The Affordable Care Act and Public Health in NYS: Health Benefits, Medicaid Expansion, and the Prevention Agenda

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Featured Speakers

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Disclosure Statements

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• University at Albany School of Public Health
• NYS Department of Health
A Plan to Transform the Empire State’s Medicaid Program

Key Elements of MRT

- Most sweeping Medicaid reform plan in state history.
- Pulls together the work of the MRT into a single action plan.
- Plan is closely tied to successful implementation of the federal Affordable Care Act.
- The plan also embraces the CMS “triple aim” of: improving quality, improving health, and reducing costs.

Primary Strategies for Improving Health

- SUPPORTIVE HOUSING
  New York will lead the nation in using supportive housing as a vital service to improve patient outcomes and lower program costs.
- FIGHTING DISPARITIES
  New strategies, including investments to address health disparities. Language translation and better data tracking – we can’t fix what we don’t understand.
- BENEFIT REDESIGN
  Redesigning the Medicaid benefit to focus on ensuring that cost effective health care is provided. Add coverage that improves health and lowers costs (expansion in smoking cessation coverage) and eliminating coverage for which there is no evidence its effective (expensive lower back treatments when less costly and proven therapies exist).
Prevention Agenda 2013-2017: New York State’s Health Improvement Plan

- Social determinants of health
- Prevention and wellness
- Eradicate health disparities along racial, ethnic, and socioeconomic lines

National Prevention Strategy

Preventing Illness and Promoting Health

- Since 2010, New York has received $62 million in grants from the Prevention and Public Health Fund created by the Affordable Care Act.
- Fund was created to support effective policies in New York, its communities, and nationwide so that all Americans can lead longer, more productive lives.

Community Prevention ($13,710,000)

Funding supports prevention activities proven to reduce health care costs and improve healthy behaviors.

- Community and State Prevention ($13,560,000).
- Tobacco Use Prevention ($150,000).
Clinical Prevention ($10,686,000)

- Funding supports programs to improve Americans’ access to important preventive services and the full range of care necessary to meet diverse healthcare needs.
- Access to Critical Wellness and Preventive Health Services ($3,424,000).
- Behavioral Health Screening and Integration with Primary Health ($4,690,000).
- HIV/AIDS Prevention ($2,572,000).

Public Health Infrastructure and Training ($32,490,000)

These efforts help State and local health departments meet 21st century challenges.

- Public Health Workforce ($24,768,000).
- Detection and Response Capacity ($3,669,000).
- Public Health Infrastructure ($4,053,000).

Research and Data Collection ($5,158,000)

Funds support the scientific study of prevention to better understand how to translate research into practice.

- Prevention Research ($2,959,000).
- Health Care Data Analysis and Planning ($2,199,000).

Why is the Waiver Important?

- Would be one of the largest waivers in history approved by the Centers for Medicare & Medicaid Services (CMS).
- Unique opportunity to bend the cost curve for New York’s health care system.
- Positions New York to lead the nation in Medicaid reform and in Affordable Care Act implementation.

Medicaid Supportive Housing

$750 million over the next five years

- This new program will expand access to supportive housing for high needs/high Medicaid cost members.
- Social determinants of health are paramount.
- Supportive housing will bend the Medicaid cost curve.
- Housing projects will target health home eligible Medicaid members with complex health conditions.

Public Health Innovation

$395.3 million over the next five years

- Comprehensive initiatives to improve maternal and child health in NYS:
  - Emphasis on racial and ethnic minorities
  - Include statewide expansion of the successful Nurse-Family Partnership program.
- Expand Medicaid coverage of Primary and Secondary Community-Based Chronic Disease Preventive Services including:
  - Medicaid coverage of home visits for environmental assessments
  - Coverage of pre-diabetes screening
  - Interventions to prevent progression to diabetes.
- Medicaid Support of Water Fluoridation.
- Address health care acquired infections and prevent sepsis.
Health Home Development

$525 million over the next five years

- NYS continues to be the nation’s leader in Health Home development.
- Health Homes are like accountable care organizations for very high need/high cost Medicaid and Medicare members.
- GOAL = Cost-effective Health Homes in all areas of the state.

Prevention Agenda 2013-2017 Goals

1. Improve the health status of all New Yorkers.
2. Advance a "Health in All Policies" approach in New York State.
3. Strengthen governmental and non-governmental public health infrastructure.
5. Further strengthen and promote the case for investment in prevention and public health.

New Priority Areas

- Prevent Chronic Diseases
- Promote a Healthy and Safe Environment
- Promote Healthy Women, Healthy Babies, Healthy Children
- Promote Mental Health and Prevent Substance Abuse
- Prevent HIV, STIs and Vaccine Preventable Diseases

For More Information on New York State’s Prevention Agenda

http://tinyurl.com/PreventionAgenda

prevention@health.state.ny.us

Health in All Policies

Health Benefit Exchange

Donna Frescatore

- Assistant Secretary for Health under Governor Cuomo
- Executive Director of the NYS Health Benefit Exchange
New York’s Uninsured: Who Are They

• 16% of New Yorkers under age 65 are uninsured
  OR
• 2.7 million New Yorkers are uninsured

New York’s Uninsured: The Details

• Working people
• Dependents
• 85% with income below 400% of FPL
• Racial and ethnic minorities

Costs of Uninsured Populations

• Uninsured:
  – Forego necessary care
  – Receive half the medical care as insured
  – Increased risk of mortality
  – Suffer 45,000 excess deaths annually

Why Health Care Reform?

• 1 Million New Yorkers gain coverage
• Reduce the number of uninsured
• Address the high cost of insurance

Costs of Uninsured Populations

• Taxpayers:
  – Spend $1.2 billion in 2012-2013 (Federal, State, Local)
    • $600 million State and Local
  – Families pay $800/year in excess premiums
What is an Exchange?

- Organized marketplace
- Apply for coverage
- Compare options
- Qualify for tax credits
- Enroll in a plan
- Individual Exchange: Individuals buy coverage
- Employer Exchange: Small Business Health Options (SHOP)

Who Will Obtain Coverage?

- > 1 Million Uninsured
- 615,000 in Individual Exchange
- 450,000 in SHOP Exchange
- 75,000 people gaining Medicaid eligibility
  - 513,000 will enroll in Medicaid

Costs Before Reform

- 2011 Monthly Costs
- $1270/individual
- $3450/family
- $490/individual plan for small business
- $1300 family plan for small business
- Nearly 800,000 New Yorkers lost employer sponsored coverage

Making It Easier

- Health care premiums will decline for individuals
- Employers able to buy coverage at a lower cost
- Low and moderate income individuals receive tax credits and subsidies

Purchasing at the Exchange

- Single point of entry
- Enroll through website, telephone or in person
- Give employers more flexibility

Economic Benefits to NY

- Taxpayer dollars for indigent pools decrease
- Small businesses able to offer insurance
  - Attract and retain healthy workforce
  - Grow and create jobs
- Taxpayers save $2.3 billion/annually in Medicaid costs
- Federal government contributing to pay for system
NYS Operating its Own Exchange

• Builds on existing insurance system
• NY makes decisions on benefits offered and health plans participating
• Preservation of patient and provider protections
• Residents able to hold State accountable

Who Will Operate the Exchange

• New York State Department of Health
• Collaborate with other State Agencies
• Work closely with Medicaid Program

For More Information

• www.healthcarereform.ny.gov

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