


Healthy Virginia

Better health, Better health care

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 VIRGINIA HOSPITAL
& HEALTHCARE
ASSOCIATION
Advancing the health and well-being of Virginia


Health Challenges

Chronic illness is on the rise

- Half of Americans have one or more chronic illnesses
- 80% of spending is linked to chronic illness
- Much of this is avoidable
- Obesity has doubled; Diabetes is on the rise

Virginia trends on rise as well

- Growing gaps in coverage and access to care for regions and populations
- Aging population – by 2030 one in five Virginians will be over 65
- 24% of population obese, 17th highest state in terms of obesity-related costs
- 17th highest infant mortality rate

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Source: Centers for Disease Control and Prevention, VaPerforms.Org.

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Health Must Improve

Without concerted action, aging and chronic illness trends will overwhelm state and federal budgets

The imperatives are clear:

- Improve chronic care management
- Reverse the trend of avoidable illness
- Achieve healthier behaviors
- Support individuals' personal health goals
- Provide education and prevention
- Help all reach their highest potential for health

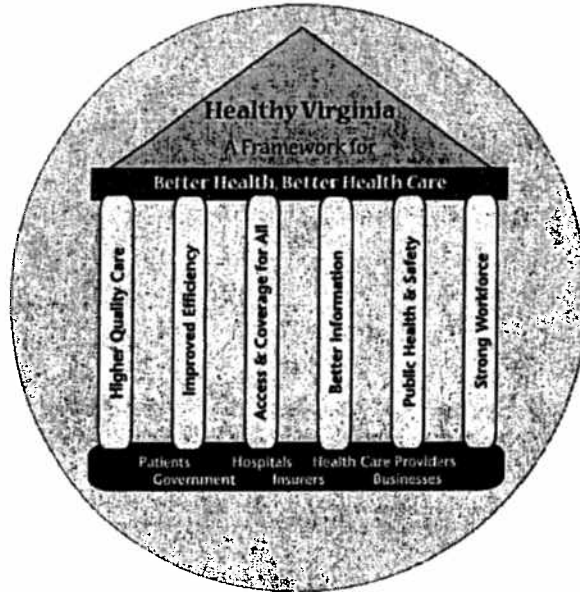
Action from everyone is required

Vision

Virginia's hospitals' and health systems' vision:

- Health care for all that is high-quality, high-value, compassionate and respectful
- Health care defined as all services needed to achieve optimum health
- Virginia as the healthiest state in the nation

Healthy Virginia Framework



Scorecard

Virginia's Health Scorecard	Virginia Rate/Score	Target
Higher Quality Care		
1. Percent of hospitalized patients receiving recommended care for heart attack, congestive heart failure and pneumonia	83.0	87.3
2. Percent of surgical patients receiving appropriate timing of antibiotics to prevent infections	84.0	82.8
3. Percent of patients with both a medical and dental preventive care visit in the past year	86.3	72.8
4. Percent of hospitalized nursing home patients with preventive exams	34.3	6.1
Improved Efficiency		
5. Medication hospital admissions for ambulatory care sensitive conditions per 100,000 beneficiaries	1,330	4,810
6. Hospital admissions for pediatric asthma per 100,000 children	187.3	81.3
7. Percent of nursing home residents with hospital readmission within three months	13.2	7.8
8. Total single premium per enrolled employee at private sector establishments that offer health insurance	\$3,808	\$3,216
Better Information		
9. Percent of adults (ages 25-64) uninsured	16.3	12.7
10. Percent of children (ages 0-17) uninsured	6.3	6.3
11. Percent of adults visited a doctor in the past two years	84.0	86.0
12. Employer-based insurance premium as a percent of median income	12.0	12.2
Public Health & Safety		
13. Percent of private medical practices that use an electronic health record with 4 to 6 components	17.0	20.0
Strong Workforce		
14. Mortality amenable to health care, deaths per 100,000 population	164.1	141.1
15. Infant mortality, deaths per 1,000 live births	7.4	6.8
16. Percent of adults age 50 and older receiving recommended screening and preventive care	48.1	48.8
17. Percent of adult diabetes receiving recommended preventive care	45.0	50.3
18. Percent of children ages 19-36 months receiving recommended doses of 5 key vaccines	88.3	88.3
19. Acute care full accreditation by the Emergency Management Accreditation Program	Fully accredited	Fully accredited
20. Number of newly licensed registered nurses per year	2,790	3,000

Mostly identified through Commonwealth Report

Governor's Health Reform Commission

First Tier Priorities

Access	•Working Uninsured option	\$20,000,000
	•Safety net infrastructure	\$10,000,000
Workforce	•Healthcare workforce data center	\$600,000
	•Physician retention – federal designations	\$176,623
	•Direct support loan repayment	\$50,000
	•Additional DMAS PCA grants	\$1,036,000
Prevention	•Prevention collaborative	\$8,000,000
Quality	•Medicaid P4P for nursing homes	\$8,000,000
Long Term Care	•Federal funds for \$ follows the person	(\$975,000)
	•Continue Acute / LTC integration initiative	\$0
Tier 1	Subtotal	\$46,888,623

Governor's Health Reform Commission

Second Tier Priorities

Access	•Medicaid expansion to 65% FPL for parents/caretaker adults (w/ dental)	\$39,700,000
	•FAMIS expansion from 200 to 300% FPL	\$2,000,000
Workforce	•Physician retention – loan repayment	\$2,500,000
	•Nurse supply – masters/PhD loans	\$600,000
Prevention	•Obesity - school meals; PE benchmarks	\$8,100,000
	•Tobacco - state employee incentives	\$30,000
	•Infant mortality- home visiting programs	\$6,899,000
Long Term Care	•Raise Medicaid personal care rates 10% for consumer-directed waiver program	\$2,600,000
Tier 2	Subtotal	\$62,429,000

Governor's Health Reform Commission Third Tier Priorities

Access	•Mcaid dental for currently enrolled parents/caretaker adults	\$3,200,000
	•Medicaid expansion from 66-100% FPL for parents/caretaker adults (w/ dental)	\$44,300,000 - \$87,800,000
	•FAMIS MOMS expansion to 200 % FPL	\$1,600,000
Transparency	•Single portal on health care costs and quality for consumers	\$200,000
Infant Mortality	•SIDS campaign	\$156,000
Long Term Care	•Continue no wrong door implementation statewide	\$2,000,000
	•Raise Mcaid personal care rates 10% for non-waiver services	\$10,800,000
Tier 3	Subtotal	\$62,256,000 - \$105,756,000

VHHA Board - Next Steps

- **Virginia Quality/Safety Initiative**
 - Top tier performance on hospital quality/safety in 2-3 years
 - likely initial priority *healthcare associated infections*
 - Potential broader partnership w/ other stakeholders
- **VHEN collaborative on administrative data exchange**
 - Health systems and health plans
 - Secretary of Technology and DMAS participating
 - Goal: Improve speed, accuracy and efficiency of administrative data transactions for all parties
- **Public/Private Partnership for Health and Healthcare Excellence**
 - Business/state leaders to measure, support and accelerate health and healthcare improvement in the Commonwealth
 - Statewide and regional initiatives
 - Governor asked to convene/kick-off

