

Setting State Health Priorities in Tough Budget Times

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Health Resources and Services Administration (HRSA)
Maternal and Child Health Bureau (MCHB)



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The AIM Program

- Alliance for Information on MCH
- Grantee collaborative



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Participants

- National membership organizations
- Members include decision-makers in:
 - State and local government
 - MCH professions
 - Foundations
 - Health insurance industry
 - Business
 - Family advocates



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Individual Grants

- Help members make well informed decisions
- Public health policies and programs for women, children and families.
- Alert the MCHB to emerging issues



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The AIM Collaborative

- Meet twice annually
- Share information and ideas about MCH
- Work together on an ad hoc basis to improve the health of women, children and families



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AIM Partners

- American Academy of Pediatrics (AAP)
- American Academy of Pediatric Dentistry (AAPD)
- American Bar Association (ABA)
- Association of Maternal and Child Health Programs (AMCHP)
- Association of State and Territorial Health Officials (ASTHO)
- CityMatch (University of Nebraska)
- Grantmakers for Children, Youth & Families (GCYF)
- Family Voices
- Grantmakers in Health (GIH)
- National Association of County and City Health Officials (NACCHO)
- National Business Group on Health (NBGH)
- National Conference of State Legislatures (NCSL)
- National Conference of State Legislatures Consortium (with NGA, ASTHO, AMCHP)
- National Governors Association (NGA)
- National Healthy Start Association
- National Institute for Health Care Management (NIHCM)
- Today's Child
- -----
- MCHB



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Value Added

- Different perspectives
- Share expertise
- Educate each other and MCHB about MCH issues and practices

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The Challenge

- How to support essential MCH programs and services?
- How can states set health priorities:
 - In these tough budget times, and
 - In the context of the national dialogue on health reform?

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Using Limited Health Dollars Wisely
 What States Can Do To Create The Health System They Want

Multi-State Seminars for State Decision-Makers Influential in
 Maternal and Child Health

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"Health Priorities" Project

A collaboration among national partner organizations
 Funded by MCHB under the
 "Improving Understanding of Maternal and Child Health
 and Health Care Issues" (IUMCH) initiative



