Health Care Reform Lessons Learned Best Practices Leadership Meeting

April 18, 2013 James W. Hunt, Jr. Ph.D., President & CEO Massachusetts League of Community Health Centers



Who We Are



based and social services
•820,000 patients

The League's Mission is Our Guide

"To provide leadership to our membership in achieving their goals, and to promote accessible, quality, community responsive health care."

Who We Are

- 49 non-profit community-based health centers serve
 1 out of 8 (820,000) state residents through more than
 280 sites
- Provide a broad range of primary care, including dental, eye and mental health care and other community-based services
- All 49 have either purchased, implemented or are in the process of implementing EHRs; all are preparing for Meaningful Use
- Centers support 14,000 jobs and generate a total economic impact approaching \$1.5 billion dollars

Community Health Centers

- Manage care in ways which benefit both the patient and the system as a whole
- Exceed national quality care measures
- Demonstrate cost-effectiveness
- Create genuine access for high-need patients
- Embrace technology to measure patient care
- Serve as economic anchors and engines in lowincome communities
- Work to eliminate health disparities
- Represent the largest primary care network in MA

Leadership Styles





Playing the Leadership Game

Leaders...

- ... are excellent card players
- ...are chess players
- ...find their way to the table
- ... understand the timing of the trains
- ...understand strategy
- ...vision out, plan, ACT

We All Have Heroes

- Abraham Lincoln
- Mother Theresa
- Franklin Delano Roosevelt
- John F. Kennedy & Lyndon B. Johnson
- Rosa Parks
- Ronald Reagan
- Ted Kennedy
- Jack Geiger
- Barack Obama

Massachusetts Health Care Reform

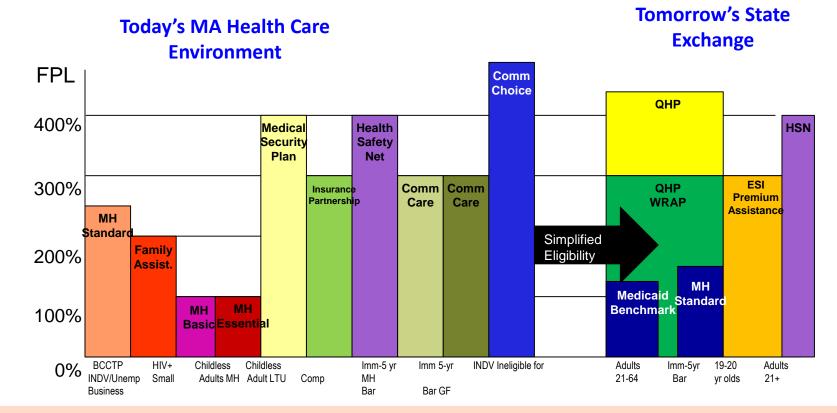
Four Iterations in 6 Years

- 2006: Chapter 58, aka RomneyCare
- 2008: Chapter 305, Workforce Focus
 (2010: ACA Enacted, aka ObamaCare)
- 2010: Chapter 288, Insurance Reform
- 2012: Chapter 224, *Payment Reform*

Current Priorities/Opportunities

- Continue knowledge development and planning around ACO/ICO and care management strategies
- Promote community-based teaching CHC residency and training programs to attract medical, dental and nursing graduates to primary care practice at MA health centers (UMass, DentaQuest, BOA/NHP LRP, Kraft)
- Seek resources from MA HCR laws to build capacity and infrastructure in CHCs including 2012 payment reform law
- Develop 2013-2014 state policy papers that focus on health centers' financial status and appropriate remedies. Launch strategy for health center fair payment and exchange implementation under the ACA

Eligibility Simplification



1. CommonwealthChoice moves QHP

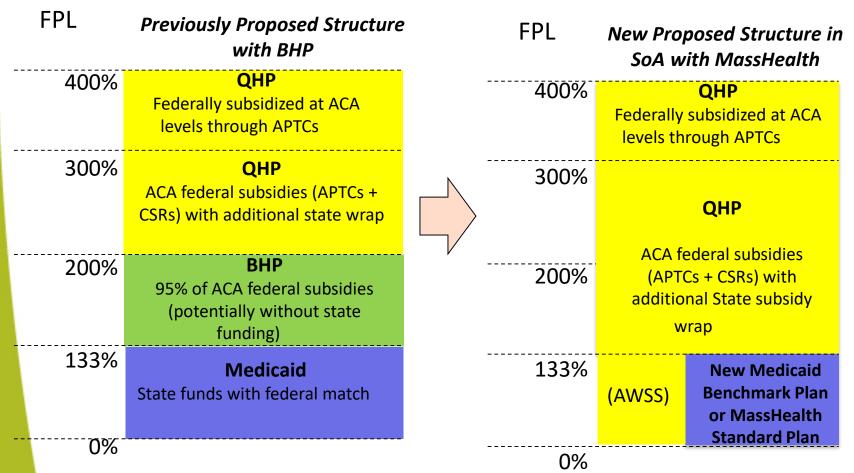
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- 2. CommonwealthCare moves to QHP Wrap or Medicaid based on FPL
- 3. CommCare Plan Type 1 moves to MassHealth or QHP Wrap of LPI/AWSS*
- 4. Medicaid Expands to 133% of FPL and will be administered by MassHealth. New Medicaid Benchmark Plan

Source: MassHealth Strategic Planning Document 2012-2014 (12/21/12)

State Exchange & Subsidized Coverage Options

Due to delays in federal guidance on the administration of a Basic Health Plan (BHP) for 2014, MassHealth and Health Connector developed an alternative structure.



Source: Connector Board Presentation 2/14/13

Strategic CHC Threats

- Global risk-based payments, incentive payments, ACO regulations
- ACA and CHC Fiscal Cliff
- Fair Medicaid payments recognizing social determinants of health
- Coverage and immigration policies
- Impact of for-profit entities, affiliations and mergers
- Media scrutiny of quality, executive salaries, compensation, and other issues
 - Aging workforce and need for succession planning

Lessons Learned

- Health centers are not "ALL SET"
- Growth Needs Investments
- ACA Growth: Medicaid Becoming More Attractive
- "If you're not at the table, you're on the menu"
- "Yesterday's adversary may be tomorrow's partner"

Questions?

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