



Health Care Reform and SBHCs: What Lies Ahead?

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Agenda

Context

- School-Based Health Centers Unique Assets and Challenges

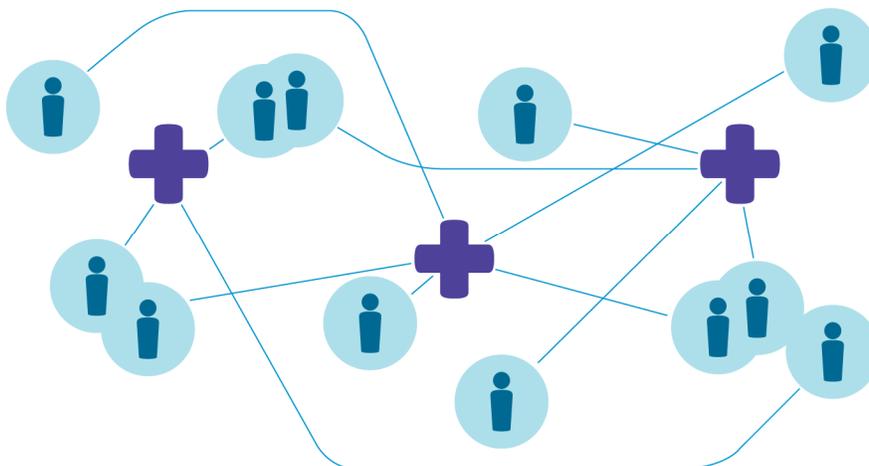
Health Care Reform

- Health Benefit Exchange
- Navigator Program: Enrollment
- New Delivery and Payment Models

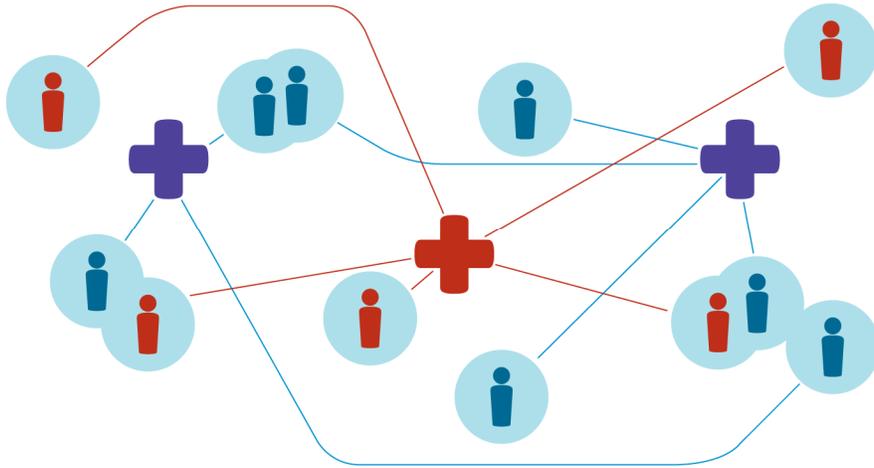


What is Unique about School-Based Health Centers?

