WELCOME & INTRODUCTIONS

Mike Carnathan
Atlanta Regional Commission
ARCHI BRAND RELAUNCH

Kathryn Lawler

ARCHI
COMMUNICATIONS FEEDBACK IN 2016

- 42% felt it would be difficult to explain what ARCHI is to a colleague
- 53% not familiar with transformation scenario
- 37% of participants felt that the overall quality of ARCHI’s communications could be improved
ARCHI TODAY

- Respected. Has the backing of “heavy hitters” in the region.
- Its affiliation with ARC, GHPC, and United Way provides significant credibility.
- Members are interested, hopeful, and cautiously optimistic.
- Understand the mission and goals, but find it very hard to explain it succinctly.
- Too many priorities and focus areas. The big picture overwhelms the steps.
OBSERVATIONS

ARCHI Does:
• Backbone support
• Common agenda
• Convene and facilitate
• Provide data
• Synthesize evidence
• Align at different levels
• Demonstrate proof of concept
• Communicate

ARCHI Does NOT Do:
• Operate programs
• Provide ongoing staff support
• Provide grant funding or awards
GUIDANCE FOR FUTURE COMMUNICATIONS

• It is not about healthcare delivery / much broader
• Communicate short-term wins and benefits, and how this connects to the bigger picture
• Demonstrate how groups have come together as a result of ARCHI affiliation (tangible outcomes/ how Playbook gets operationalized)
• Identify and connect-the-dots of all of the resources/assets in the Region (matchmaker)
• Help us imagine how entities can start working together
More than health

Where discussion meets actions

Stronger together

Pulling puzzle pieces together

Complementary connections
HEALTH&
&
bottomline
&
balanced
health
&
better
beings
archi
LOGO UNPACKED

The use of a lowercase font symbolizes the equal representation of all members of the movement.

The type is set in italics which speaks to our forward progress.

The iconic ampersand integrates the & framework directly into our visual identity, the mark of our movement.

The equal width of our logo and tagline represents our balanced approach to health.

The use of the circle and skewed location pin that composes the ampersand indicates that the time is now and the place is here.

HEALTH IS UNBALANCED IN OUR REGION
Evidence points us to look beyond the usual suspects.
There are more factors involved in shaping our health outcomes.
WE UNCOVER
complimentary context for diverse stakeholders to evolve the health landscape.

WE ACTIVATE
innovative models that demonstrate mutual benefit and accelerate both health and economic improvement.

WE PROVIDE
an unbiased platform to incentivize unlikely partners to work together.

We.
Are committed.
To mutual benefit.
CO-DESIGNING SOLUTIONS
Community-led and informed progress

BUILDING CREDIBILITY
Strong reputation and influential support

TRANSFORMING SYSTEMS
Cross-sector collaboration and lasting impact

CARRYING THE TORCH
Data-driven transformation models

INVESTING IN US
Reinvestment of savings in our communities
The status quo is not an option

We have established a shared vision & are activating first steps.
ATLANTA TRANSFORMATION SCENARIO

ENCOURAGING HEALTHY BEHAVIORS

FAMILY PATHWAYS

COORDINATED CARE

GLOBAL PAYMENT

CAPTURE AND REINVEST

EXPAND INSURANCE

INNOVATION FUND
ARCHI DOES THIS IN FOUR CRITICAL WAYS:

1. PROVIDE UNBIASED PLATFORM
2. INCENTIVIZE UNLIKELY PARTNERS
3. ACTIVATE INNOVATIVE MODELS
4. DEMONSTRATE MUTUAL BENEFIT

DECREASE
- HEALTHCARE COSTS BY 13%
- NON-URGENT ER TRIPS BY 45%
- HOSPITAL READMISSIONS BY 13%

INCREASE
- WORKER PRODUCTIVITY BY 7%
- ACCESS TO PREVENTIVE AND CHRONIC CARE BY 16%
BOTTOM LINE
BALANCED HEALTH BETTER BEINGS
HEALTH IS UNBALANCED IN OUR REGION

Outcomes lag behind the $11 billion spent annually on healthcare. Rigid silos stand tall between sectors. Disparity gaps are wider than ever. It’s time to think and do differently.
TRANSFORMATION SCENARIO UPDATE
ATLANTA TRANSFORMATION SCENARIO

1. EXPAND INSURANCE
2. Coordinated Care
3. Family Pathways
4. Encouraging Healthy Behaviors

Capture and Reinvest
Innovation Fund
Global Payment
Health Reform Update
ARCHI
September 13, 2017

Bill Rencher, JD, MPH
Three-Pronged Approach

3 R’s
• Reconciliation
• Regulation (and other administrative actions)
• Regular order
Reconciliation Update

- AHCA passed U.S. House on May 4, 2017
- Senate substitute, the Better Care Reconciliation Act introduced as a substitute on July 19, 2017
- BCRA, after several amendments, was defeated by the Senate on July 26, 2017
- Other bills also defeated in the Senate
  - Obamacare Repeal Reconciliation Act – July 26, 2017
  - “Skinny Repeal” – July 28, 2017
- Graham / Cassidy efforts for state block grants have received support from President Trump
- Current reconciliation resolution expires September 30, 2017 at midnight
Regulation & Administrative Action – Updates

• Opioid Epidemic declared a national emergency, allowing agencies “...to use all appropriate emergency and other authorities to respond to the crisis....”

