

LEADERSHIP MAINE PI CLASS

BLUE TEAM PROJECT

Controlling Health Care Costs in Maine

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Controlling Health Care Costs in Maine

What's The Problem?

- Maine's health care costs are extraordinarily high and rising at an unsustainable rate as a function of GDP

	Avg. GDP (% growth)	Health Care Costs as % GDP ¹
N.E.	2.5%	N.A.
U.S.	3.4%	14.6%
Maine	1.9%	22.1% (\$8B of GDP)

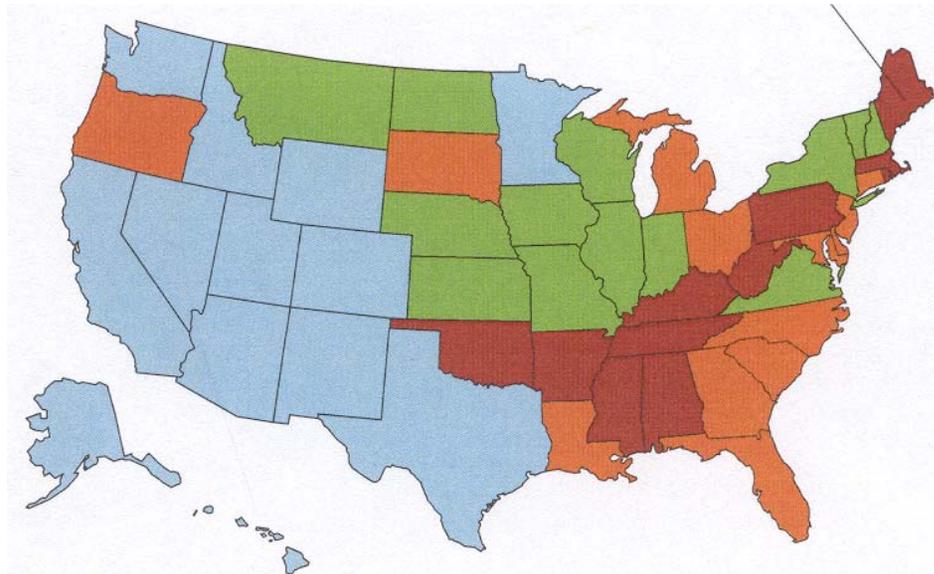
¹ 2004 Data

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What's The Problem? (Cont.)

- Miliken Institute reports that Maine ranks in the bottom quartile for occurrence of 7 common chronic diseases

Miliken Institute Chronic Disease Index



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What's The Problem? (Cont.)

- Economic impact:²
 - \$1.4B in treatment costs
 - \$5.3B in lost productivity
 - \$6.7B

² 2003 Data

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What Are We Doing Wrong?

- Much of the State's health care cost is preventable – the result of poor diet, low exercise, high stress and environmental conditions
- Miliken Institute estimates that with appropriate prevention and management of common chronic diseases, Maine could avoid 27% of its health care costs (\$5.8B)

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What Are We Doing Wrong? (Cont.)

Disease	# Impacted ¹	Cause	Solution
Pulmonary	274,000	Varied, preventable	Diet, exercise
Mental Disorders	177,000	Varied	Varied, medication
Hypertension	175,000	Life choices - preventable	Reduce stress, diet, exercise
Heart Disease	83,000	Life choices, genetic	Reduce stress, diet, exercise
Diabetes	69,000	Life choices – Type II	Diet, exercise
Cancer	53,000	Varied – some preventable	Environmental, diet

¹ 2003 Data

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How Do We Change It?

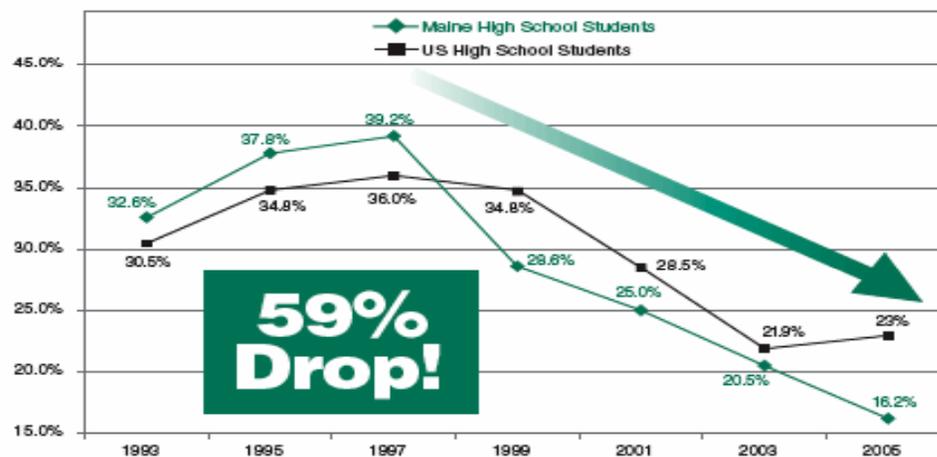
- Attack the source of the problem rather than the symptom (actual cost of delivering health care)
- Focus on prevention and disease management
 - Diet
 - Exercise

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How Do We Change It? (Cont.)

- Use Tobacco Settlement Fund Model targeted at educating children to lower incidence/cost related to common chronic diseases

Smoking Rates—High School Students
Maine & US 1993–2005



Source: Maine Department of Education, Youth Risk Behavior Survey: 1993, 1995, 1997, 2001, 2003, 2005
Note: 1999 data is from the Maine Youth Tobacco Survey and was collected in the fall of 1999

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What Should We Be Doing Next?

- Goal: Find a program targeted at educating children on diet and exercise to reduce incidence of common chronic diseases and related health care cost
- The **5-2-1-0** Program focuses on getting children to make healthy food and activity choices
 - Better choices now will lead to better choices later

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What Should We Be Doing Next? (Cont.)



- 5** • 5 fruits and vegetables per day
- 2** • 2 hours or less of recreational screen time.
- 1** • 1 hour or more of physical activity.
- 0** • 0 sugary drinks, more water and low fat milk.

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Why Don't Good Ideas Get Implemented?

- No shortage of good ideas and solutions but implementation of workable programs – like **5-2-1-0** – is problematic

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Why Don't Good Ideas Get Implemented? (Cont.)

- Implementation gateways/barriers:

Gateways	Barriers
↗Passionate champion driving idea	↗Fear or reluctance to assume leadership role
↗Detailed plan	↗Lack of detailed plan results in aimless wandering
↗Doable goal	↗Overbroad/unmanageable goal
↗Role comprehension	↗Role conflict
↗Role acceptance	↗Fear to stretch comfort zone