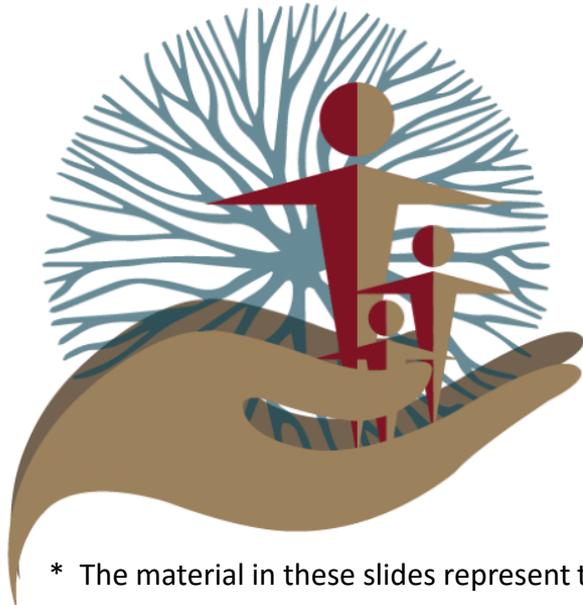


OBAMACARE: LESSONS AND IMPLICATIONS FOR UHC



Cape Town
16 -19 July 2017

The
18th Annual
**BHF Southern
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Private sector embracing universal healthcare

Liz Fowler
Vice President, Global Health Policy

Johnson & Johnson

* The material in these slides represent the speaker's personal perspective and do not necessarily reflect those of Johnson & Johnson

Agenda

1

Health Reform is a Long Journey

2

Better to Have Company on the Journey

3

“The Journey of a Thousand Miles Begins with One Step”



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Lesson 1: Health Reform is a Long Journey

1

U.S. Health Reform in Historical Context

Affordable Care Act: 100 Years in the Making

Early 1900s	Progressive platform	National health insurance excluded from the final draft
1934-1939	New Deal	Social Security took precedence over health care benefits
1945-1950	Fair Deal	Labor split and AMA (physicians) vigorously opposed
1960-1965	Great Society (Medicare & Medicaid)	AMA opposed creation of Medicare but lost the debate
1970-1974	Nixon vs. Kennedy	Competing plans split the cause
1993-1994	Clinton's attempt	Opposed by every major health care stakeholder group
2009-2010	Affordable Care Act	Legislation passed with support from the private sector but opposed by Republicans
<i>2010-present</i>	<i>ACA 'Repeal and Replace'</i>	<i>Ongoing (and current) efforts to repeal Obamacare</i>

1

The Road to Obamacare, 2008-2010



FINAL VOTE RESULTS FOR ROLL CALL 165

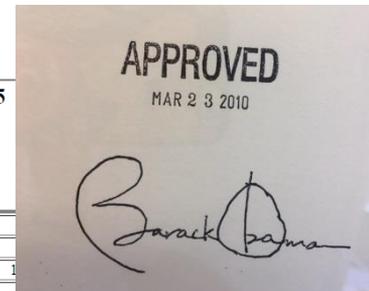
(Democrats in roman; Republicans in *italic*; Independents underlined)

H R 3590 RECORDED VOTE 21-Mar-2010 10:49 PM

QUESTION: On Motion to Concur in Senate Amendments

BILL TITLE: Patient Protection and Affordable Care Act

	<u>AYES</u>	<u>NOES</u>
DEMOCRATIC	219	1
REPUBLICAN		
INDEPENDENT		
TOTALS	219	212



2008

2009

2010

Senate Health Reform Activities, 2009-2010

Hearings

36 days

Legislative Markup

18 days

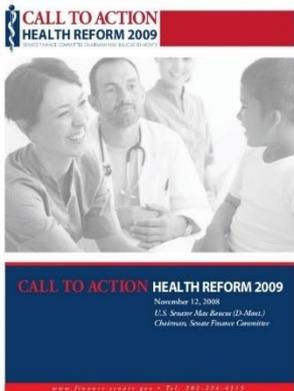
Senate Floor Debate

26 days (270 hours)

NOTE: This content not intended for commercial use.

Images: ObamaCare Facts Image Public Domain; U.S. Government Work

(<https://obamacarefacts.com/obamahealthcare/>).



Challenges in Passing U.S. Health Reform

- **The Politics**
 - **Priority setting:** health reform vs. other domestic policy priorities
 - **Timing:** when to take up reform and how fast to move
 - **Building support:** building a coalition within government and gathering support in the private sector
- **The Policy**
 - Build on the current health system or replace it with a new model?
 - How to fund the cost of new coverage and other reforms?
 - How to phase-in major policy changes and build in “early deliverables”?
 - What is the appropriate balance between expanding coverage and controlling costs?
 - What is the role of States vs. Federal government?



