



State Policy Levers to Improve Access to Care

Samantha Scotti, Project Manager, NCSL Health
Program

Rural Health Roundtable— Western States

May 20, 2023

- I. Access to Care: State Legislative Trends
 - I. Samantha Scotti
- II. Presentation: Build Healthy Places
 - I. Ruth Thomas-Squance
- III. Small Group Discussion



Agenda

Defining Access to Care

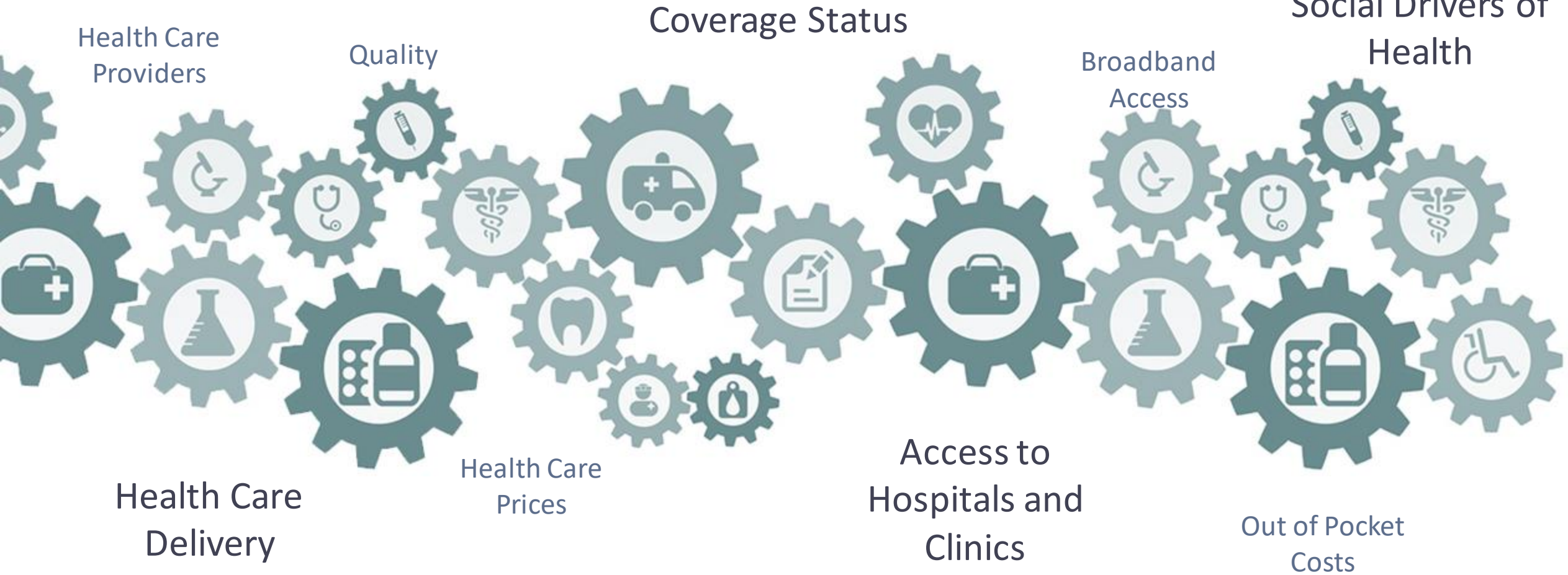
What comes to mind
when you hear:
“Access to Care”



Shout it out!

Access to Care Components

“The timely use of personal health services to achieve the best health outcomes.” (AHRQ)



Access to Care Components for Today's Session

"The timely use of personal health services to achieve the best health outcomes." (AHRQ)

Coverage Status

Social Drivers of
Health



Health Care
Delivery

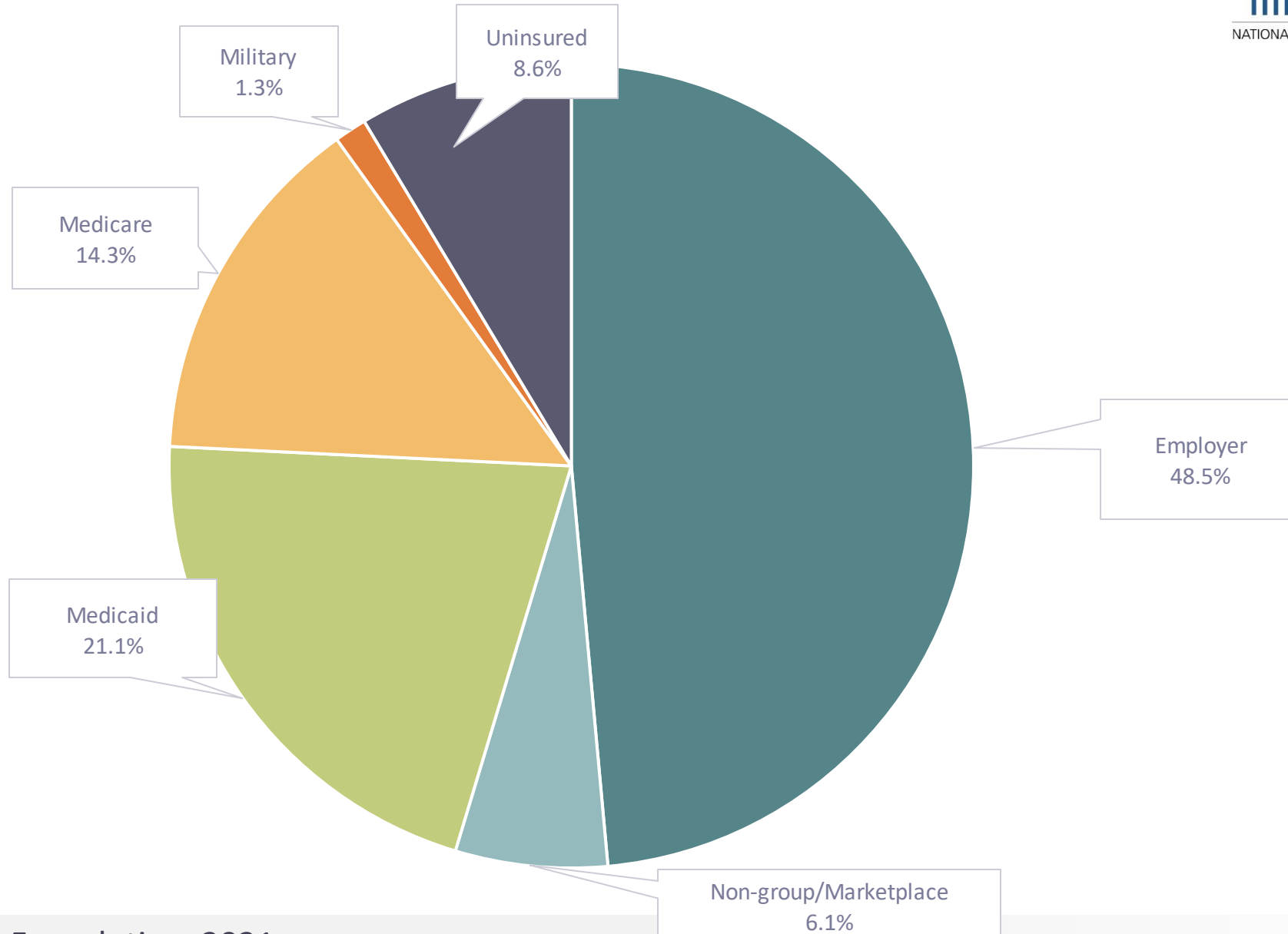


Health Coverage: Pop Quiz!

