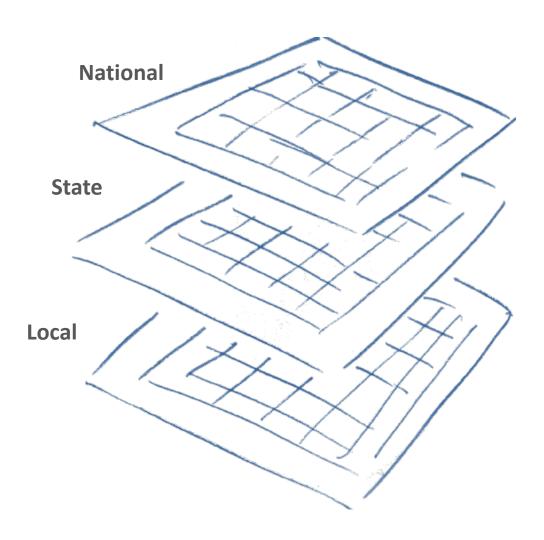


Health Expenditures for the Uninsured by Type of Service (U.S.)



Strategic Alignment

Triple-Layer Chess



Visit www.gsu.edu/ghpc for more information or follow us on Facebook.





