

Health Reform and MCH: View through a new taxonomy



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Presentation at the MCHB Partnership Meeting

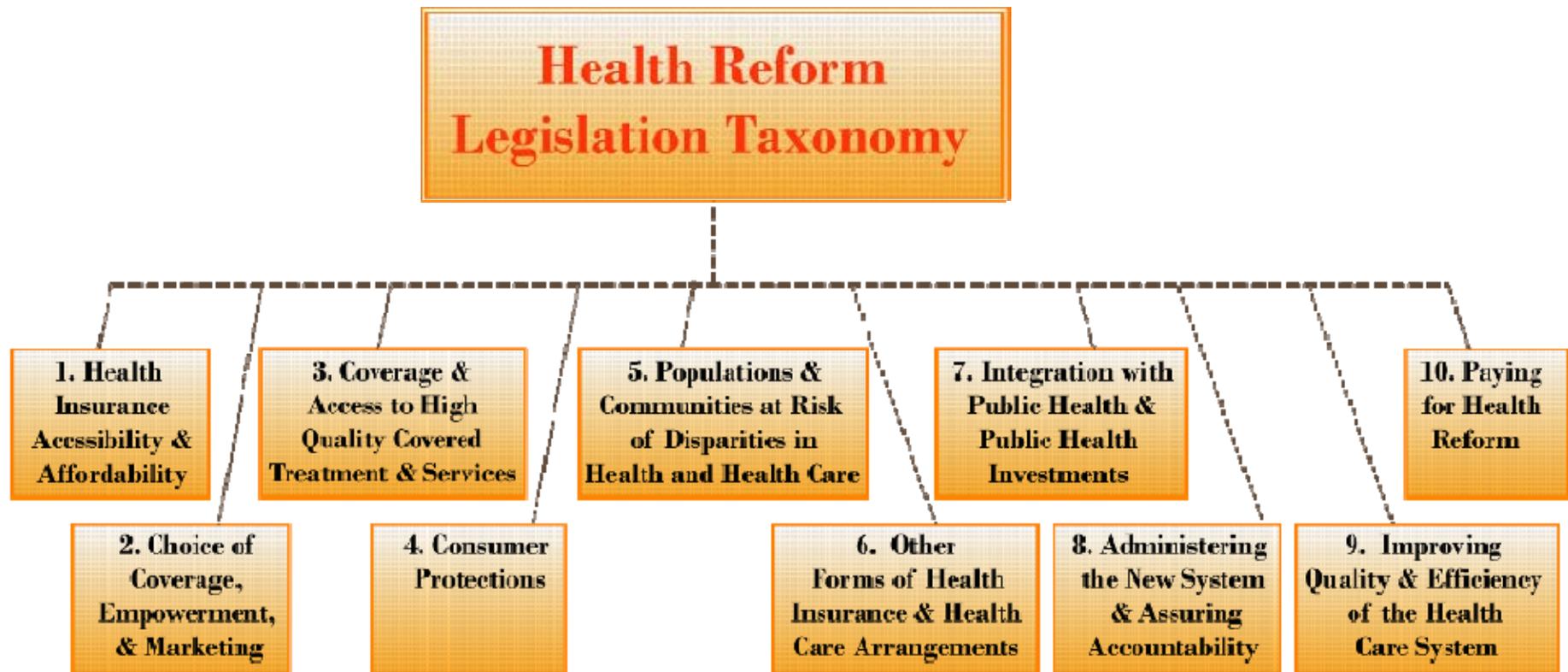
October 26, 2009

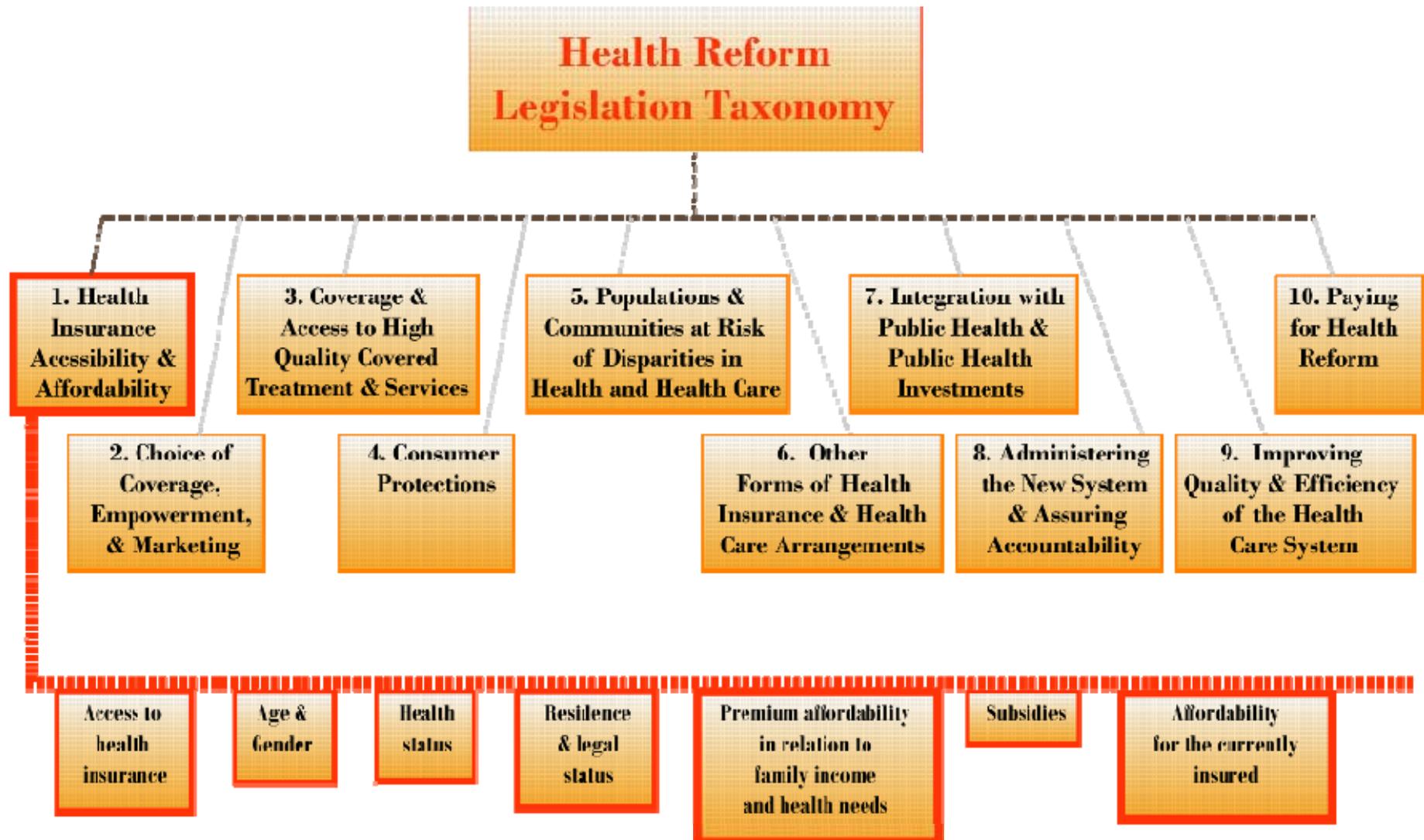
Health Care Reform Legislation Taxonomy

National Health Reform Law and Policy Project

