



NCVHS

Session 1

“In Rochester there is collaboration like I have never seen.”

Jaime Torres, DPM, Regional Director of the
U.S. Department of Health and Human Services



“I am blown away by Rochester. There’s a lot of good stuff being done by a lot of people.”

Richard Gilfillan, MD, acting director, Center for Medicare and Medicaid Innovation

The Rochester Advantage

- Commercial premium **costs** – 41% below national average
 - 2010 Milliman Survey
- Medicare spending – 21% below national average
 - Dartmouth Atlas of Healthcare
- High **access to care** evidenced by low uninsured rates
 - Monroe County – 10.6%
 - New York State – 16.6%
 - National average – 21.4%
- High **quality** of care
 - 2010 Hospital Value Index

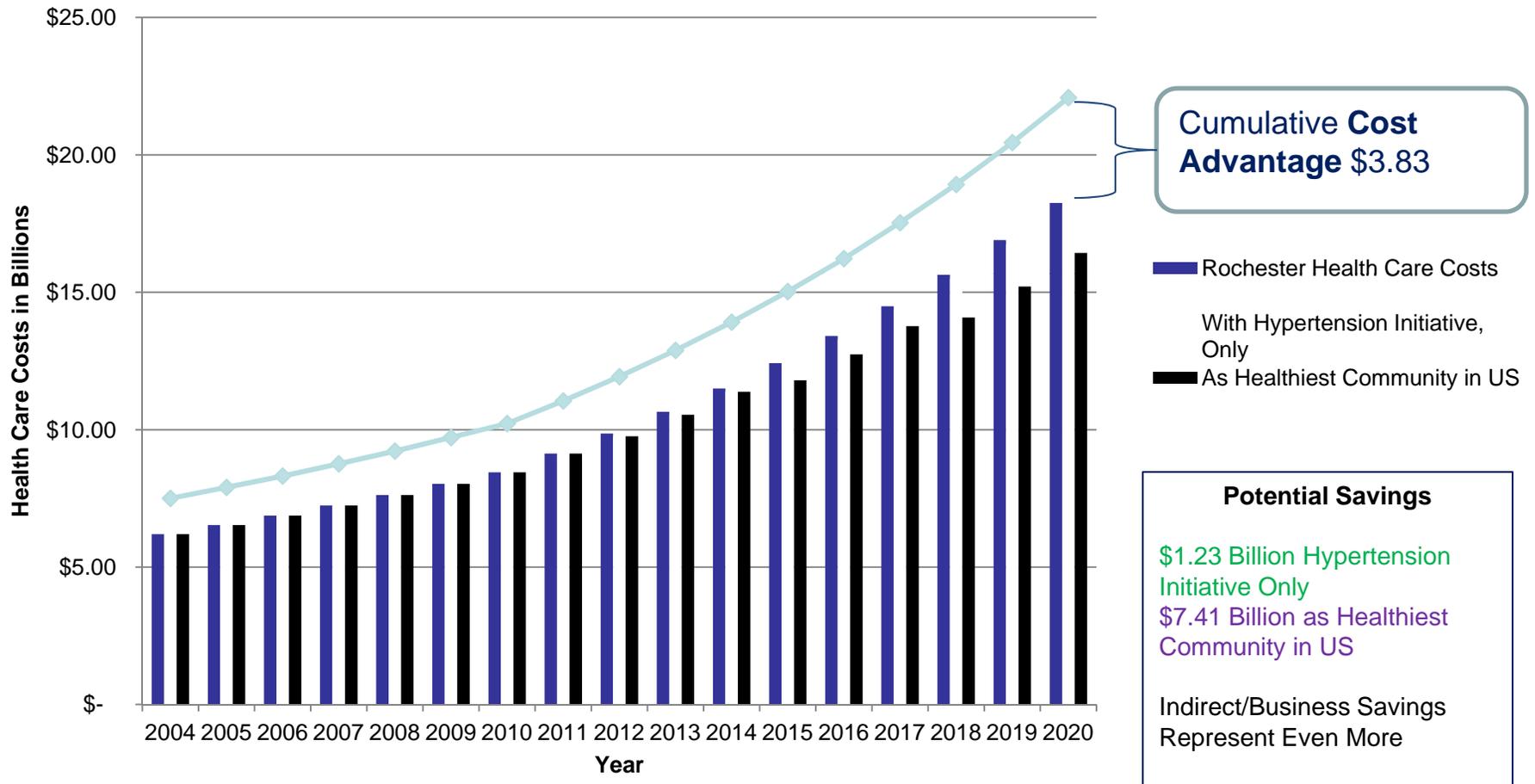


Why Does Rochester Have An Advantage?

