

LOOKING FORWARD TO 2009



***COMMUNITY COLLABORATIVES IN AN ERA OF
HEALTH CARE REFORM***

Greetings From The Other West Coast!!!

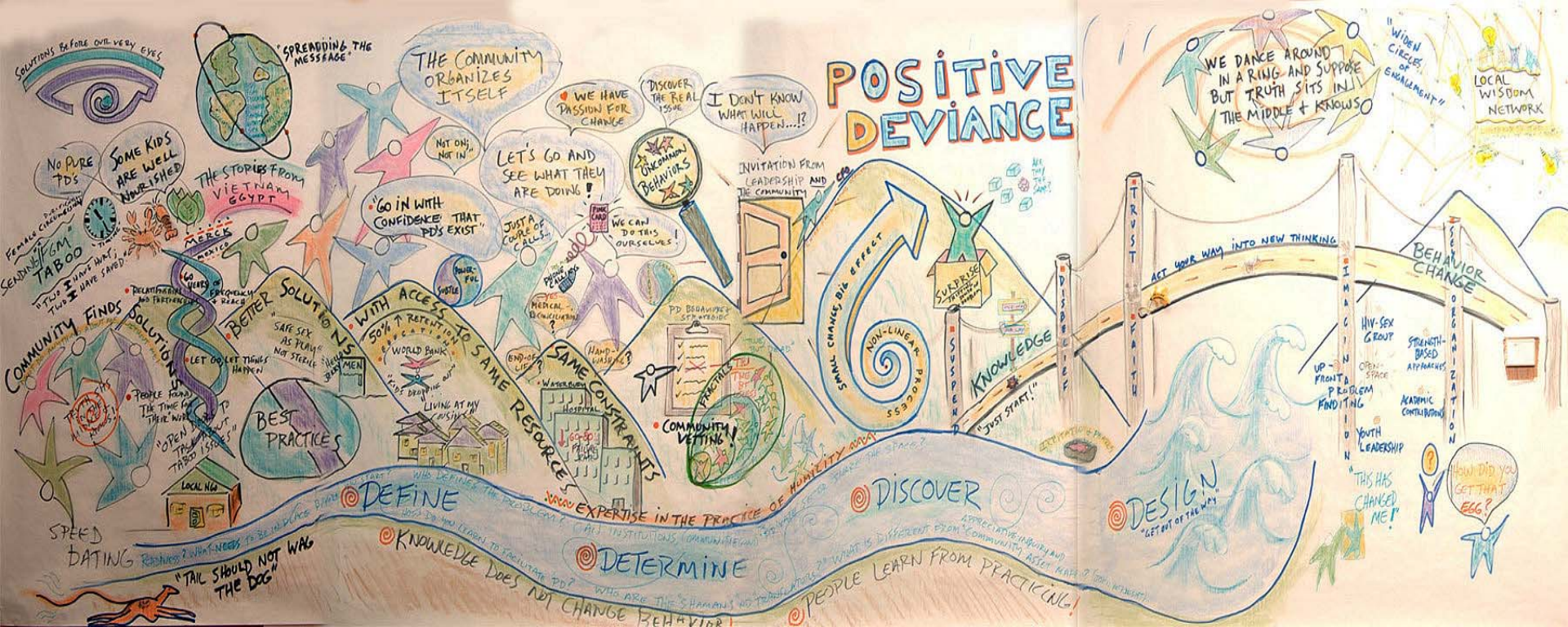
MUSKEGON → *

A satellite-style map of the Great Lakes basin in North America. The lakes are shown in dark blue, and the surrounding land is in shades of green and brown. A red dot is placed on the western shore of Lake Michigan, with a white arrow pointing to it from the text 'MUSKEGON → *'. The map also shows parts of the surrounding landmasses and cloud cover.