Thanks to Sara Rosenbaum and colleagues
The George Washington University
School of Public Health and Health Services
Department of Health Policy

<http://www.gwumc.edu/sphhs/departments/healthpolicy/healthReform/>

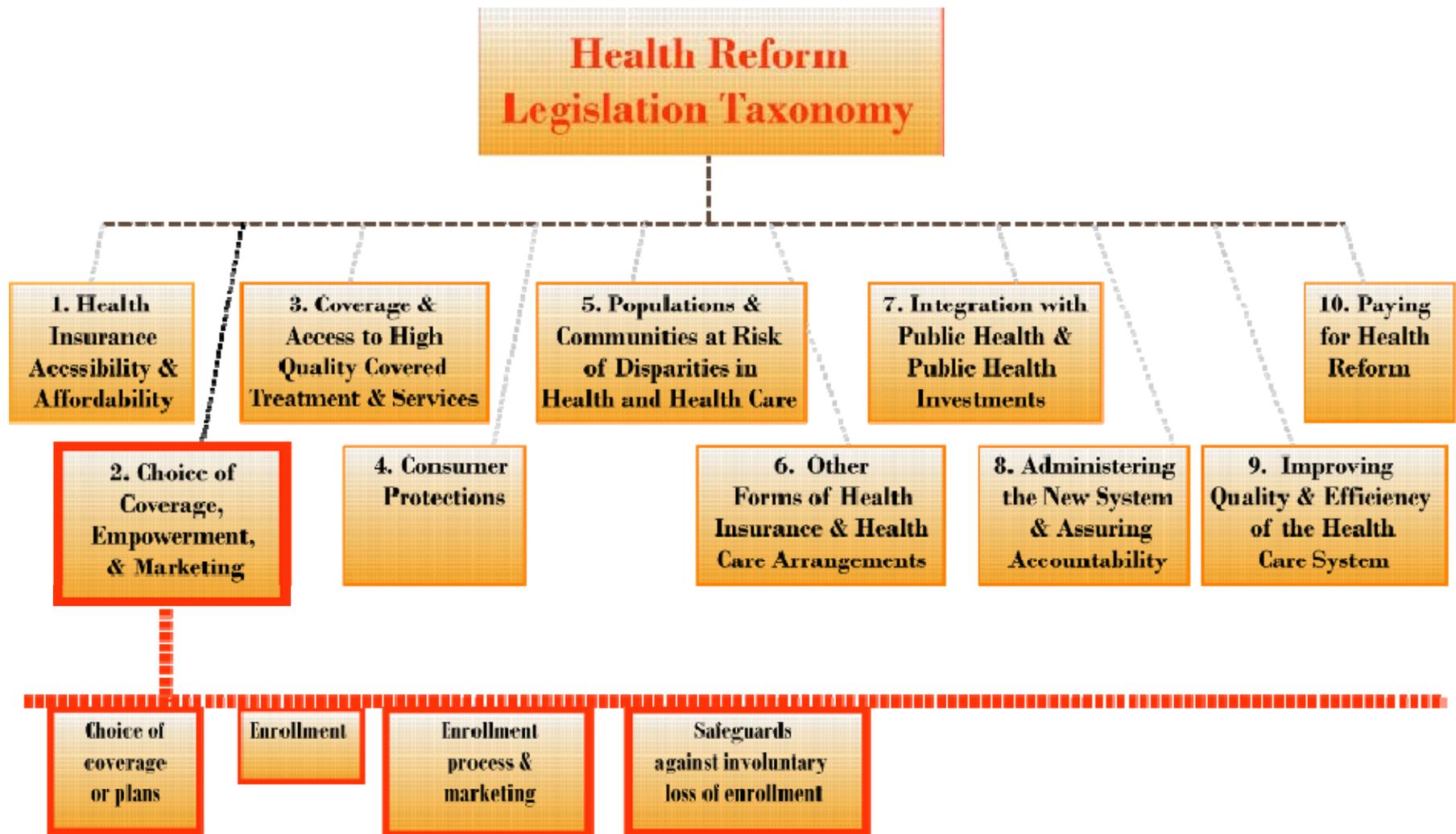




What would it mean in terms of MCH?