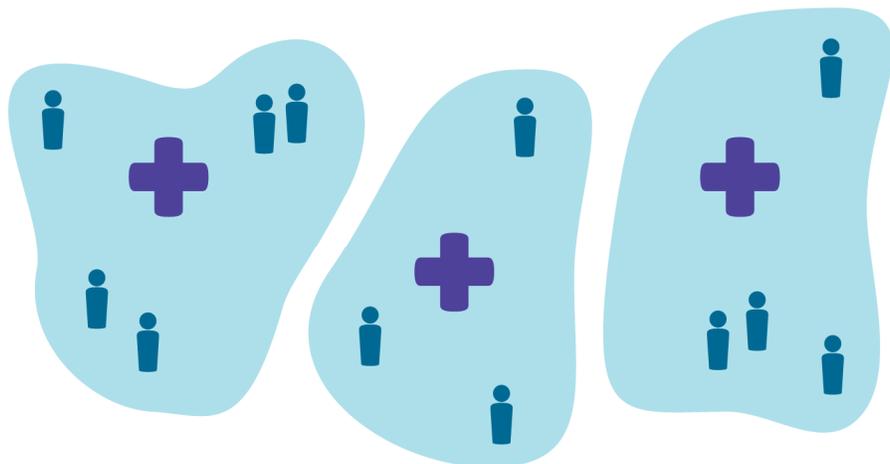
Traditional Health Care Delivery Model



Traditional Health Care Delivery Model



School-Based Health Care Delivery Model



School-Based Health Centers

Integrating Health Care and Public Health Approaches



What Can SBHCs Offer?

- Immediate Access
- Universal Screening
- Health Education and Prevention
- Insurance Enrollment and Consumer Education
- Confidential Care
- Reaching hard-to-reach populations

What Are the Financial Challenges?

- Not enough funding for prevention, education, case management, etc.
- Limited reimbursed if the SBHC is not the assigned primary care provider
- Many uninsured patients



Our Goal is to Figure Out:

- Where SBHCs fit in the system
 - Who cares about our value-added (and how we can get them to care more)
- AND
- How to get paid for what we do best

Health care reform offers opportunities to move towards this goal.



CA Health Benefit Exchange: the Basics

- Provide a gateway to subsidized coverage for millions of uninsured Californians.
- Help organize the insurance marketplace in a manner that focuses competition among health plans on price, quality and service.
- Provide greater value to its members in terms of improved access to more affordable, higher-quality insurance products.



CA Health Benefit Exchange: the Basics

Health Benefit Exchange Vision and Mission:

The vision of the California Health Benefit Exchange is to improve the health of all Californians by assuring their access to affordable, high quality care.

The mission of the California Health Benefit Exchange is to increase the number of insured Californians, improve health care quality, lower costs, and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and providers that give them the best value.

CA Health Benefit Exchange: our Values

Consumer-focused

At the center of the Exchange's efforts are the people it serves, including patients and their families, and small business owners and their employees. The Exchange will offer a consumer-friendly experience that is accessible to all Californians, recognizing the diverse cultural, language, economic, educational, and health status needs of those we serve.

Affordability

The Exchange will provide affordable health insurance while assuring quality and access.

Catalyst

The Exchange will be a catalyst for change in California's health care system, using its market role to stimulate new strategies for providing high-quality, affordable health care, promoting prevention and wellness, and reducing health disparities.

Integrity

The Exchange will earn the public's trust through its commitment to accountability, responsiveness, transparency, speed, agility, reliability, and cooperation.

Partnership

The Exchange welcomes partnerships, and its efforts will be guided by working with consumers, providers, health plans, employers and other purchasers, government partners, and other stakeholders.

Results

The impact of the Exchange will be measured by its contributions to expanding coverage and access, improving health care quality, promoting better health and health equity, and lowering costs for all Californians.

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Eligibility → Enrollment

- Enrollment modernization
 - Education and outreach
 - “No wrong door” enrollment system
 - Navigator/Assister program
- Exchange-DHCS-MRMIB activities
- SBHC opportunities



Enrollment → Access to Care

- Provider network capacity
- Essential Community Providers
- Exchange activities
- SBHC opportunities



Access to care → Affordability

- Medi-Cal expansion; Exchange premium tax credits
- New financing and delivery models
 - Reimbursing value versus volume
 - Delivering coordinated, integrated care
- Exchange activities
- SBHC opportunities



SBHCs: Getting ready for 2014

- Community-wide needs assessment → SBHC “fit”
- Near universal coverage → Capacity to accept insurance
- Value-based purchasing → Demonstration of cost-effectiveness, quality of care provided
- Integrated care delivery → Collaborative partnerships



Anything else we should be thinking about?

