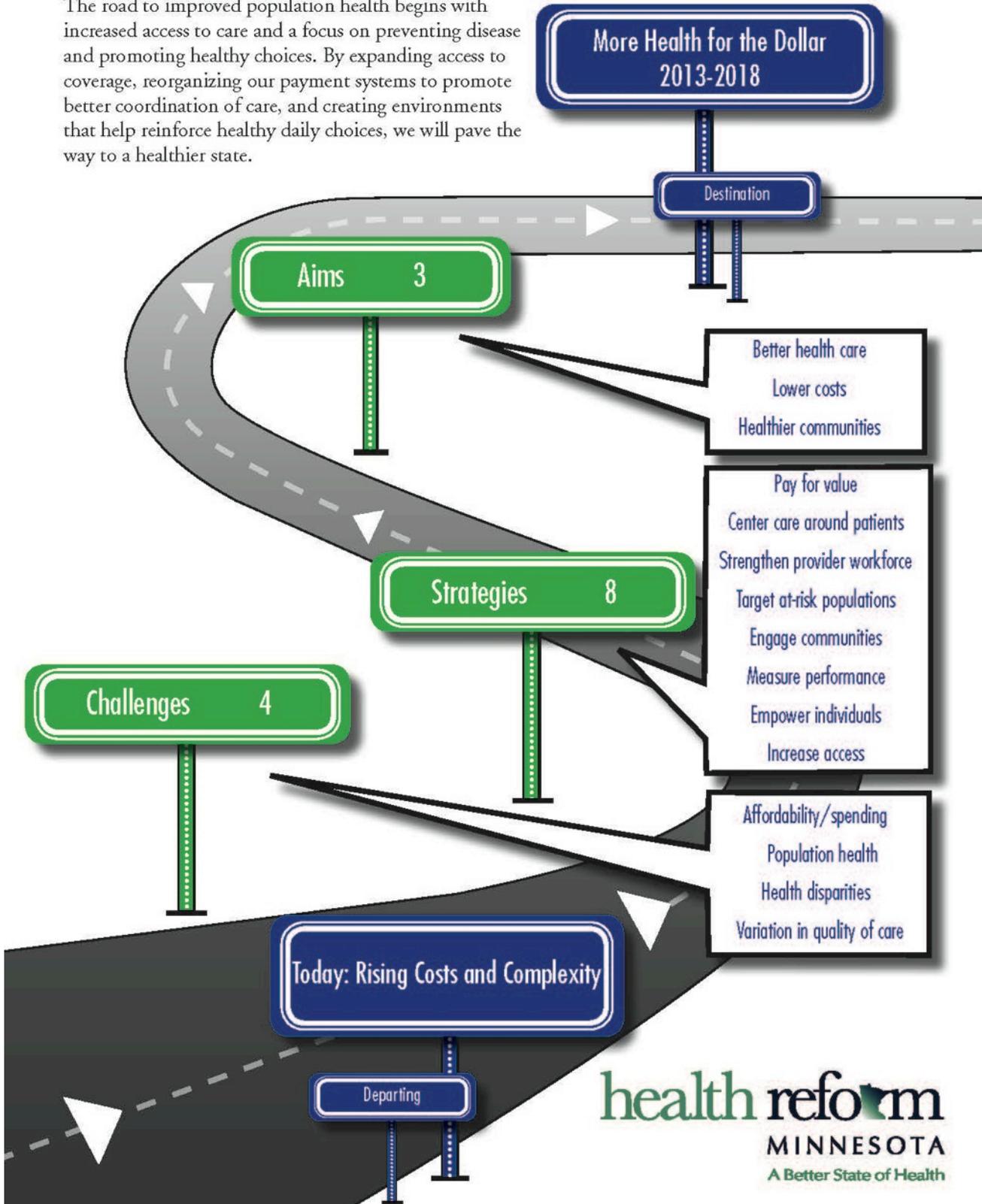


The Roadmap to a Healthier Minnesota

The road to improved population health begins with increased access to care and a focus on preventing disease and promoting healthy choices. By expanding access to coverage, reorganizing our payment systems to promote better coordination of care, and creating environments that help reinforce healthy daily choices, we will pave the way to a healthier state.