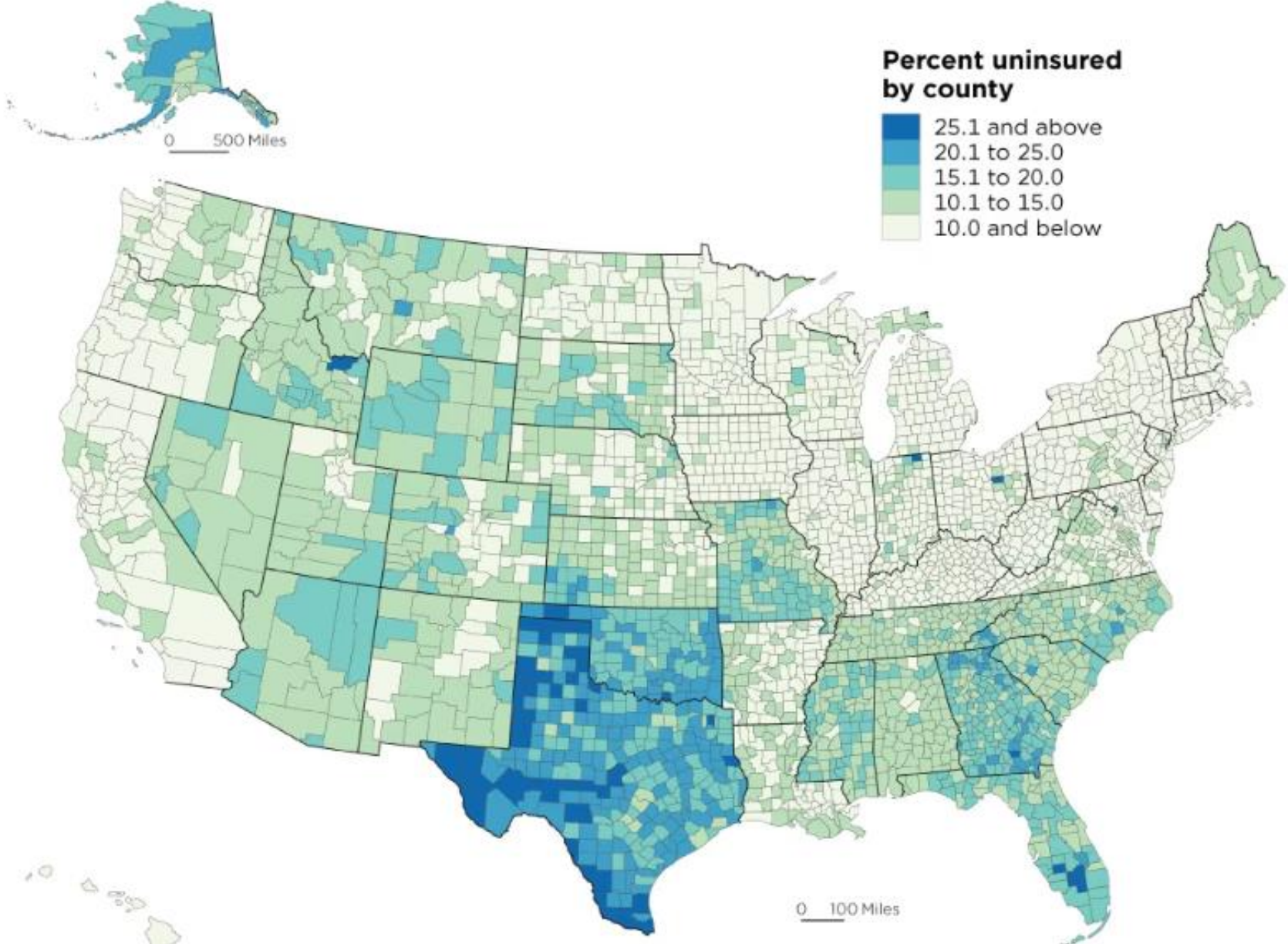
Which health insurance payer covers the largest number of Americans?

- A. Medicaid
- B. Medicare
- C. Employer-Sponsored
- D. Marketplace Coverage

Health Insurance Coverage of the Total U.S. Population



Uninsured Rates for the Population Under Age 65, 2020



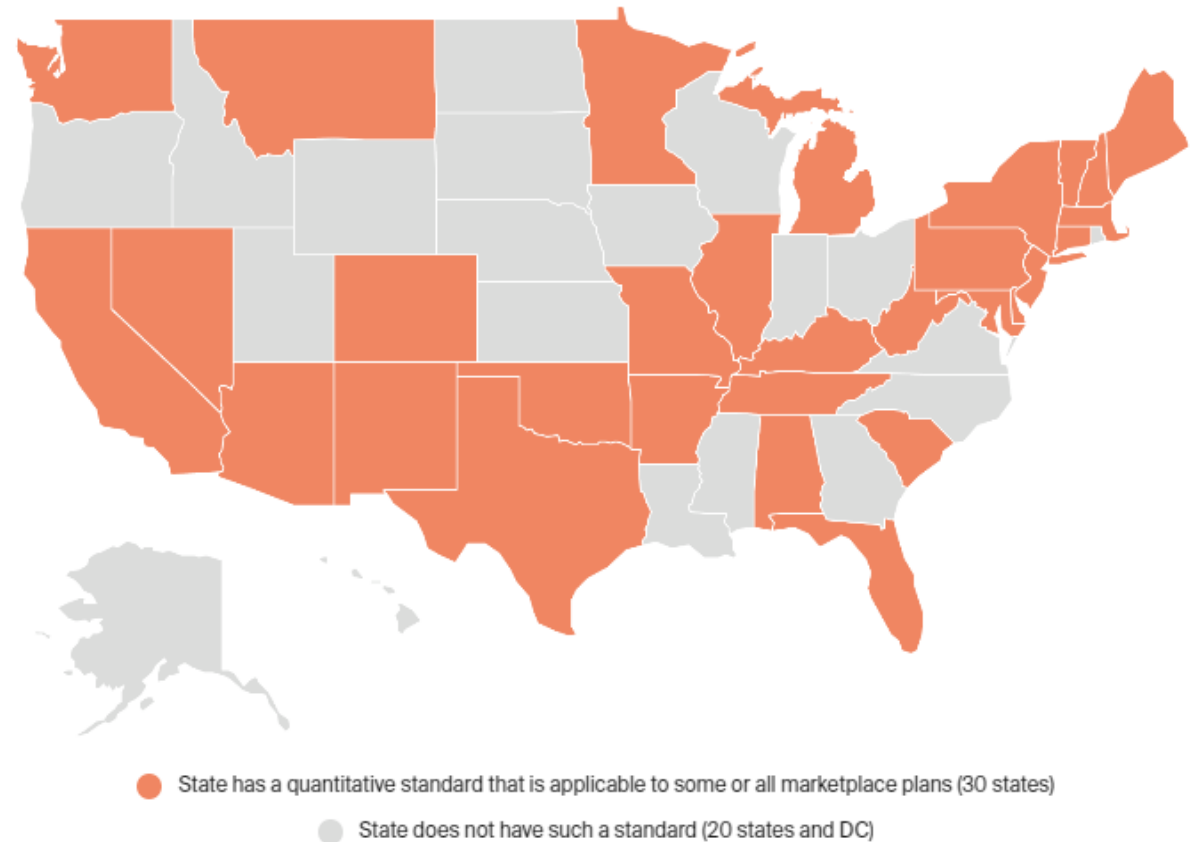
Source: 2020 Small Area Health Insurance Estimates (SAHIE) Program

Network Adequacy

Quantitative standards include:

1. travel times and distance between enrollees and providers in certain types of geographic areas;
2. minimum number of providers or provider-to-enrollee ratios; and
3. appointment wait times.

States Where Marketplace Plans Are Subject to One or More Quantitative Standards for Network Adequacy, 2021



Source: Justin Giovannelli, "Federal Regulators Appear Set to Take a More Active Role to Ensure ACA Marketplace Plan Networks Are Adequate," Commonwealth Fund, Feb. 15, 2022.

State Telehealth Policy Levers



- **Medicaid**
- **Private Insurance**
- **Cross State Licensing**
- **Telehealth Modalities**
- **Authorized Telehealth Providers**
- **Authorized Services for Telehealth**
- **Site Restrictions**
- **Teleprescribing**
- **Patient-Provider Relationship**
- **And more!**







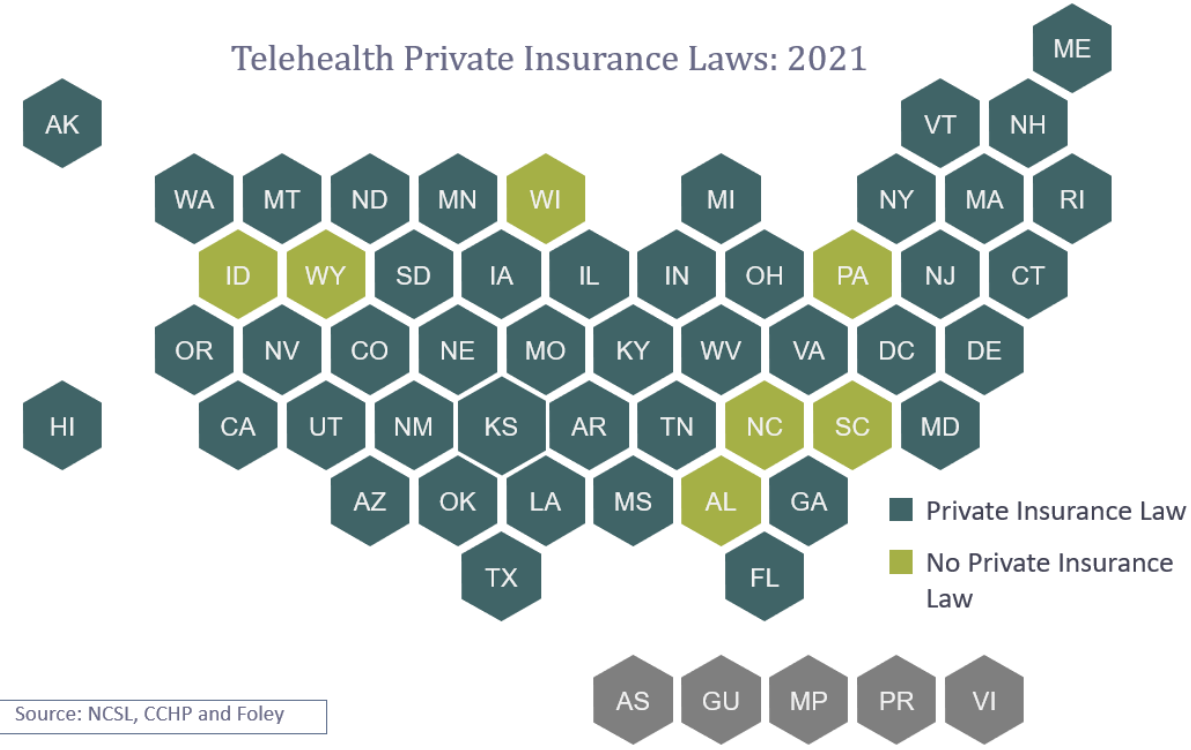
Health Coverage: Telehealth

Which of the following is NOT a telehealth modality?

