Implications of Healthcare Reform for Local Communities

What can local communities be doing?

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Session Agenda

- Types of local response
- PPACA Provisions
- Local responses to Health Care Reform Issues
- Why rural areas are important in Health Care Reform
PPACA Provisions

- Health Care Coverage Provisions
- Health System Innovation Provisions
- Public Health Provisions
- Health Workforce Provisions
- Health Safety Net Provisions
Types of Local Response

- **Practice Response**: potential steps to be taken by private practices in the community.
- **Safety Net Response**: potential steps to be taken by community health centers, rural health clinics, public health offices and other public and nonprofit outpatient agencies and programs.
- **Facility Response**: potential steps to be taken by local hospital or other key health facilities.
- **Community Response**: potential steps to be taken by local leadership, civic and business groups.
Issue: Expansion of Coverage

• **Community/Safety Net Response**
  • Provide information and links to statewide resources for uninsured local residents. [*]
  • Provide information on *plans offered*, *subsidies offered*, and *mandates/incentives*. [*]
  • Provide advice and counseling to uninsured and to local employers. [*]

• **Practice/Safety Net/Facility Response**
  • Negotiate participation agreements with all plans covering local population. [*]
Issue: Shortage of Primary Care Providers

- **Practice/Safety Net Response**
  - Re-engineer the primary care encounter.
  - Increase use of non-physician providers.
  - Increase use of Federal/State incentive program. [*]
  - Provide retention incentives.
  - Provide compensation guarantees.
  - Conduct periodic compensation reviews/adjustments.
  - Serve as a field training site for primary care providers. [*]

- **Facility Response**
  - Provide hospitalist support to primary care practices.
  - Provide financial support to primary care practices. Note Stark issues.

- **Community Response**
  - Conduct community-wide recruitment.
Issue: Increased Professional Education Indebtedness

- **Practice/Safety Net/Facility Response**
  - Participate in public loan repayment programs. [*]
  - Establish separate loan repayment benefit system.

- **Community Response**
  - Establish Community Loan Repayment Program. [*]
**Issue: Outcome Oriented Care**

- **Practice/Safety Net/Facility Response**
  - Establish primary care home model and participate in demonstration project. [*]
  - Negotiate participation in regional accountable care organization demonstration project. [*]
  - Negotiate establishment of bundled care networks. [*]

- **Community Response**
  - Develop coordinated chronic condition prevention and care management programs for key conditions [diabetes, asthma, hypertension]. [*]
Strengths of Rural Projects in Health Care Reform

- **Basic Message:**
  - The relatively *small scale of systems* in rural areas make them a *microcosm* of what might be accomplished in larger communities and an excellent *test bed for health system innovation*.

- **Low Overall Project Cost – High Cost-Effectiveness:**
  - The relatively small cost of health projects in rural communities can attractive investments for Federal funders. The relatively large impact in the target community makes cost-effective investments.

- **Health System-Wide Interventions:**
  - With a relatively small number of healthcare providers, health projects can be system-wide.
Rural Projects and Health Care Reform [con’t]

- **Population-Wide Intervention:**
  - The relatively small size of the target area permits the health project to serve a relatively high percentage of the target population.

- **Population-Wide Impact:**
  - With population-wide intervention comes the ability to assess the population-wide impact of the health system innovation.

- **Model for System-Wide Change in Larger Communities:**
  - Small health system improvements require the same mechanisms as large ones. Rural communities are excellent places to prototype health systems improvements.