Accessibility & Affordability

- Millions of women and children gain access to coverage (if mandated, universal)
- Protection against gender discrimination
- Prohibit discrimination based on health status
 - e.g., pre-existing conditions, mental health parity
- Affordability benchmark
- Subsidies for more people
- Medicaid coverage for lowest income

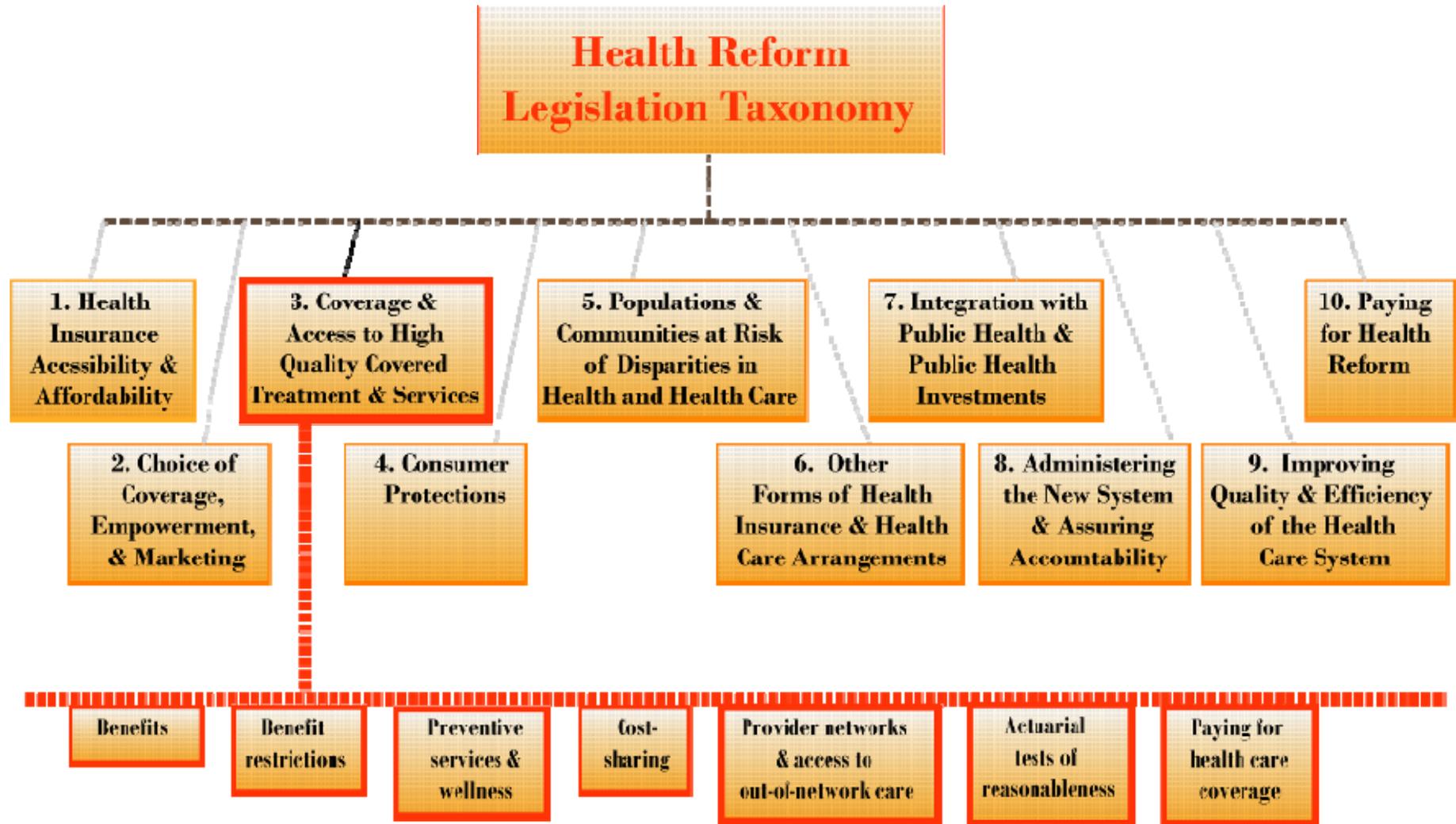


What would it mean in terms of MCH?

Choice & Empowerment

- Advantage of “guaranteed issue” policy
- More choice of plans for many families
- More informed choice
 - Example (HR 3200): Fair marketing principles, required outreach to vulnerable populations such as children, individuals with
 - disabilities, individuals with mental illness, and individuals with other cognitive impairments, more uniform marketing materials,
 - Example (Finance): In implementing the state exchanges, the Secretary would be required to develop: 1) standard definitions for common insurance terms; 2) standard definitions for medical terms; 3) several scenarios (for example, breast cancer); and 4) standards for an annual personalized statement that summarizes an individuals’ use of health care services and claims paid in the previous year.
- More uniform application processes

Health Reform Legislation Taxonomy



What would it mean in terms of MCH?