COMMUNITY HEALTH COLLABORATIVES - 2008 -



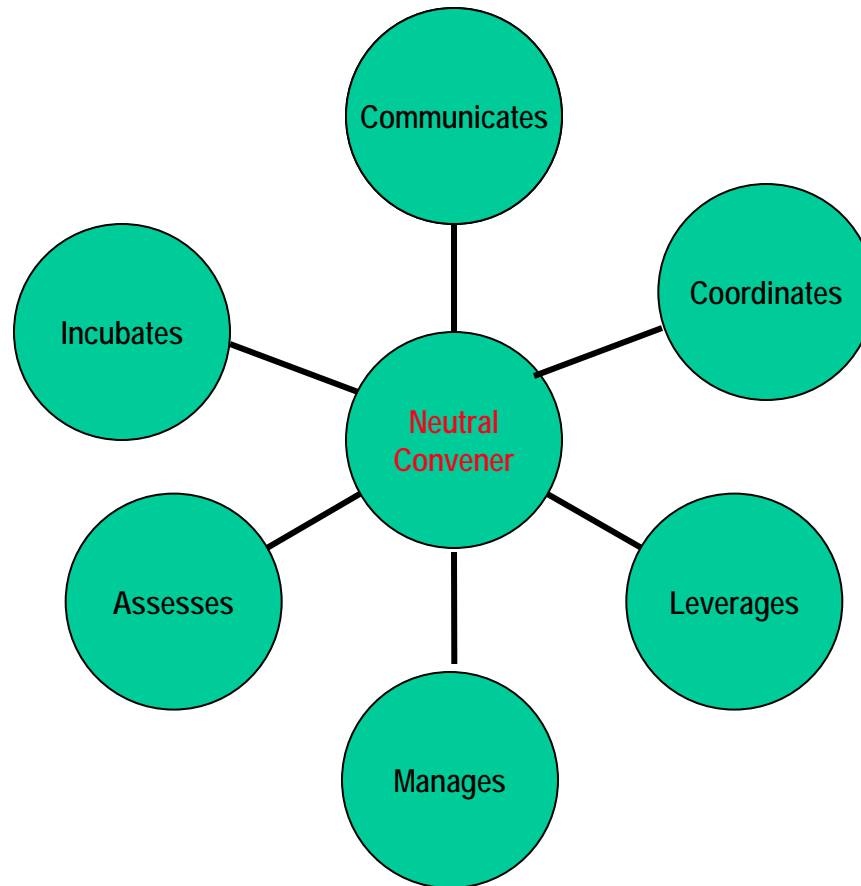
“Hell, there are no rules here – we’re trying to accomplish something.”



- There are communities who have achieved 100% access
- There are many more that are one deal away from success
- There are even more just starting their journey
- Significantly improve health outcomes
- Save billions of dollars
- Leverage an additional \$6 for every federal \$ invested

