



Alaska Health Care Commission & the Alaska Statewide Health Plan

**DHSS & Commission State Health Plan
Stakeholder Meeting**

Deborah Erickson, Executive Director

August 9, 2013



Statutory Authority

- ▶ “ The purpose of the commission is to provide recommendations for and foster the development of a statewide plan to address the quality, accessibility and availability of health care for all citizens of the state.” AS 18.09.010
 - Temporary body 2009; Statute enacted 2010
 - Advisory in nature
 - 14 members, appointed by Governor except for 2 leg.s
 - Policy recommendations due annually (January 15) to Governor and Legislature



Membership (seats designated in statute)

▶ Voting Members

- Ward Hurlburt, MD, MPH: DHSS Chief Medical Officer (designated Chair)
- C. Keith Campbell: Health care consumer
- Valerie Davidson: Tribal health community
- Jeffrey Davis: Health insurance industry
- Emily Ennis: Alaska Mental Health Trust Authority
- Col. Thomas Harrell, MD: U.S. Dept. of Veterans' Affairs health care
- Allen Hippler: Statewide chamber of commerce
- Patrick Branco: Alaska State Hospital & Nursing Home Association
- Lawrence Stinson, MD: Health care provider
- Robert Urata, MD: Primary care physician
- David Morgan: Community health centers

▶ 3 Ex-Officio Members

- Wes Keller: House of Representatives
- John Coghill: Senate
- Jim Puckett: Office of the Governor



Statutory Alignment



- ▶ “ The commission shall serve as **the state health planning and coordinating body.**”

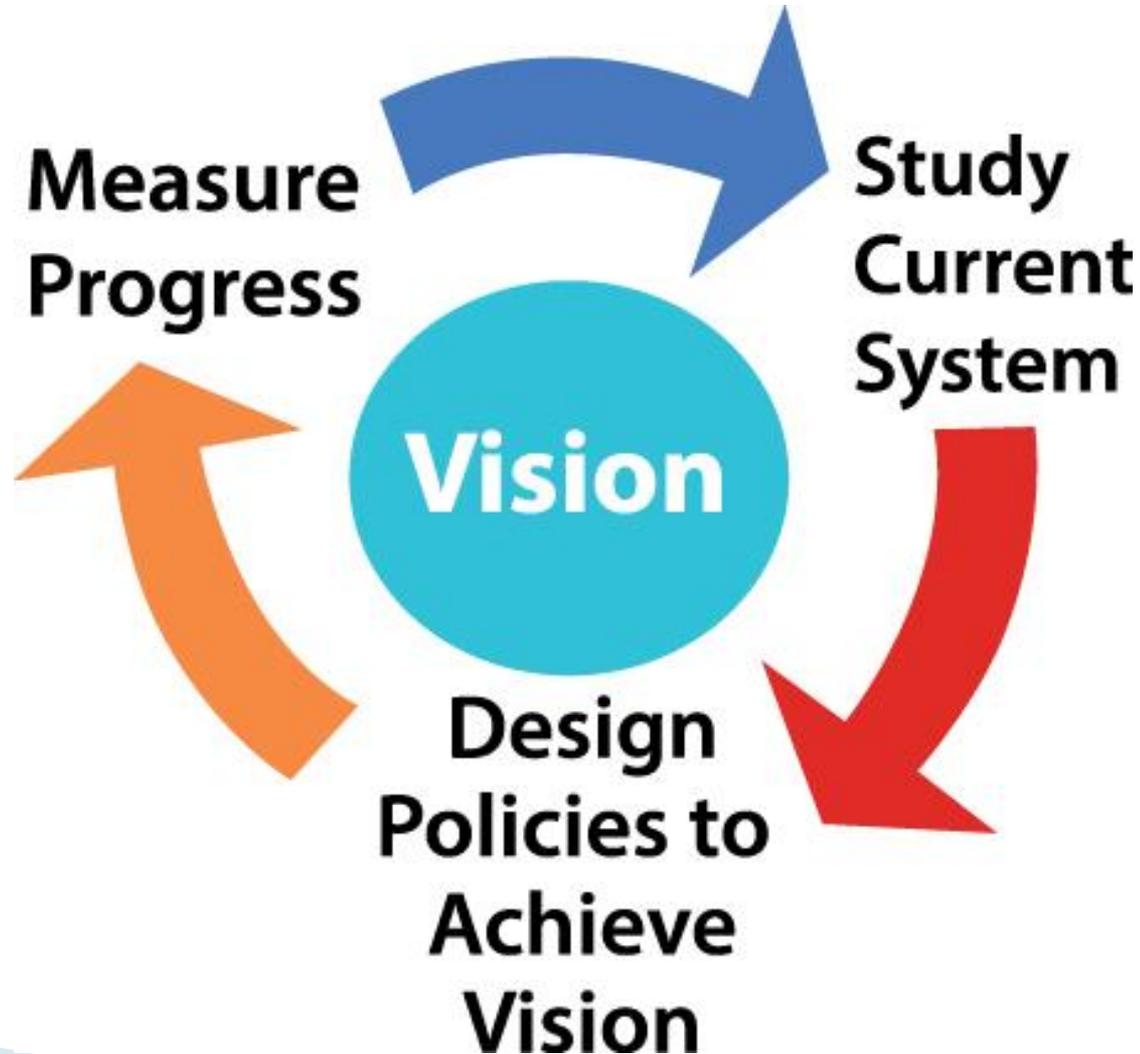
AS 18.09.070(a)