Coverage & Benefits

- Move toward EPSDT gold standard; Bright Futures in HELP bill
- Preventive services for adults (e.g. preconception)
- Core benefits defined with board to develop details
 - Example (HR 3200): Minimum Services to be Covered (essential benefits package) : 1) hospitalization; 2) outpatient hospital and clinic services; 3) services of physicians and other health professionals; 4) such services, equipment, and supplies in institutional settings, physician offices, patients' homes or place of residence, or other settings, as appropriate; 5) prescription drugs; 6) rehabilitative and habilitative services; 7) mental health and substance use disorder services; 8) preventive services, including those with a grade of A or B by Task Force on Clinical Preventive Services and vaccines recommended by CDC; 9) maternity care; and 10) well-baby and well-child care and oral health, vision, and hearing services, equipment, and supplies at least for children under 21 years of age.
 - Example (Finance): Minimum Required Benefits: Preventive and primary care, emergency services, hospitalization, physician services, outpatient services, day surgery and related anesthesia, diagnostic imaging and screenings (including x-rays), maternity and newborn care, pediatric services (including dental and vision), medical/surgical care, prescription drugs, radiation and chemotherapy that at least meet minimum standards set by federal and state laws.



What would it mean in terms of MCH?

Consumer Protection

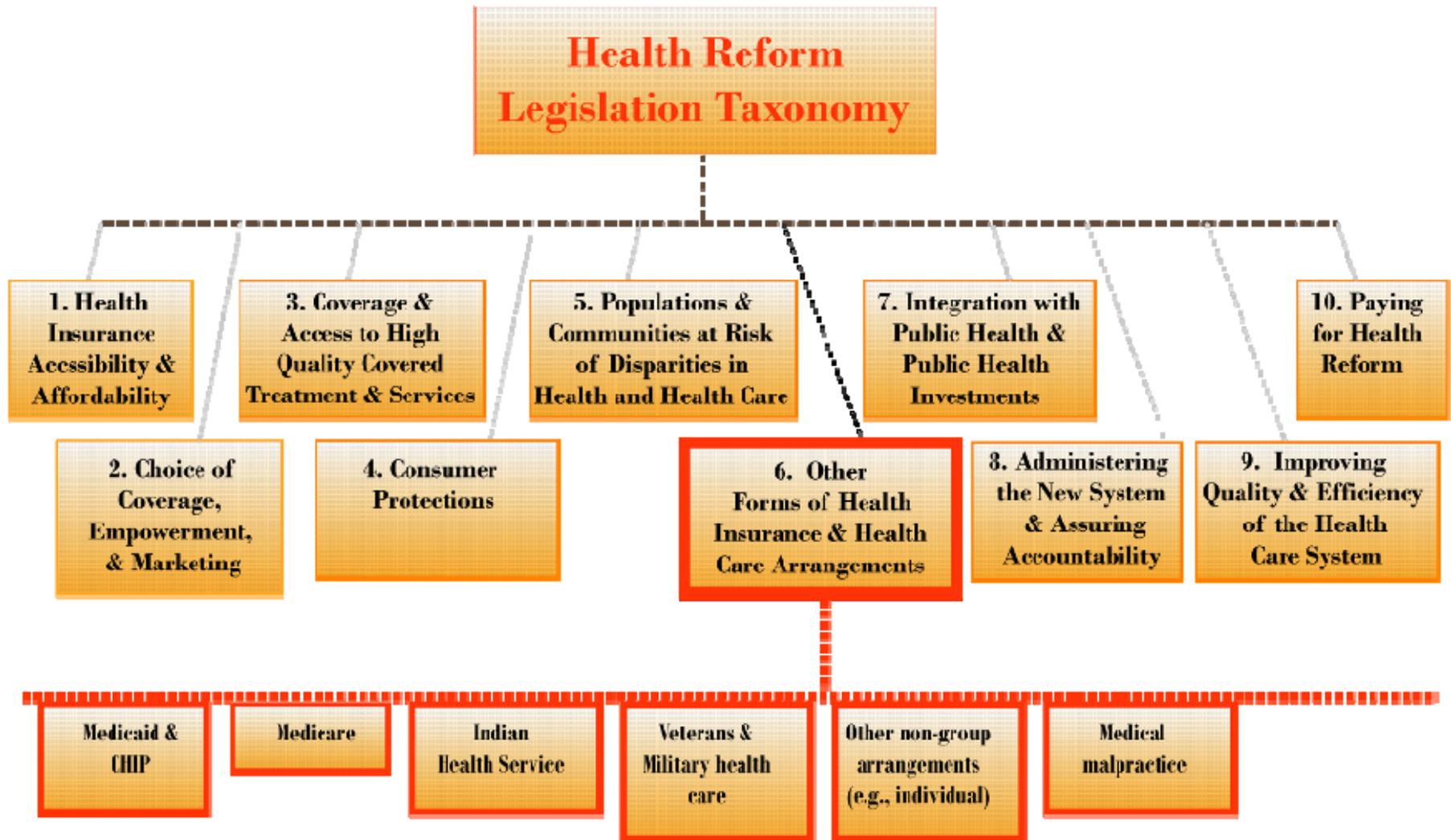
- Require fair hearing and grievance procedures
- Informing obligations related to utilization review, termination of benefits, etc.
- Internal and external review and appeals processes
- Protecting confidentiality of health information
- Consumer information
 - Example (Finance): Authorizes \$30 million to establish a new competitive grant program to support consumer assistance organizations in each state.



What would it mean in terms of MCH?