1. Live Video
2. Store-and-Forward
3. Remote Patient Monitoring
4. Audio-Only
5. All are Modalities

Telehealth Coverage: Medicaid and Private Insurance

Medicaid Reimbursement		# of States
	Live Video	50 + D.C.
	Store-and-Forward	28
	Remote Patient Monitoring	34
	Audio-Only	36 + D.C.





Health Coverage: Social Drivers of Health

True or False? Meeting certain needs such as housing, transportation and food improves health outcomes for families and individuals.

Social Drivers of Health – Legislative Trends

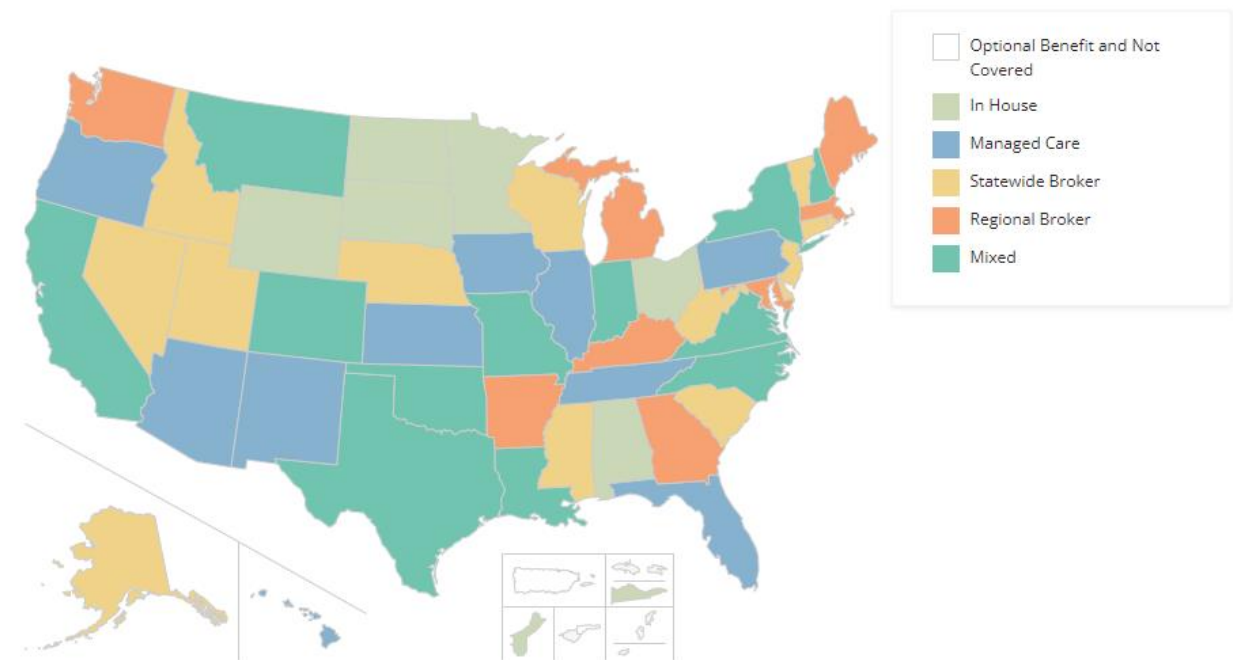
○ Housing

- Policies addressing healthy housing, medical respite, aging in place, supportive housing, recovery housing
- For example: [Colorado HB 1204](#) (Enacted): Requires recovery residences to implement a client discharge and transfer policy before discharge or transfer may occur.

○ Nonemergency Medical Transportation (NEMT)

- Policies addressing NEMT delivery models, who may provide NEMT services, appropriations, permits and licensing for NEMT providers.
- For example: Maryland switched from regional to statewide broker (2022).

NEMT Delivery Models By State



NCSL Resources

- [Health Costs, Coverage and Delivery State Legislation \(Database\)](#)
- [Bringing the Benefits of Telehealth to Rural and Underserved Patients](#)
- [NTIA Broadband Briefing Webinar](#)
- [Showcasing 'the Power of Rural': National Rural Health Day](#)
- [Telehealth Explainer Series: A Toolkit for State Legislators](#)
- [Repeal or Retool? States Assess Certificate of Need Laws](#)
- [Rural Emergency Hospitals](#)



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Welcome Our Faculty

Ruth Thomas-Squance, PhD, MPH,
Co-Executive Director, Build Healthy
Places Network



Multi-Sector Rural Health Partnerships Models of Investment

Ruth Thomas-Squance, PhD, MPH
Ashley Hernandez, MSc
Build Healthy Places Network | NCSL Rural Health Regional Roundtable
May 20th, 2023





Tycroes



**San
Francisco**



The Build Healthy Places Network

We are the national center at the intersection of **community development and health**, leading a movement to accelerate investments and speed and spread solutions for building healthy and prosperous communities.