- ▶ “ In performing its duties under this chapter, AS 18.09, and AS 18.15.355–18.15.395, the department (*DHSS*) may develop, adopt, and implement a **statewide health plan** under AS 18.09 based on recommendations of the Alaska Health Care Commission established in AS 18.09.010.”

AS 18.05.010(b)(5)(A)



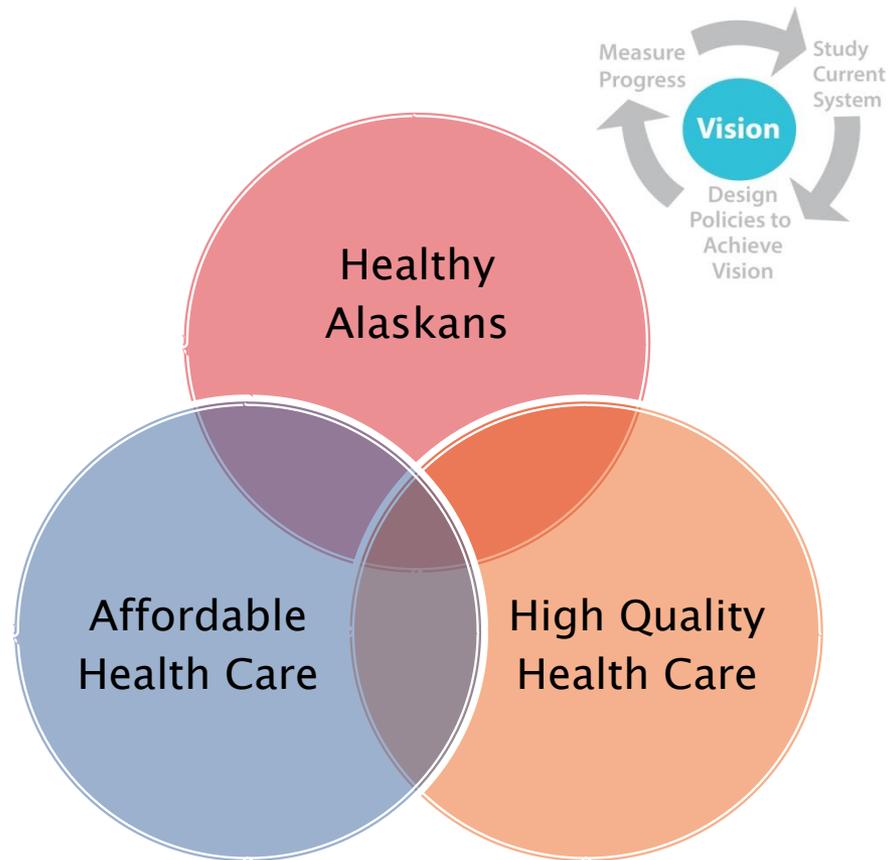
Planning Process





Vision

By 2025 Alaskans will be the healthiest people in the nation and have access to the highest quality most affordable health care.

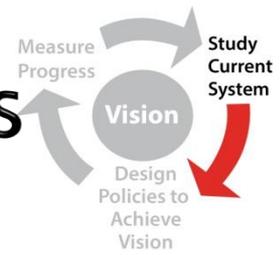


We will know we attained this vision when, compared to the other 49 states, Alaskans have:

1. The highest life expectancy (currently 29th)
2. The highest percentage population with access to primary care (27th)
3. The lowest per capita health care spending (49th)



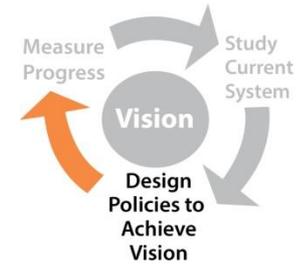
Commission Studies of Alaska's Current Health Care System