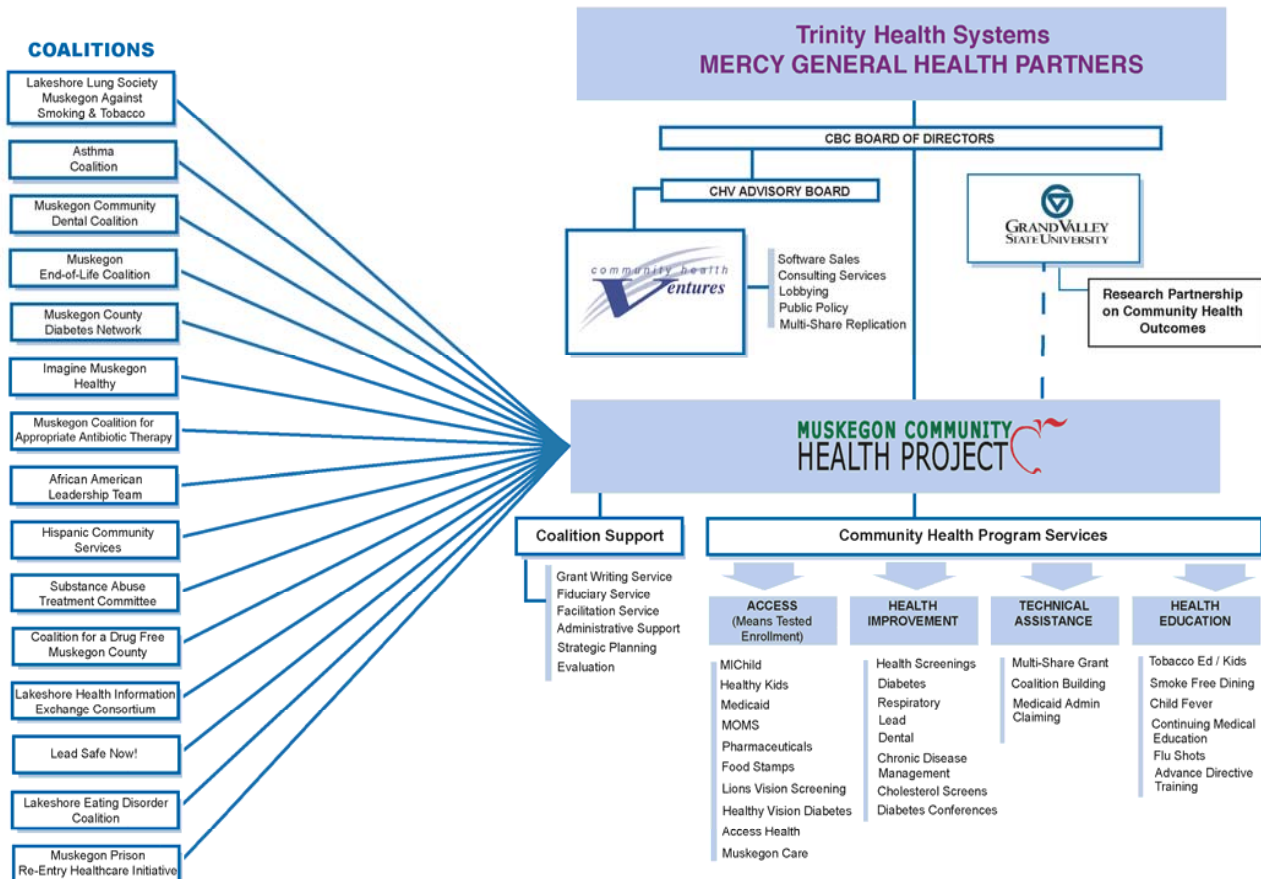
OUR COLLABORATIVE MODEL

We All Start Someplace...



AND...WE END UP LOOKING VERY DIFFERENT AS WE AGE!!