Addressing Disparities

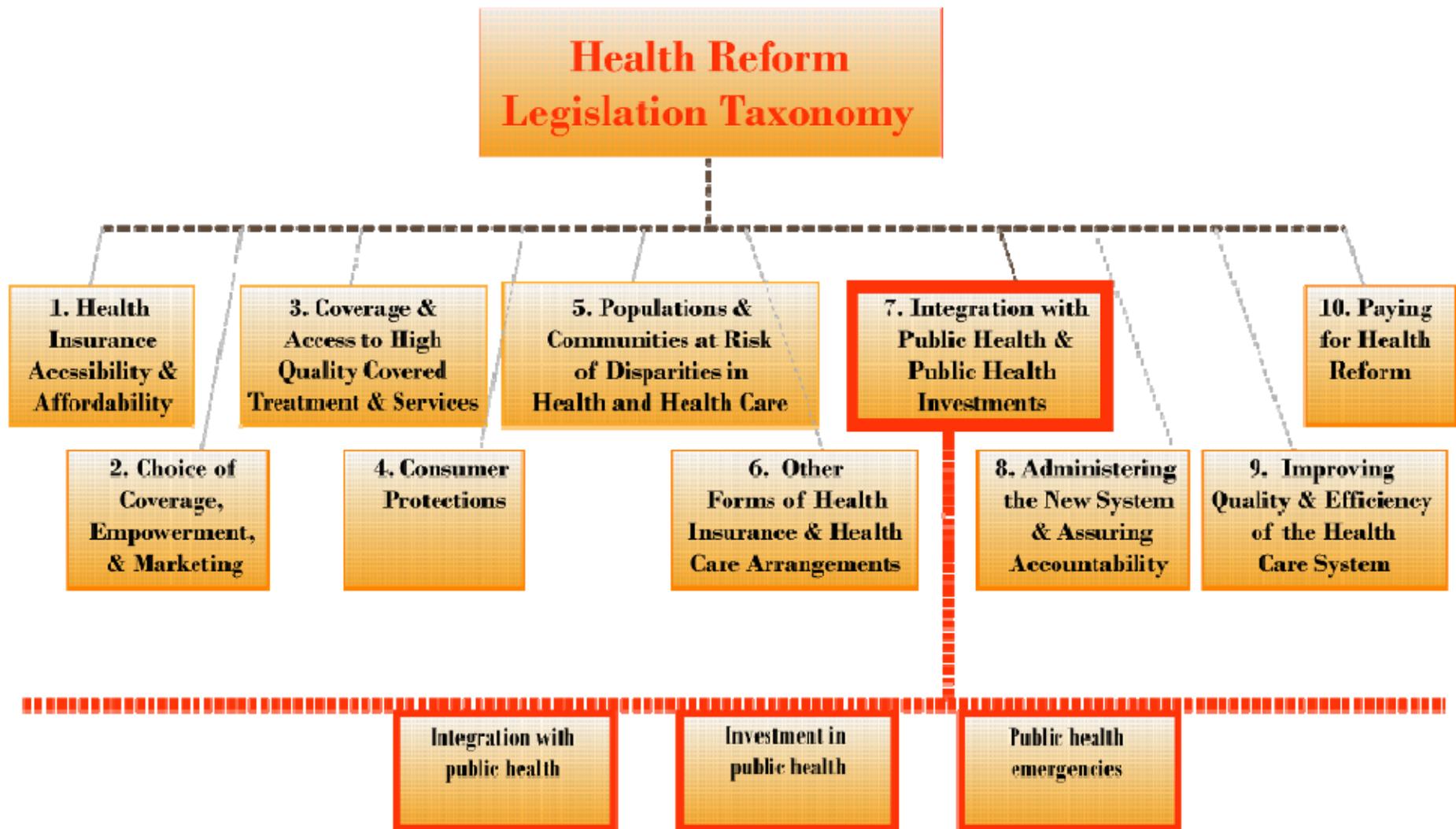
- Increase investment in safety net clinics
- Safety Net boosts
 - Example (HR 3200): Extend PHS drug pricing program to certain children's hospitals and Title V agencies
 - Example (Finance): To increase training and improve access to primary care services, qualified teaching health centers would be eligible for payments for direct graduate medical residency training programs
- Effective and Appropriate Communication
 - Example (HR 3200): Requires Effective Culturally and Linguistically Appropriate Communication
 - Example (Finance): Extends family-to-family health information centers
- Investments in research
 - Example (Finance): The Patient-Centered Outcomes Research Institute to take into account potential differences in outcomes among different subpopulations, such as racial and ethnic minorities, women, age, and groups of individuals with different co-morbidities, genetic and molecular subtypes, or quality of life preferences. Members of such subpopulations would be included in the research as feasible and appropriate
- Medicaid option for family planning services (replaces FP waiver)
- Medicaid option to include Freestanding Birth Center Services



What would it mean in terms of MCH?

Treatment of Other Insurance

- Medicaid equalization
 - Expand Medicaid to all non-elderly individuals (children, pregnant women, parents, and adults without dependent children) with incomes up to 133% FPL in HR 3200 and Finance Committee; 150% in HELP Committee
- Addresses CHIP in new system
 - Example (Finance): Require states to maintain current income eligibility levels for children in Medicaid and CHIP until 2019
 - Example (HR 3200): Require CHIP enrollees to obtain coverage through the Health Insurance Exchange (in the first year the Exchange is available)
- Maintenance of Effort for Medicaid
- Provides increased federal support for Medicaid, especially in high need states