• Proposed rule to implement Disproportionate Share Hospital payment cuts in 2018

• 2018 Open Enrollment
  • CMS education and promotion budget reduced from $100 million to $10 million for 2018 open enrollment
  • Navigator funding for FFEs reduced from $62.5 million to $36.8 million, a 41% decrease
  • Navigator funding will be dependent on meeting enrollment goals

• CSR subsidies paid for August; uncertainty about future payments
Regular Order – Updates

• Market Stabilization Proposals
  • Lamar Alexander (R-TN) and Patty Murray (D-WA)
    • Would extend CSR payments for one year
    • Make waiver approval process more flexible
  • Governors’ proposal led by John Kasich

• Children’s Health Insurance Program (CHIP)
  • Must be re-authorized by September 30
  • Most states would run out of funding by June 2018; Georgia by April 2018

• “Medicare for all” bill to be introduced today
1115 and 1332 Waivers

• March 2017 letter to governors signal additional flexibility forthcoming:

“...we commit to ushering in a new era for the federal and state Medicaid partnership where states have more freedom to design programs that meet the spectrum of diverse needs of their Medicaid population...”

From HHS Secretary and CMS Administrator
## 1115 Medicaid Waivers

**Alternative Medicaid**

<table>
<thead>
<tr>
<th>Pending provision as of Aug 2017</th>
<th>Number</th>
<th>States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work requirements</td>
<td>4</td>
<td>AR, AZ, IN, KY</td>
</tr>
<tr>
<td>Time limit on coverage</td>
<td>1</td>
<td>AZ</td>
</tr>
<tr>
<td>Limit expansion eligibility to 100% FPL with enhanced match</td>
<td>1</td>
<td>AR</td>
</tr>
<tr>
<td>Monthly income verification and eligibility renewals</td>
<td>1</td>
<td>AZ</td>
</tr>
<tr>
<td>Lock-out for failure to timely renew eligibility</td>
<td>1</td>
<td>KY</td>
</tr>
<tr>
<td>Tobacco surcharge</td>
<td>1</td>
<td>IN</td>
</tr>
</tbody>
</table>
1332 Waivers Update

- Alaska – approved July 11, 2017
  - Waives community rating requirements and allows risk payments to factor into rating
  - Operate Marketplace reinsurance program to lower premiums and keep insurers in market
  - Access federal pass-through funds to sustain program / offset state costs

- Oklahoma – submitted August 16, 2017
  - Similar to Alaska’s, but funded with both state and federal funds
  - Approval pending

- Iowa, Minnesota, and Vermont still pending
Georgia Marketplace Update

- 2018 open enrollment November 1 – December 15, 2017
- Four insurers offering plans in Georgia:
  - Alliant
  - Ambetter (Peach State)
  - Anthem BCBS
  - Kaiser Permanente
- Most counties will have only one insurer
- Anthem BCBS not available in metro Atlanta after DOI compromise
- Rate increases of 18.6% to 40%, with average of 24.15%, over 2017 rates
Thank you!

- http://ghpc.gsu.edu/project/health-reform/
- wrencher1@gsu.edu
Georgia Community Health Worker Initiative

Christine Wiggins, MPH, CHES
Chronic Disease Prevention Deputy for Planning and Partnerships
How We Got Started

- DPH along with representatives from Kaiser Permanente, United Way of Atlanta, Morehouse School of Medicine, Grady Health System, ARC, and ARCHI began meeting in the summer of 2016 to plan a statewide CHW Forum (CHW Steering Team).
- CHW Forum took place on November 17, 2016 at Georgia Tech Hotel and Conference Center.
  - Approximately 130 people were present representing health systems, community based organizations, academia, state and local government and other sectors.
  - The Forum, included presentations on CHW models used in other states, a discussion of proposed definitions for the term CHW in Georgia, information about the existing wide range of CHW programs, approaches, and policies in Georgia; baseline training needs for CHWs; and, networking opportunities.
Next Steps

• As a result of the feedback received from the Forum, the CHW Steering Team members decided to do the following:
  – Develop a CHW webpage that would provide updates and information about the work of CHWs in Georgia
    • https://dph.georgia.gov/community-health-workers
  – Establish an Advisory Board to help align our efforts statewide to define, train, and certify CHWs, and to provide recognition to this growing group of professionals.
  – Host another Forum in the Fall of 2017
CHW Advisory Board

• Made up of 18 individuals who represent health systems, health plans, academia, community based organizations, advocacy groups, rural health, government, physicians, nursing, public health, social work, legal, and most importantly, community health workers.