Study	Consultants	Annual Report
Description of health care system structure & financing	AK DHSS Staff	2009
Discussion of current health care system challenges	AK DHSS Staff	2009
Overview of Affordable Care Act	AK DHSS Staff	2010
Impact of Affordable Care Act on Alaska	ISER/MAFA	2010
Economic analysis of health care spending and cost drivers	ISER/MAFA	2011
Actuarial analysis of physician, hospital, and durable medical equipment prices compared to other states and between payers; cost drivers of price differentials (3 reports)	Milliman, Inc.	2011
Actuarial analysis of prescription drug prices compared to other states and between payers	Milliman, Inc.	2012
Impact of malpractice reforms enacted to-date	Expert Witnesses	2012
Government regulation of the health care industry	AK DHSS Staff	2012
Business use case analysis of an All-Payer Claims Database	Freedman Healthcare	2013



Core Strategies



- I. Ensure the best available evidence is used for making decisions
- II. Increase price and quality transparency
- III. Pay for value
- IV. Engage employers to improve health plans and employee wellness
- V. Enhance quality and efficiency of care on the front-end
- VI. Increase dignity and quality of care for seriously and terminally ill patients
- VII. Focus on prevention
- VIII. Build the foundation of a sustainable health care system



I. Ensure the best available evidence is used for making decisions

- ▶ Encourage, support and coordinate health care program application of evidence-based medicine principles to health benefit design and provider payment



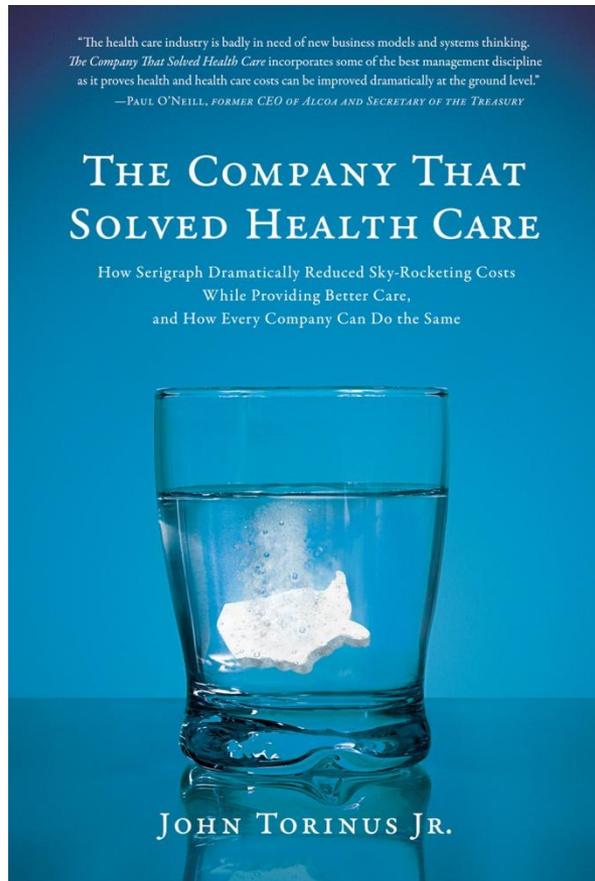


III. Pay for Value

- ▶ Redesign payment structures to incentivize quality, efficiency and effectiveness; move away from fee for service payment
 - ▶ Take a phased approach; start with primary care payment enhancement
 - ▶ Develop health data and analytics needed for design and negotiation of payment reform initiatives
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- A photograph showing a silver stethoscope with a black chest piece and tubing, resting on a white surface. In the background, a pink piggy bank is visible, symbolizing the connection between healthcare and finance.
- ▶ Support collaboration between State agencies that purchase health care and private health care purchasers in multi-payer payment reform efforts



IV. Engage employers to improve health plans and employee wellness



- ▶ Investigate and support mechanisms for providing the public with information on price and quality of health care services
- ▶ Provide leadership for Alaskan employers
- ▶ Include essential elements of successful employee health management programs:
 - Price sensitivity
 - Price and quality transparency
 - Pro-active primary care
 - Healthy lifestyle support