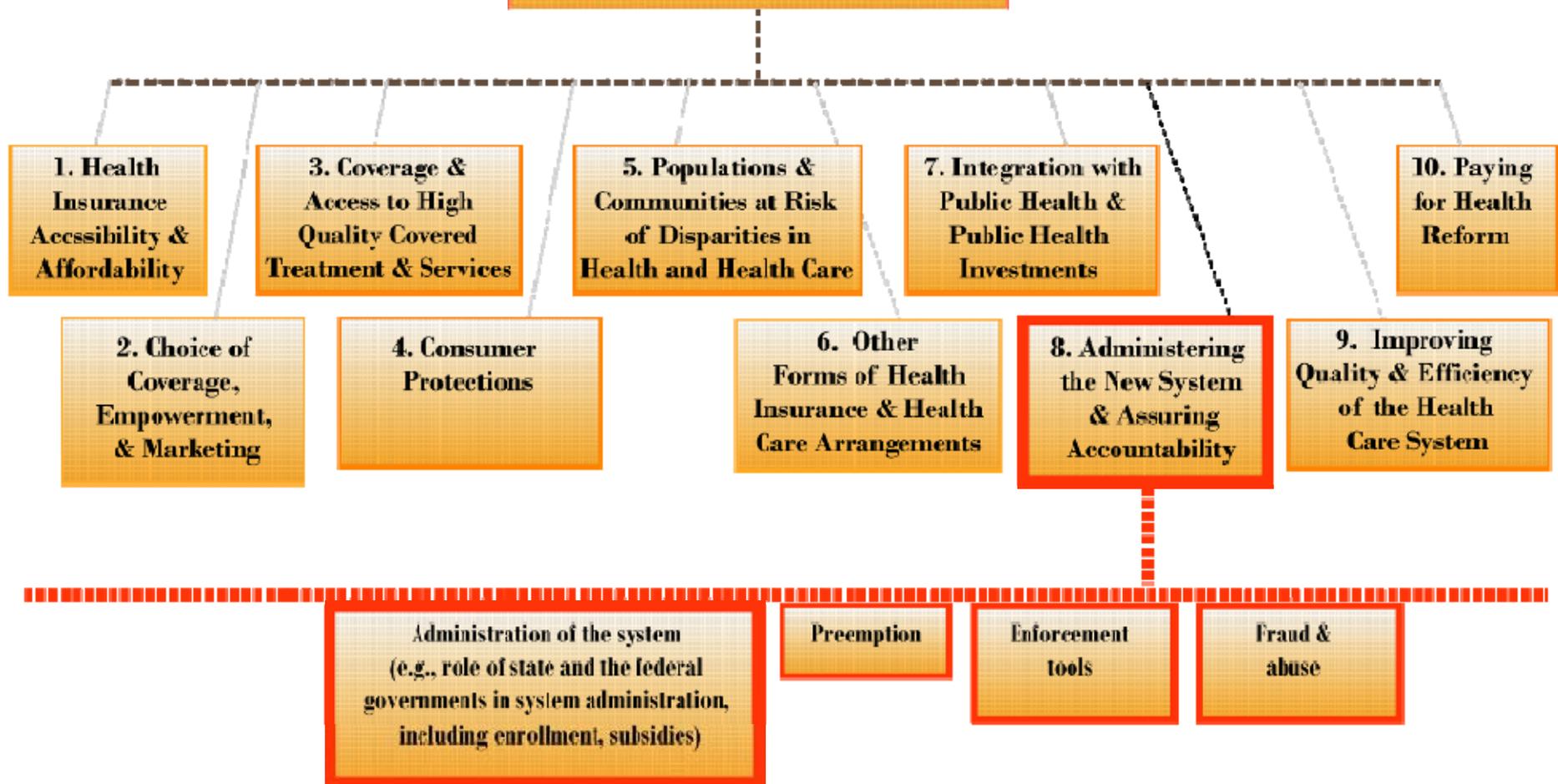


What would it mean in terms of MCH?

Integration with Public Health

- Home visiting
- Establishment of School-Based Health Clinic Program
- Core Public Health Infrastructure for State, Local, and Tribal Health Departments
- Prevention and Wellness Trust
 - Example (HR 3200): >\$2 billion

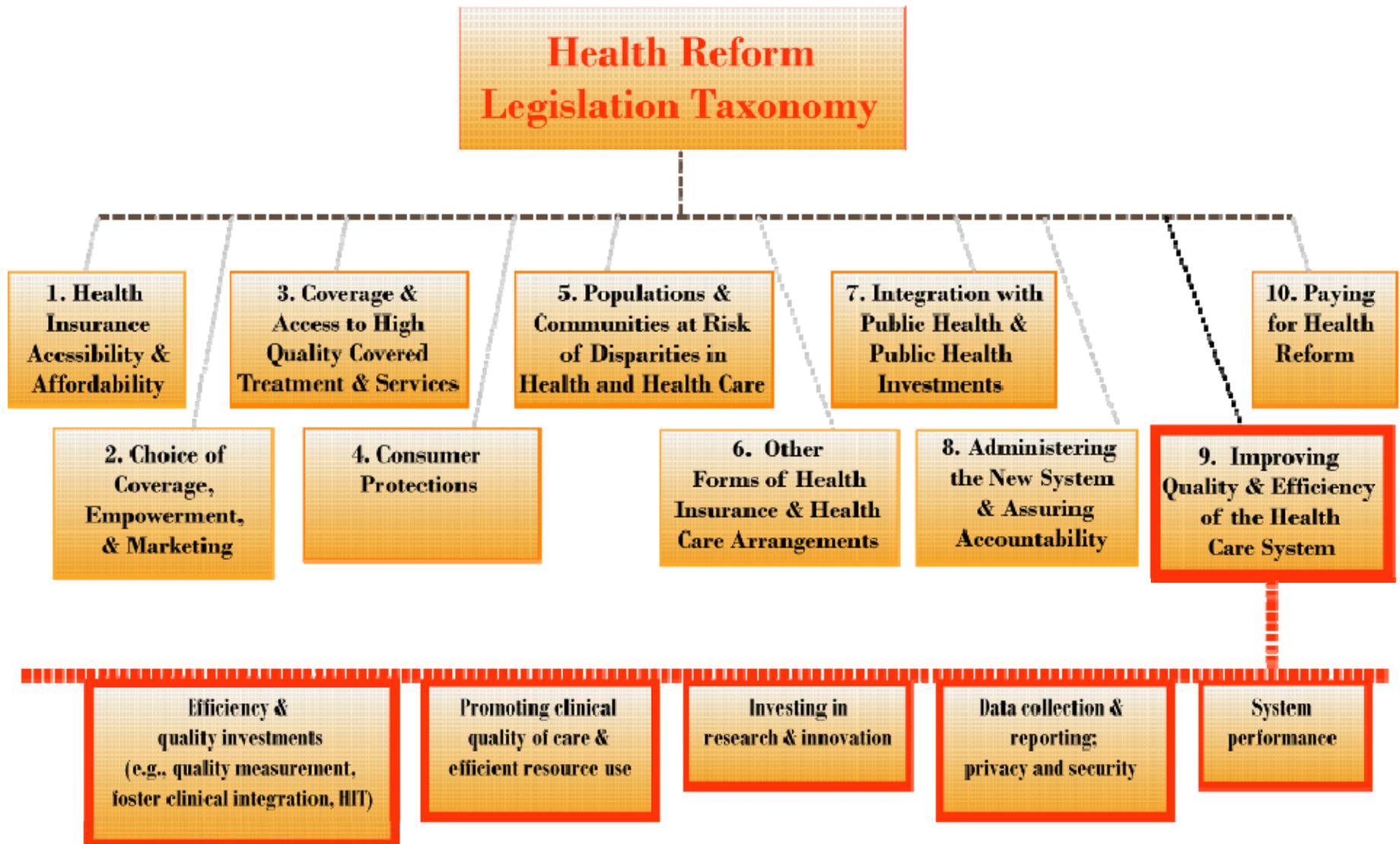
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What would it mean in terms of MCH?

