

# A Population Health Approach in a Time of Change

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# National Trends in Health System Transformation

- Increased access to health insurance
- Value-based payment model
- Innovative care models
- Demographic changes
- Evolving role of public health



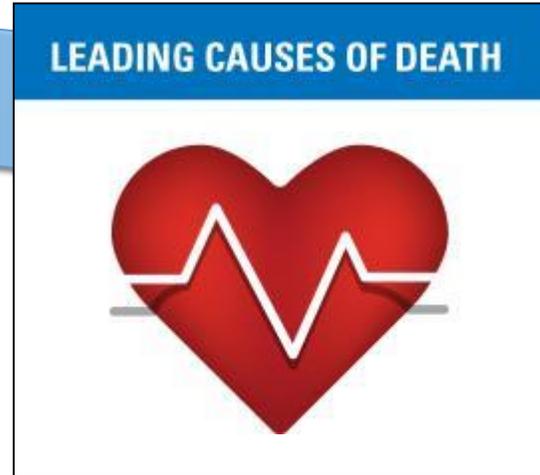
# To Assist in Adapting to Current and Future Needs

- **The Vision:** Public Health 3.0
  - Historical context: what's changed & what those changes mean
- **The Characteristics:** Chief Health Strategist
  - What are the key characteristics of a 3.0 public health agency (e.g. partnering with health care & promoting healthy community conditions)
- **The Skills & Needed Resources:** Foundational Capabilities
  - Essential functions and the resources needed by every department
- **The Tools:** Three Buckets of Prevention
  - A framework to guide action with the health care sector & to promote healthy community-wide policies
  - 6/18 and HI – 5; tools to act on the 3 buckets framework



# CDC Strategic Directions

Improve health security at home and around the world



Better prevent the leading causes of illness, injury, disability, and death



Strengthen public health/health care collaboration

# Questions We Have Heard

I work for a governor who only wants health initiatives that will lead to positive results before she runs for re-election? Got any of those?

How do I make the business case for my “community benefits” health proposals to a hospital board?

I lead a small health department. How do I address the social determinants of health?



# The 3 Buckets of Prevention

## Traditional Clinical Prevention



## Innovative Clinical Prevention



## Community-Wide Prevention



Health Care

Public Health



# SIX WAYS TO SPEND SMARTER FOR HEALTHIER PEOPLE



**REDUCE  
TOBACCO USE**



**CONTROL  
BLOOD PRESSURE**



**PREVENT HEALTHCARE-  
ASSOCIATED INFECTIONS (HAI)**



**CONTROL ASTHMA**



**PREVENT UNINTENDED  
PREGNANCY**



**CONTROL AND  
PREVENT DIABETES**

# Reduce Tobacco Use: *Proposed Payer Interventions*

- Expand access to tobacco cessation treatments (e.g., individual, group, and telephone counseling and all FDA-approved cessation medications)
- Remove barriers that impede access to covered cessation treatments (e.g., cost sharing and prior authorization)
- Promote utilization of covered benefits by tobacco users



