

CENTER FOR HEALTH LAW
& POLICY INNOVATION
Harvard Law School

SPECIALTY CARE POLICY & ADVOCACY INITIATIVE

**IDENTIFYING LAW AND POLICY REFORM OPPORTUNITIES TO
PROMOTE SUSTAINABILITY AND SCALABILITY**

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Center for Health Law
and Policy Innovation

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CHLPI Specialty Care Mission and Role

- **Our Specialty Care Mission:** To identify opportunities for law and policy reforms that support the long-term sustainability and scalability of innovative programs developed through BMSF's Specialty Care and Bridging Cancer Care initiatives
- **Our Role:** To develop policy roadmaps (that provide a high-level assessment of the legal and policy context of grantee initiatives), to identify opportunities for supporting initiatives through legal, regulatory and policy change, and to provide technical assistance to promote implementation of reforms

A History of Innovation with BMS Initiatives

Providing Access to Health Solutions (PATHS 2012-16)

- Promoted coverage of DPP (implemented in Medicare and supported by NJ legislature but pocket-vetoed by Gov. Christie)
- Encouraged development of CMMI funded alternative payment model for diabetes care and treatment
- Worked to secure “food is medicine” insurance contracts

State Health Care Access Research Project (SHARP 2008-12)

- Helped secure additional annual “Maintenance of Effort” Ryan White funding (AL \$2.5 M; NC \$14.1 M; MS \$2.1 million and SC \$2M)
- Reduced barriers to Medicaid transportation across NC county lines
- Facilitated case management delivery system TA from AL to IL

Lessons Learned

- Advocacy and policy reform work is not a linear process
- One size does not fit all
- Advocacy experience helps, but most important is bringing together a diverse group of existing leaders and cultivating new ones to promote reform (including consumers)
- Advocacy and policy reforms often take time – reasonable metrics of success inspire staying the course

Specialty Care Initiatives Across the Care Continuum

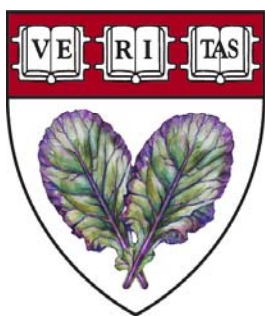
- The continuum of funded initiatives include state-of-the-art interventions in prevention, screening, linkage to care, retention in care, and the integration of care and essential support services
- Initiatives support tobacco cessation, increased cancer screening, the deployment of innovative cancer prevention and education programs, expanded assessment, enhanced connection to and retention in cancer and HIV care, the promotion of survivorship care and support groups for people living with lung cancer

Emerging Trends (Preliminary)

1. High rates of uninsured patients
2. Inadequate support for patient navigation (notably CHWs)
3. Burdensome screening requirements with inadequate reimbursement and biased criteria
4. Inadequate support for prevention, including reimbursement rates for tobacco cessation efforts
5. Exclusion from federal innovative models of care delivery research
6. Inadequate financing structures to support telehealth

Next Steps

- Work with grantees to define the innovative models of prevention and care delivery
- Identify the qualitative and quantitative data needed to support sustainability and scalability
- Develop potential demonstration projects that would provide evidence needed to secure public and/or private insurance coverage
- Prepare for meetings with payors to promote interest and alignment on program design and evaluation criteria



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