

OHIC NEWS

RHODE ISLAND SEES RETURN ON INVESTMENT IN PRIMARY CARE

More patient-centered practices, gains in behavioral healthcare integration

Rhode Island is among the top states for patients being seen in advanced primary care practices, according to a report by the Care Transformation Collaborative Rhode Island ([CTC-RI](#)).

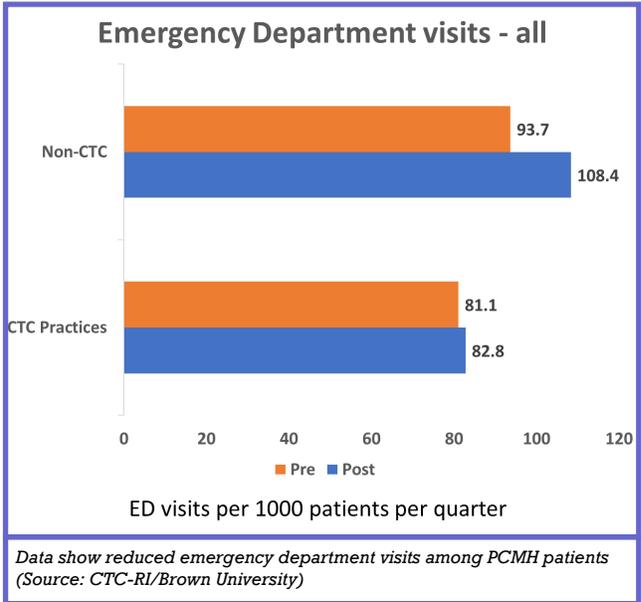
With 260 primary care practices in the state designated as patient-centered medical homes (PCMH), Rhode Island is currently ranked third in the nation for PCMH-designated practices per capita.

The advancement in primary care is a result of sustained investment under OHIC's Affordability Standards, which have directed an additional \$87 million into primary care since 2010.

In a recent letter, Ann Grenier, President and CEO of the Patient-Centered Primary Care Collaborative, cited a July 2017 *Health Affairs* article in highlighting Rhode Island's success in primary care investment, writing that OHIC "[increased] health plan primary care spending as a percentage of medical spending from approximately 5% in 2008 to between 8-11% in 2014. **During this time period, overall health spending in Rhode Island grew slower than in any other New England state**" except New Hampshire.

CTC-RI also reports that 12 primary care practices have begun regular screenings for depression, anxiety, and substance use within the primary care setting as part of an effort to integrate behavioral health with primary care.

This integrated behavioral health project—supported



by the State Innovation Model (SIM), the Rhode Island Foundation, and Tufts Health Plan—is still in an early pilot stage, but preliminary results show success in diverting behavioral health patients from expensive emergency room visits via screening and intervention on the part of the primary care practice.

The patient-centered medical home model focuses on coordinated, accessible, team-based care through the primary care provider, with an emphasis on prevention and overall wellness. PCMH practices “improve quality, the patient experience and staff satisfaction, while reducing health care costs,” according to the National Committee for Quality Assurance.

State Innovation Model Releases Health Assessment Report

A new statewide Health Assessment Report was published in July under Rhode Island's State Innovation Model (SIM) grant.

The report profiles eight health focus areas including obesity, substance use disorders and chronic disease, and will help align goals and assessments among varied stakeholders engaging in population health planning.

View the report at www.eohhs.ri.gov/ReferenceCenter/StateInnovationModelSIM/Publications.aspx

Rhode Island's
Health Insurance Consumer Helpline



1.855.747.3224

www.rireach.org

RI has culture of collaboration when it comes to health care

I was humbled and excited to be appointed by Governor Raimondo to serve as Rhode Island's next Health Insurance Commissioner, effective July 17, 2017.

I have enjoyed working on health care policy for many years, working cooperatively with businesses, patient advocates, healthcare providers and insurers. Rhode Island has, in recent decades, quietly built a tradition of innovation in healthcare. It was in this tradition that the Office of the Health Insurance Commissioner – the first and only state-level office of its kind in the US – was created to not only guard the solvency of the health insurance market, but to transform it into a system based on quality and value.

OHIC's first-in-the-nation Affordability Standards have been helping to drive that transformation. Since 2010, we have seen tens of millions of additional dollars invested in our state's primary care infrastructure, resulting in slowed growth in the use of expensive hospital services. Our state successfully implemented the Affordable Care Act, including OHIC's comprehensive rate review process that has saved Rhode Islanders \$236 million in excess premiums since 2013, and ensured insurers compliance with state coverage requirements.

As a result, the number of uninsured in Rhode Island is

down to its lowest level **ever**—from over 11% in 2012 to under 5% now. **We have seen continued stability in our health insurance market, as well as some of the lowest overall average premium growth in the nation.**

This is real progress, but we still have a long way to go. Too many Rhode Island workers and business owners still struggle to afford health insurance, or pay their co-pays or deductibles. On top of the perennial challenges of rising costs and utilization, we must also confront the remaining barriers to access to treatment for mental health and substance use disorders. And we have already seen how even the threat of federal health policy changes this year can set back the progress we have achieved.

States across the US are facing these challenges, but Rhode Island's tradition of proactively protecting consumers through collaborative and innovative health care policy makes us especially well equipped to address them. It is within this tradition that I will work, as Health Insurance Commissioner, to ensure that consumers are treated fairly and can get the care they need.

Sincerely,




Marie L. Ganim, PhD

Upcoming Meetings

State Innovation Model (SIM) Steering Committee

Meets the 2nd Thursday of every month

Thursday, September 14, 5:30—7:30 PM
HP Conference Center
301 Metro Center Blvd., Warwick

Administrative Simplification Workgroup

Tuesday, September 19, 10 AM—12 PM
Department of Labor and Training Conference Rm.
1511 Pontiac Ave. Building 73-1, Cranston

Health Insurance Advisory Council

Meets the 3rd Tuesday of every month

Tuesday, September 19, 4:30—6 PM
Department of Labor and Training Conference Rm.
1511 Pontiac Ave. Building 73-1, Cranston

Alternative Payment Methodologies & Care

Transformation Committees Joint Meeting

Friday, October 6, 8—11 AM
Department of Labor and Training Conference Rm.
1511 Pontiac Ave. Building 73-1, Cranston



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