



Scott Leitz, Assistant Commissioner  
Minnesota Department of Health  
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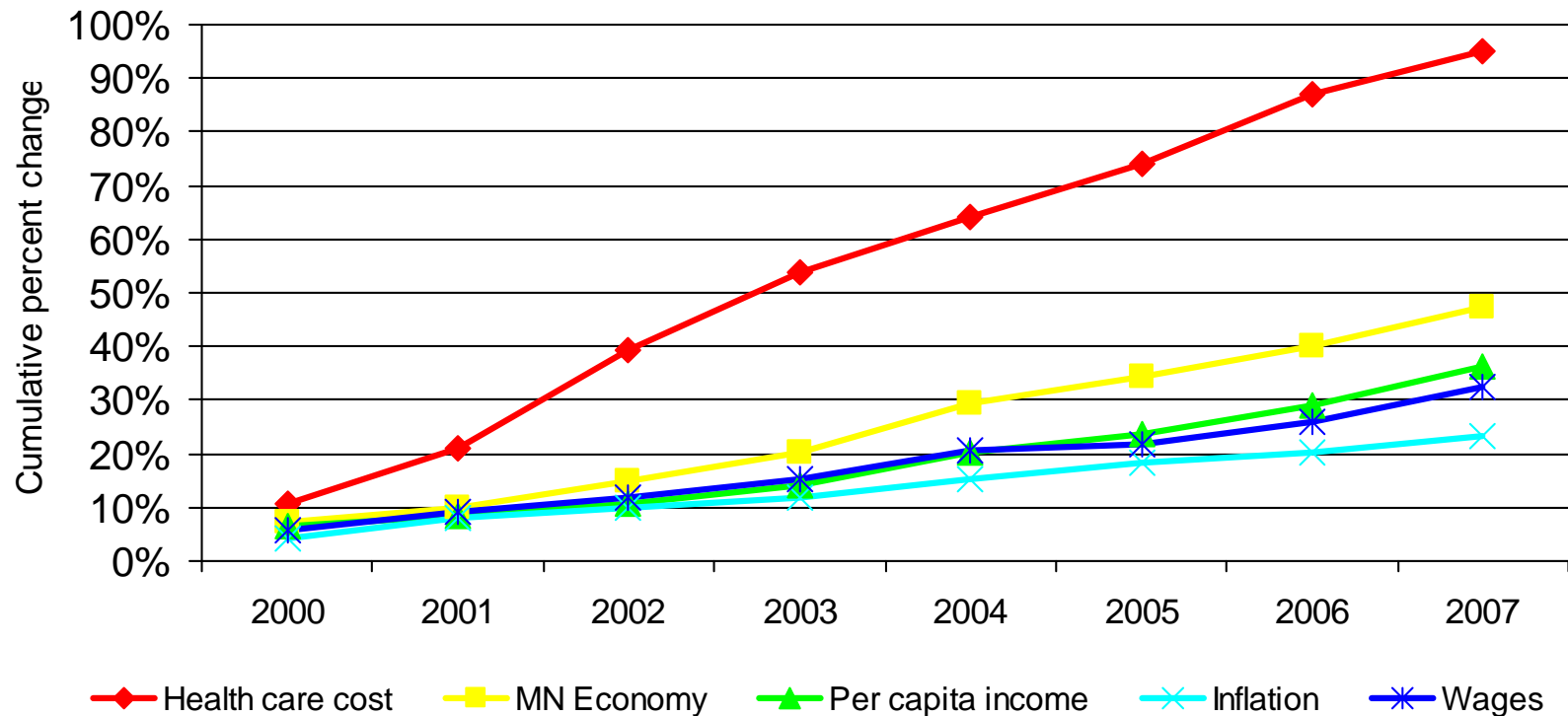
# Minnesota's Vision for a Better State of Health

- Our goals for health reform:
  - Improve the overall health of the population
  - Improve the patient experience
  - Improve the affordability of health care
- We want to improve access to health care.
- To do that, we have to contain rising health care costs.