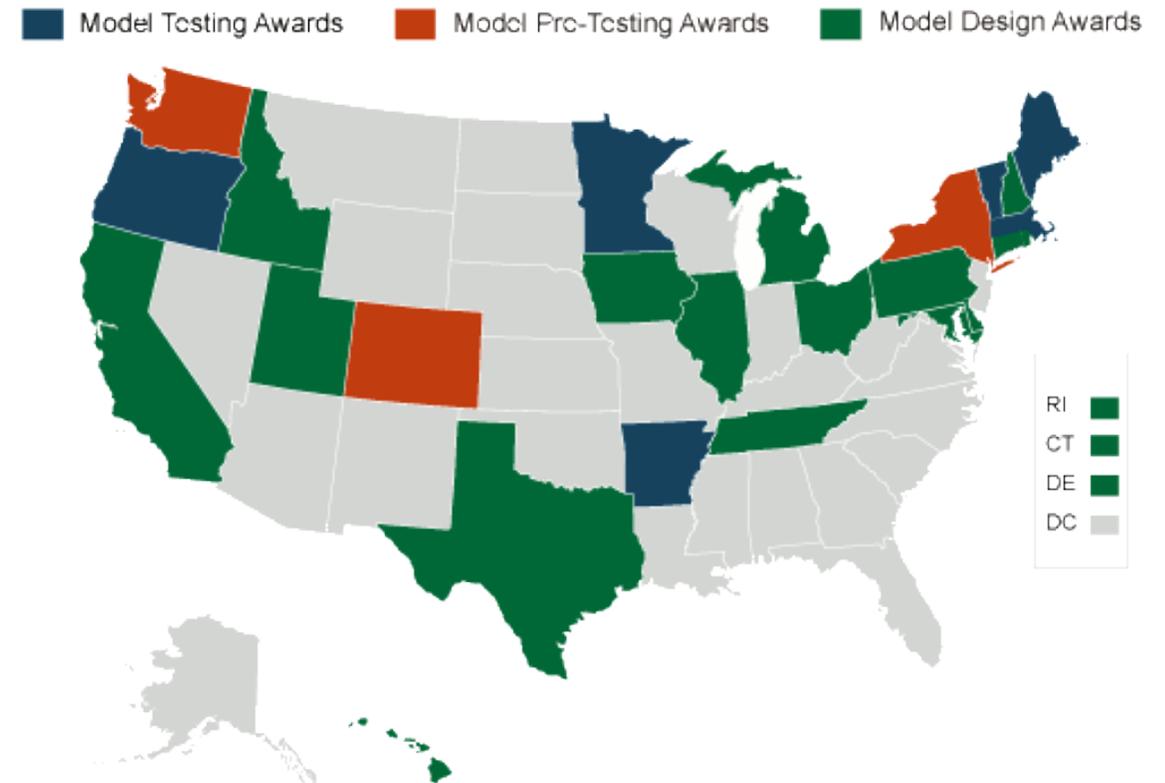
# Control and Prevent Diabetes: *Proposed Payer Interventions*

- Expand access to the National Diabetes Prevention Program (the National DPP), a lifestyle change program for preventing type 2 diabetes.
- Promote screening for abnormal blood glucose in those who are overweight or obese as part of a cardiovascular risk assessment.



# State Innovation Model (SIM) is a Game Changer

- More than \$1 billion to get to 80% value-based – 34 states funded
- Public and private payers working to align measures and incentives
- Population health must be included
- Linked public health-primary care system innovation in several states — **public health is needed at the “table”**



Source: Centers for Medicare & Medicaid Services

# Ohio's State Innovation Model (SIM) Progress to Date

## Comprehensive Primary Care

- **Care model and payment model** design in place for model to reach 80 percent of Ohio's population
- **Statewide provider survey** gauged readiness
- **Infrastructure plan** in place for attribution, enrollment, scoring, reporting, and payment
- **Ohio CPC performance report** designed with provider/payer input
- **All payers applied for Ohio to be a statewide Medicare CPC+ region**