Health Project Community Benefit Collaborative



AN EXTRAORDINARY OPPORTUNITY

Visionary Leadership - 2009

Policy

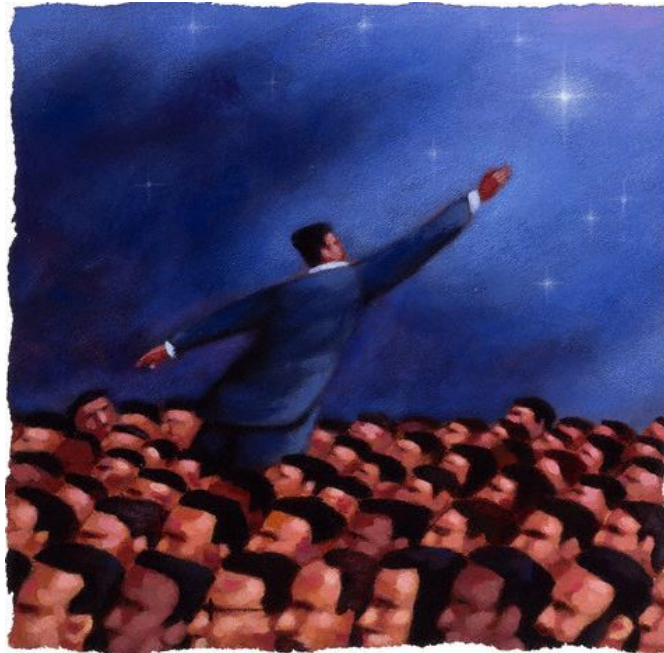
Represent our Constituency Aggressively

Players

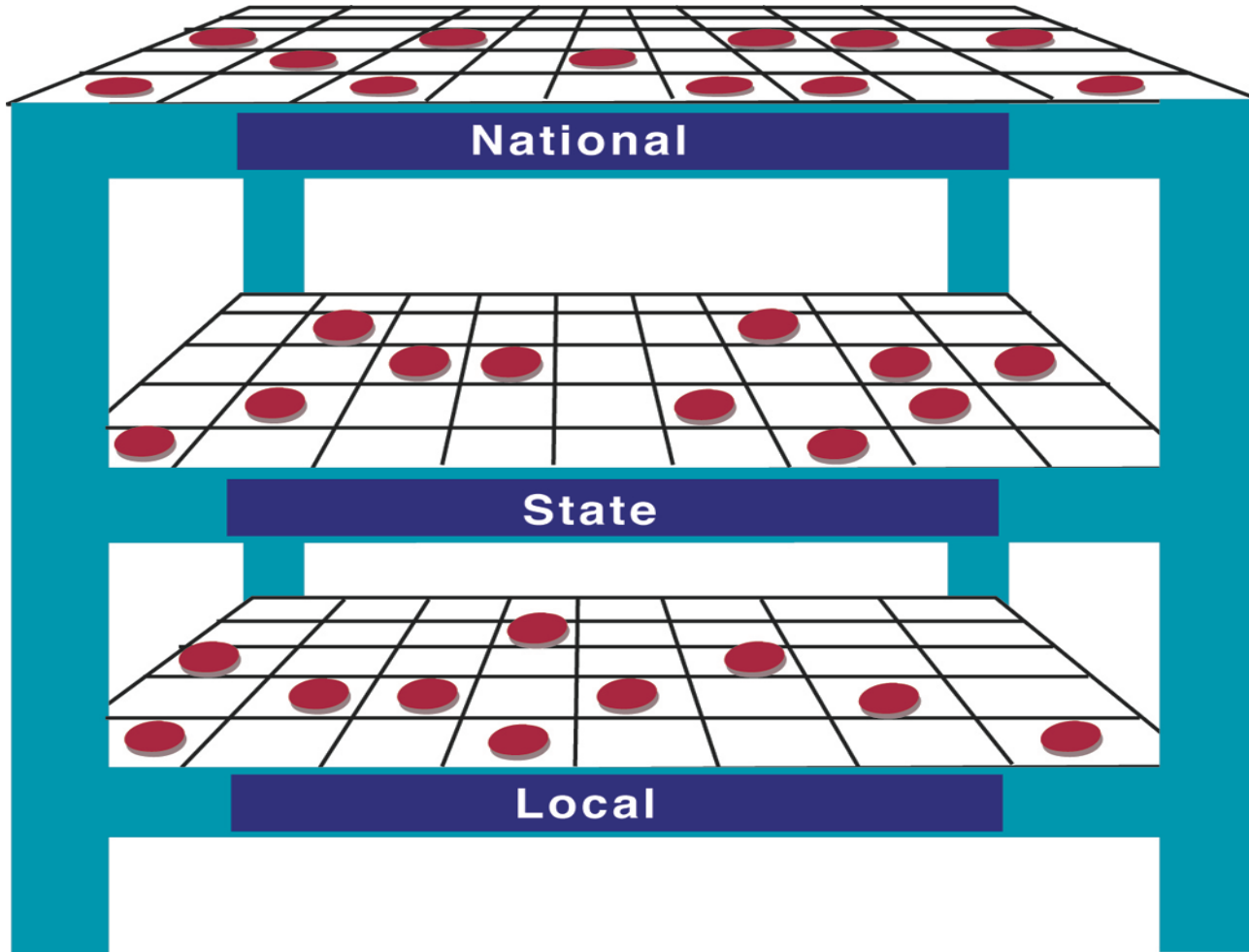
Maximize Opportunity and Be Entrepreneurial

Profession

Build Value for Ourselves and Employees!



PLAY AT THREE LEVELS



POLITICAL IMPLICATIONS For Health Care Policy...