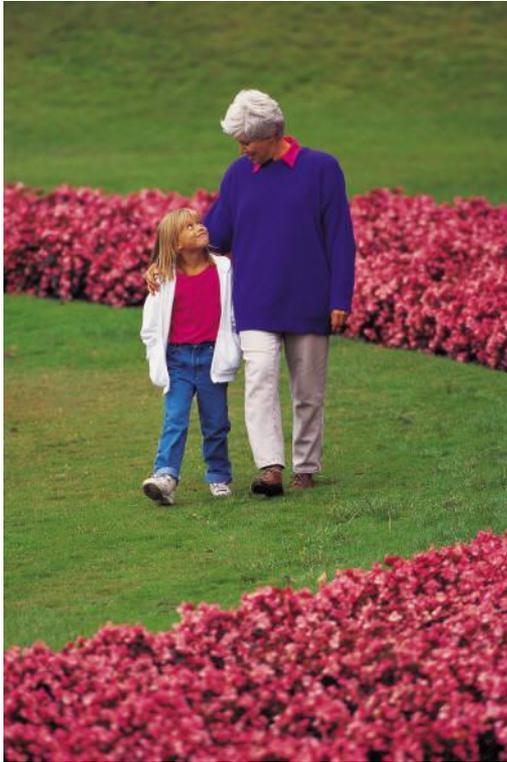


V. Enhance quality and efficiency of care on the front end

- ▶ Recognize value of primary care through appropriate reimbursement
 - ▶ Promote patient–clinician relationships
 - ▶ Support state health programs to implement patient–centric primary care models
- 
- A photograph showing a female healthcare professional with long brown hair tied back, wearing a blue patterned sweater, smiling as she examines a young boy's mouth. The boy is wearing a red sweater and is sitting on a white surface. The professional is holding a small white object, possibly a dental tool or a piece of paper, near the boy's mouth. The background shows a clinical setting with a wall-mounted device and some papers.
- ▶ Support high quality, comprehensive, coordinated trauma care system



VI. Increase dignity and quality of care for seriously and terminally ill patients



- ▶ Support communication and education regarding end-of-life planning and resources
- ▶ Require continuing education in palliative care and pain management for clinicians
- ▶ Encourage clinical training programs to address death and dying
- ▶ Evolve Comfort One program to include POLST (Physician Orders for Life Sustaining Treatment)
- ▶ Create electronic registry for directives
- ▶ Pilot:
 - Tele-palliative care
 - Payment Structures



VII. Focus on Prevention

- ▶ Implement obesity prevention programs
- ▶ Insure adequate funding and support for immunization program
- ▶ Integrate behavioral health and primary care services



- ▶ Support screening for
 - History of adverse childhood events
 - Substance abuse
 - depression

Get out and Play. Every day.



*Raising healthy kids
in Alaska!*



VIII. Build the foundation of a sustainable health care system



Alaska Native Tribal Health Consortium Telemedicine Cart

- ▶ **Health Information Infrastructure**
 - Support Electronic Health Records & Health Information Exchange
 - Foster Telemedicine
 - Encourage Hospital Discharge Data
 - Study All-Payer Claims Data

- ▶ **Health Workforce**
 - Support workforce innovation and adaptation as care models evolve
 - Target public investment to primary care workforce development

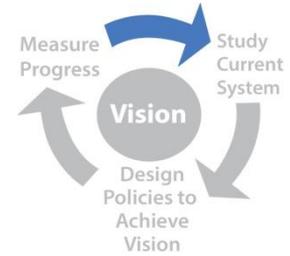


L to R: Danielle Boston, Daniel Kennedy, Sheena Nelson, and Christopher Evan.

1st Graduating Class of Alaska Dental Health Aide Therapists



Measuring Progress



I. Monitor Implementation of Recommendations

II. Measure Progress Towards Vision Attainment

We will know we attained this vision when, compared to the other 49 states, Alaskans have:

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Statewide Health Plan Process



- ▶ Step 1 (2010 – 2012)
 - Commission recommendations developed

- ▶ Step 2 (2013 – 2014)
 - Coordinate with DHSS, other state agencies and the community to:
 - Identify alignment with Commission recommendations
 - Document action steps for implementation of the plan

- ▶ Step 3 (2014 and beyond)
 - Monitor, evaluate and refresh plan



NEXT STEPS



- ▶ **Commission**
 - Review information gathered at this meeting
 - Continue coordination with State agencies, and document their action steps for implementation of the plan

- ▶ **Community Partners/Stakeholders**
 - Continue following and contributing information and ideas to the Commission

- ▶ **DHSS Leadership Team**
 - Review information gathered at this meeting
 - Identify areas of alignment between the Commission's recommendations and agency plans



Thank You!



NEXT COMMISSION MEETING:
August 21–22, 2013

For more information, visit the Commission's
website at:

<http://dhss.alaska.gov/ahcc/>

For periodic updates, join the Commission's
listserve via our website