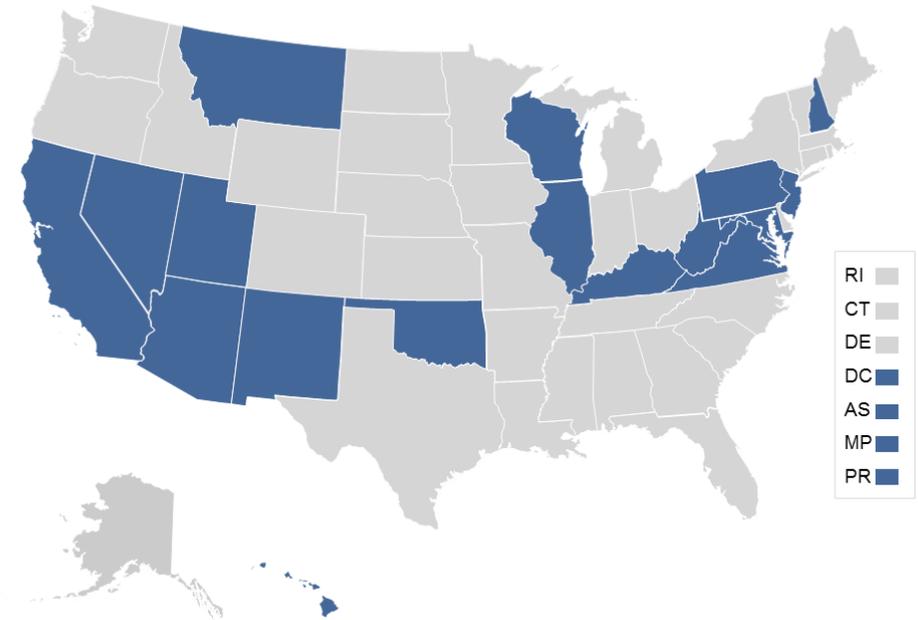
## Episode-Based Payment

- **13 episodes** designed across seven clinical advisory groups (CAGs)
- **30 additional episodes** under development to launch in 2017
- **Nine payers** released performance reports on first wave of 6 episodes
- State set **thresholds for performance** payments across Medicaid FFS and MCPs on first wave of episodes
- State released **performance reports** aggregated across Medicaid FFS and MCPs on second wave of 7 episodes
- **Executive Order** and rule require Medicaid provider participation



# How CDC Supports CMS

- Intra-agency agreement to improve state-level public health-health care collaboration
- Technical assistance to SIM states on population health issues, including the provision of tools, resources, and linkages with subject matter experts across CDC
- Review CMS' Request for Information on State Innovation Model Concepts with State Health Officers
- Provide information to support rulemaking and implementation of Medicare certification of the Diabetes Prevention Program



Source: Centers for Medicare & Medicaid Services



- School-Based Programs to Increase Physical Activity
- School-Based Violence Prevention
- Safe Routes to School
- Motorcycle Injury Prevention
- Tobacco Control Interventions
- Access to Clean Syringes
- Pricing Strategies for Alcohol Products
- Multi-Component Worksite Obesity Prevention

Counseling and Education

Clinical Interventions

Long Lasting Protective Interventions



## Changing the Context

Making the healthy choice the easy choice

- Early Childhood Education
- Clean Diesel Bus Fleets
- Public Transportation System
- Home Improvement Loans and Grants
- Earned Income Tax Credits
- Water Fluoridation



## Social Determinants of Health

# HI-5



# HEALTH **IMPACT** IN 5 YEARS



# 14 Evidence-Based, Community-Wide Interventions

## *Address the Social Determinants of Health*

- Early Childhood Education
- Clean Diesel Bus Fleets
- Public Transportation System Introduction or Expansion
- Home Improvement Loans and Grants
- Earned Income Tax Credits
- Water Fluoridation

## *Change the Context: Making Healthy Choice the Easy Choice*

- School-Based Programs to Increase Physical Activity
- School-Based Violence Prevention
- Safe Routes to School (SRTS)
- Motorcycle Injury Prevention
- Tobacco Control Interventions
- Access to Clean Syringes
- Pricing Strategies for Alcohol Products
- Multi-Component Worksite Obesity Prevention





## Helping people quit tobacco.



### Description

- Tobacco price increases
- High-impact anti-tobacco mass media campaigns
- Comprehensive smoke-free policies

### Health Impact

- Reduced smoking initiation and use among adults and youths
- Increased quitting among adults/youth
- Reduced hospitalizations (asthma and heart attacks)

### Economic Impact

- Smoke-free indoor policies reduce hospital admissions by 5-20%
- Mass-media campaigns have benefit-to-cost ratio up to 74:1
- Raising prices of tobacco products by 20% generates healthcare savings up to \$90 per person per year



## Transitioning bus fleets. Cleaner air for a healthier community.



### Description

- Retrofitting or modifying older diesel engines to run more cleanly
- Implemented by state or local voluntary incentive or mandatory regulation
- Federal funding opportunities exist

### Health Impact

- Reduces air pollution & diesel emissions
- *Adults:* Decrease risk of mortality, heart attacks, and hospitalizations for heart disease

### Health Impact (continued)

- *Schoolchildren:* Improved lung function and reduced hospitalizations due to pneumonia

### Economic Impact

- Benefit-to-cost ratio of \$5:1 up to \$21:1
- Estimated lifetime value of health benefits resulting from Diesel Emission Reduction Act grants (2009-2013) totaled \$11 billion dollars

