Prevention Agenda 2013-2018

• Goal is improved health status of New Yorkers and reduction in health disparities through increased emphasis on prevention

• Call to action to broad range of stakeholders to collaborate at the community level to assess local health status and needs; identify local health priorities; and plan, implement and evaluate strategies for community health improvement

• Incorporated into NYS Health Care Reform Initiatives
Importance of Prevention Agenda

• Focuses on Underlying Causes of Disease and Determinants of Health
• Helps DOH align goals and investments
• Achieved strong collaboration with partners
• Emphasizes Local Collaborative Planning and Highlights Community Benefit
• Outcomes Driven
Estimated Number of Deaths Due to Modifiable Behaviors
NY State, 2014

47% of all deaths are attributed to these eight modifiable behaviors

Source: Estimates were extrapolated using the results published in:
Five Prevention Agenda Priorities

1. Prevent chronic diseases
2. Promote a healthy and safe environment
3. Promote healthy women, infants and children
4. Promote mental health and prevent substance abuse
5. Prevent HIV, sexually transmitted diseases, vaccine-preventable diseases and healthcare associated infections
Health Determinants and Health Spending

Health Behaviors 30%
Clinical Care 20%
Social and Economic Factors 40%
Physical Environment 10%

$3 Trillion
Prevention 3%
Medical Services 97%

Determinants of Health
National Health Expenditures


NYS Spending on Public Health

• As per Trust for America’s Health, NYS invested $2.14 billion in public health in 2013-2014 (all sources, including operations).
• Spending is second highest per capita expenditure ($109.11) among all states, and 3.5 times higher than median state expenditure level per capita.
• NYS spent $1.5 billion in public health programs and activities in the community associated with Prevention Agenda priorities, including public health infrastructure and social determinants of health.

Available at: http://healthyamericans.org/assets/files/TFAH-2015-InvestInAmericaRpt-FINAL.pdf
Prevention Agenda 2013-2018:
Ad Hoc Leadership Group

Collaborative effort led by committee appointed by Public Health and Health Planning Council, including leaders from Healthcare, Business, Academia, CBOs, Local Health Departments, and other State Agencies including OMH and OASAS

Final Priorities based on active participation from members of committee and stakeholder feedback
Significant Partner Actions

• **NYS Office of Mental Health:** partnered to focus attention on mental health promotion

• **NYS Health Foundation**
  – invested over $500,000 in grants to 27 Local Health Departments to help them implement community health improvement plans
  – invested over $500,000 in technical assistance to support implementation at local levels.

• **HANYS, NYSACHO, GNYHA:** hosted training and TA opportunities for their members
Local Community Health Planning Requirements

• Informed by:
  – NYS Public Health Law requirements for Local Health Departments and Hospitals
  – Experience with Prevention Agenda 2008-12
  – Public Health Accreditation Standards
  – Affordable Care Act Community Benefit Rules

• Goal is to promote collaboration to identify shared goals and actions to address them.
Community Health Improvement Plan
Requirements for Hospitals

Asks Hospitals to:

– Submit Schedule H from IRS form 990 so NYS can track investments
– Invest in Prevention Agenda implementation activities and document them in community benefit reporting to IRS
– Align NYS Medicaid Reform ("DSRIP") work with local community health improvement efforts to support Prevention Agenda goals

Goal is increased investments in the community health improvement and community building categories of community benefit, and in evidence based interventions described in the Prevention Agenda.
Hospital Community Benefit Investment

In 2013, community benefit accounted for 12% of NYS hospital’s total expenses, including 0.4% of expenses for community health improvement.

<table>
<thead>
<tr>
<th>Community Benefit</th>
<th>Percentage of Total Operating Expenses Nationally, 2009</th>
<th>Percentage of Total Operating Expenses NYS, 2010</th>
<th>Percentage of Total Operating Expenses NYS, 2012</th>
<th>Percentage of Total Operating Expenses NYS, 2013</th>
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</thead>
<tbody>
<tr>
<td>All Categories</td>
<td>7.50%</td>
<td>10.26%</td>
<td>11.04%</td>
<td>11.80%</td>
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<tr>
<td>Charity Care</td>
<td>1.9</td>
<td>1.04</td>
<td>1.03</td>
<td>1.07</td>
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<tr>
<td>Unreimbursed Cost for Means Tested Government Programs</td>
<td>3.4</td>
<td>3.62</td>
<td>3.79</td>
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<tr>
<td>Subsidized Health Services</td>
<td>1.1</td>
<td>1.13</td>
<td>1.02</td>
<td>1.12</td>
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<tr>
<td>Community Health Improvement</td>
<td>0.4</td>
<td>0.42</td>
<td>0.53</td>
<td>0.37</td>
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<tr>
<td>Cash or In Kind Contributions</td>
<td>0.2</td>
<td>0.04</td>
<td>0.04</td>
<td>0.08</td>
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<tr>
<td>Research</td>
<td>0.1</td>
<td>0.91</td>
<td>1.11</td>
<td>0.78</td>
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<tr>
<td>Health Professions Education</td>
<td>0.4</td>
<td>3.09</td>
<td>3.44</td>
<td>3.69</td>
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</table>

New York State Department of Health Office of Public Health Practice.
Are Prevention Agenda Interventions Included in Community Benefit Reporting? 2014 vs. 2015

<table>
<thead>
<tr>
<th>On Schedule H</th>
<th>Just one on Schedule H</th>
<th>Yes both on schedule H</th>
<th>No</th>
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<tbody>
<tr>
<td>2014</td>
<td>14.6</td>
<td>39</td>
<td>22.8</td>
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<tr>
<td>2015</td>
<td>11.0</td>
<td>61.4</td>
<td>11.8</td>
</tr>
</tbody>
</table>

Percent

2014: 14.6, 39, 22.8, 23.6
2015: 11.0, 61.4, 11.8, 15.8
Trend: Overall, New York

Rank Based On: Weighted sum of the number of standard deviations each core measure is from the national average.