Engage

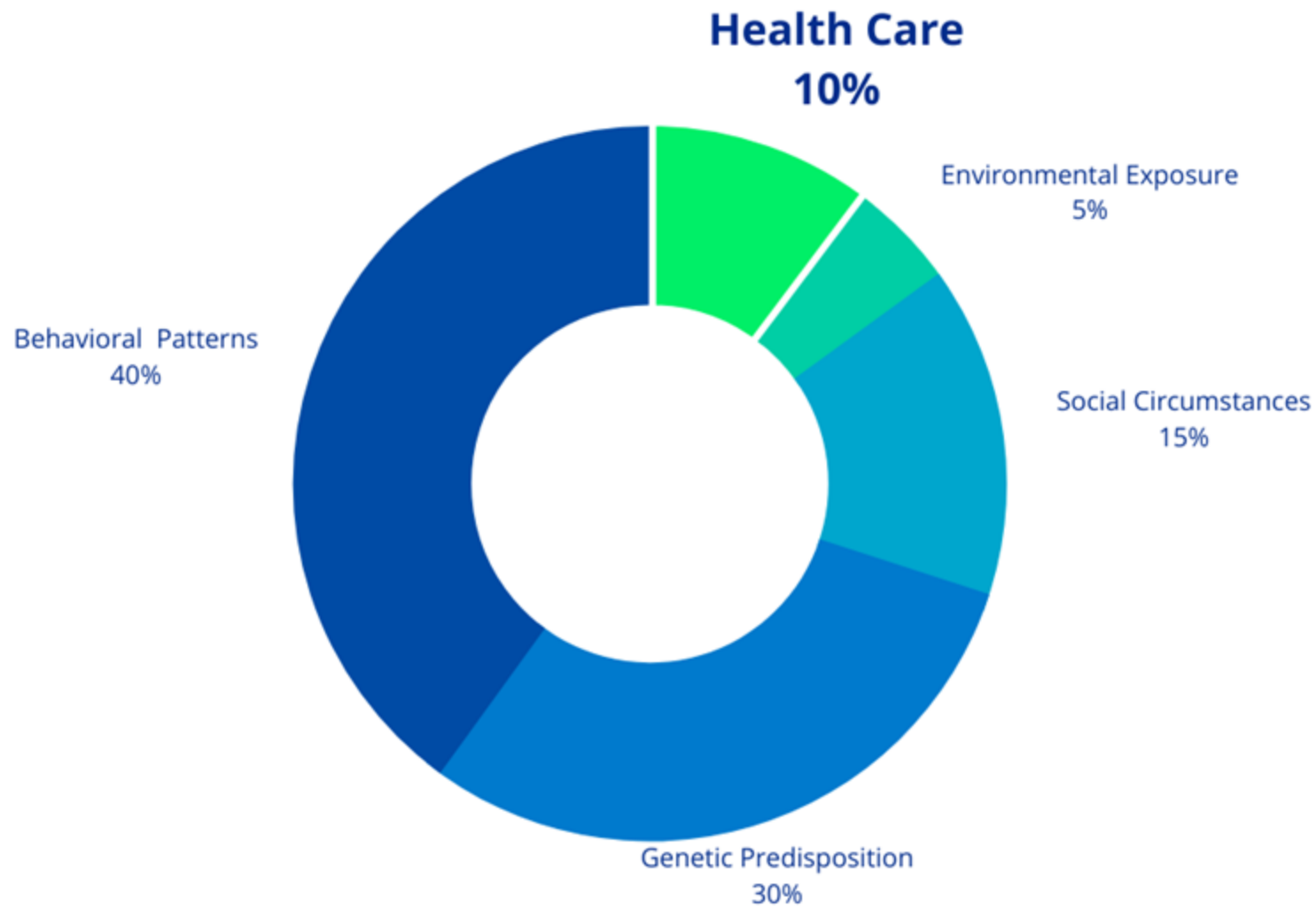


Educate



Synthesize

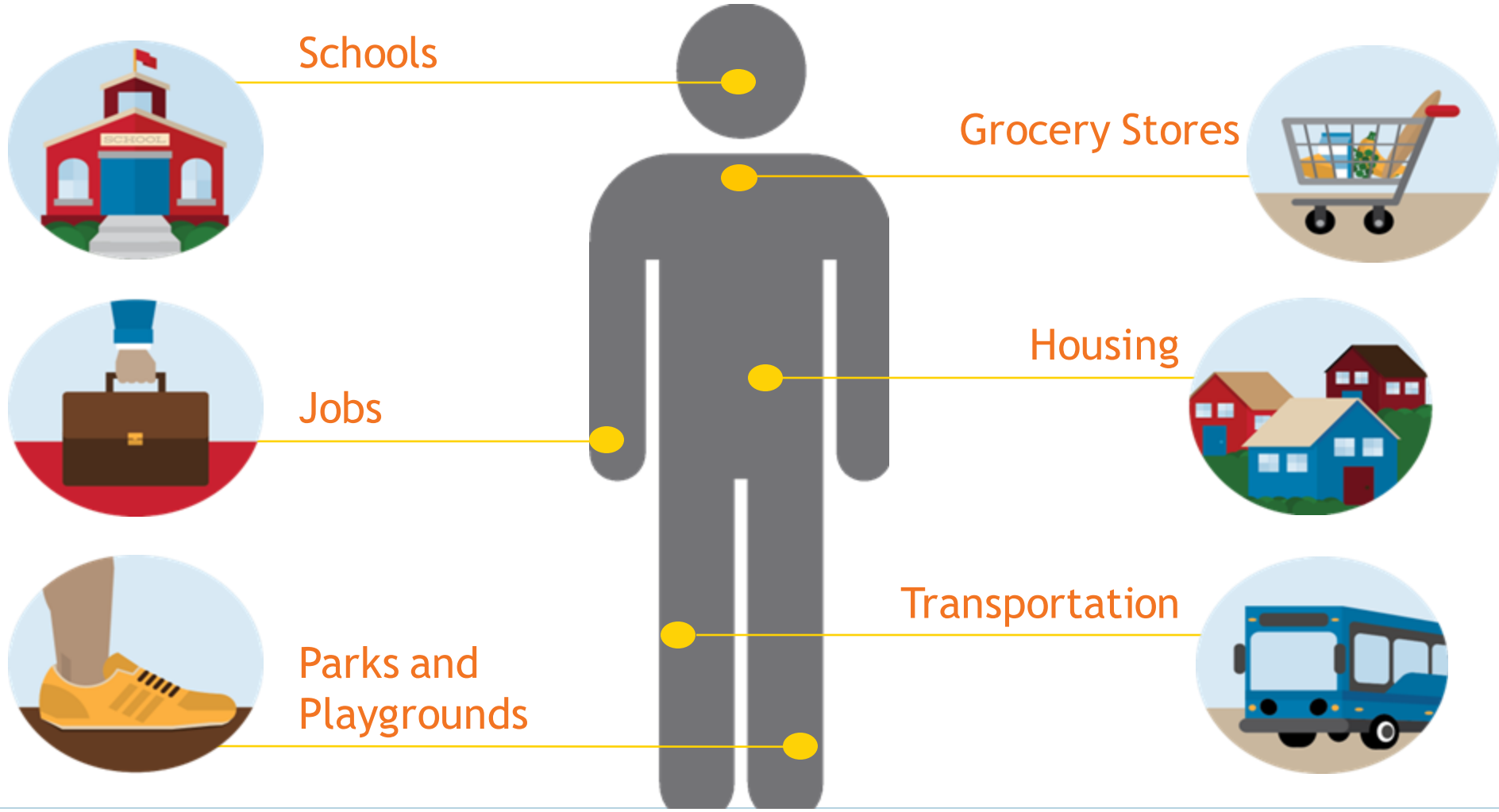
CONTRIBUTIONS TO PREMATURE DEATH



McGinnis MJ, Williams-Russo P, Knickman JR.
Health Affairs 2002

Health Happens in Communities

People Get Sick Because Of Their Social And Physical Environments



Vital Conditions for Well Being



Thriving Natural World



Basic Needs for Health & Safety



Humane Housing



Meaningful Work & Wealth



Lifelong Learning



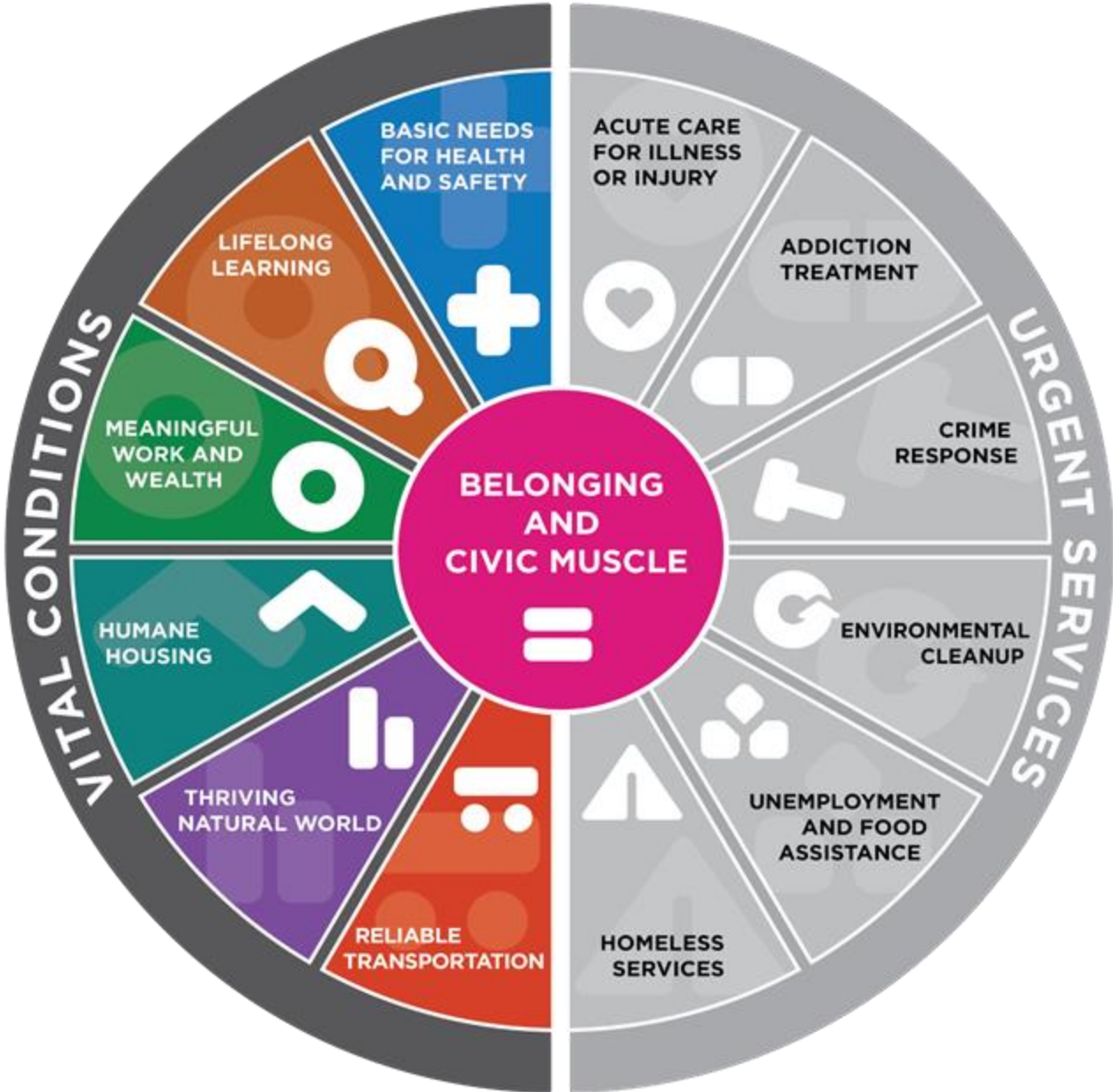
Reliable Transportation



Belonging & Civic Muscle



Urgent services alone, will not produce thriving places.



