



Minnesota Health Care Marketplace

- Low number of uninsured- 7.2%
- Healthiest state in the nation 4 out of the last 5 years
- Most state-wide purchasing tools in marketplace:
 - Institute for Clinical System Improvement (ICSI) establishes standards
 - Minnesota Community Measurement (MMC) publicly reports quality of over 700 clinics state-wide
- Highest use of Health Saving Accounts- 9.2%
- High purchase of long term care insurance – 10% (over 50 years)
- More integrated systems (hospitals & clinics)
- More primary care physicians / citizen
- High employer sponsored insurance
- Not for profit HMO's
- Collaborative history
- Three separate coordinates public programs:
 - Medical Assistance
 - General Assistance Medical Care
 - MinnesotaCare
- 2% provider tax
- High risk pool insurance – long established and subsidized Minnesota Comprehensive health Association (MCHA)
- State-wide public/private purchasing coalition creates market forces for reform Smart Buy Alliance
- HHS Chartered Value Exchange- Minnesota is one of the original designated



Minnesota Health Care Reform

- State Health Improvement plan – distributes \$47 million to Minnesota communities- on a competitive basis to effect health status improvement relating to obesity and tobacco.
- Establish criteria for “health care homes”, which will assume more responsibility for navigating a consumer’s health care.
- Authorizes payment of care for coordination fees to health care homes.
- Mandate for e-prescribing- all providers, plans and pharmacies.
- Uses encounter data to establish peer groupings of providers based on quality and efficiency.
- Establish at least 7 bundles of care for rapid transparency of certain conditions.
- Lends \$50 million to general fund until these reforms saves \$50 million.
- State is active business partner in the Health Information Exchange- to establish interoperability of electronic health records and information.
- Common coding and administrative standards will be completed by the AUC (uniformity group) by 2009.
- Personal health records will be connected by 2009 for many, for all by 2011.
- Transparency project will display 100 most common procedures price and provider and will also list the 50 most common ordered imaging by prices/provider.
- Every consumer engagement tool will be found and used to meet consumer’s need to act on health before sickness.
- Minnesota public programs use over 90% generic drugs.
- Nation-leading tiered plan for state employees.
- QCare pay for performance payments increasing clinical outcomes, sponsored by private sector, state employees, University of Minnesota and, DHS and others.
- “Centers of Excellence” sponsored by private and public sectors.
- State-wide agreement by MN Hospital Association and health plans not to submit bills for adverse events- first in Nation.
- HSA compliant version of MN Advantage plan offered to public sector through PEIP (Public Employee Insurance Plan).
- Major mental health initiative pre-dating federal legislation to integrate health delivery and payment.
- Nation leading rebalancing of institutional care to home and community services.