## A few caveats

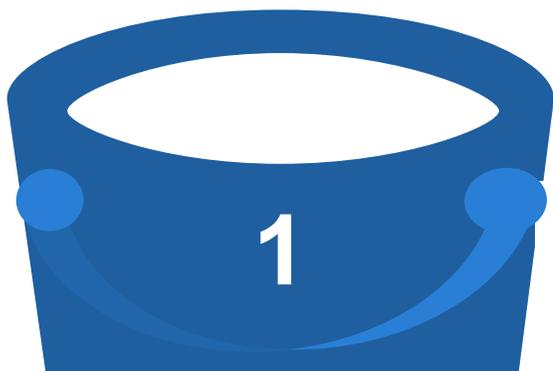
- CDC's roles: summarizing evidence & tools
- There are many other worthwhile efforts
  - Some take longer to work
  - Some don't save money
  - Some haven't been evaluated



Important  
Information

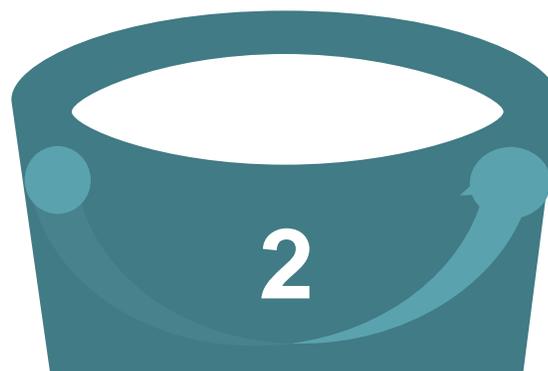
# Tobacco Cessation in All Three Buckets

## Traditional Clinical Prevention



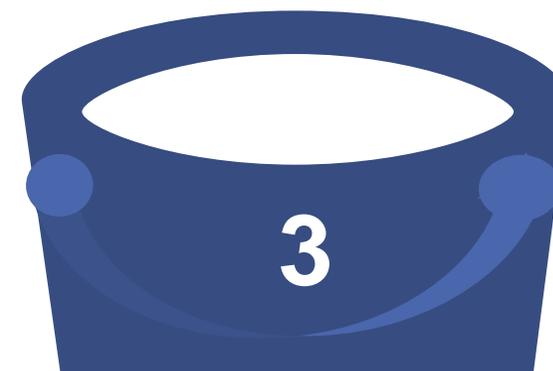
- Expand access to evidence-based tobacco cessation treatments
- Remove barriers that impede access to covered cessation treatments

## Innovative Clinical Prevention



- Promote increased utilization of covered treatment benefits by tobacco users

## Community-Wide Prevention



- Tobacco price increases
- High-impact anti-tobacco mass media campaigns
- Comprehensive smoke-free policies



Health Care

Public Health



# Addressing the Social Determinants of Health Community-Wide Health Improvement Initiatives



[www.cdc.gov/socialdeterminants](http://www.cdc.gov/socialdeterminants)



[www.cdc.gov/CHInav](http://www.cdc.gov/CHInav)



## What Does This Mean In Practice. . .

### *Meet Fran Edwards*

- Newly insured
- At MD for first physical in 5 years
- 55 years old, married, smokes, overweight, little exercise
- Asthmatic, high blood pressure
- Stopped taking medications in past due to cost



# Insurance and Quality Care Help . . . **But the Following Also Contribute to Her Health**

- **Income**—Low-income family of 5
- **Barriers to fitness**—Rising crime rate, few parks, no nearby supermarket
- **Under stress**—Child with behavioral health concerns, worried about money
- **Sub-par housing**—Mold and ventilation problems



# How Can A Three-Bucket Approach Help Ms. Edwards?

**Bucket 1:** \*No co-pay for meds

\*Tobacco cessation meds & counseling

\*Screening for abnormal blood glucose

**Bucket 2:** \*Home visits to reduce asthma

\*Team-based approach to HTN control

\*Diabetes Prevention Program

**Bucket 3:** \*Statewide tobacco approaches

\*Workplace obesity program

\*Home improvement loans & grants



# On a Policy Level

I was able to give assurances to my governor that the 6/18 and HI-5 interventions would produce positive results within the next few years.

We shared the CDC-endorsed “business case” packets with our local hospital and met with the CEO to discuss the use of community benefits to support these efforts.

My health department has begun partnering with our local schools and transportation departments to address the HI-5 social determinants interventions.





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Protecting People.™

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