Minnesota Health Care Reform Task Force

The Roadmap to a Healthier Minnesota: Strategies and Elements

Strategy	Element
I. Pay for Value in Health Care	1. Advance Total Cost of Care (TCOC) contracting for Minnesota Health Care Programs.
	1. Explore possible improvements to and expansion of the health care home program.
I. Support Patient-Centered, Coordinated Care	1. Facilitate improved integration of behavioral health and primary care services.
	1. Support appropriate coordination and integration of health care, long-term care, public health and social services in Minnesota Health Care Programs TCOC contracts.
	1. Provide reimbursement for prevention and care coordination services for the uninsured through safety net providers.
	1. Address barriers to clinically appropriate data sharing while rigorously protecting against unauthorized sharing and disclosure.
	1. Provide technical assistance to targeted providers to help these providers succeed in the future within a system in which providers are contracting for the Total Cost of Care (TCOC).
I. Prepare and Support the Health Provider Workforce	1. Invest in high-need infrastructure for telehealth and workforce services that increase access and foster interprofessional competency.
	1. Explore and remove regulatory barriers to the advancement of the nursing workforce.
	10. Increase the supply of the primary care workforce and stabilize support for health professions education by supporting existing health professions training sites and funding new sites for primary care physicians, advanced practice registered nurses, physician assistants and pharmacists through the Medical Education and Research Costs (MERC) program.
	10. Attract and retain the long-term care workforce by doing targeted career advancement; increasing wages of direct care workers employed in nursing homes and in-home care; and supporting innovative adult training programs, such as the existing FastTRAC program.
	10. Increase the number of health professionals in underserved areas by increasing funding for the state's Health Professional Loan Forgiveness Program, especially for nurses and physician assistants, and opening the program to a wider group of health professionals.
	10. Prepare for anticipated increased demand on safety net provider services by increasing reimbursement to safety net providers for primary care, mental health, substance abuse, and community-based services provided to Minnesota Health Care Programs enrollees.
	10. Increase diversity in the health care workforce by supporting a range of health professions diversity programs.
	10. Expand the existing evidence-based family home visiting program for high-risk mothers and evaluate the impact of home visiting on health disparities.
IV. Improve Health for Specific At-Risk Populations	10. Include an evidence-based diabetes prevention program as a statewide reimbursed benefit under Minnesota Health Care Programs.
	10. Expand school-linked behavioral health grants and include previously untreated children with high mental health needs, coordinate with suicide prevention texting and telephone supports, and offer screening and referral for substance abuse issues.
	18. Evaluate and perform gap analysis on school health reforms

IV. Engage Communities	19. Identify the most proven Statewide Health Improvement Program (SHIP) initiatives to date and expand these preventive approaches statewide, as indicated.
	19. Pilot the concept of “Accountable Communities for Health” that engage communities in setting and achieving Triple Aim goals.
IV. Measure Performance and Ensure System Sustainability	19. Use a private-public process to set performance targets including goals for health care cost containment, health care quality, patient experience and population health.
	19. Implement best practices for collection and reporting of data on detailed categories of race, ethnicity, and language linked to health disparities.
	19. Develop recommendations for implementing a public health return on investment (ROI) methodology including recommended practices for programs funded by state government.
	19. Guide a process for comprehensive performance measurement of TCOC-contracted provider entities and other provider organizations in achieving health and cost goals.
IV. V. Design Benefits to Enhance Personal Responsibility	19. Increase the market availability of health insurance products that foster consumer accountability for health behaviors and create incentives for consumers to use high value providers.
IV. Increase Access and Support Consumer Navigation	19. Expand Medicaid to include individuals with incomes up to 138% of the federal poverty level (FPL).
	19. Implement a Minnesota-based health insurance exchange, employing a public-private governance structure.
	19. Provide affordability and coverage support for adults with incomes between 138 and 200% FPL at a level equivalent to MinnesotaCare, at a minimum.
	19. Consider that Benchmark options for the Essential Health Benefits (EHB) based on Minnesota plans would provide generally similar benefits and that an ongoing mechanism for review and stakeholder feedback on the EHB is needed.
	19. Ensure the availability of Exchange navigators who are knowledgeable about public health care programs and who are skilled in connecting eligible applicants to the appropriate public program.
	19. Create a referral process in the Exchange for people who are not initially eligible for Medicaid or premium tax credits to connect them to low-cost clinics and health resources in their area and legal services for immigration assistance.

For more information:

- Minnesota’s health reform website www.healthreform.mn.gov
- Bush Foundation/Citizens League community conversations on health reform www.citizensolve.org
- Questions? Healthreform.mn@state.mn.us