

Sustainable Funding for Community Prevention

Division of Community Health
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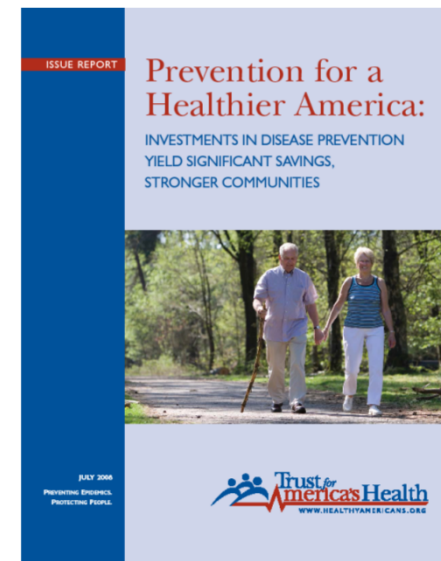
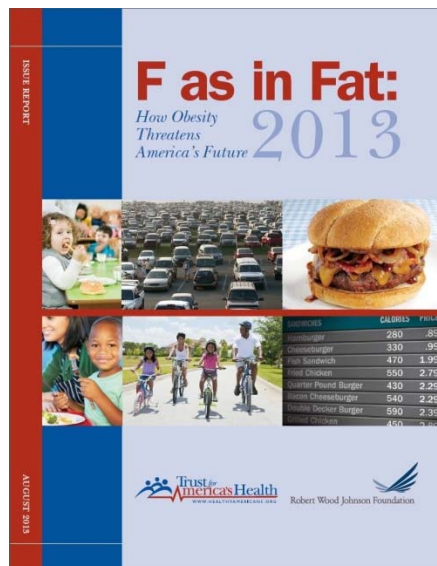


Overview

- Prevention opportunities in ACA
- Sustainability and community-based prevention
- Medicaid rule change opportunity

About TFAH: Who We Are

- Trust for America's Health (TFAH) is a non-profit, non-partisan organization dedicated to saving lives by protecting the health of every community and working to make disease prevention a national priority.



ACA & The Road to Health

The Affordable Care Act recognizes that health means more than the absence of disease and that every part of our life must be focused on creating health

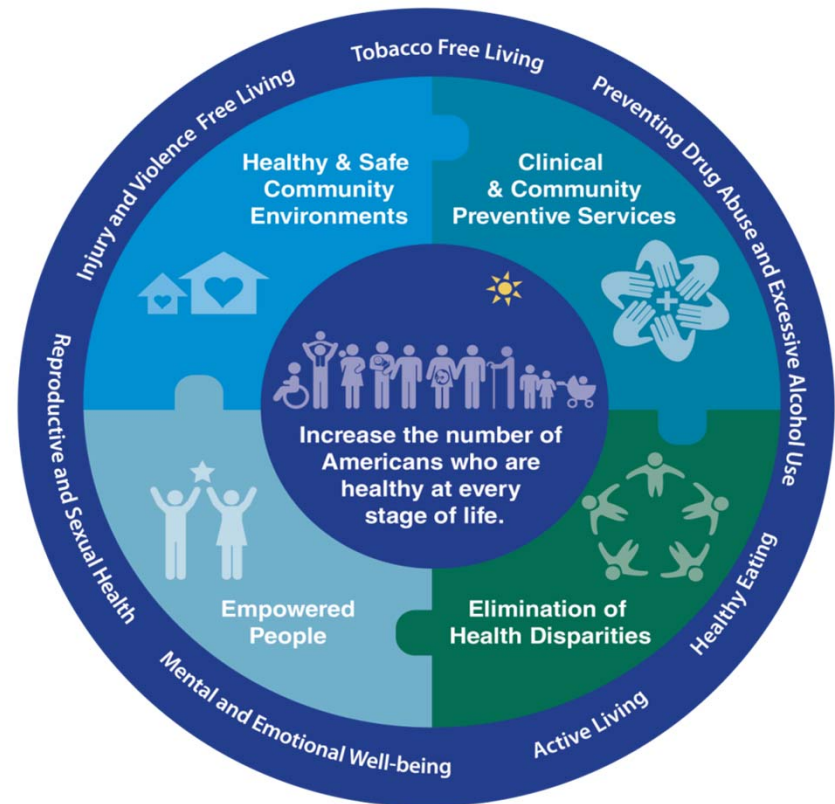
- Clinical preventive services like screenings and counseling
- Each of us as individuals has a responsibility to be as healthy as we can be
- All parts of society must work together to make the healthy choices the easy choice

Prevention in ACA

- Insurance matters
- Coverage for preventive services
 - Every new health plan, since 2010, must include coverage of evidence-based, effective preventive services, such as screenings for type 2 diabetes, immunizations and mammograms, without co-pays.
 - Since January 1, 2011, seniors on Medicare receive many preventive services, with no co-payments—such as annual wellness visits, cervical cancer screening, diabetes screening, mammograms and immunizations for the flu and pneumonia.