Partner Organizations

AMCHP: *Association of Maternal and Child Health Programs*

ASTHO: *Association of State and Territorial Health Officials*

CityMatCH: *CityMatCH*

MCHB: *Maternal and Child Health Bureau*

NACCHO: *National Association of County & City Health Officials*

NCSL: *National Conference of State Legislatures*

NGA: *National Governors Association*

Project Staff and Interns

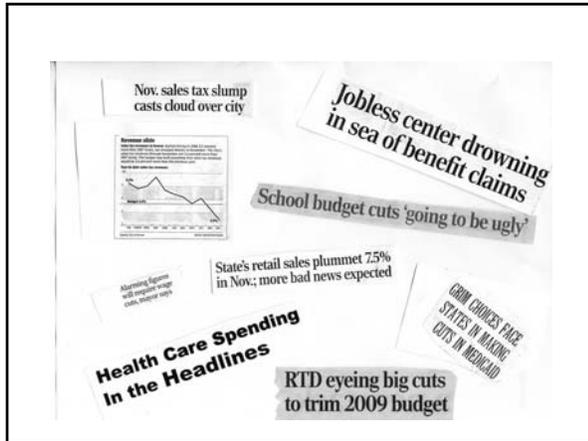


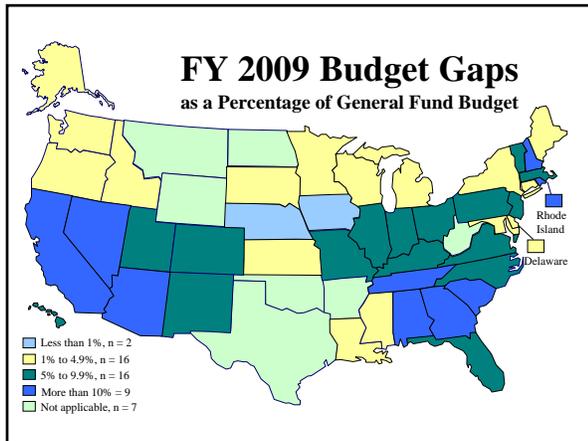
Project Goals

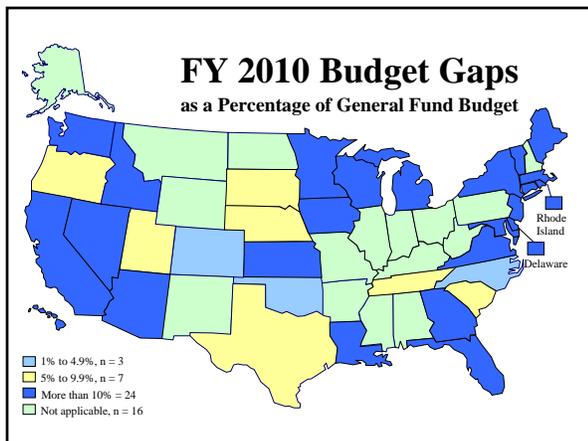
- Convene state teams of key health policymakers to foster communication and collaboration about state health goals & opportunities.
- Raise greater awareness about state health goals, resources and the value of establishing priorities.
- Improve the understanding of MCH issues within the context of larger health policies & priorities.
- Consider the health status of the state's children & families identify strategies for improvement.
- Have participants identify the next steps they will take in their own states.

Current Climate

- "Tough Budget Times"
- Setting health priorities:
 - More critical than ever
 - Av. 32% of state budgets go to health care
 - Priorities may focus on protecting programs from cuts, rather than adding to the "wish list."
- Larger context
 - Seminar dialogue broader than MCH
 - Where does MCH fit in?







Actions to Balance FY 2009 Budgets

- **Across-the-board cuts** (20 states +10 considering)
 - Delaware (7%)
 - Georgia (10%)
 - Hawaii (2%-4% + 4%)
 - Kansas (3%)
 - Maine (5%)
 - Nevada (7.4% +)
 - Ohio (4.8%)

Invitational Seminars

Multi-state teams from 6 to 7 states meet for 2 ½ days and include the following members:

- State legislators & legislative staff
- Governor's health policy advisor
- State health officer
- Title V director
- Medicaid director
- Insurance commissioner
- Local health officer

Roles of MCH and other public health representatives on the teams

- Public health folks bring ...
- awareness of the resources currently available
 - data capacity and evaluation skills to assist in decision making
 - knowledge of the health of the families living in the state
 - knowledge of current programmatic efforts and gaps
 - knowledge of emerging issues in the states
 - knowledge of evidence-based approaches
 - the prevention message
 - and an understanding of the lifecourse perspective of health

Contributing to state goals and priorities that are based on data, evidence and the needs of families.

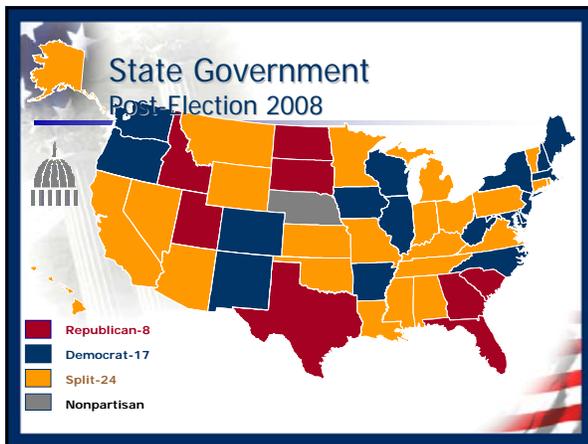
What do public health folks get from participating in the teams?

Opportunities to ...

- participate in dialogue and strategic planning with other key state decision makers
- promote the need for a particular focus on MCH populations in health efforts
- share successes
- be viewed as resources
- build relationships

Invitational Seminars (in this grant cycle)

- Meeting 1: October 2005, Naples, Florida
Alabama, Georgia, Louisiana, Missouri, Oklahoma, South Carolina, and Tennessee
- Meeting 2: June 2006, Denver, Colorado
Alaska, Kansas, Montana, New Mexico, North Dakota, South Dakota, and Texas
- Meeting 3: June 2007, New Orleans, Louisiana
Iowa, Mississippi, New Hampshire, Virginia, and West Virginia
- Meeting 4: June 2008, Denver, Colorado
Arkansas, Idaho, Indiana, Louisiana, Maryland, Wyoming
- Meeting 5: October 2009
States to be determined



Plenary Sessions



Seminar Agenda: Plenaries

Early Childhood Development: Economic Development with a High Public Return

Rob Grunewald, Federal Reserve Bank, Minneapolis

A New Health Vision: Confronting Priorities and Tradeoffs

Richard Lamm, Institute for Public Policy Studies (University of Denver) and former Colorado Governor

Priorities into Action: Practical Healthcare Priority Setting

Mark Gibson, Center for Evidence-Based Policy, Oregon Health and Science University

Investing in the Public's Health

Maxine Hayes, M.D., State Health Officer, Washington

Investing in the Future: Promoting Healthy Families

*Peter van Dyck, M.D., Maternal and Child Health Bureau
(and a panel of health officials)*