• Initial task was to come to a consensus on a CHW definition for Georgia

• Currently in the process of developing a consensus document that includes recommendations on training, certification, and payment and reimbursement of CHW services in Georgia
2017 CHW Forum

- Tentatively scheduled for November 29, 2017 in Atlanta, GA.
- Purpose - to gain input and support on the consensus document currently being developed by the CHW Advisory Board.

- Who we would like to see attend:
  - CHWs
  - Physicians, nurses, social workers, and other members of the care team
  - Health Systems
  - Health Plans, Medicaid
  - EMS
  - Home Visiting Programs
  - Community and Faith Based Organizations
  - Public Health
  - Rural Health
  - Academia
What Can You Do?

• Let us know about your CHW Programs
  – What is the job description you use for CHWs?
  – What is the source of funding?
  – How are CHWs part of the care coordination?

• Share your thoughts and suggestions
  – Attend the upcoming Forum
  – Email your feedback to chronic.disease@dph.ga.gov
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FAMILY PATHWAYS EVIDENCE-BASED INTERVENTION PANEL

Shannon Sale, Grady Health System
Y. Denise Mayhan, Grady Health System
Kimberly Stringer Ross, Georgia Department of Public Health
Comer Yates, Atlanta Speech School
ANNOUNCEMENTS & CLOSING
Kathryn Lawler
ARCHI
ARCHI PARTNERS

Alliant GMCF
American Cancer Society
American Diabetes Association
Arthur M. Blank Family Foundation
Atlanta Community Food Bank
Atlanta Community Health Interfaith Partners
Atlanta Housing Authority
Atlanta Neighborhood Development Partnership (ANDP)
Atlanta Regional Commission
Atlanta Volunteer Lawyers Foundation
Carter Center
Charitable Connections
ChildKind
CHRIS Kids, Inc.
Clayton State University, School of Nursing
Club E. Atlanta
Common Market Georgia
Community Foundation for Greater Atlanta, Inc.
Community Health Interfaith Partners
Community of College Park
Concerned Black Clergy
DeKalb County Board of Health
DeKalb County Government
Diabetes Community Action Coalition, Inc.
Emory Fuqua Center for Late Life Depression
Emory Healthcare
Emory University – Urban Health Program
Enterprise Community Partners
Families First, Inc.
Friends of Refugees
Fulton County Government
Georgia Alliance for Health Literacy
Georgia Center for Nonprofits
Georgia Department of Public Health
Georgia Health Policy Center
Georgia Institute of Technology
Georgia State University
Get Georgia Reading
Global Dialogues
Grady Health System
Health Equity Advocacy & Resource Center
Health Promotion Action Coalition, Inc
Hillside
Historic Westside Gardens Atl, Inc
I Can Be The Change
Insure Georgia
Jesus Set the Captive Free
Kaiser Permanente of Georgia
Legacy Community Housing Corporation
Live Living International Foundation
Marcus Autism Center
Metro Atlanta Urban Farm
Metropolitan Counseling
Muni Cares, Inc.
Oakhurst Medical Centers
Odyssey Family Counseling Center
One Talent Inc.
Open Hand Atlanta
Partnership for Southern Equity
Perkins & Will
Piedmont Healthcare
Resurgia Health Solutions
Rimidi, Inc
RiteAid Pharmacy
Saint Joseph’s Health System/Mercy Care
Saving Our Sons & Sisters International
South Fulton Human Services Coalition
Southside Medical Center
TechBridge
Truly Living Well
United Way of Greater Atlanta
Veterans Empowerment Organization
Visiting Nurse Health System
Voices of Georgia’s Children
Wellcare
Wellstar
West End Medical Center Inc.
HEALTHY BEHAVIORS:
Atlanta Bike Challenge- October 2017  www.lovetoride/atlanta

Atlanta Beltline Westside Trail opens September 29th

CARE COORDINATION:
Community Health Worker Forum- November 29th

FAMILY PATHWAYS:
Connect ATL- September 22nd GA Tech Conference Center

Health Connect South- September 28th
www.healthconnectsouth.com      ARCHI members receive discount!

State of the Region Breakfast- November 3rd
www.atlantaregional.org

December 6th ARCHI QUARTERLY BREAKFAST
NEXT QUARTERLY MEETING

December 6, 2017