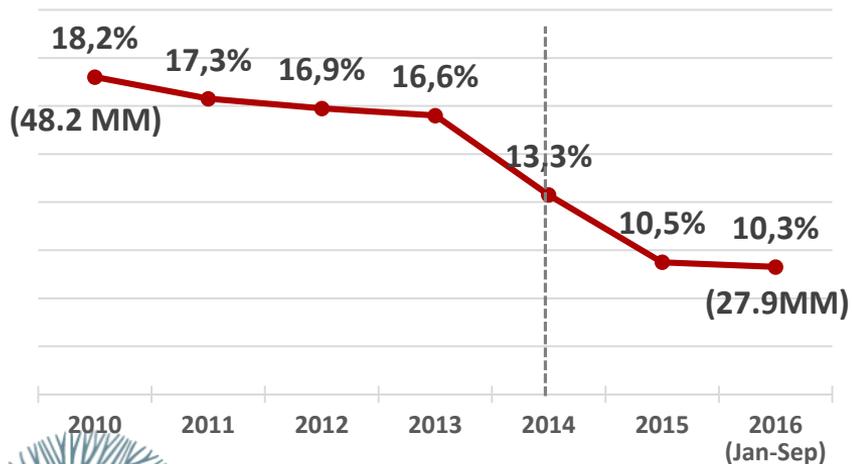
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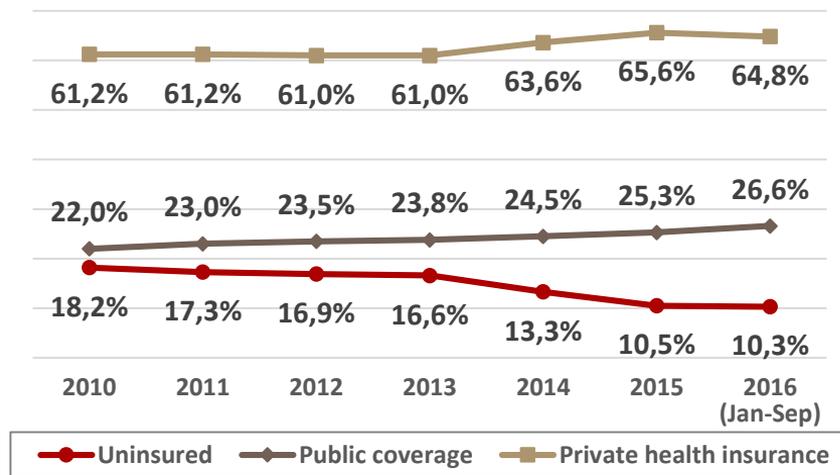
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Impact of the Affordable Care Act

Percent under 65 years old without health coverage, 2010-2016

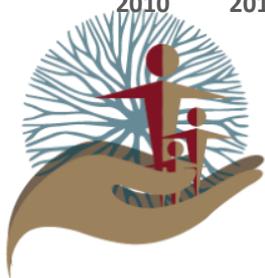


Percent under 65 years old by type of coverage, 2010-2016



Note: States that expanded Medicaid had a lower rate of uninsured in 2016 (8.0% vs. 10.3%) and conversely, States that didn't expand Medicaid had a higher rate of uninsured (14.2% vs. 10.3%).

Source: CDC, National Center for Health Statistics, "Health Insurance Coverage: Early release of Estimates from the National Health Interview Survey, January-September 2016" (February 2017) (<https://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201702.pdf>).



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Affordable Care Act "Repeal and Replace"



The New York Times
For the First Time, 45 Counties Could Have No Insurer in the Obamacare Marketplaces
 By HAEYOUN PARK and AUDREY CARLSEN June 9, 2017



Frustration mounts over ObamaCare co-op failures
 BY PETER SULLIVAN – 08/01/16

2010 - 2012

2013-2014

2015-2016

2017

Nos. 11-393 & 11-400
In the Supreme Court of the United States
 NAT'L FED. OF INDEP. BUSINESS, ET AL.,
Petitioners,
 v.
 KATHLEEN SEBELIUS, ET AL.,
Respondents.
 STATE OF FLORIDA, ET AL.,
Petitioners,
 v.
 U.S. DEPT. OF HEALTH & HUMAN SVCS., ET AL.
Respondents.

111TH CONGRESS
 2D Session
S. 3152

To repeal the Patient Protection and Affordable Care Act.