Dr. van Dyck Presents



Participants Network with Dick Lamm



Seminar Agenda: State Team Meetings

Three meetings for each state team, facilitated by a Project partner

- Review their own state's health status indicators, challenges and existing goals
- Discuss and prioritize state health goals to address at the meeting
- Identify objectives and strategies to meet the goals
- Agree on action steps to take back home
- Report to the larger group about goals and strategies

Expectation: an agreement to meet again in their own state, with a Project facilitator

A State Team Meeting



State Team Exercise to ID Priorities



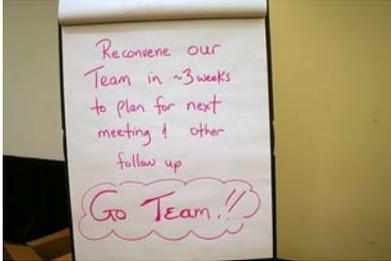
"Affinity Group" Meeting (State Legislators)



State Teams Report Out (Mississippi -- 2007)



Expect Follow Up



Successes

Examples of state team accomplishments:

- Arkansas legislation to address childhood obesity, including measuring students' body mass index.
- Agreement on a state-funded Medicaid expansion in one state to cover undocumented pregnant women.
- A joint effort by team members in Minnesota to protect children's health programs during the state's budget crisis.

Successes, con't

Examples of state team accomplishments:

- Testimony sponsored by state team members to study groups or commissions to encourage certain decisions or actions (e.g., Iowa, West Virginia, Wyoming)
- Sponsorship of in-state meetings for broader stakeholders in Mississippi and New Hampshire

New Orleans Service Project





State Examples

Indiana

State Representative Peggy Welch

Iowa

*Tom Newton, Director
Department of Public Health*

Kansas

*Marcia Nielsen, Executive Director,
Kansas Health Authority*

New Hampshire

*Lisa Bujno, Chief
Bureau of Community Health Services*

Indiana State Team



Indiana State Rep. Peggy Welch



Iowa Team (2007)



Kansas Team (2007)



New Hampshire Team (2007)



State Team Process & Highlights

Indiana:

Rep. Peggy Welch

Iowa:

Tom Newton

Kansas:

Marcia Nielsen

New Hampshire:

Lisa Bujno

Concerns & Apprehensions?



New Hampshire:

Lisa Bujno

Kansas:

Marcia Nielsen

Iowa:

Tom Newton

Indiana:

Rep. Peggy Welch

State Team Goals & Strategies

Iowa:

Tom Newton

Kansas:

Marcia Nielsen

Indiana:

Rep. Peggy Welch

New Hampshire:

Lisa Bujno

Iowa Goals & Strategies

- Provide accessible affordable health care for all children in Iowa, including dental & mental health services
 - Improve outreach
 - Investigate mandating coverage

- Create a comprehensive prenatal and newborn home visitation program for every newborn Iowan
 - Provide state-level support for programs

Iowa, con't

- Design a process to set health priorities so we can fund the highest priorities
 - Identify options and key stakeholders
 - Develop a timeline and initiative process
- Create wellness enhancements for state employees
 - Ban smoking at the capitol complex
 - Develop a menu of options for wellness activities and behaviors



Kansas Goals & Strategies

Kansas Health Policy Authority:

Creation grew out of Governor's reorganization proposal and participation in a previous Health Priorities meeting.

Kansas Health Policy Authority goals:

KHPA shall develop and maintain a coordinated health policy agenda that combines the effective purchasing and administration of health care with promotion oriented public health strategies.

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Kansas, con't

Recent Goals & Strategies:

- Agree on the "big picture" goal for the health of Kansans: change focus from "health care" to "health"
- Improve public health initiatives
 - Bring newborn screening up to national standards
 - Focus efforts on tobacco prevention & cessation
 - Focus on obesity
- Improve quality of care
 - Use e-prescribing & improve transparency for consumers
 - Data consortium and public reporting of health indicators
 - Medicaid Transformation project (14 program review)
 - Value-based purchasing in State Employee Health Plan (SEHP)
 - Expand health information technology and exchange

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Kansas, con't

- **Improve access to care**
 - Expand capacity of the Healthy Start Home Visitor Program
 - Redefine primary care and integrate better with mental health, dental, and preventive services (medical home initiative)
 - Improve telemedicine in rural areas
 - Pilot/expand community medical records
 - Pilot/expand chronic disease management
 - Expand SCHIP to 250% FPL
 - Expand funding for safety net clinics

