

Ohio Health and Human Services Transformation Framework

MODERNIZE MEDICAID		STREAMLINE HEALTH AND HUMAN SERVICES		IMPROVE HEALTH SYSTEM PERFORMANCE	
Executive Order	Advance the Governor's Medicaid modernization and cost containment priorities in the operating budget	Recommend a permanent health and human services organizational structure and oversee transition to that structure	Engage private sector partners to set clear expectations for overall health system performance		
Problem	Medicaid spending is growing at an unsustainable rate, four times faster than the Ohio economy, and now consumes 30 percent of total state spending and 4 percent of the Ohio economy	Ohio HHS policy, spending and administration is split across multiple state and local government jurisdictions, and this inefficient structure impedes innovation and lacks a clear point of accountability	Ohioans spend more per person on health care than residents in all but 13 states, and rising health care costs are eroding paychecks and profitability, yet higher spending is not resulting in higher quality or better outcomes for Ohio citizens		
Policy Priorities	<ul style="list-style-type: none"> Improve care coordination Integrate behavioral and physical health care Rebalance long-term care 	<ul style="list-style-type: none"> Share services to increase efficiency Right-size state and local service capacity Streamline governance 	<ul style="list-style-type: none"> Get the right information in the right place at the right time Make health care price and quality information transparent Pay for value not volume 		
Initiatives	<p><i>Spring 2011</i></p> <p>Phase I: Enact Medicaid Transformation (HB 153)</p> <ul style="list-style-type: none"> Enact common-sense Medicaid modernization and cost containment proposals <p><i>Fall 2011</i></p> <p>Phase II: Implement Medicaid Transformation</p> <ul style="list-style-type: none"> Oversee rules process and initial implementation Secure federal support to implement reforms <p><i>Spring 2012</i></p>	<p>Phase I: Consolidate HHS Medicaid Programs (HB 153)</p> <ul style="list-style-type: none"> Reorganize funding and control of Medicaid programs to be more efficient (e.g., unified long-term care budget) <p>Phase II: Consolidate HHS Operations</p> <ul style="list-style-type: none"> Eligibility determination Enterprise information integration Medicaid Information Technology System <p>Phase III: Streamline HHS Governance</p> <ul style="list-style-type: none"> Recommend and transition to a permanent HHS structure 	<p>Phase I: Leverage Medicaid Purchasing Power (HB 153)</p> <ul style="list-style-type: none"> Reward best practices in health care delivery system reform (e.g., health homes, accountable care organizations) <p>Phase II: Align Public/Private Health System Priorities</p> <ul style="list-style-type: none"> Health Insurance Clearinghouse (ODI lead) Electronic Health Information Exchange 		
Governance	Office of Health Transformation (OHT) Cabinet	HHS Shared Services Project Office (sponsors: DAS, OBM, OHT)	Ohio Health System Performance Task Force		
Participant Agencies	AGE, ADA, MH, DD, ODH, Medicaid with connections to JFS	JFS, RSC, AGE, ADA, MH, DD, ODH, Medicaid with connections to ODE, DRC, DYS, DVS, others welcome	DAS, BWC, OHT, ODI, TAX, JobOhio, others welcome		