- Consistent investment in primary care
 - Strong ratio of primary care physicians per population
 - Reimbursement Rates
 - Advanced Medical Home
 - Graduate Medical Education
- Legacy of community rating
- Low uninsured rate
- Non-profit insurers predominant in the market
- Long history of collaboration

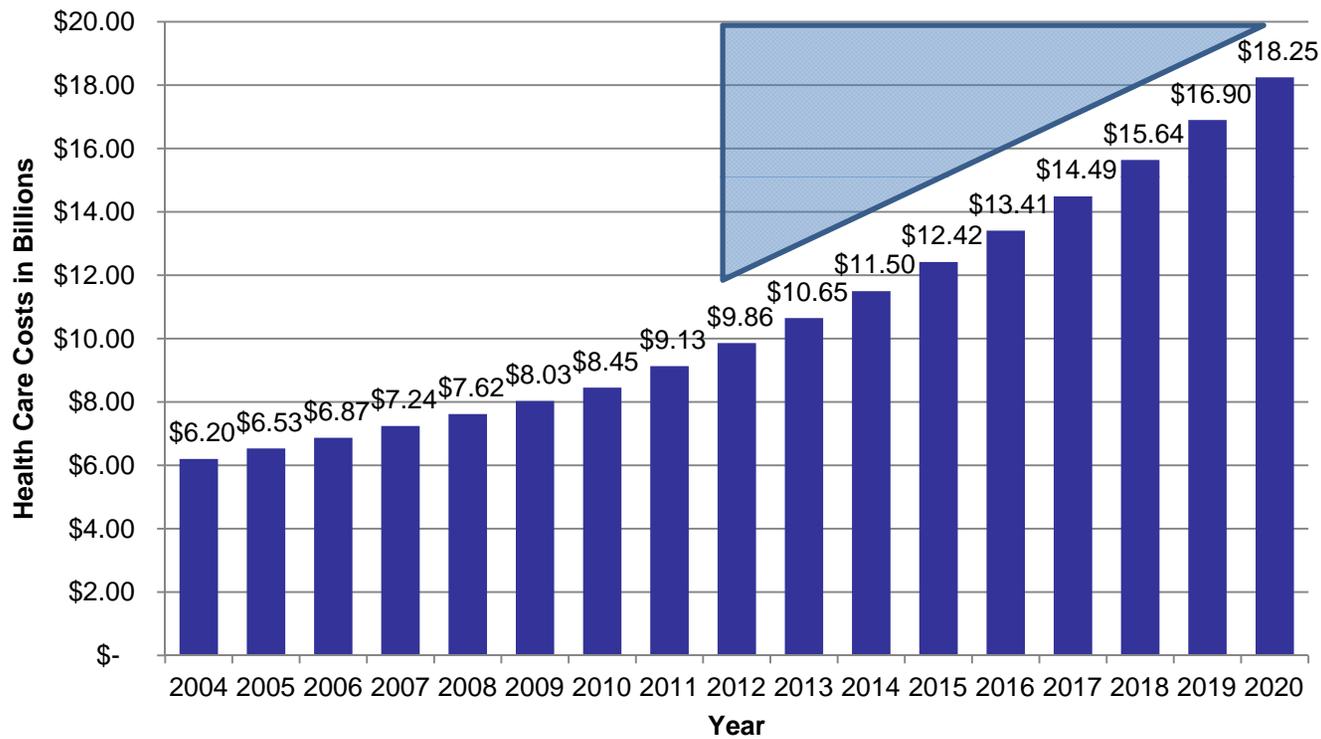


Rochester Cost Advantage



Now the bad news.....

Rochester Health Care Costs



Costs Nearly Double in Eight Years

■ Rochester Health Care Costs



Community High Blood Pressure Collaborative

High Blood Pressure Collaborative Primary Goal

is to decrease the devastating impact high blood pressure has on the lives of adults in Monroe County because of heart failure, heart attacks, kidney disease and strokes, while simultaneously decreasing the overall cost of high blood pressure within our community.