- **Congressional Make-up 2008**
- **Democrats can pass legislation in House -232-200**
- **Senate Democrats (51-49) do not have the 60 votes to stop a filibuster or pass controversial legislation**
- **2008 elections expected to go Democratic – margin could go as high as 57 vote majority in Senate**
- **Legislators 2008 will be reluctant to allow opponents any legislative victories**
- **Bush veto strategy continues**

SCHIP & MEDICAID - 2009

- **No renewal of SCHIP effort in 2008 – extension (now) through March 2009**
- **Democratic Congress may force another veto before November elections**
- **Bush Admin. will continue to limit enrollment in Medicaid and aggressively regulate the program**
- **January – CMS guidance – states may not increase SCHIP eligibility above 250% poverty**
- **States and members of Congress protested rule**
- **Congress may attempt to preempt rule**

WE MUST WORK HARD TO PUT COMMUNITIES AT THE TABLE



SENATE FINANCE COMMITTEE HEARINGS

A National Opportunity

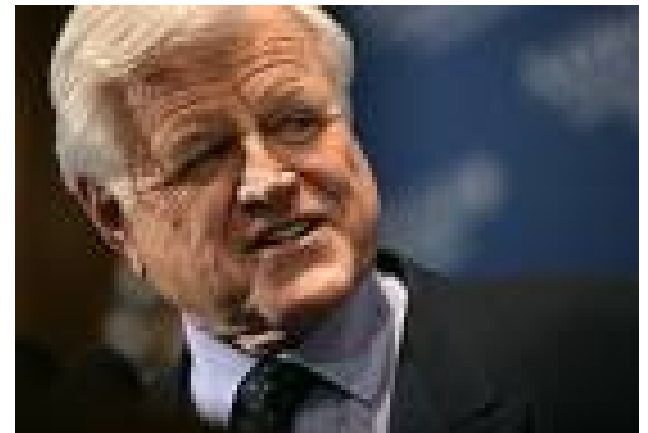
June 2008 – Bipartisan/Bicameral Summit..”Prepare for Launch”
Part of a year long series of hearings, roundtables and events to discuss options for health care reform in 2009.

- Ben Bernanke – HC and Competitiveness
- State Based Reforms
- Public Programs
- Costs
- Demographic Shifts
- Insurance Reforms
- Northwest Well Represented
 - *Maria Cantwell – WA*
 - *Ron Wyden – OR*
 - *Gordon Smith - OR*



HEALTH CARE REFORM

- **Senator Kennedy would have been the natural to lead the 2009 health care reform.**
- **There is a tradition that when a much beloved member of the Senate is departing, the Club, the body, tries to send them on their way with the passage of a piece of legislation that carries the person's name and much of the person's thinking**



CJA ADVOCACY AGENDA

- **Community Collaboratives for Access & Quality Improvement (CCAQI)** Federal grant program with a \$75 million appropriation to replace HCAP.
- **Communities Building Act (CBAA)**
If passed, would provide \$46 million in federal grants for 3-share models & project access type models.
- **Oregon – HB3626** Oregon legislation passed during the February 2008 special session, which establishes a grant program to improve access and health. \$500,000 was allocated.
- **SCHIP** – CJA continued to assist with “call to action” alerts. Revisit SCHIP – Extended through March 2009.
- **Washington** – Senate Bill 6459 passed in 2006 which was funded at \$1.5 million.

WHAT BUSINESS ARE YOU IN??



