



Top Ten Takeaways from the Affordable Care Act

Presentation for National Organization of State Offices of Rural Health
Webinar Series on Payment Reform and Care Coordination

September 23, 2010

Presented by

Keith Mueller, Ph.D.

Head, Department of Health Management and Policy
College of Public Health, University of Iowa
Director, RUPRI Center for Rural Health Policy Analysis



Overview of the ACA

- Multi-faceted legislation: 10 titles doing much more than expand coverage
- With a time line of up to 10 years
- When the system may be quite different
- Policy challenges along the way



General expectations

- Near universal coverage
- Affordable medical care to persons and in total
- New models of organizing the system that improve quality and moderate expenditures
- Improve care across the continuum, from public health to end-of-life care



(Drum Roll....)

Number 10: New Opportunities to Study the System

- Comparative Effectiveness Research
- Evaluating demonstration and pilot programs
- Developing new performance and quality measures
- Emphasis on evidence-based system design and health care



Number 9: Payment changes designed to save \$\$\$\$\$

- Value-based purchasing comes to all providers
- Productivity adjustments in the prospective payment systems calculations
- Re-basing payment to Medicare Advantage plans
- Bundled payment
- Accountable Care Organizations



Number 8: Rural-favorable payment changes

- Payment extenders in Sections 3121-3124
- Medicare rates for primary care physicians treating newly eligible Medicaid patients in 2013 and 2014
- Modifications to hospital payment adjustment for low-volume hospitals to lower mileage requirement and change volume threshold to be based on total discharges (not Medicare only)
- Primary care bonus payments and floor in geographic adjustment in frontier states



Number 7: Measurement and Transparency in Health Care Quality

- Section 2701: core set of adult health quality measures for Medicaid eligible adults
- Section 3013: new quality measures to assess health outcomes and functional status, management and coordination across episodes and care transition, use of information provided to and used by patients
- Built into developing new system approaches, including accountable care organizations, value based purchasing



Number 6: Building Healthy Communities

- Improved access to local services (Flex program continuation, primary care, workforce programs)
- Funding for public health initiatives
- Title IV, subtitle C: grants for community preventive health activities and specifically for public health community interventions, screenings, and clinical referrals for persons between ages 55 and 64



Number 5: System Redesign to Improve Quality

- Value based purchasing and ACOs in a different light (not as cost containment)
- Section 3011: national strategy for improving the delivery of health care services, patient health outcomes, and population health
- Section 3021: Center for Medicare and Medicaid Innovation
- Quality improvement Network Research Program



Number 4: Improvements in the Healthcare Workforce

- Increased authorized spending in existing programs such as National Health Service Corps, Titles VII and VIII training programs, loan repayment programs
- Expanding loan repayment to include public health and allied health professionals
- Emphasis on rural training in reallocating residency slots in graduate medical education
- Grants for establishing programs to train or employ alternate dental health care providers
- Loan repayment for nursing and nursing faculty



Number 3: Enhancing Public Health

- All of Title IV
- National health prevention and public health fund, grows to \$2 billion in FY 2015 and annually thereafter
- National prevention and health promotion outreach and education campaign
- Series of specific grant programs



Number 2: Expansion of Health Insurance Coverage

- Immediate benefits of high-risk pool, coverage for dependents, eliminating pre-existing conditions for children, cost-free preventive health benefits, eliminating lifetime limits
- Expansion of Medicaid eligibility
- Tax credits for small businesses
- Subsidized coverage for households



(drum roll...)

Number 1: Comprehensive Approach to Improving Health Care in the US

- A national plan required by 2011 (Section 3011)
- The National Workforce commission
- The CMS Center on Innovation
- The National Prevention and Public Health Council annual report

For Further Information

The RUPRI Center for Rural Health Policy Analysis

<http://cph.uiowa.edu/rupri>

The RUPRI Health Panel

<http://www.rupri.org>





Dr. Keith J. Mueller

Department of Health Management and Policy

College of Public Health

200 Hawkins Drive, E203 GH

Iowa City, IA 52242

319-384-5121

keith-mueller@uiowa.edu