Success Measures

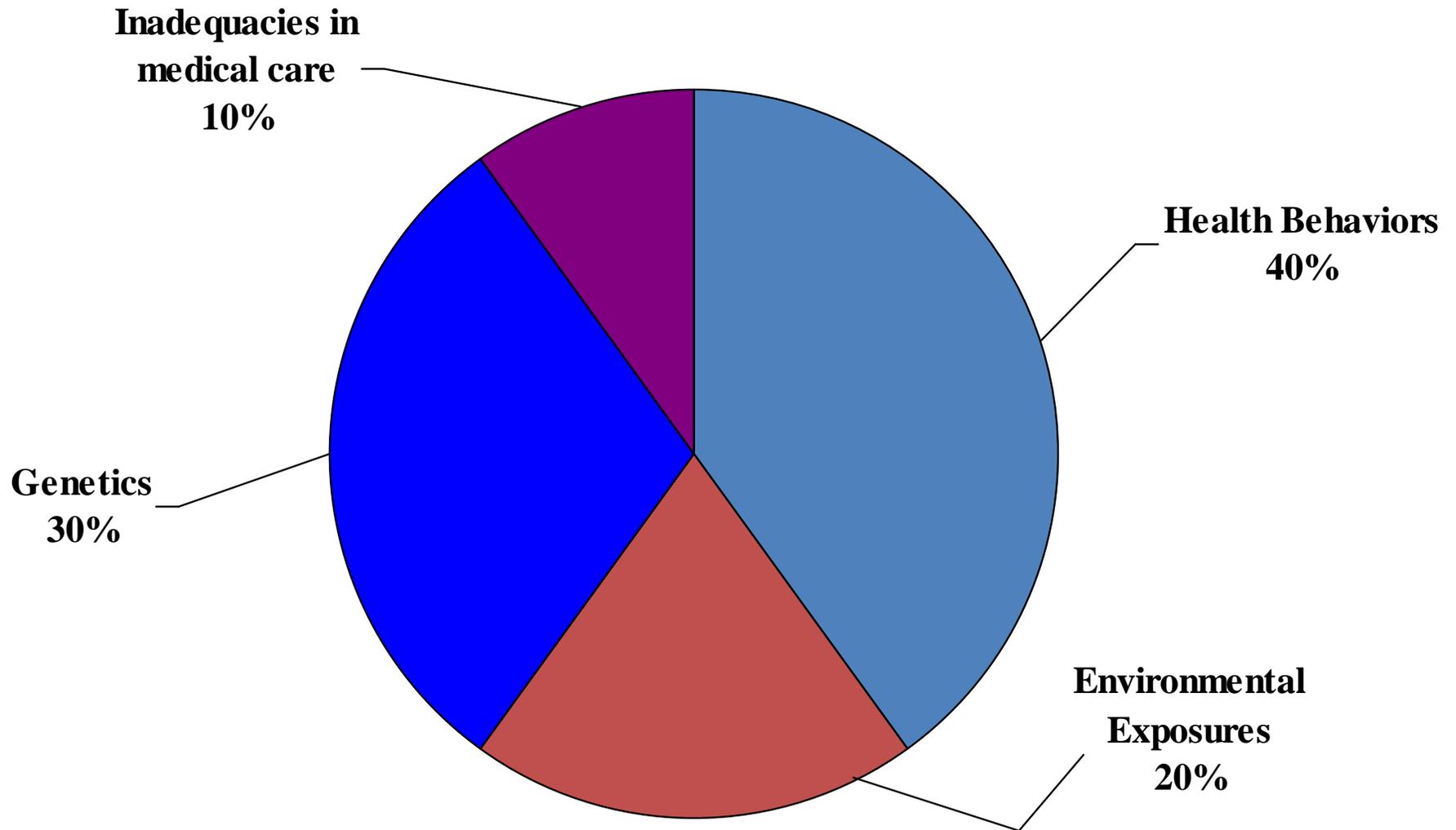
- The incidence of heart failure, heart attack, kidney disease and stroke among Monroe County adults, across all demographic categories.
- The percentage and rate of people with high blood pressure who get their blood pressure in control.

Why Begin with High Blood Pressure?

- High blood pressure affects 65 million Americans
In NYS: **27.2% have a diagnosis of high blood pressure;**
Aggregate annual spending is \$1.1 Billion

In the Finger Lakes Region: **29.4% (237,200 adults) have this dx;**
Aggregate spending is \$305 Million
- Affects more than half the people age 60-69, and 64% of males and 78% of females 80 and older have HBP
- African Americans have 1.5-2 times higher incidence of high blood pressure; Latinos have an incidence 1.3 times the non-Latino White population
- For every 20 mmHg systolic or 10 mmHg diastolic increase in blood pressure, mortality from both ischemic heart disease and stroke doubles

Determinants of Health



What Would Wagner Do?



En-gage-ment

(to come together; pledge to a

Other Community Approaches	Community Engagement
Focused on individual behavior	Focused on institutional/organizational policy/practice
Community "invited" to table	Community "is" the table
Solutions are implemented externally	Solutions and change are dependent on community
Focus on programs/services	Focus on relationships and community action



Community Interventions

- Attitude Survey
- Health Screenings
- Pharmacy
- Faith communities
- Kiosks
- Barbershops
/Salons





Demonstration Projects

- Churches
- Worksites
- Salons/Barber
shops





Clinical Interventions

- Baseline Survey
- Community Data Base
- Academic Detailing
- Primary Care
- Plan Design