BE AN OPPORTUNIST



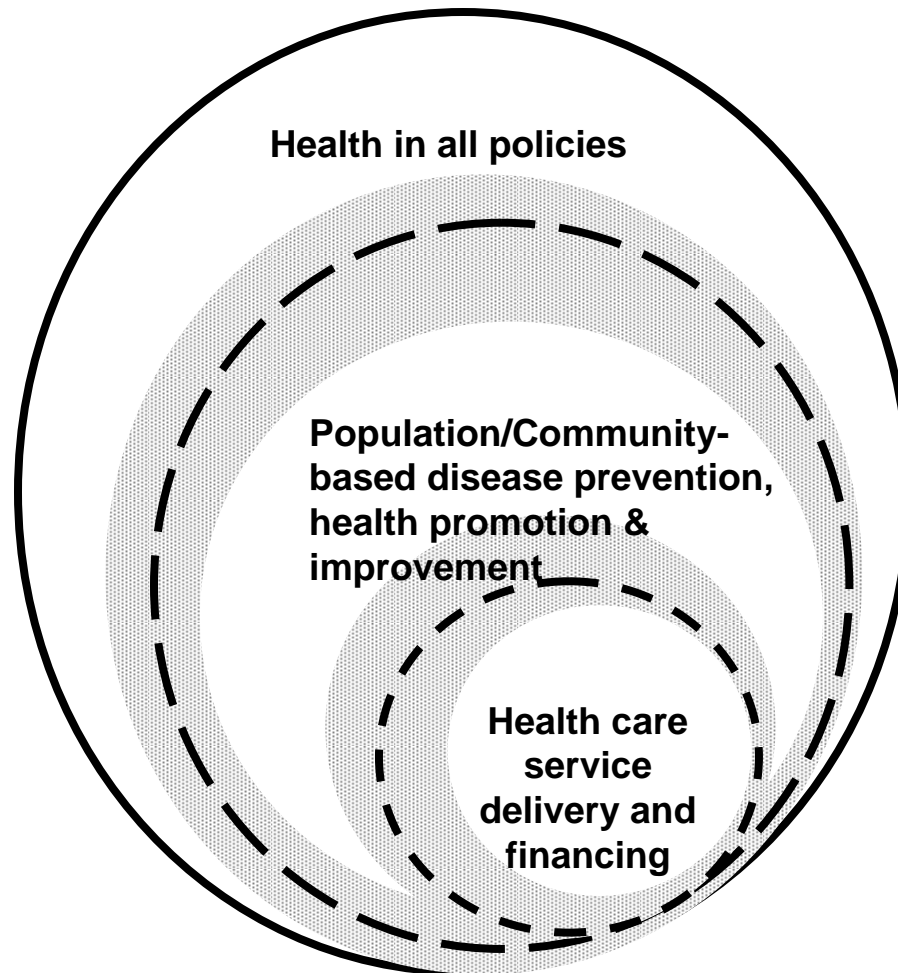
NEW NATIONAL AGENDAS?

– TRANSFORMING COMMUNITIES

- Centers for Disease Control and Prevention
- Extends Health Care debate to Wellness and Prevention
- Offers chance for communities to convene and discuss
- Seeks a message and policy agenda – ‘09

