Health Care Reform Cabinet Progress Report

for the month of July 2010

Submitted by:
Cristine A. Vogel
Health Care Reform Cabinet, Chair

UPDATE AT A GLANCE

Funding Opportunity	Application	Lead Agency
1. Temp. High Risk Pool	App. submitted, 6/1	DSS/DOI
2. Early Retiree Reinsurance Program	In process	Comptroller Office
3. Prem. Rate Review	App. submitted, 7/1	DOI
4. Long-term Care	due 7/30	DSS & Comm. On Aging
5. Maternal/Child Home Visits	Part 1 sent 7/9; part 2 due 9/1	DPH/DSS
6. Multipayer Adva. Primary Care	LOI sent 6/29, app 8/17	Comptroller/DSS/ProHealth MD
7. Backgrd Check Prog. LTC providers	LOI sent 6/10, app due 8/9	DPH/DSS (state match 25%)
8. Teen Pregnancy Prevention	App sent 6/1	DPH
9. Public Health Infrastructure	App due 8/9	DPH

GENERAL HEALTH CARE REFORM UPDATE

Medical Loss Ratio

The DOI along with NAIC is working toward developing standardized methodologies for calculating MLRs and uniform definitions of the type of expenses used in the calculation; discussions continue.

UPDATE IN DETAIL

1. **Temporary High Risk Pool**

This program seeks to provide affordable health insurance to people who are uninsured because of pre-existing health conditions and will be funded entirely by the federal government. There are specific requirements that an individual must meet in order to be eligible. The law appropriates $5 billion of federal funds to support the temporary program – funding will be available after July 1, 2010; and the program ends in 2014. HHS will allocate the funds similar to the formula used in CHIP; based on this methodology CT may be allocated approximately $50 million for the four year period. Applications from states need to demonstrate how the insurance will be affordable and the program sustainable.

Project Leads: DSS (M. Schaefer) and DOI (M. Breault)

Progress:

- Letter to HHS on April 30th expressing CT's intention to submit an application
- DSS/DOI submitted the application on June 1st ; continue to be in discussion with HHS; should have signed contract very soon

2. **Early Retiree Reinsurance Program**

This program will provide financial assistance to employers that qualify to help them maintain coverage for early retirees age 55 and older who are not yet eligible for Medicare. The new law appropriated $5 billion, but program ends when money is depleted. The Comptroller's Office estimates there are 11,000 retirees eligible at about $2,900 per enrollee ($30 M each year). Cost Containment Committee will determine how funds should be used. The federal subsidy is 80% on claims in the range of $15,000-$99,000 per claim.

Project Lead: Comptroller's Office (T. Woodruff)
Progress:

- The Office of the Comptroller sent application; setting up infrastructure to enable submitting claims

3. **Health Insurance Premium Rate Review**

This program's goal is for states to establish or enhance an existing process for the annual review of health insurance premiums to protect consumers and small employers from unreasonable rate increases; strengthen oversight responsibility and to make the information more transparent to the public. The grant provides states with $1 million. The application requests more tools for rate review, improve systems to offer better transparency, and modeling software.
Project Lead: DOI
Progress:

- submitted application on July 1st

4. **Long-term Care**

This funding is available for states that have existing supports in the community and it must be used to strengthen the linkages between the medical and social services systems for the unique needs of seniors, disabled Americans and their caregivers as they seek health care and long term care. It is estimated that CT could be eligible for approximately $1.2 million.
Project Lead: DSS in partnership with Commission on Aging
Progress:

- Application due on July 30th

5. **Maternal, Infant and Early Childhood Home Visiting Program**

This funding will build on partnerships at the federal, state and community levels that will provide coordinated services for families who live in at-risk communities. The proposals must rely on evidence-based home visiting strategies. Approximately $90 million will be awarded this summer based on a pre-determined formula.
Project Leads: DPH (L. Davis) and DSS
Progress:

- 3 part application process; first submitted on July 7th.
- Part 2 is due Sept. 1st (guidance not yet received from HHS)

6. **Multi-payer Advanced Primary Care Practice (MAPCP) demonstration**

Medicare, Medicaid and private insurers will join in "state-based" efforts to improve the delivery of primary care and lower health care costs. The "patient-centered" medical home model is being proposed with the State employee and retirees plans (Anthem and United HealthCare), ProHealth Physicians, Inc., Medicare and Medicaid (DSS). Thorough data collection and analysis is required. Medicare will enhance payment to providers. It is estimated that ProHealth Physicians, Inc. groups provide care to approximately 30,000 state employees and retirees, 60,000 Medicare, and 15,000 Medicaid beneficiaries.
Project Leads: Comptroller's Office (T. Woodruff), DSS (M. Starkowski) and OPM (R. Dakers)
Progress:

- Letter of Intent submitted by June 30th; application due August 17th

7. **Background Check Program for LTC Providers**

To institute a background check process that would alert and prohibit the hiring of employees who have histories of abuse or relevant criminal violations that would provide care to vulnerable long term care

population. The following facilities and providers include: skilled nursing, home health, hospice, adult day care, personal care, etc. The application would enable an expansion to an existing system that DPS already maintains. Costs were not yet known; the grant does require a state match (3 year $1M with a $1M match?). Need to consider DDS and DCF as well.
Project Leads: DPH (W. Furniss), DSS (M. Schaffer) and Dept. Public safety
Progress:

- Letter of Intent sent 6/10
- Governor needs to designate DPH as lead (DSS endorsed)
- Application due August 9th

8. **Teen Pregnancy Prevention**

This funding is to enhance outreach programs that focus on reducing the teen pregnancy rate while improving other adolescent public health behaviors. This competitive grant is for $1 million each year for five years.
Project Leads: DPH (L. Davis)
Progress:

- Application submitted 6/1, waiting for response, program starts 9/1

9. **Strengthening Public Health Infrastructure for Improved Health Outcomes**

The goal of this program is to increase the capacity and ability of health depts. to meet national public health standards to help restrain the growth in health care costs. Two components.
Project Lead: DPH (M. Hooper)
Progress:

- Application due 8/9

Collaborative Opportunities (state does not receive the funding):

- **Pregnancy Assessment Fund (FY 10 Support for Pregnant and Parenting Teens and Women):** Implement activities to assist pregnant and parenting teens and women. Funding available to high schools. Application due 8/2/2010. Lead agency SDE/Shelby Pons.
- **Connecticut Workforce Investment Strategies in Health Care (WISH) Planning Grant:** the CT Employment & Training Commission is applying; DPH provided a letter of support including anticipated participation in WISH planning process

Cabinet Members:
Thomas Sullivan, Commissioner, Dept. of Insurance
Michael Starkowski, Commissioner, Dept. of Social Services
Patricia Rehmer, Commissioner, Dept. of Mental Health & Addiction Services
Peter O'Meara, Commissioner, Dept. of Developmental Services
Diane Wallace, Commissioner, Dept. of Information & Technology
Michael Purcaro, Dept. of Public Health
Robert Dakers, Office of Policy & Management
Janet Williams, M.D., Dept. of Children & Families
Susan Sherman, Dept. of Revenue Services
Ronald Angelo, Deputy Commissioner, Dept. of Economic & Community Development
Jeffrey Asher, CT Health & Educational Facilities Authority
Cristine Vogel, Deputy Commissioner, Dept. of Public Health