IN THE SENATE OF THE UNITED STATES

MARCH 23 (legislative day, MARCH 19), 2010

Mr. DEMINT (for himself, Mr. BENNETT, Mr. VITTER, Mr. RISCH, Mrs. HUTCHINSON, Mr. CRAPO, Mr. BOND, Mr. LEMIEUX, Mr. CHAMBLISS, Mr. KYRHOE, Mr. ROBERTS, Mr. GRAHAM, and Mr. ENGLISH) introduced the following bill, which was read the first time

The Washington Post
The House has voted 54 times in four years on Obamacare. Here's the full list.
 By Ed O'Keefe March 21, 2014

ON MOTION TO CONCUR IN THE SENATE AMENDMENT

	H	R				
			3762			
	YEA	NAY	PRES	N		
REPUBLICAN	239	3		4		
DEMOCRATIC	1	178		9		
INDEPENDENT						
TOTALS	240	181		13		
			TIME REMAINING	0:00		

C-SPAN
 c-span.org



CONGRESSIONAL BUDGET OFFICE
 COST ESTIMATE

May 24, 2017

H.R. 1628
American Health Care Act of 2017
As passed by the House of Representatives on May 4, 2017



Lesson 2: Better to Have Company on the Journey

Hospitals and Other Stakeholders Agreed to Fund Health Coverage in 2009...

SPECIAL BULLETIN, July 8, 2009

AHA ANNOUNCES AGREEMENT TO “DO OUR PART” ON REFORM THAT EXPANDS COVERAGE

“The AHA today announced its support for an agreement on health care reform that expands health coverage to 95% of Americans while capping at **\$155 billion over 10 years** the amount of hospital spending cuts that would be used to help achieve that goal.”

“As coverage expands and more Americans are insured, the AHA estimates conservatively that hospitals would see reduced uncompensated care of at least \$171 billion over 10 years. A June 30 report from Bank of America-Merrill Lynch states that the hospital field stands to gain \$214 billion - \$236 billion over 10 years through coverage expansion. “



Link to AHA bulletin can be found at: <http://www.aha.org/bulletins/2009?p=3>. Note that access is restricted to AHA members.



**American Hospital
Association**



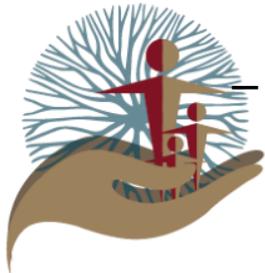
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...And Are Now Concerned About Repeal

- **A 2015 bill to repeal the ACA**, “Restoring Americans’ Healthcare Freedom Reconciliation Act,” proposed to:
 - Repeal ACA coverage expansions without offering a replacement
 - Repeal ACA taxes that were used to finance the legislation
 - But retain ACA reductions to hospital payments
- **An analysis** sponsored by the AHA found that:
 - The proposal would result in a loss of health coverage for an estimated 24 million people
 - The loss of health coverage would have a net impact on hospitals of \$165.8 billion
 - Retaining ACA’s hospital payment cuts while repealing coverage would result in an additional \$289.5 billion loss



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Inclusion Generates Investment



“America’s hospitals and health systems are deeply disappointed in the House passage of the AHCA because it will jeopardize health coverage for millions of Americans.”

“The bill passed by the House . . . will result in millions of Americans losing access to quality, affordable health insurance and those with pre-existing health conditions face the possibility of going back to the time when insurers could charge them premiums that made access to coverage out of the question.”



“The [Senate proposal] will have a devastating impact on people with chronic conditions, who will pay more for access to less care. This is unacceptable. The proposed cuts to Medicaid will harm the nation’s poorest and sickest populations.”



“AARP is deeply disappointed in today’s vote by the House to pass this deeply flawed health bill.”



“Preliminary analysis of the Senate bill released today shows the proposal could greatly harm millions of cancer patients, survivors and those at risk for the disease.”