TRANSFORMING COMMUNITIES

Layers of Reform



COMMUNITY BENEFIT

A Local Opportunity Driven by National Policy

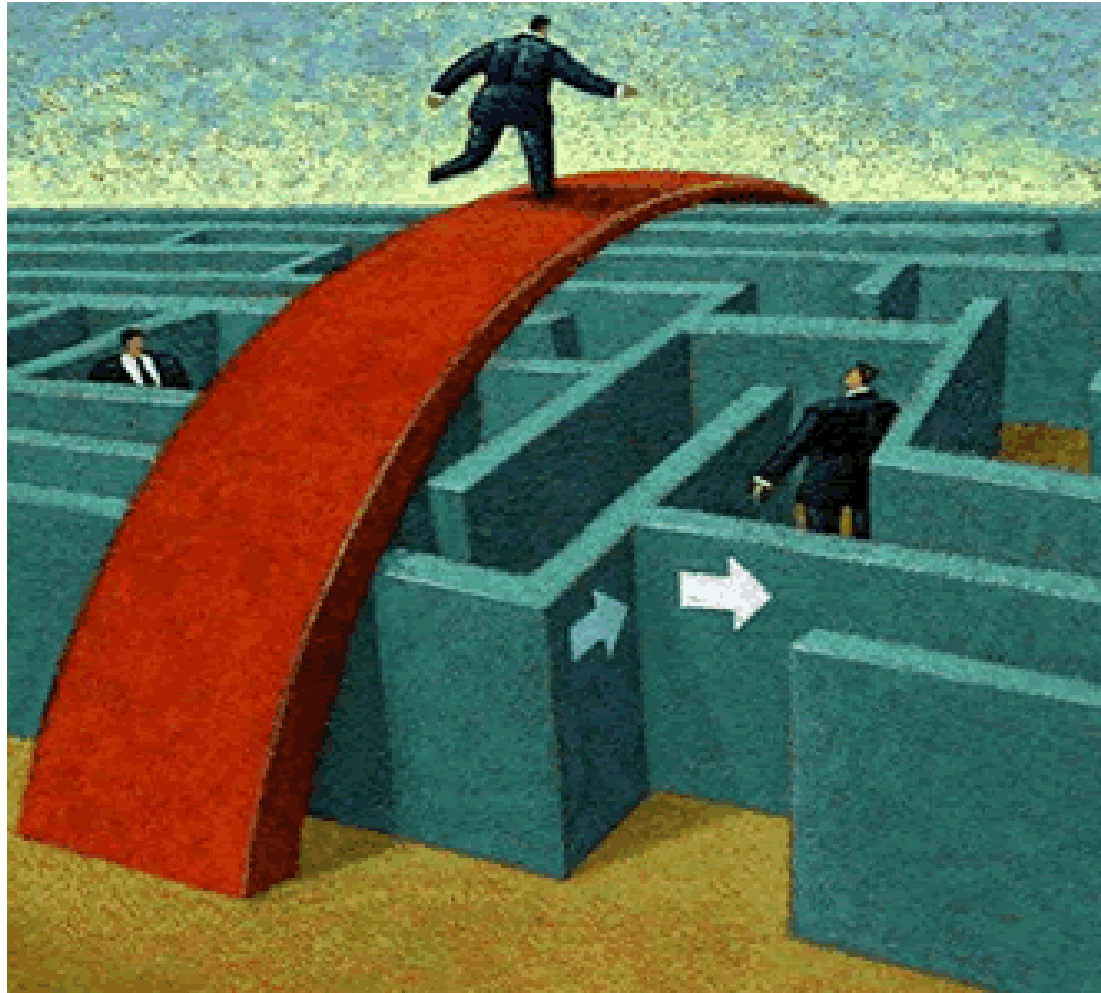
- Senate Finance Committee Hearings
- Questions Performance of Nonprofit Hospitals
- Allocation of operating expenses to charity care and the needs of low income/at risk populations
- Nonprofit review extends to Educational Institutions – *Harvard - \$34.6 billion endowment*
- Presents opportunities to partner with hospitals
- Outreach, chronic disease management, Pharmacy Assistance, screening can be counted.
- *Grassley – Hospitals Fall Short of Serving Communities*

COMMUNITY BENEFIT

Hospitals and Collaboratives

- **New IRS 990's**
- **Hospitals need to do Community Needs Assessments**
- **Coalition involvement can be counted**
- **Study on Coalitions to understand purpose**
- **Hospitals can claim community benefit on employees who work on collaboratives**
- **Hospitals are looking for new ways to show benefit to their communities!**

BE AN ENTREPRENEUR



CORRECTIONAL HEALTH

A Local Opportunity Driven by State Budgets



WHAT DOES MUSKEGON'S NAVIGATION PROCESS DO?

Medical In-reach to prisoner prior to release



NAVIGATOR- DIRECTED RE-ENTRY

Packaging the Eight Critical Activities

- **Secure Medical Record**
- **Conduct Health Assessment**
- **Screen for enrollment into Medicaid, FSP, etc.**
- **Identify and schedule first appointment for medical home**
- **Provide for pharmaceutical assistance**
- **Provide chronic disease management**