Source: Milstein, B. et al, Health Affairs, Feb 2023

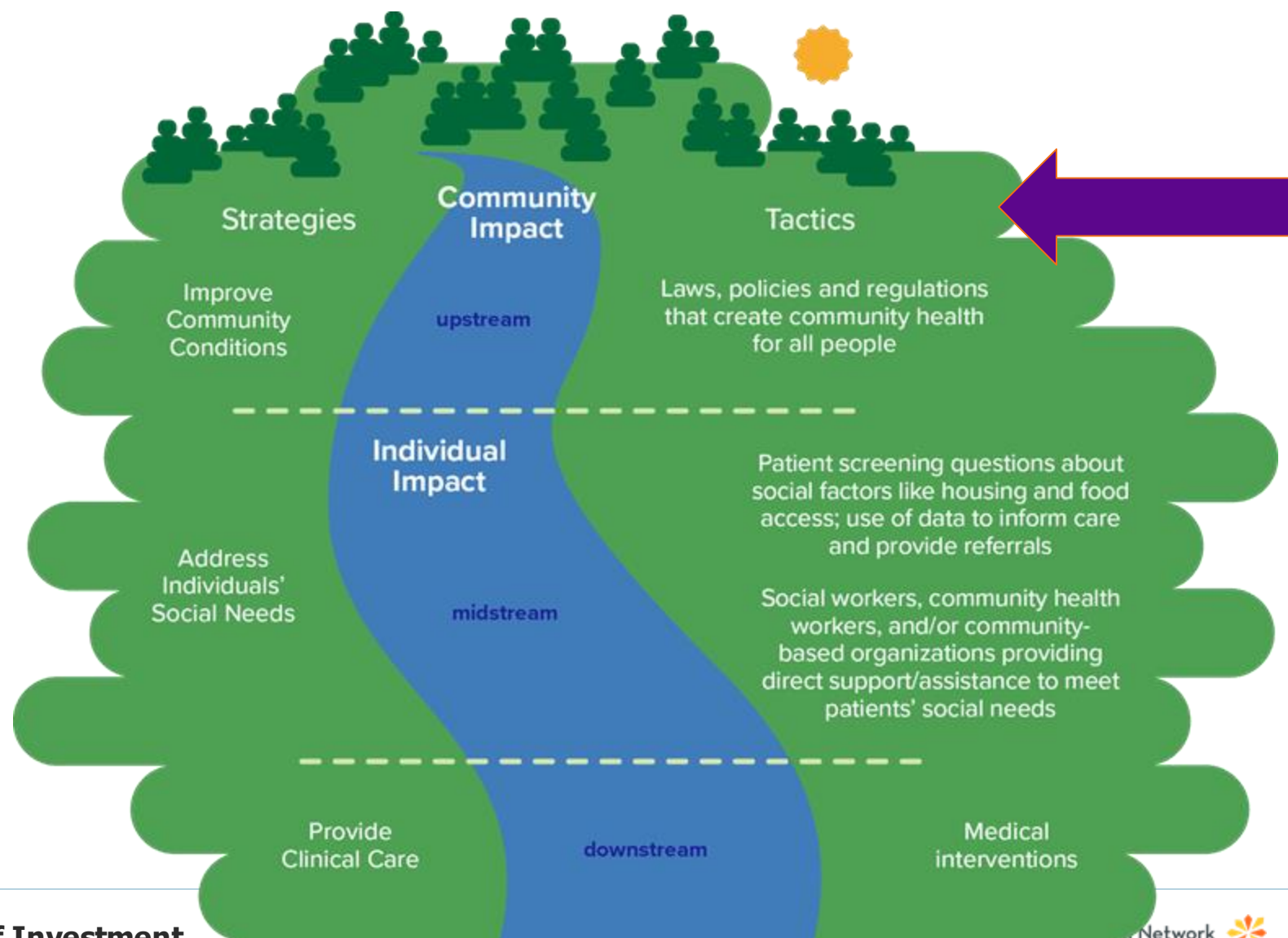
Needs are not Drivers

Social needs interventions act at the level of an individual person's needs.

Social Determinants or Drivers of health impact the community level.

Many health entities conflate the two.

Different strategies and different tactics.