Administration & Accountability

- **Administrative simplification**
 - e.g., streamlined application forms and process
- **Portability**
 - Example (Finance) Allows national plans with uniform benefit packages to be offered across state lines. Premiums for national plans will be determined based on rating rules in each state and will reflect geographic variation among rating areas.
- **Administrative structures (agency, etc.)**
- **Standardizing technology & transactions**
- **MCH specific**
 - Example (Finance): Establish demonstration projects in Medicaid and CHIP to allow pediatric medical providers organized as accountable care organizations to share in cost savings.

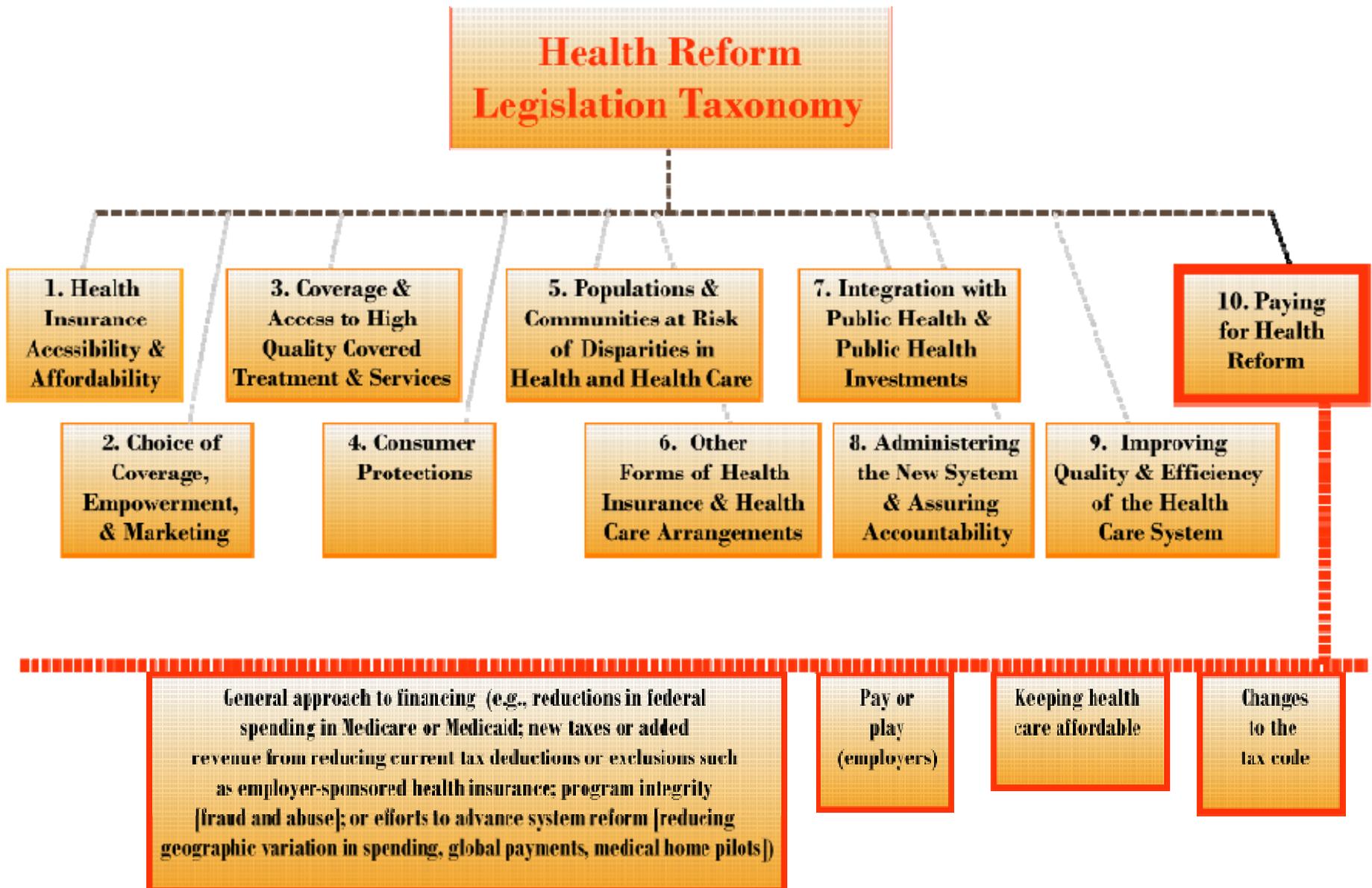


What would it mean in terms of MCH?