National Prevention Strategy

- Four strategic directions
 - Healthy and Safe Community Environment
 - Clinical and Community Preventive Services
 - Empowered People
 - Elimination of Health Disparities



Recent Community Prevention Investments

- ❑ Communities Putting Prevention to Work (CPPW)
- ❑ Community Transformation Grants (CTG)
- ❑ Tobacco Prevention, Quitlines, National Media Campaign
- ❑ Coordinated core chronic disease funding for state health departments
- ❑ And...

Prevention Investments 2014

- Community Prevention grants
- Preventive Health grants to states
- Immunizations
- Diabetes Prevention
- Tobacco Prevention
- Cancer Prevention
- Heart Disease and Stroke Prevention
- Nutrition, Physical Activity, and Obesity grants to states
- Racial and Ethnic Approaches to Health (REACH)
- Epidemiology and Lab Capacity grants
- And much more...

Community-based Prevention

- Future of this work to be determined by:
 - Success of current efforts
 - Letting the world know of those successes
 - Creating partnerships that go deeply into the transforming health system
 - Creating sustainable resources by leveraging new funding streams

Community-based Prevention

Return on Investment

- An investment of \$10 per person in proven community-based disease prevention programs could yield net savings of more than \$16 billion annually within five years, an ROI of \$5.6 for every \$1 invested.
- A 5% reduction in the obesity rate could yield more than \$600 billion in savings in health care over the next 20 years.
- What does your program show?

Medicaid Support for Community Prevention

- Recent Medicaid EHB rule change to allow reimbursement for non-licensed providers
- Waivers and other CMS authorities to pay for additional covered services, or to pay additional entities, or for services in non-traditional setting
 - MA Pediatric Asthma 1115 Waiver
 - Diabetes Prevention Program
 - TX 1115 Waiver
- Coverage of tobacco quit lines in Medicaid

Medicaid Payment for Non-licensed Providers

- Centers for Medicare and Medicaid Services (CMS) clarified the statute in the recently issued Essential Health Benefits rule.
- Medicaid will now reimburse for preventive services recommended by licensed providers and provided, at state option, by non-licensed providers.

What is the Opportunity for Community Prevention?

A broader array of health professionals could be reimbursed for providing preventive services to Medicaid beneficiaries

- ❑ Health Educators
- ❑ Community health workers
- ❑ Care Coordinators
- ❑ Home Visiting Staff
- ❑ Lactation Consultation
- ❑ Developmental screening
- ❑ YMCA Diabetes Prevention Program
- ❑ Parenting Education

What are the Steps?

- Define what you want to do.
- Gather the required information.
- Meet with your state Medicaid agency to request that they submit a **State Plan Amendment** (SPA).
- Meet with local Managed Care Organizations (MCOs) to explore workforce innovation partnerships.

Describe the Issue and Solution

- Explain the health issue you are addressing.
- Describe the intervention.
- Provide the evidence of effectiveness and, if available, return on investment.

Define the Change

- What provider(s) do you propose?
- What services will they provide?
- Which Medicaid beneficiaries would be eligible for the services?

Specify Provider Qualifications

- Educational background
- Training
- Experience
- Credentialing or registering
- Employment model

Explain Service Delivery

- What preventive services
- Evidence of effectiveness
- Referral process (from licensed provider)
- Unit of service
- Service limitations if any
- Location limits or requirements if any
- Reimbursement level

Partner and Persevere

- ❑ Collaborate with state Medicaid agency to submit state plan, implement, monitor, improve.
- ❑ Negotiate with Managed Care Organizations to implement, monitor, improve.
- ❑ Partner with health care delivery system to implement and measure outcomes/savings.
- ❑ Work with public health agency to implement and measure outcomes.

For More Information

www.healthyamericans.org

Questions? adebiasi@tfah.org

Thank you!