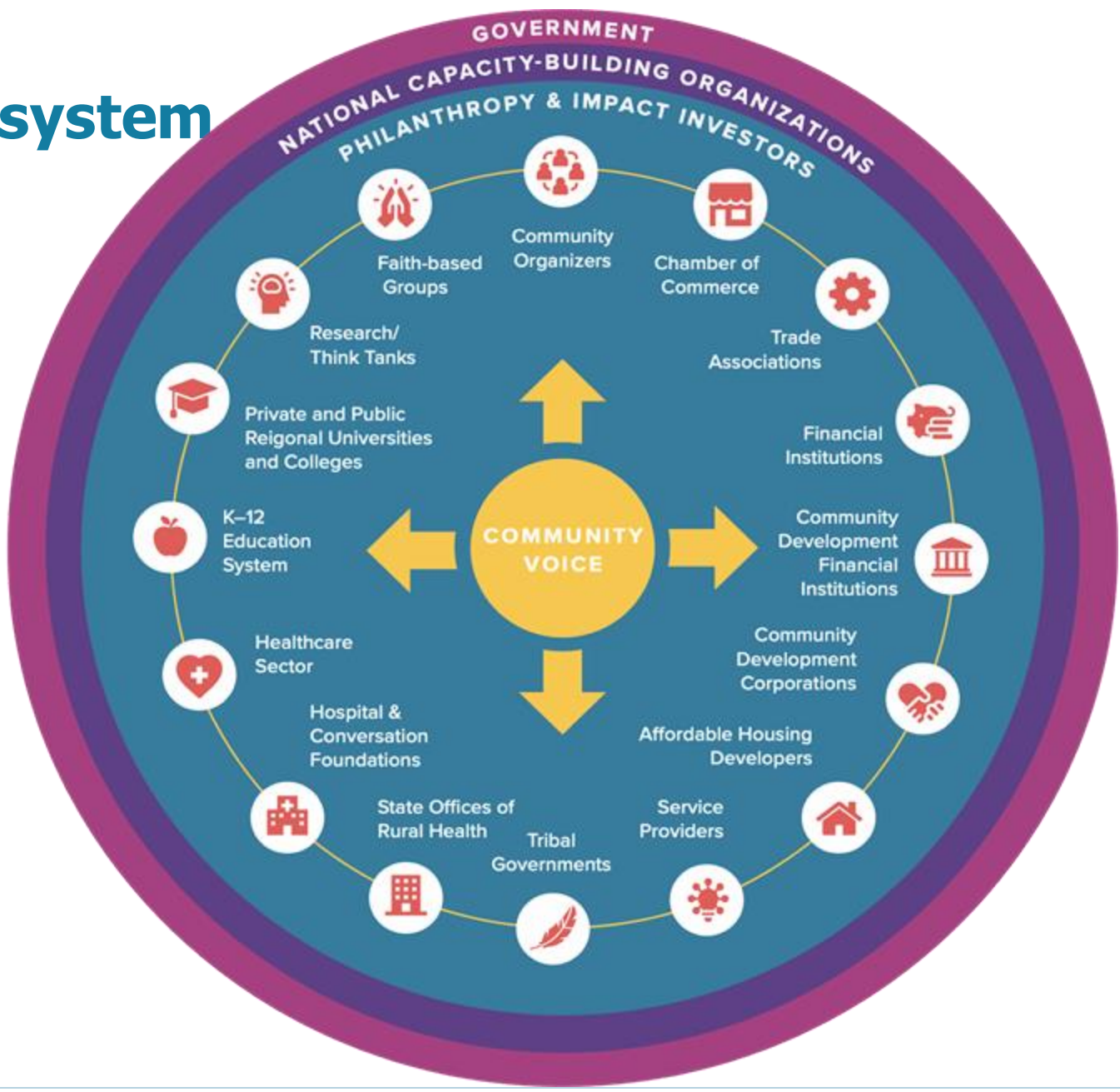


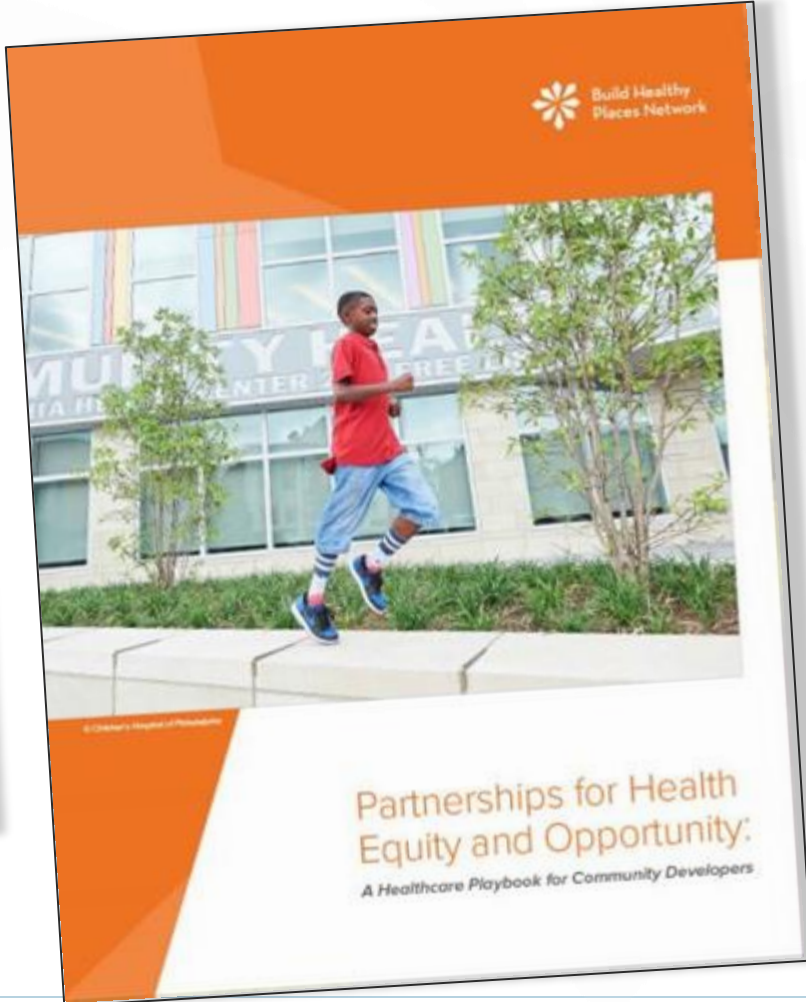
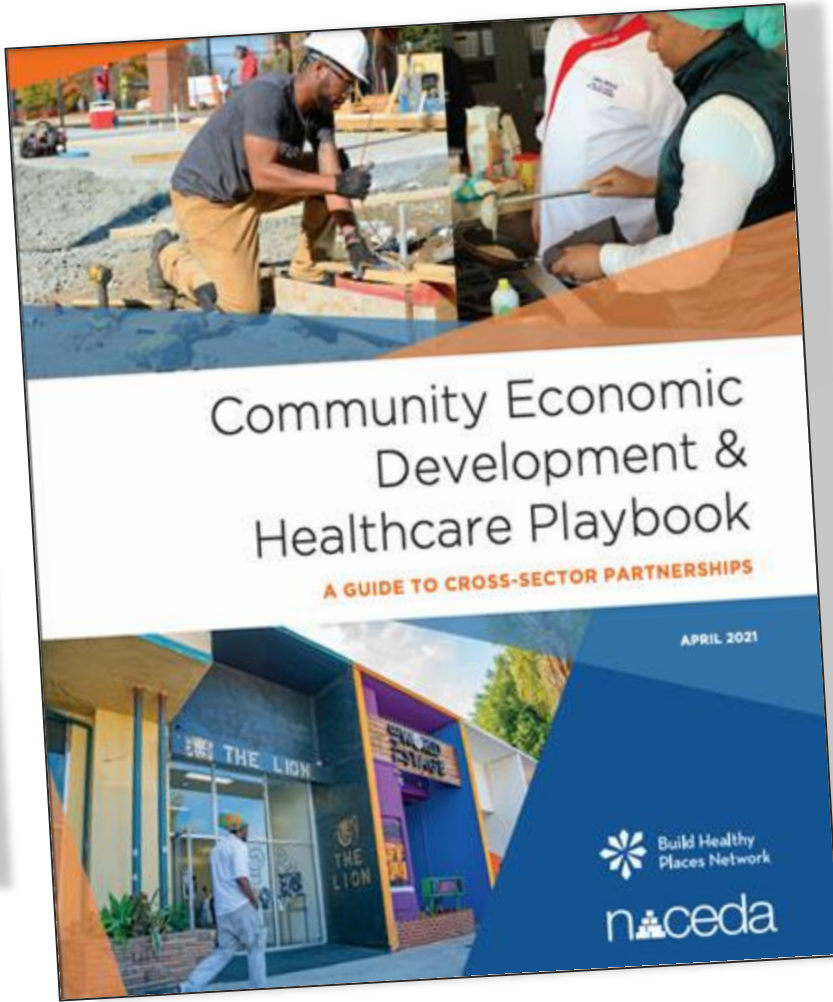
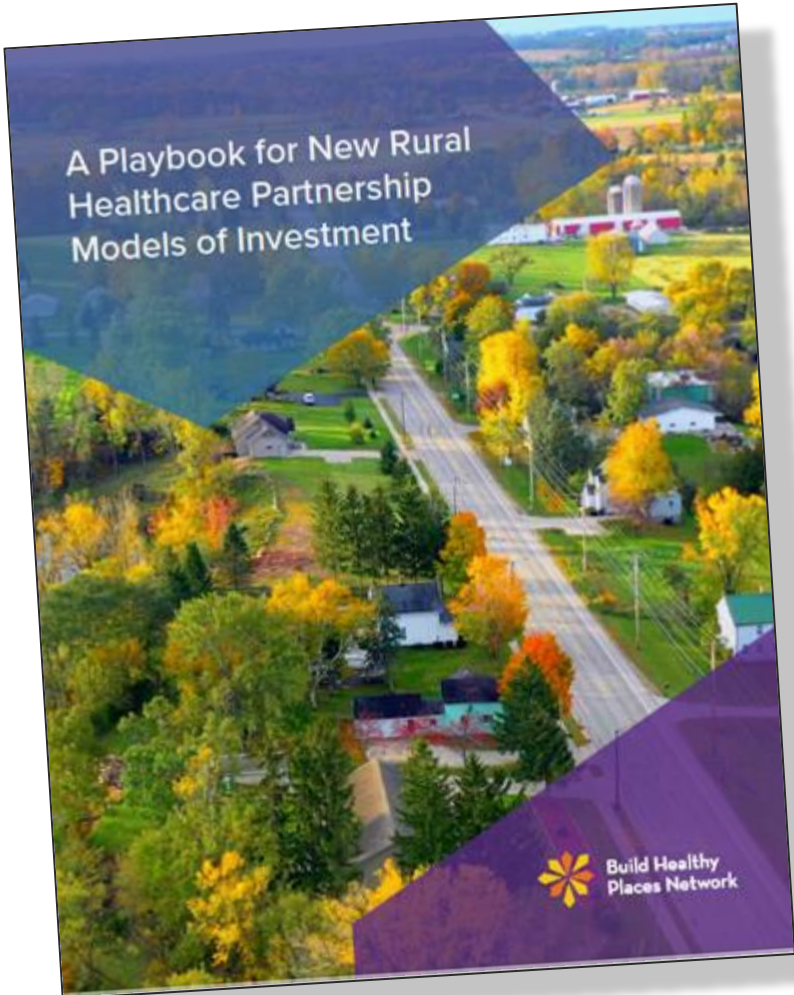
Why Multi-Sector Rural Health Partnerships?

- Interconnectedness and close-knit ties
- Informal networks bridge formal sectors
- Leverage strengths from natural networks
- Combined efforts can address challenges in attracting capital
- Small investments to make big impacts
- Pathway for community knowledge to drive solutions

Rural Health Partnership Ecosystem

- Community Leaders
- Local Government
- Health Sector
- Community Development
- Business



