Prevention Agenda Update

Office of Public Health Practice, NYSDOH

July 24, 2015
Prevention Agenda Update:

• Summary Findings from First Year Survey
• Progress on Meeting Health Objectives
• Links with Health Reform
• Next Steps, including Next Cycle of Local Planning
• Next Meeting of Ad Hoc Committee: September 24
Lessons Learned, First Year Survey

• LHDs and Hospitals are on track with implementation
• LHDs and hospitals implementing a mix of evidence-based and “other” interventions and strategies
• Identifying and tracking process is challenging
• Collaboration in communities is strong, but some partners remain a challenge to involve, including health insurance plans, faith based organizations, schools, business and media.
• Health Disparities continues to be focus, but hard to measure progress.
• Hospitals are often but not always connecting PA work with other health reform efforts.
New York State Prevention Agenda
Priorities Selected by Counties, 2013

Priority Areas (# Selected by Counties)
- Chronic Disease (n=57)
- Mental Health and Substance Abuse (n=30)
- Women, Infants, Children (n=16)
- Environment (n=9)
- HIV, STD, Vaccines & HAI (n=3)
<table>
<thead>
<tr>
<th>Priority Area</th>
<th>LHDs N=58</th>
<th>Hospitals N=123</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevent Chronic Diseases</td>
<td>94.9</td>
<td>95.9</td>
</tr>
<tr>
<td>Promote a Health and Safe Environment</td>
<td>10.3</td>
<td>9.8</td>
</tr>
<tr>
<td>Promote Health Women, Infants and Children</td>
<td>24.1</td>
<td>26</td>
</tr>
<tr>
<td>Promote Mental Health And Prevent Substance Abuse</td>
<td>41.3</td>
<td>27.6</td>
</tr>
<tr>
<td>Prevent HIV/STDs, VaccinePreventableDisease, and HealthcareAssociatedInfections</td>
<td>3.4</td>
<td>7.3</td>
</tr>
</tbody>
</table>
Other

Increase participation of adult with chronic illness in a class to learn how to manage their condition.

Create linkages with local health care systems to connect patients to community preventative resources.

Increase the number employers and service providers in your county to adopt standards for healthy food and beverage procurement.

Support use of alternative locations to deliver preventive services, including cancer screening.

LHDs N=70   Hospitals N=159
Healthy Women, Infants And Children Interventions Among Local Health Departments, Hospitals
December 2014

Promote Breastfeeding
Other
Provide timely, continuous and comprehensive prenatal care services to pregnant women
Provide education to health care providers to reduce preterm birth.
Integrate preconception and interconception care into routine primary care for women

LHDs N=12  Hospitals N=32

Percent
Other
Build community coalitions that advance the State’s ‘Suicide as a Never Event’ through promotion and prevention activities
Administer screening programs such as SBIRT, Symptom Checklist 90 etc.
Implement mental health promotion and antistigma campaigns

LHDs N=24 Hospitals N=34

Mental Health Interventions

LHDs • Hospitals

Other

45.8
32.4

Mental Health And Substance Abuse Interventions Among Local Health Departments, Hospitals, December 2014
Percent Of Interventions Addressing A Disparity Among Local Health Departments, Hospitals, December 2014

LHDs N=116   Hospitals N=246
Number Of Interventions Addressing Each Type Of Disparity, By Local Health Departments, Hospitals, December 2014

Disparity Type Intervention Addresses

- Income/SES
- Race/ethnicity
- Geography
- Age
- Other
- Disability
- Gender

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- Race/ethnicity
- Geography
- Age
- Other
- Disability
- Gender

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Number
Top Partner Types Among Local Health Departments & Hospitals, December 2014

![Bar chart showing the number of partners of different types.](chart_image)

- **Pre-existing local coalition (e.g., tobacco prevention)**: 193
- **Other community based organization**: 169
- **Community health center/Federally Qualified Health Center**: 132
- **Government or community-based organization - Social Services**: 98
- **Media**: 95
- **Government or community-based organization - Mental and Behavioral Health (including Substance Abuse)**: 93
- **Faith-based organization**: 90
- **Business**: 84
- **Schools (K-12)**: 83
- **College/University**: 75

Partners Types
Top Partnerships Local Health Departments And Hospitals Require Help To Develop, December 2014

Number of Partnerships:
- Health Insurance Plan: 22
- Faith-based organization: 21
- Schools (K-12): 18
- Business: 16
- Media: 16

Partnerships chart
Hospitals Reporting Interventions Part Of DSRIP Application, December 2014 (N=123 Hospitals/Groups)

- Yes: 48.0%
- No: 13.8%
- Unsure: 29.3%
- No DSRIP application: 8.9%
Schedule H Community Benefit Reporting By New York State Hospitals, 2010

