Health Care Affordability Act Catamount Health

> Senator James Leddy, Chair Vermont Senate Health & Welfare Committee

Principles of Health Care Reform in Vermont Established by Coalition 21 (January 2005)

- Principle I: It is the policy of the State of Vermont to ensure universal access to and coverage for essential health care services for all Vermonters.
- Principle II: Health care coverage needs to be comprehensive and continuous.
- Principle III: Vermont's health delivery system will model continuous improvement of health care quality and safety.
- Principle IV: The financing of health care in Vermont will be sufficient, equitable, fair and sustainable.
- Principle V: Built-in accountability for quality, cost, access and participation will be the hallmarks of Vermont's health care system.
- Principle VI: Vermonters will be engaged, to the best of their ability, to pursue healthy lifestyles, to focus on preventive care and wellness efforts, and make informed use of all health care services throughout their lives.

Vermont's New Law Catamount Health

Goal: Control the steeply rising costs of health care by:

- Covering the uninsured
- Making health care more affordable for the insured
- Improving the quality and value of health care delivery

Catamount Health Details

New comprehensive health insurance plan for uninsured Vermonters

Available 10/1/07 through private insurers (MVP, BC)

More info: <u>www.leg.state.vt.us/Health</u> <u>Care/catamount.htm</u> State provides premium assistance to lowerincome individuals or families to keep premiums low

No cost-sharing for preventive services or chronic care management

What's wrong with chronic care now?

What is a chronic condition?

- A chronic condition is defined as an established clinical condition that is expected to last a year or more and that requires ongoing clinical management.
- Examples include: diabetes, hypertension, cardiovascular disease, cancer, asthma, pulmonary disease, substance abuse, mental illness, hyperlipidemia, and spinal cord injury.
- Approximately 75% of all health care spending today is for people with chronic conditions.
- Well-documented and accepted national studies indicate that people with chronic conditions receive the right care at the right time only about 55% of the time.

Delivery of Better Health Care

- Catamount Health will include a chronic care management program that focuses on providing the right care at the right time.
 - Incentives to join: co-pays & deductibles will be waived
 - Aligns with the Vermont Blueprint for Health: a statewide chronic care initiative for all Vermont residents (both publicly and privately insured)

Other Benefits

- Free immunizations for all Vermonters
 - Based on CDC recommendations
- Subsidy for individual market
- Community Wellness Grant Program
- Information Technology Coordination
- Loan Repayment for Health Care Professionals
- Healthy Lifestyles Insurance Discount
- Common claims, procedures and credentialing administrative simplification
- Multi-payer Database and Consumer Price and Quality Information
- Medical Event Reporting and Hospital Infection Reporting program
- Safe Apology program

Financing

- Income based premiums
- Cigarette Tax
- Coordinated with Medicaid to maximize federal funds (Global Commitment)
- Employer assessment on those who do not offer insurance to employees

Opportunities for Transferability

- Make health care affordable and accessible to uninsured
- Manage and coordinate chronic care <u>for all</u>
- Build on employer-sponsored insurance
- Outreach to Medicaid eligible uninsured
- Reduce cost shift by
 - Insuring the currently uninsured and reimbursing at 110% of cost
 - Providing better chronic care
 - Increase Medicaid reimbursement
- Finding common ground: building broad based coalitions