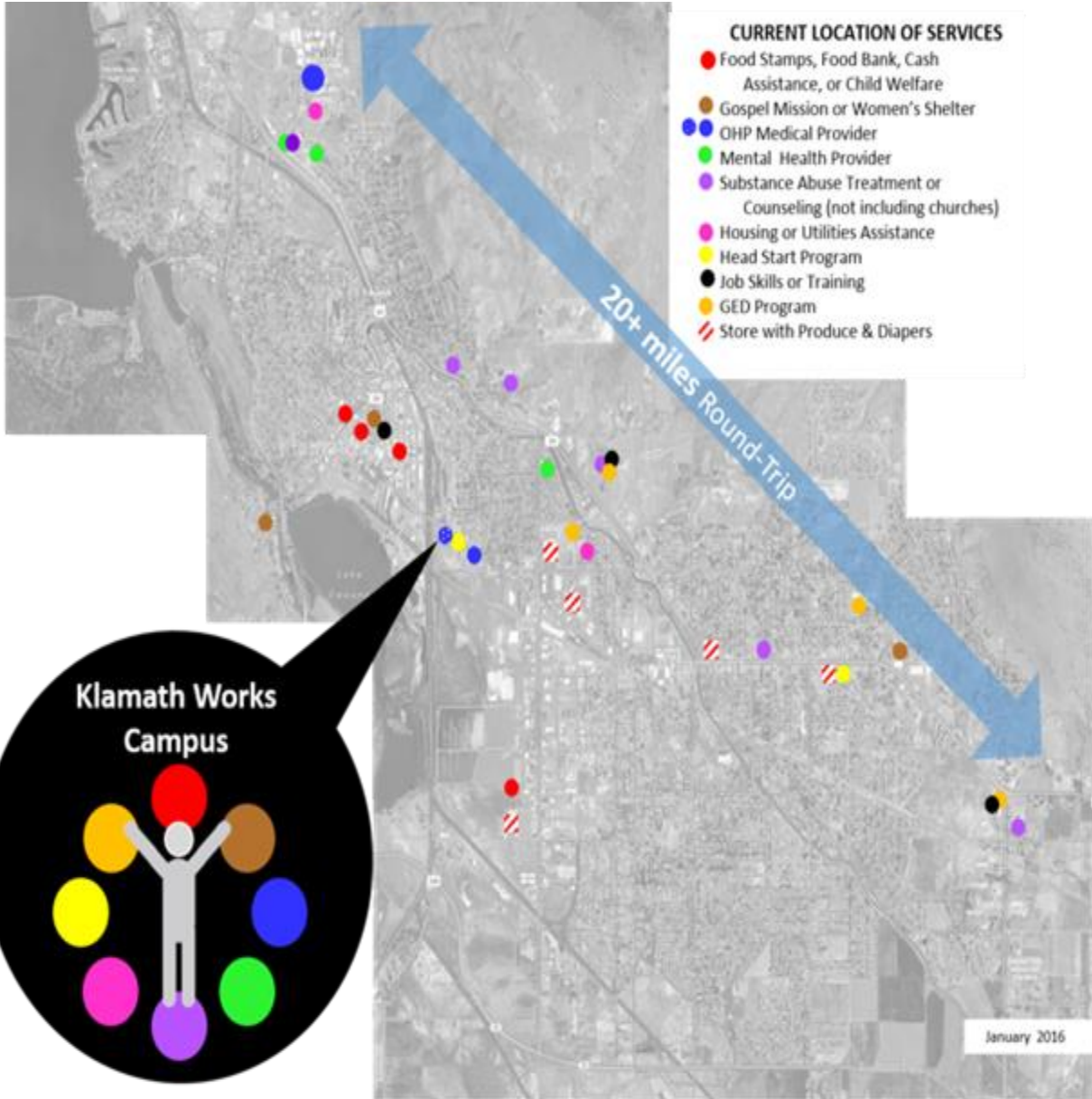


Klamath Works Human Service Campus:

- 18 acre campus
- Hub for public and private social services providers.
- Co-locating services, encouraging coordination.

Services on campus include:

- Klamath Falls Gospel Mission
- Link Access Center, a collaborative behavioral health and sobering center
- Klamath Works Job Training Program





Hospital

- Medical screening physical or mental

Gospel Mission:

- Food and shelter

Link Access Center

- Intoxication & addiction support



Co-localization of services within walking distance.



Gospel Mission:

- Spaces of social connection
- Fosters sense of self-worth
- Community garden, commercial kitchen, dining hall and chapel hall

Place image here



Klamath Works ;
jobs program with coaching and individualized plans

Sky Lakes Medical Center

- Convenor
- Purchased land, land swap
- Social capital, fund raising

Klamath Falls Gospel Mission

- Venue for social connection

- Community garden
Commercial

Cross sector partnership
community orgs collaborate
with common vision

- Co-localization and coordination of services
- Social capital and fund raising diversification
- Culturally responsive services

Klamath Basin Behavioral Health.

- Runs Link Access Center
- Addiction & mental health
- Healthcare plan enrollment
- Housing & employment

Place image here

Klamath Tribes

- Funders and champions
- Staffing & operation Link Access Center
- Culturally responsive practice

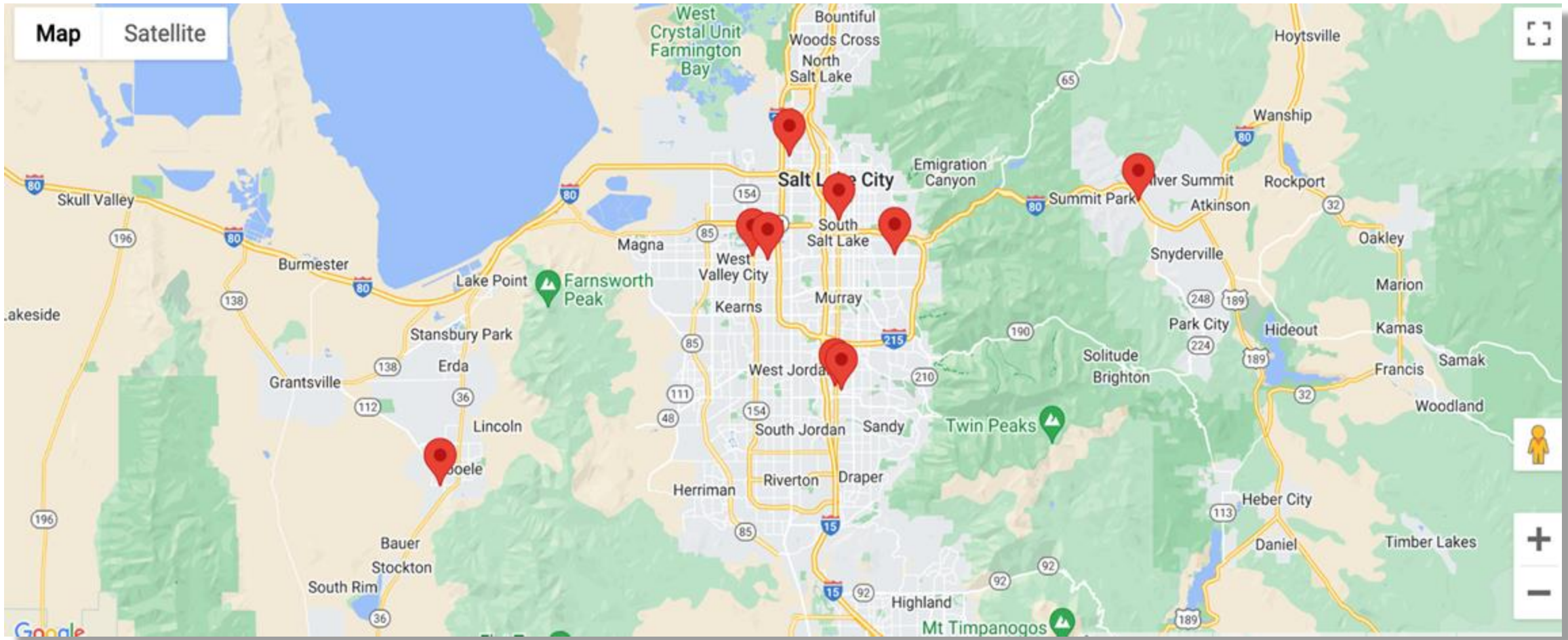
'A job is the best weapon
in combating poverty – not
merely poverty of income
but of health, of pride, and
of spirit.'

*Former CEO and President of Sky Lakes,
Paul Stewart*

Utah Housing Preservation Fund:

- Public and private-sector money
 - Purchases existing housing
 - Preserve affordable rental units serving low-to moderate-income Utah residents in perpetuity
-
- 100% owned and operated by the Utah Non-Profit Housing Corporation, a 501(c)3.
 - In partnership with
 - Intermountain Healthcare System,
 - Clark and Christine Ivory Foundation
 - Zions Bank





Total of 9 Properties with a total of 644 units.

Multi-Sector Rural Health Partnerships Models of Investment

Housing and health framework

Existing evidence on housing and health can be understood as supporting the existence of four pathways



1. **First, the health impacts of not having a stable home (the stability pathway).**
2. **Second, the health impacts of conditions inside the home (the safety and quality pathway).**
3. **Third, the health impacts of the financial burdens resulting from high-cost housing (the affordability pathway).**
4. **Lastly, the health impacts of neighborhoods, including both the environmental and social characteristics of where people live (the neighborhood pathway).**

Utah Housing Preservation Fund's Multi-Sector Collaboration Creates a Direct Link Between Housing Stability and Health

**BASIC NEEDS FOR
HEALTH & SAFETY AS
A VITAL CONDITION**



**HUMANE
HOUSING AS A
VITAL CONDITION**



Senior housing and health equity: lessons from the COVID-19 pandemic

“A new narrative about housing as the linchpin of wellbeing for older adults”

- Leverage age-friendly networks
- Collaboration and engagement in planning processes
- Flexibility ensures innovation
- Build in service coordination
- Home and neighborhood design matters
- Connect housing, healthcare, and social services (programs, subsidies, incentives, data, collaboration)



JOINT CENTER FOR
HOUSING STUDIES
OF HARVARD UNIVERSITY

Build Healthy Places Network 

Community development helps counter isolation

September 2020

A Collaboration Between

Build Healthy Places Network

NeighborWorks AMERICA

Community Development Counteracts Isolation

Community Development can address the negative health impacts of isolation

Found in both urban and [rural communities](#), social isolation can reduce access to support systems, sense of security and affordable community services, undermining mental and physical health and reducing quality of life. As a [growing epidemic in the US](#), social isolation is as significant a [health hazard](#) as alcohol and smoking, and more hazardous than obesity. [Social isolation and loneliness increase a person's risk](#) of premature death, is associated with increased risk of dementia, and can lead to higher rates of depression, anxiety, and suicide.

Multiple factors can contribute to social isolation: from [redlining, discriminatory housing policies, living in rural areas](#) and [gentrification](#), to [resource constraints](#) and [societal barriers of aging](#). Isolation disproportionately affects marginalized communities including older adults, minorities, rural residents, LGBTQ+, people with disabilities, and immigrants.

When it comes to determining one's health, ZIP Code is more important than genetic code; Community Development is in the ZIP Code improvement business. This series of fact sheets from NeighborWorks America and the Build Healthy Places Network highlights the common aims, evidence base, and what works for health and community development.



