CDC’s 6|18 Initiative: Informational Webinar for Prospective States and Territories

July 23, 2018

Tricia McGinnis, MPP, MPH, Senior Vice President
Alissa Beers, MA, Associate Director, Population Health

Made possible by the Robert Wood Johnson Foundation
To submit a question online, please click the chat icon located at the bottom of the screen.

Answers to questions that cannot be addressed due to time constraints will be shared after the webinar.
Welcome & Introductions
Meet Today’s Presenters

**Tricia McGinnis**
Senior Vice President
Center for Health Care Strategies

**Kristin Brusuelas**
Senior Policy Advisor
Centers for Disease Control and Prevention

**Laura Oliven**
Tobacco Control Program Manager
Minnesota Department of Health

**Alissa Beers**
Associate Director,
Population Health
Center for Health Care Strategies

**Deirdra Stockmann**
Lead for Secondary Prevention
Centers for Medicare & Medicaid Services

**Ellie Garrett**
Deputy Director, Office of Medical Director
Minnesota Department of Human Services
Welcome and Introductions

The 6|18 Initiative

» Background and objectives
» Reflections from current 6|18 participants


» Timeline and selection process

Q&A
Welcoming Remarks

- **Center for Health Care Strategies (CHCS)**
  - Tricia McGinnis, Senior Vice President

- **Centers for Disease Control and Prevention (CDC)**
  - Kristin Brusuelas, Senior Policy Advisor for Office of the Associate Director for Policy, Office of Health Systems Collaboration

- **Centers for Medicare & Medicaid Services (CMS)**
  - Deirdra Stockmann, Lead for Secondary Prevention, Division of Quality and Health Outcomes
About the Center for Health Care Strategies

A non-profit policy center dedicated to improving the health of low-income Americans
The 6|18 Initiative

Alissa Beers, CHCS
The 6|18 Initiative

Promote adoption of evidence-based interventions in collaboration with health care purchasers, payers, and providers

High-burden health conditions 6 18 Evidence-based interventions that improve health and save money

CDC.gov/sixeighteen

The 6|18 Initiative focuses on six common and costly health conditions — tobacco use, high blood pressure, inappropriate antibiotic use, asthma, unintended pregnancies, and type 2 diabetes — and associated interventions with evidence of improved health outcomes and cost reduction or neutrality.

CDC used the following criteria to choose conditions/interventions:

1. Health conditions that affect large numbers of people and are associated with high costs
2. Interventions that are specific and underutilized
3. Interventions that prevent or control the condition and yield short-term savings
4. Interventions that can be implemented in both clinical and community settings

Why Adopt CDC’s 6|18 Initiative?

- Aligns with **quality improvement** goals
- Accelerating the impact of **value-based payment** reform efforts
- Promotes effective and results-driven **cross-sector collaboration**

“6|18 fostered communication and collaboration so that we each know what each other is doing.” - State Medicaid

“No longer do we think reimbursement is only a Medicaid issue.” - State Public Health

Reflections from Current 6|18 Initiative Participants

Laura Oliven, MPP; Tobacco Control Program Manager, Minnesota Department of Health

Ellie Garrett, JD; Deputy Director, Office of Medical Director, Minnesota Department of Human Services
ACCOMPLISHMENTS: Minnesota Reducing Tobacco Use

**Goals**

- Assess and address variation in Medicaid MCO tobacco cessation benefits and services
- Increase provider, enrollee and community-based organizations’ awareness and use of free Medicaid tobacco cessation benefits and services

**Activities and Accomplishments**

- Surveyed Medicaid MCOs to identify variation in benefits and used results to engage with MCOs not following state cessation policies – resulting in improved and more uniform cessation treatment coverage.
- Increased awareness of free Medicaid benefits by engaging community groups and populations most disparately impacted by the health harms of tobacco.
- Analyzed the All Payer Claims Database to establish a baseline for utilization of cessation medications across payers (*in progress*)

Alissa Beers, CHCS
6|18 Initiative: 
Program Overview

- Solicitation of state and territorial Medicaid and public health agencies to indicate interest in jointly participating in 6|18 Initiative

- Focus on **up to two** of the health conditions

- Receive assistance to select and implement interventions over 12 months (October 2018 – October 2019)
Condition-Specific Technical Assistance

- Control Asthma
- Reduce Tobacco Use
- Prevent Type 2 Diabetes
- Control High Blood Pressure
- Improve Antibiotic Use
Benefits of State Participation

- Build/enhance cross-agency partnerships
- Implement concrete interventions that align with state payment reform activities and goals
- Improve health and control costs using evidence-based interventions
- Receive targeted technical assistance
- Learn from and share experiences with other states
Project Activities

- Work plan development
- Targeted technical assistance
- Peer-to-peer information exchange
- Capacity building
- Access to a range of how-to tools and resources
- In-person convenings
Anticipated Time Commitment

- 5 calls between State team and TA team to deliver technical support and discuss progress
- Ad hoc peer-to-peer condition-specific calls or webinars
- 5 capacity-building learning sessions
- 1-2 in-person convenings
- Offline state work to advance 6|18 goals (e.g. MCO Surveys, State Plan Amendments, Communications Plans, etc.)
- Participation in 6|18 assessment activities
Examples of Targeted Technical Assistance

- Support with ROI development and financial analyses
- Strategic planning calls with CDC, CMS, and other subject matter experts
- Environmental scans and state examples (e.g., engagement strategies, communications campaigns, contract language)
- Connections to states undertaking similar activities (e.g., MCO surveys, social media promotion, provider training)
Instructions for Indicating State Interest


- Respond to all questions directly in the Microsoft Word document

- Send completed form as an email attachment to Alissa Beers at: abeers@chcs.org

- Due: Friday, August 10, 2018
Criteria for State Selection

- **Commitment** from agency leadership and interest in partnering on chosen activities
- **Availability** to participate in regular calls, peer learning events and meetings
- **Identification** of high-level goals and target conditions
- **Need** for technical assistance
- **Willingness** to participate in project assessment
## Project Timeline

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<th>Activity</th>
<th>Date</th>
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<tr>
<td>Application issued</td>
<td>July 9, 2018</td>
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<td>Informational webinar for prospective states/territories</td>
<td>July 23, 2018</td>
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<tr>
<td>Applications due to CHCS</td>
<td>August 10, 2018</td>
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<tr>
<td>States/territories notified of selection</td>
<td>August 24, 2018</td>
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<tr>
<td>Orientation webinar for selected states/territories</td>
<td>Mid-September, 2018</td>
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<tr>
<td>In-person convening in Atlanta, GA</td>
<td>October 9-10, 2018</td>
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Visit CHCS’ Resource Center for Implementing CDC’s 6|18 Initiative

- Online resource center, made possible by the Robert Wood Johnson Foundation, to help Medicaid agencies and MCOs collaborate with public health departments to launch 6|18 interventions
- Offers practical how-to resources, including:
  - **6|18 in Action** - Interactive map of 6|18 activities from across the country and profiles of select state activities
  - **General resources** to help stakeholders get started with 6|18 interventions
  - **Health condition-specific resources** to guide the implementation of CDC’s 6|18 Initiative strategies

www.618resources.chcs.org
Question & Answer
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For more information, contact:

Alissa Beers
Associate Director
Center for Health Care Strategies
abeers@chcs.org
(609) 528-8400
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