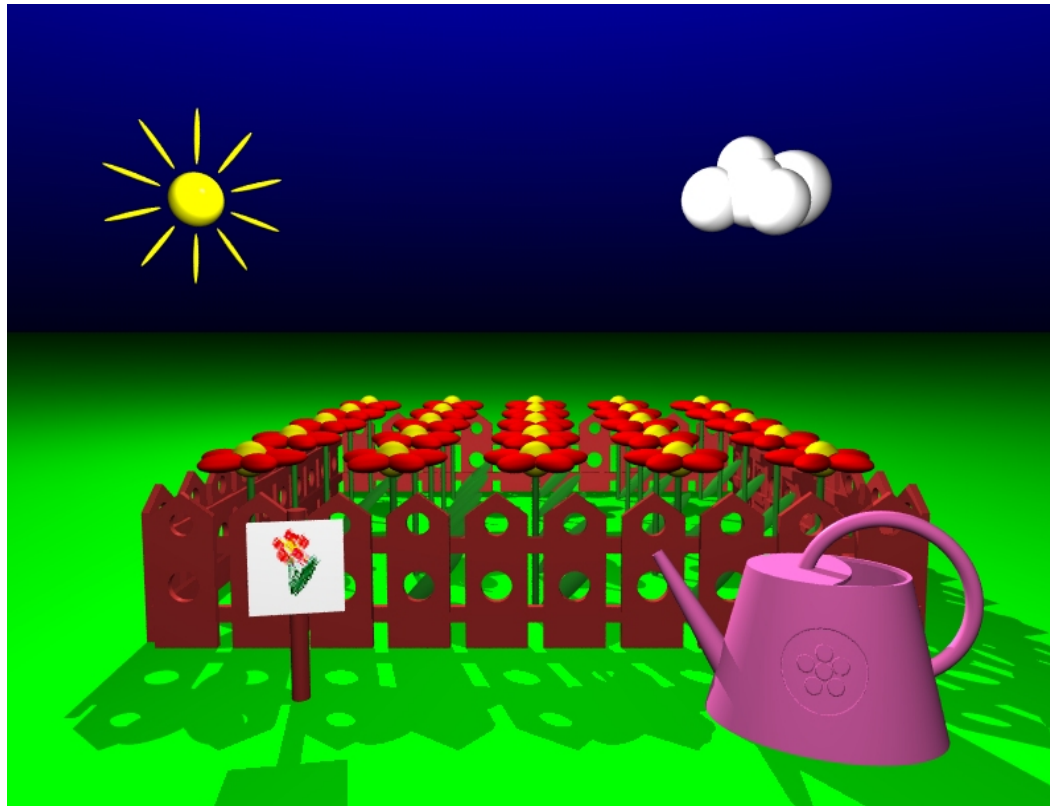
TESTING AN EXPANDED APPROACH

Re-entry for Serious/Chronic Medical Conditions



Kenneth Anderson, 80, of Iron County, receives care at the Duane Waters Hospital in Jackson. He awaits placement in a nursing home through a pilot prisoner re-entry program.

EACH ONE * TEACH ONE CJA IN ACTION



NATIONAL MEMBERSHIP - CJA

42 States & Virgin Islands

- Highest in states that are organizing state affiliates

Michigan 15, Virginia 12, Washington
10, Oregon 9, Georgia 8

- No representation

Wyoming, S. Dakota, Colorado, Alabama
Vermont, New Jersey, Rhode Island
Hawaii

ACTIVITIES

- [National Conference – Seattle – October 23 & 24](#)
- **Technical Assistance**
- **Sustainability Series**
Funded by HRSA in 2006, the last of the TA Conference Call series ended with:
 - ◉ Profiles in Building Sustainability
 - ◉ Marketing 101
 - ◉ The Need for Information Systems to Support Program Sustainability
 - ◉ Outcome Measures
 - ◉ How to Earmark series

ON THE HORIZON @ CJA

- **March 2008 – Strategic Retreat**
 - **Grow and Strengthen Membership – Values Based**
 - **Explore CEU or Certification for Community Leadership**
 - Learning Institutes
 - Conferences
 - **Expand TA Conference Call Series**
 - **Build our State Affiliates**
 - **Aggressively Seek Out Opportunities to Fund Ourselves and our Membership**
 - Web Site Enhancement with “Member Only” sites
 - List Serv
 - Get Involved!!

STATE AFFILIATES

Washington – “Communities Connect”

➤ 7 Members



▪ Oregon – Quarterly Learning Institutes held in Portland.

➤ 69 member roster

➤ CJA attends each LI

▪ Michigan – The “Michigan Chapter of Communities Joined in Action” (MICJA)

➤ Convened their first meeting in 2007

➤ 28 member roster

➤ Developed bylaws, logo, & website
www.micja.blogspot.com



BAND TOGETHER FOR STRENGTH

WHAT WE CAN'T
DO ALONE
WE CAN DO
TOGETHER



WORK TOGETHER TO SUCCEED

Communities
joined in action
Better health for more people for less cost



 **Communities**
Connect
Better Health for More People at Less Cost