Example:
The Community Gardens,
Springfield OH, affordable senior
rental housing

Partnerships, UT

Intermountain Healthcare:

Investor and provider of wrap-around services

Foundation

Clark Christine Ivory

Foundation: Convener of partners and Investor

Power of cross-sector partnerships

- Fund can continue to secure diverse sources of funding, e.g. public dollars, philanthropy & private capital.
- Makes the economics work.

Place image here

Zions Bank: Investor and primary lender

Utah State Legislature: 2023 state budget included \$10 million for Fund

Utah Non-profit Housing Corporation: Owner and Fund Manager, Service Provider

Telehealth Access Point Sites (TAPS) Library Project

- Partnership across sectors
 - Leverages existing State Public Library System
 - Changes in policy for reimbursement
 - Pandemic - changes in insurer prioritization
-
- **Building infrastructure**
 - ARPA Funding
 - Telehealth Access Point Sites (TAPS) Library Project
 - **Need to develop community capacity to engage**
 - Digital navigators
 - Community hiring
 - Community trust



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Hawai'i Dept Public Health

- Convenor
- Member of Broadband Hui
- Social capital, fund raising

Broadband Hui

- Cross sector partnership
- Wireless providers, non profit, health partners, economic development orgs, state legislators

Cross sector partnership bring telehealth

- Navigates challenges of geography
- Fund raising diversification
- Culturally responsive services

Hawai'i State Public Library System

- Champions and convenor
- Locations for initial telehealth service points
- Created training team of digital navigators
- Loan and track equipment

Pacific Basin Telehealth Resource Center

- Champions and collaborator for Federal funding

**BASIC NEEDS FOR
HEALTH & SAFETY AS
A VITAL CONDITION**



Department of Health Genomics Section - expands to others

- Circumnavigates challenge of getting people to services
- Reduces expensive emergency costs

**BELONGING & CIVIC
MUSCLE AS A VITAL
CONDITION**



Telehealth Access Point Sites (TAPS) Library Project

- Hiring from within community fosters community trust
- Youth development opportunity creates belonging

**MEANINGFUL WORK &
WEALTH AS A VITAL
CONDITION**



Telehealth Access Point Sites (TAPS) Library Project

- Hiring young people as digital navigators

**LIFELONG
LEARNING AS A
VITAL CONDITION**

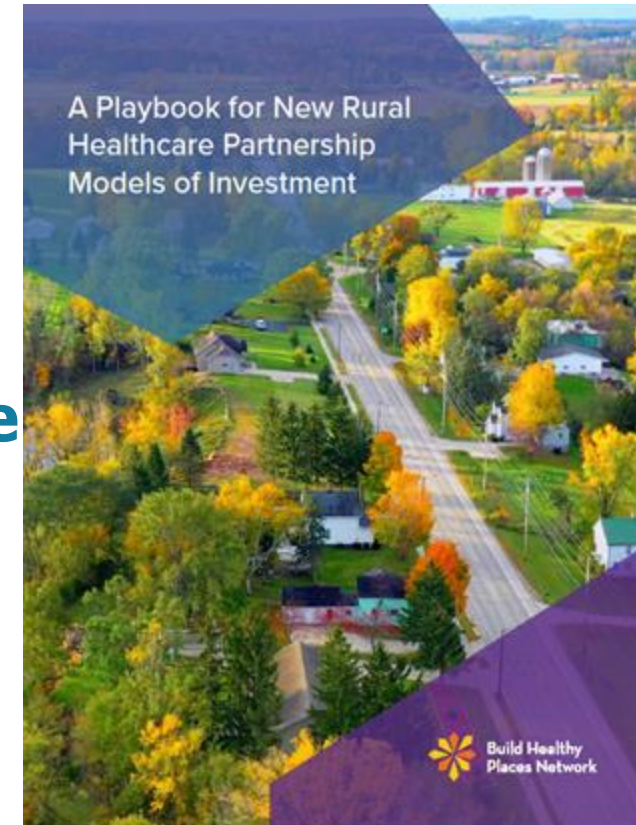


Digital Literacy Working Group

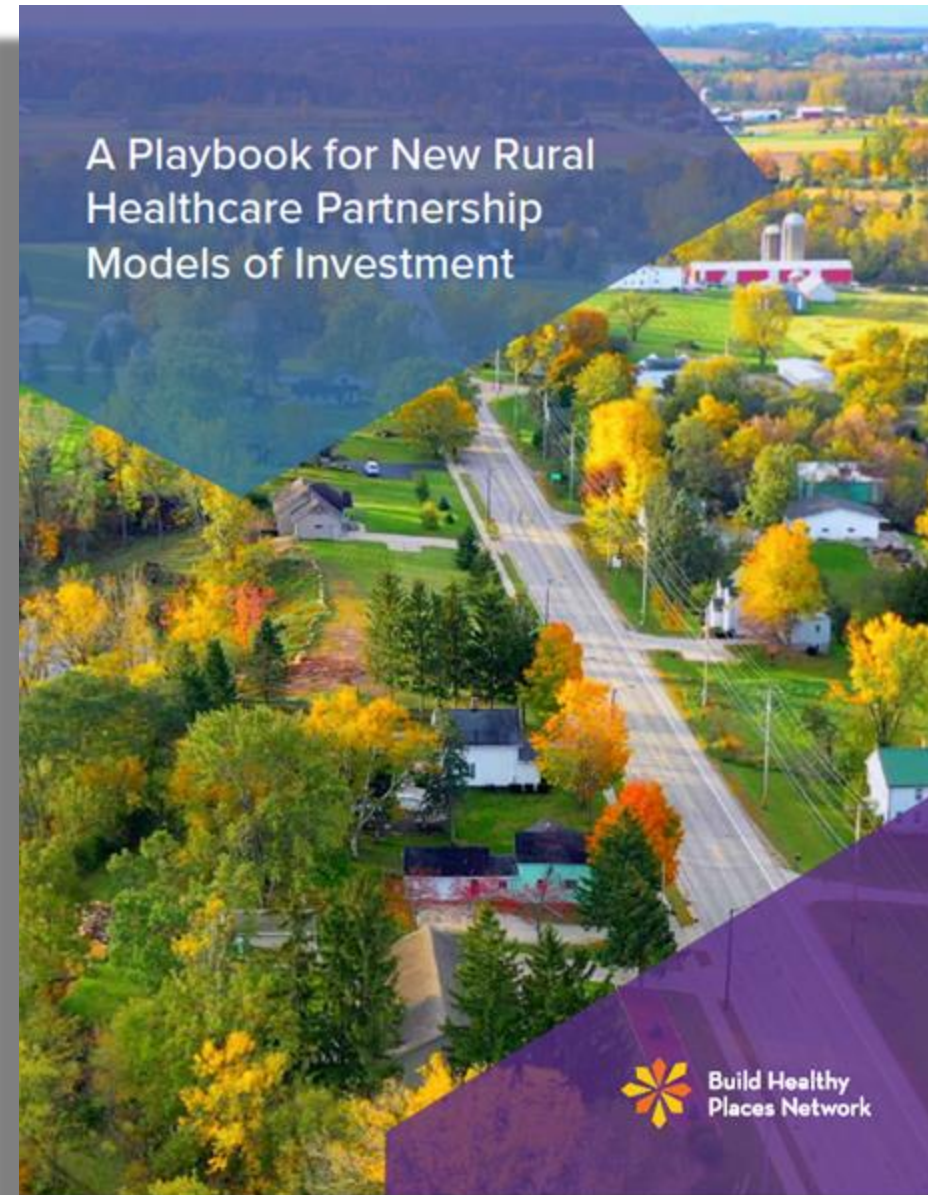
- Supports effective use of telehealth
- Opens up opportunities for education

Looking Ahead to Next Steps for BHPN

- **Engage regional approaches to advance rural health and multisector efforts**
- **Operationalize the Rural Playbook and strengthen commitments to the vital conditions**
- **Initiate a learning cohort of rural leaders**
- **Develop targeted case-making tools that encourage and support cross-sector rural conversations**
- **Support multisector collaboratives interested in increasing investments that address the vital conditions**



Additional Resources for Deeper Dive



**Download
Here**



INVESTING IN Rural Prosperity



BUILDING A BETTER AMERICA

BIPARTISAN INFRASTRUCTURE LAW RURAL PLAYBOOK

A ROADMAP FOR DELIVERING OPPORTUNITY AND INVESTMENTS IN RURAL AMERICA

Last Updated - April 2022

- [Department of Transportation ↗](#)
- [Department of Commerce ↗](#)
- [Environmental Protection Agency ↗](#)
- [Department of the Interior ↗](#)
- [Department of Energy ↗](#)
- [U.S. Department of Agriculture ↗](#)
- [FEMA ↗](#)

Q & A

Small Group Discussion

- Pick a question from the cup in the middle of the table and discuss!
- You have about 20 minutes - please allow for everyone at the table to answer a question.
- Flag down NCSL staff if you have any questions.



Walk Away with a Takeaway!

What is one thing you
learned during this
session?