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Indiana Goals & Strategies

Prioritize health services to maximize the health status of the population

- Learn from other states (e.g., Oregon)
- Gather data & convene stakeholders

Indiana residents to prepare for long-term care needs

- Rep. Welch to sponsor legislation

Increase the infrastructure for state and local public health

- Study whether to require accreditation for local health departments

New Hampshire Goals & Strategies

- **Assure optimal early childhood developmental services**
 - Re-establish a kids cabinet or other cross-agency forum to address early childhood issues
 - Fully fund the home-visiting program
 - Fund prenatal projects

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New Hampshire, con't

- Raise greater awareness about the cost savings of investing in high quality and public health services
 - Sponsor speaker about the cost savings of prevention to state legislators (e.g., WIC, immunization, injury & violence prevention, pre- and post-natal care, breastfeeding, etc.)
 - Convene a legislative task force
 - Work on a family planning waiver

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New Hampshire, con't

- Increase communication within/between stakeholders to include executive and legislative branches and their stakeholders
 - Convene a collaborative team to review opportunities and develop priorities
 - Establish priorities for a 5-year legislative public health policy direction
 - Establish a "preventive health" legislative caucus

Major Activity: In-state meeting

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State Team Follow-up Activities & Successes

Kansas:

Marcia Nielsen

Indiana:

Rep. Peggy Welch

New Hampshire:

Lisa Bujno

Iowa:

Tom Newton



Kansas Activities & Successes

- **Crafted comprehensive health reform proposal**
 - Limited success: SCHIP, pregnant women, dental care expansions; defined medical home in statute
- **Medicaid improvements**
 - DSH* reform, GME** improvements, program efficiencies, Transformation process

*Disproportionate Share Hospital
 **Graduate Medical Education



Kansas Activities & Successes

- **State Employee Health Plan improvements**
 - Wellness and prevention incentives, better benefit design, increased state contribution for families, focus on tobacco control
- **Continued push for data & transparency**
 - Completed 20 studies for legislature, advisory councils, E-newsletter, website redesign, data analytic interface

Indiana Activities & Successes

- **Prioritizing health services, etc.**
 - Legislation introduced & pending:
 - Statewide smoking ban
 - Mandated menu information
- **Long-term care**
 - Legislation introduced & pending:
 - Incentivize purchase of LTC insurance

Indiana, con't

- **Infrastructure**
 - Executive order to establish a public health not-for-profit
 - Expanded communications between state & local health commissioners

Iowa Activities

- **Summer 2007 – Affordable Health Care Commission**
- **Health Care Reform Act of 2008**
- **This comprehensive legislation addressed access, cost, and quality of health care and garnered broad stakeholder and bipartisan support**

Iowa Successes

- **Expanded hawk-i program to children at <300% FPL – explore adult coverage**
- **Established advisory councils for health IT, medical homes, chronic care management, patient autonomy, and health workforce.**
- **Prevention and wellness addressed as well through creation of a “healthy communities” grant program, Governor’s Council on Physical Activity and Nutrition, and Small Business Tax Credit for Qualified Wellness Programs.**

Iowa Successes, con't.

- **Smoke Free Air Act – banned smoking in nearly all public places**
- **Healthy Kids Act – set guidelines for nutrition and physical activity in school settings**
- **2009 Health Care Reform – SF48**

New Hampshire Activities & Successes

- **A full day conference for key legislators within the Health and Human Services, Finance, and Commerce Committees**
- **120 attendees, including 75 legislators**
- **Replicated key aspects of NCSL agenda, w/ focus on additional items specific to NH health policy**

New Hampshire, con't

- **Legislative Day small group sessions yielded rich input:**
 - **Concern about health care vs public health and how to pay**
 - **Need for health leadership to guide legislative branch in these areas**
 - **Need overarching plan for the health system**

Challenges/Barriers?

New Hampshire:

Lisa Bujno

Iowa:

Tom Newton

Indiana:

Rep. Peggy Welch

Kansas:

Marcia Nielsen

Advice to Others?

Indiana:

Rep. Peggy Welch

Kansas:

Marcia Nielsen

Iowa:

Tom Newton

New Hampshire:

Lisa Bujno

Broader Context

- Carry the message that MCH is a wise investment
- MCH needs a seat at the "Health" table
- MCH needs to realize its issues are considered in the context of broader health & other issues
- Highlight MCH's role in promoting health and reducing diseases and debilitating conditions

Contacts for More Information

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Questions and Answers

Thank you for attending this event.
Please complete the evaluation directly
following the webcast.

Archives of the event are located at
<http://mchcom.com>