Quality & Efficiency

- Create quality board/center/institute
- Calls for a national quality strategy
- Quality measures
 - Maternity care & adult health (Medicaid and CHIP)
 - Patient-centered and population measures
- Medical home pilot
- Workforce investments
 - Cultural and linguistic competency
 - Primary care physicians, oral health, nursing, etc.
- National Prevention & Wellness Strategy PLUS
Community Prevention & Wellness grants

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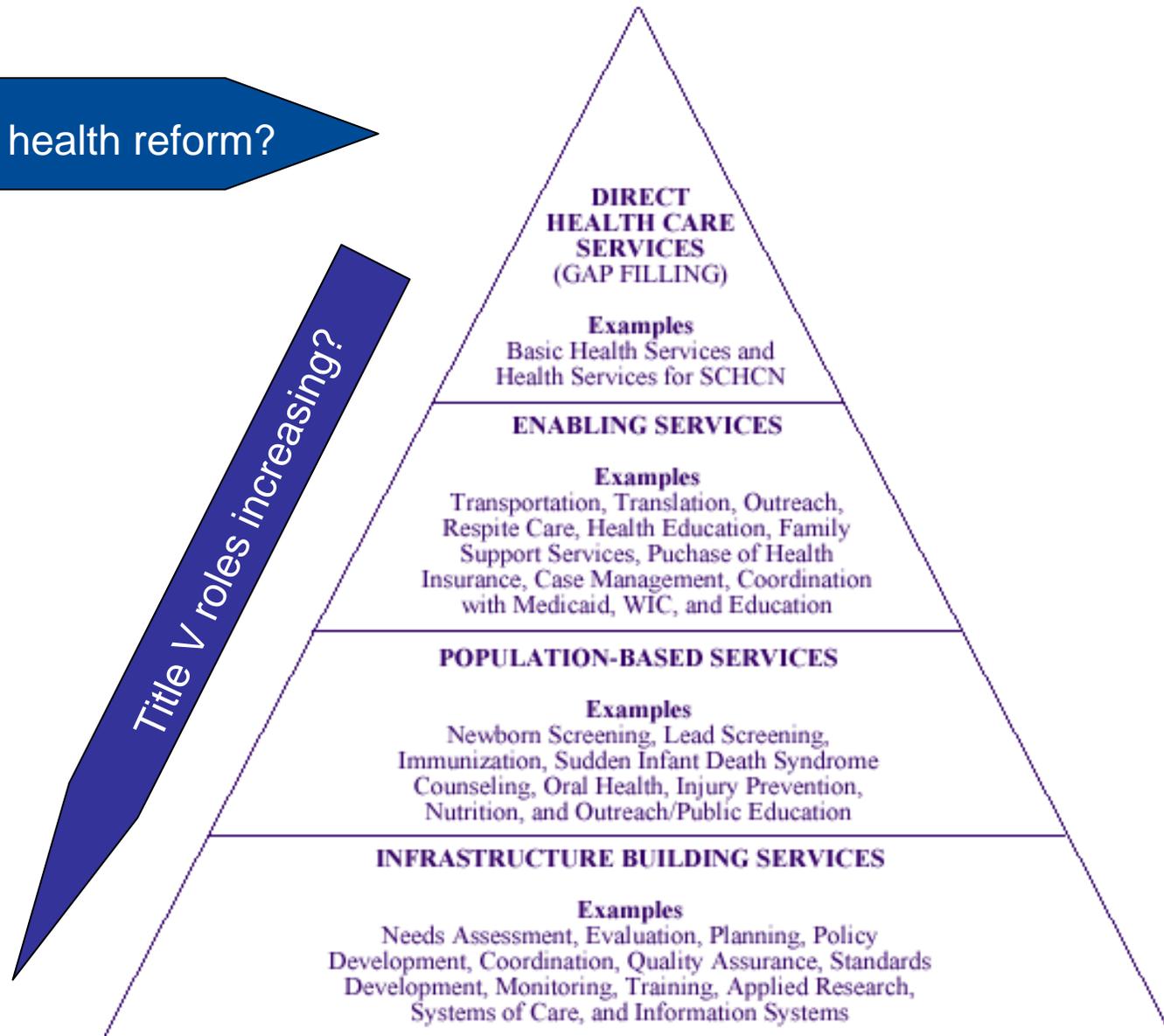
What would it mean in terms of MCH?

Paying for Health Reform

- Example (Finance): A combination of savings from Medicare and Medicaid and new taxes and fees. The largest source of new revenue will come from an excise tax on high cost insurance.
- Example (HR 3200) Approximately half of the cost is financed through savings from Medicare and Medicaid. Much of the remaining costs are financed through a surcharge imposed on families with incomes above \$350,000 and individuals with incomes above \$280,000.

**CORE PUBLIC HEALTH SERVICES
DELIVERED BY MCH AGENCIES**

Impact of health reform?



Different Title V roles needed in possible new health system

- **What might be the new direct, enabling, population-based, and infrastructure needs?**
 - More focus on enrolling *families*
 - Shift CSHNC, and other children
 - More women covered for preconception and care across the life span
 - Different provider incentives, especially for primary care
 - New quality measurement approaches, especially for children and pregnant women
 - Greatly expanded safety net capacity
 - New health information technology
 - Larger public health investments
- **Where does Title V fit? What are new roles ?**