<table>
<thead>
<tr>
<th>Category</th>
<th>Total (millions of dollars)</th>
<th>Percent (of total expenditures)</th>
<th>Percent Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charity care</td>
<td>437</td>
<td>1.09%</td>
<td>(-2.41) - 23.17%</td>
</tr>
<tr>
<td>Unreimbursed Medicaid</td>
<td>1,498</td>
<td>3.22%</td>
<td>(-7.80) - 30.35%</td>
</tr>
<tr>
<td>Other means-tested government programs</td>
<td>40</td>
<td>0.10%</td>
<td>(-3.25) - 55.0%</td>
</tr>
<tr>
<td>Community health improvement services</td>
<td>166</td>
<td>0.41%</td>
<td>0 - 10.62%</td>
</tr>
<tr>
<td>Health professionals education</td>
<td>1,245</td>
<td>3.09%</td>
<td>(-2.01) - 8.62%</td>
</tr>
<tr>
<td>Subsidized health services</td>
<td>485</td>
<td>1.20%</td>
<td>(-0.09) - 13.98%</td>
</tr>
<tr>
<td>Research</td>
<td>89</td>
<td>0.22%</td>
<td>0 - 2.96%</td>
</tr>
<tr>
<td>Cash and in-kind contributions</td>
<td>14</td>
<td>0.04%</td>
<td>0 - 0.78%</td>
</tr>
<tr>
<td>Community benefit total</td>
<td>3,949*</td>
<td>9.81%</td>
<td>0.55 - 46.33%</td>
</tr>
</tbody>
</table>

Table 2. New York 2010 Form 990 H Supplemental Category Reporting

<table>
<thead>
<tr>
<th>Supplemental categories</th>
<th>Total Expenditures (millions of dollars)</th>
<th>Average Percent of Expenditures</th>
<th>Percent Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community building expenses</td>
<td>18</td>
<td>0.04%</td>
<td>0 - 3.22%</td>
</tr>
<tr>
<td>Bad debt attributable to charity care</td>
<td>158</td>
<td>0.39%</td>
<td>(-1.38) - 3.29%</td>
</tr>
<tr>
<td>Unreimbursed Medicare</td>
<td>414</td>
<td>1.03%</td>
<td>(-34.31) - 53.16%</td>
</tr>
<tr>
<td>Supplemental measures total</td>
<td>590</td>
<td>1.46%</td>
<td>(-26.74) - 56.75%</td>
</tr>
</tbody>
</table>

Source: New York Academy of Medicine, Achieving the Triple Aim in New York State: the Potential Role of Hospital Community Benefit (Issue Brief June 2014)
Interventions On Hospital's Schedule H Tax Form, December 2014 (N=123 Hospitals/Groups)

- 39.0% reported both on Schedule H
- 22.8% reported No
- 23.6% reported Unsure
- 14.6% reported just one on Schedule H
New York State - Age-adjusted preventable hospitalization rate per 10,000 - Aged 18+ years

Data Source: SPARCS data as of December 2014

Year

Age-adjusted rate

2008 2009 2010 2011 2012 2013
Government Sponsored Insurance Programs - Percentage of children with an outpatient visit, during the measurement year, that includes an assessment for weight status - Aged 3-17 years

Data Source: Office of Quality and Patient Safety data as of January 2015
New York State - Percentage of adolescents (youth aged 12-17 years) reporting non-medical use of painkillers in the past year

Data Source: National Survey on Drug Use and Health data as of March 2015
New York State - Ratio of Black non-Hispanics to White non-Hispanics for maternal mortality rate

Data Source: Vital Statistics data as of April 2015
New York State - Prevalence of any tobacco use (cigarettes, cigars, smokeless tobacco) by high school age students

Data Source: NYS Youth Tobacco Survey data as of January 2015

[Graph showing the prevalence of tobacco use from 2000 to 2014, with a downward trend.]
New York State - Age-adjusted heart attack hospitalization rate per 10,000

Data Source: SPARCS data as of December 2014

Age-adjusted rate

Year

2008 2009 2010 2011 2012 2013

16.7 15.9 16.7 15.1 15.2 14.2

14 14 14 14 14 14

Age-adjusted rate
PA 2017

Data Source: National Immunization Survey data as of January 2015
New York State - Percentage of adults who are obese

Data Source: NYS Behavioral Risk Factor Surveillance System data as of January 2015
What’s Next?

• Alignment with Health Reform:
  – Reviewing 1st Quarter Reports from DSRIP to assess conformity with PA
  – Participating in SIM to incorporate PA goals into processes to transform primary care

• Minority Health Data Report – goal is to stimulate attention to health disparities
What’s Next?

• Next Cycle of Community Health Improvement Planning
  – IRS Deadline: December 2016
  – Aligning IRS, PHAB and NYS requirements into one guidance
  – Goal is to ask for one report by county with contributions from LHD and hospitals clearly articulated
  – Can be update from most recent completed CHNA for DSRIP
  – Role for PHIPs

• Next Ad Hoc Committee Meeting: September 24
QUESTIONS