# Minnesota Starts from a Good Place



# Minnesota Still Faces Challenges: Rising Health Care Costs (cont)

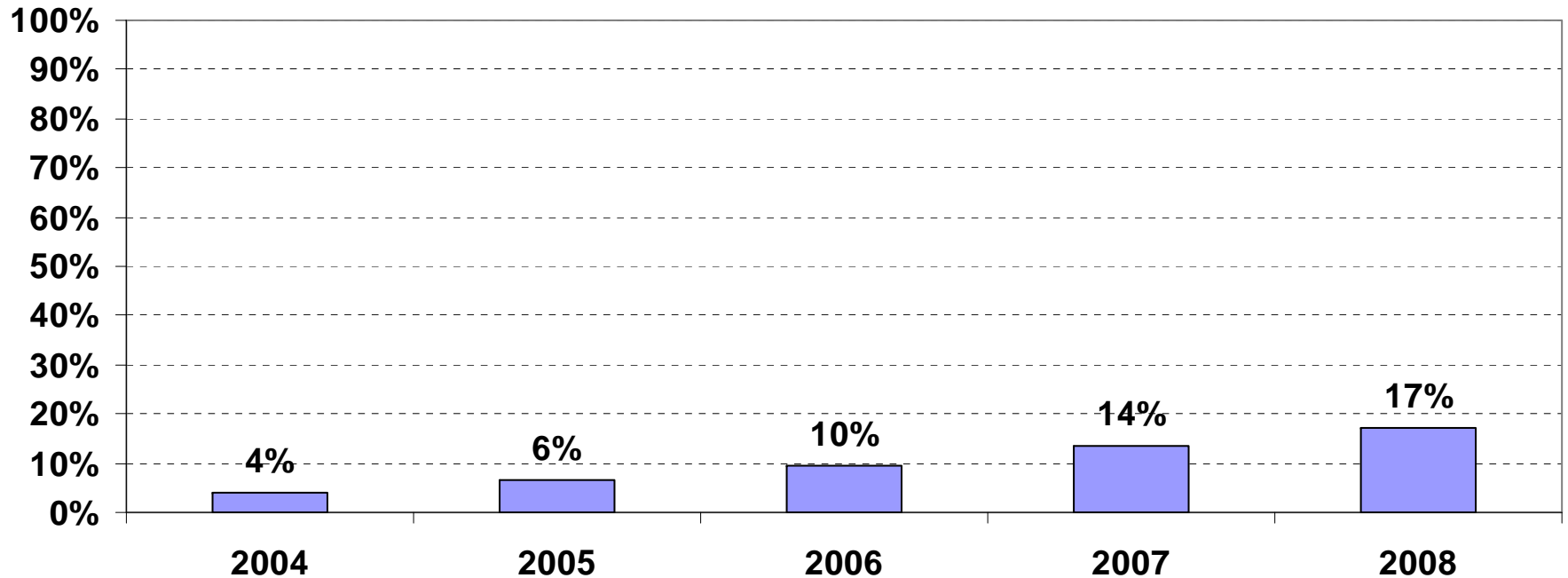


Note: Health care cost is MN privately insured spending on health care services per person, and does not include enrollee out of pocket spending for deductibles, copayments/coinsurance, and services not covered by insurance..

Sources: Minnesota Department of Health, Health Economics Program; U.S. Department of Commerce, Bureau of Economic Analysis; U.S. Bureau of Labor Statistics, Minnesota Department of Employment and Economic Development

