Proposal to Provide Development of a Community Wide Health Care Plan for Uninsured and Underinsured Manatee County Residents

HMA Update

June 22nd, 2016

HealthManagement.com
Agenda

- Process to date
- Priority populations
- Mission/enumeration of principles
- Draft goals and objectives
- Next steps
HMA Project Team

Maurice Lemon, MD, MPH  
*Project Director*  
*Clinical Co-Lead*

Lori Weiselberg, MPH  
*Project Manager*  
*Community Health Lead*

Gary Crayton, MBA  
*Financial Lead*

Debby McNamara, LCSW  
*Clinical Co-Lead*
Process to date/planned

• Environmental review
  – Interviews
  – Secondary data review
  – Site visits
• Best practices
• Mission/Principles
• Recommendations of goals and objectives
• Implementation plan
Priority Populations

• Uninsured at various income levels
• Insured with high deductible & low income
• Veterans with poor access to care
• Elderly with low fixed incomes
• ALICE
• Other groups
Principles – 1
County funding and/or influence should be used to:

Support efforts to ensure Medicaid and subsidized insurance through the Health Insurance Marketplace is maximized for eligible low-income residents to ensure County funding for health care is the last resort.
Principles – 2

Support ongoing assessment of healthcare access for target population, and support/facilitate capacity expansions in critical areas of need. This should include at minimum: primary health care, behavioral health care, oral health care.
Principles – 3

Support and incentivize efforts to ensure continuous, coordinated primary care services for the target population
Principles – 4

Support efforts to ensure appropriate utilization of health care services with emphasis on the management of chronic conditions to include, at minimum, robust programs in:

– **Health care navigation** to direct people to safety net providers with access, e.g., paramedicine program, community health worker program.
– **Care management**, embedded in primary care and community behavioral health, to better manage individuals with chronic conditions that are high utilizers/high risk.
Principles – 5

Support and facilitate collaboration among safety net providers within the county to create economies of scale and improve funding opportunities. These may include efforts such as care management, primary care/behavioral health integration, coalitions to collaboratively apply for grant funding, etc..
Principles – 6

Support prevention interventions related to target behaviors that contribute to chronic disease to decrease the burden of disease. These may be interventions that target individuals in worksites, schools, communities, etc.
Principles – 7

Develop and adopt a funding strategy that secures County and other government dollars and influences the use of community resources to support activities consistent with guiding principles.
Goals, objectives, recommendations

1. Access to primary care for medical and behavioral health clients
2. Care management for highest need individuals
3. Improved access to mental health treatment
4. Substance abuse treatment expansion
5. Dental health services access
6. Assistance for navigation to health services
7. Health prevention programs
Need to add delivables from timeline
Kelly Wright, 11/25/2015
Process to date/planned

• Environmental review
  – Interviews
  – Secondary data review
  – Site visits

• Best practices

• Mission/Principles

• Recommendations of goals and objectives

• Implementation plan
Questions