

Alliance for Health Reform

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The challenge before us is to move from today's highly decentralized, cottage industry to one that is capable of providing primary and preventive care, caring for the chronically ill, and coping with acute and catastrophic events.

To meet this challenge, there must be a commitment to organizing services around common patient needs and applying information technology and engineering concepts to the design of care processes.

- *Crossing the Quality Chasm*, Institute of Medicine

Post-Katrina Louisiana

For Louisiana, the challenge is two-fold:

We must first meet *immediate needs* while ensuring that, in the process, we support the *rebirth of a better overall system* of care that is in line with the IOM principles.

Meeting the Challenge

How immediate relief is supporting long-term strategies:

- **Primary Care**
 - Immediate: Social Services Block Grant (SSBG) supported the safety net and primary care services
 - Long-term: SSBG supported collaborative planning for coordinated care and expectations to implement electronic medical records (EMRs)

- **Behavioral Health**
 - Immediate: Crisis counseling for hurricane survivors to build resilience, recover and move towards self sufficiency
 - Long-term: SSBG supported crisis intervention, community-based supports, and supervised independent living and now the State is sustaining efforts consistent with La's Plan for Access to Mental Health Care

- **Health Information Technology**
 - Immediate: LINKS and KatrinaHealth.org played key roles in providing health information to physicians in and outside of Louisiana
 - Long-term: LA Health Information Exchange was established, which allows information to be shared among providers

Post-Katrina Louisiana

Immediate Needs Remain

- Primary care for the uninsured
- Specialty services
- Behavioral health services
- Workforce recruitment and retention
- Graduate medical education (GME)

How can immediate needs be addressed?

- Fully implement the Greater New Orleans Health Services Corps
- Allow flexibility to use DSH funds to support non-institutional care (clinics and physicians)
- Increase primary care capacity through new CHCs / medical homes
- Support the state's behavioral health plan
- Provide continued support for LaHIE
- Exemption from years 2 and 3 of the GME 3 year rolling average

Impact on Long-term Systemic Change

Meeting the immediate needs will:

- Create a sustainable workforce
- Increase primary care access and reduce overcrowding of emergency departments
- Set groundwork for a coordinated, accessible, local system of care

Why does a twofold approach work for Louisiana?

- Addresses the immediate issues
- Provides the opportunity to make systemic changes that will affect cost, quality, and access...and ultimately improve the health of Louisiana's citizens