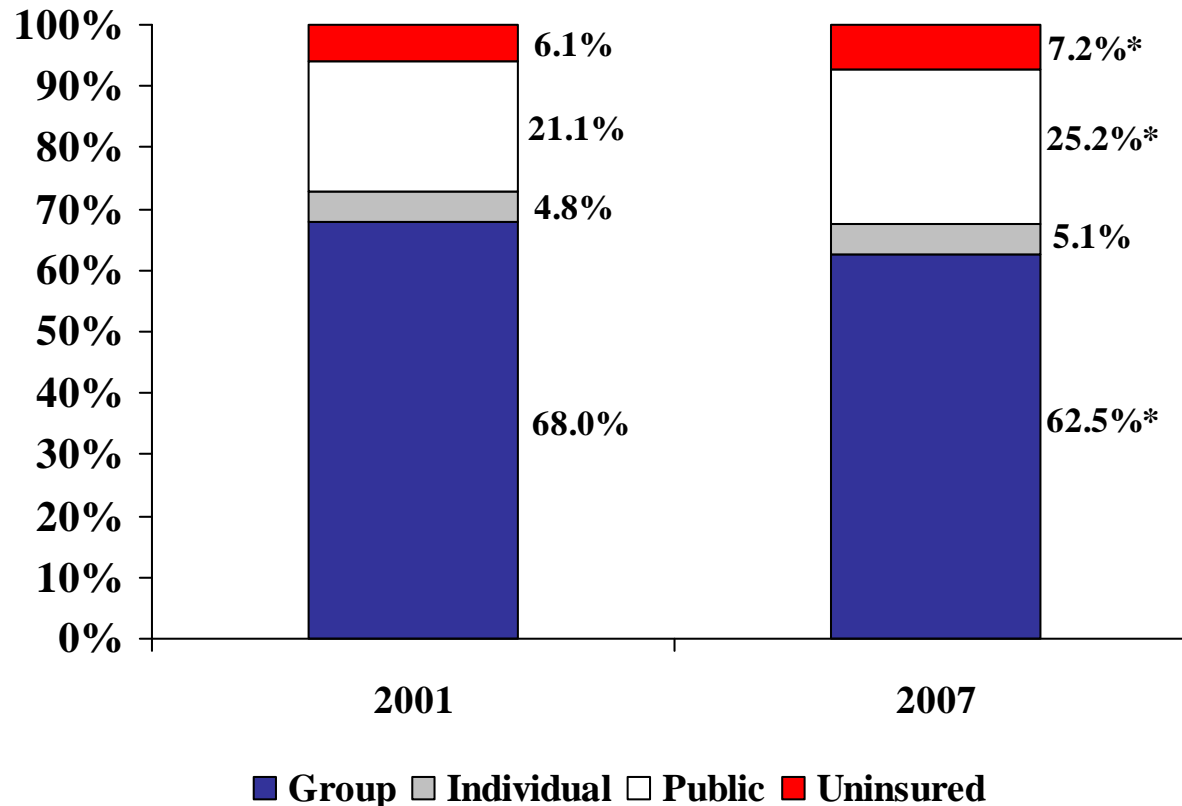
# Minnesota Still Faces Challenges: Quality is Improving, but Uneven

Percent of diabetics receiving optimal diabetes care



Source: Minnesota Community Measurement Health Care Quality Report

# Minnesota Still Faces Challenges: Coverage and Uninsured



Source: Minnesota Health Access Surveys, 2001 and 2007

# Minnesota's Vision: Nation-leading Reforms



- In 2008 we passed health reform legislation that takes a comprehensive approach.
- Public health investment
- Market transparency
- Care redesign and payment reform
- Consumer engagement
- E-health

# Minnesota's Vision for Public Health



- Minnesota's 2008 health reform law started with an investment in public health.
- In August, we launched the Statewide Health Improvement Program, or SHIP.
  - \$47 million investment in public health aimed at reducing tobacco use and obesity.
- Statewide scope includes 39 grants covering:
  - 86 of 87 counties
  - 8 out of 11 tribal governments

# Minnesota's Vision: Market Transparency



- Provider Peer Grouping
  - Compares providers based on both quality and risk-adjusted cost.
  - More comprehensive information for consumers, providers, health plans and employers.
- Statewide Quality Reporting System
  - Creates a common statewide set of provider quality measurement
  - Aligns efforts and creates mechanism for development of new measures.

# Minnesota's Vision: Care Redesign & Payment Reform



- Health Care Homes
  - Redesign of primary care that puts patient and family at the center of care
  - Reimbursement for care coordination – something that is not paid for now
- Baskets of Care
  - Episodes of care/bundled services
  - Different way to pay for and deliver care
- Creation of tools such as provider peer grouping that can be used in future payment reform efforts

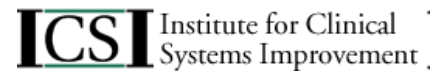
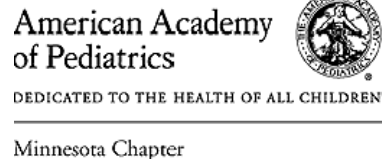
# Minnesota's Vision: E-health



- Interoperable electronic health records required by 2015.
- E-prescribing required by 2011.
- All Minnesotans have an online personal health portfolio by 2011, and that all state employees have portfolios by 2009.
- Exchange of common health care business transactions electronically required this past July.
  - Reduce health care administrative costs by more than \$60 million a year.

# Many Partners Involved in First Year of Implementation

- Broad stakeholder process
  - Development of health care homes, baskets of care, provider peer grouping system all include public and private sector participation
- Partnering with many organizations



MINNESOTA'S  
**V**ISION  
*A Better State of Health*

[www.health.state.mn.us/healthreform](http://www.health.state.mn.us/healthreform)