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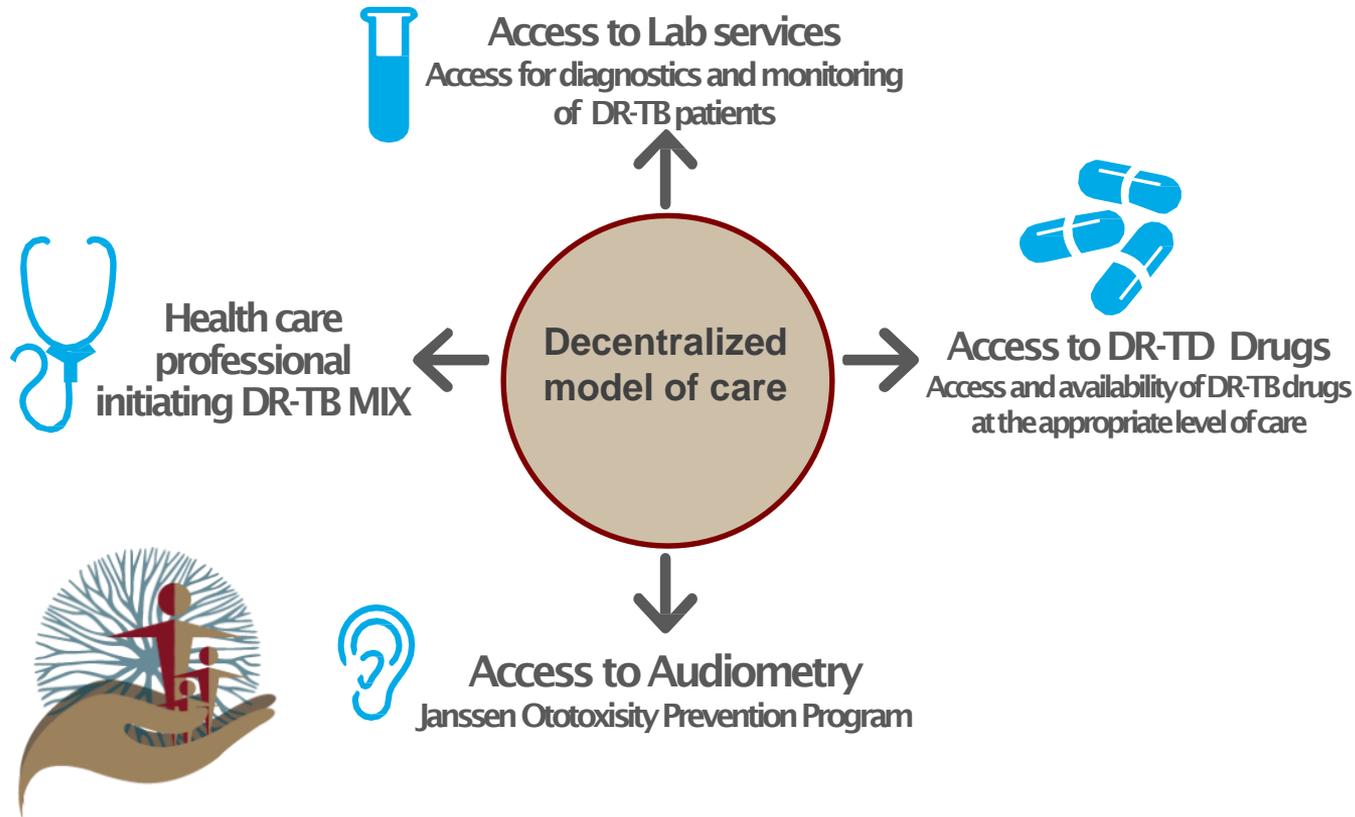
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Lesson 3: The Journey of a Thousand miles...

Model of Care for Drug Resistant TB in South Africa



- A contributing factor to poor outcomes for MDR-TB is inadequate access to diagnosis and treatment due to a centralized model of care – namely, hospitalization.
- Prior to 2011, guidelines directed compulsory hospitalization for all drug resistant TB patients for at least the first six months of their TB treatment.
- In 2011, DoH reduced the length of time patients were required to stay in hospitals and decentralized and deinstitutionalized the provisions of services.

Community Mental Health Centers in Turkey

Lack of Capacity to Treat Patients with Mental Illness

- Hospitals and outpatient clinics serving 450,000 patients
- Limited number of Community Mental Health Centers (CMHCs)
- Government commitment to increase CMHCs and improve quality



Public-Private Partnership to Improve Capacity

- Initiatives to improve service capacity of CMHCs
- Efforts to improve recruitment and referral of patients to CMHCs,
- Programs to improve treatment and enhance retention rates in services



Results and Impact

- Increased number of CMHC from 73 in 2013 to 180 in 2016 (and targeting 236 in 2018)
- Over 8,000 caregivers trained
- Decreased re-hospitalizations and days in hospitals
- Less use of multiple medication
- Improved quality of life and functioning



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To Recap...

1

Health Reform is a Long Journey

- Plan ahead, lay the groundwork, develop consensus on a framework
- Consider how success will be measured

2

Better to Have Company on the Journey

- A broad the coalition increases the chances of success
- Inclusion inspires commitment and generates genuine investment

3

“The Journey of a Thousand Miles Starts with One Step”

- Leverage and build on successful partnerships and programs



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THANK YOU



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