Medicaid’s Role in Prevention, Population Health, and Building a Culture of Health

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Trish Riley
Executive Director, Co-Chair NASI Study Panel
National Academy for State Health Policy
Medicaid’s Role – Culture of Health

- Supported by the Robert Wood Johnson Foundation

- Charge to Study Panel & Membership
Study Panel

Sara Rosenbaum, Co-Chair, Harold and Jane Hirsh Professor of Health Law and Policy, Milken Institute School of Public Health, The George Washington University

Trish Riley, Co-Chair, Executive Director, National Academy for State Health Policy

John Auerbach, Associate Director for Policy, Centers for Disease Control and Prevention

Deborah Chang, Senior Vice President for Policy and Prevention and Corporate Officer, Nemours Children’s Health System

Ajay Chaudry, Senior Fellow, New York University and Visiting Scholar, Russell Sage Foundation

Julie Cox-Kain, Deputy Secretary of Health and Human Services and Senior Deputy Commissioner, Oklahoma State Department of Health

Leonardo Cuello, Director, Health Policy, National Health Law Program

Deborah De Santis, President and Chief Executive Officer, Corporation for Supportive Housing

Patricia A. Gabow, Professor Emerita of Medicine, University of Colorado School of Medicine

Daniel Hawkins, Senior Vice President, Public Policy and Research Division, National Association of Community Health Centers

Paloma Hernandez, Chief Executive Officer and President, Urban Health Plan

Kathy Ko Chin, President and Chief Executive Officer, Asian & Pacific Islander American Health Forum

Paula Lantz, Associate Dean for Academic Affairs and Professor of Public Policy, Gerald R. Ford School of Public Policy, University of Michigan

MaryAnne Lindeblad, Medicaid Director, Washington Health Care Authority

Jewel Mullen, Federal Liaison, Principal Deputy Assistant Secretary for Health, U.S. Department of Health and Human Services

Margaret A. Murray, Chief Executive Officer, Association for Community Affiliated Plans

Matt Salo, Executive Director, National Association of Medicaid Directors

Christian Soura, Director, South Carolina Department of Health & Human Services

Marilyn Tavenner, President and Chief Executive Officer, America’s Health Insurance Plans

Cathy Ficker Terrill, Senior Advisor, The Council on Quality and Leadership

Julie Trocio, Senior Director of Community Benefit and Continuing Care, Catholic Health Association of the United States

James D. Weill, President, Food Research & Action Center

Leana S. Wen, Commissioner of Health, Baltimore City

Gail Wilensky, Senior Fellow, Project HOPE

Advisers to the Panel

Lynn Etheredge, Consultant, The Rapid Learning Project

Judith Solomon, Vice President for Health Policy, Center on Budget and Policy Priorities

Karin VanZant, Executive Director, Life Services, CareSource
Medicaid’s Role – Culture of Health

▪ Largest Public Insurer
  ▪ Low income and medically vulnerable families
  ▪ Facile – accommodates changing needs

▪ Health care as entry point for more comprehensive responses to address social determinants of health

▪ Medicaid as partner, not piggybank
Administrative Options: System transformation, quality improvement, and payment reform

A1. Develop health improvement demonstrations that employ a longer-term savings time frame, focus on the social determinants of health, recognize health related expenditures as qualified for federal funding, and count a broader range of estimated cost offsets when calculating budget neutrality.

A2. Develop a fast-track approval process, a clear implementation roadmap, and a series of definable outcome measures for promising service delivery transformation models.

A3. Better align federal health, nutrition, housing, and social support eligibility, benefit, and expenditure policies to enable coordination with Medicaid coverage and system transformation efforts in order to extend the reach of programs and ensure that people are connected to the full range of assistance needed to improve health.
A4. Restructure Medicaid payment policies to improve access to behavioral health services.

A5. Improve data sharing between physical health, mental health, and substance use disorder services and providers to enhance care coordination.

Administrative Options cont.

A7. Strengthen access standards for individuals whose primary language is not English who require language services and people with disabilities who experience challenges in communication.

A8. Develop and disseminate information on best practices in coverage of comprehensive preventive and primary care for adults.

A9. Disseminate social determinants screening tools for utilization in managed care and integrated delivery systems and adopt payment methods that foster comprehensive care and the integration of health and social services.
A10. Develop safety net health care payment reform models that promote access, quality, efficiency, and a Culture of Health.

A11. Include consultation with state Medicaid and public health agencies as an express requirement for tax-exempt hospitals in developing community health needs assessments under the Internal Revenue Code.

A12. Make Medicaid an equal priority to Medicare for the Center for Medicare and Medicaid Innovation (CMMI), with special emphasis on pilots aimed at health improvement and prevention
Thank You

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