How are senior care organizations responding to the Affordable Care Act?

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Background

• The Affordable Care Act (ACA) has had an impact on the delivery of care and services for health care organizations. The ACA advanced the development of Accountable Care Organizations (ACOs), with the intent of fostering relationships between insurance organizations, doctors, hospitals, senior care organizations, and others to coordinate the delivery of care.

• This change is directly related to the Institute for Health Improvement Triple Aims initiative, focusing on improving the health of older adults, enhancing the care experience, and being more efficient with sparse resources.

• As a result senior care providers and other organizations are now evaluating how this new landscape requires them to reconsider how they meet the needs of patients and residents.

Purpose

• Currently, there is a lack of information available in a summarized manner about the affect the ACA is having on senior care and changing the delivery of care and services in senior care.

• The provisions in the ACA are also affecting the ability of an organization to develop effective affiliations and partnerships with providers offering complementary care or services.

• By identifying the changes in the ACA and new initiatives being advanced by senior care organizations, themes in established practices can be identified as well as any high-impact practices for other professionals in the field.

Methods

• A literature review was conducted for both peer-reviewed articles and provider/vendor information to begin to identify common themes and potentially high-impact practices. These resources are available on request in a handout.

• A pilot instrument has been drafted and is available to gather additional information and feedback during the 2015 ACHCA Convocation.

• This research begins to lay the foundation for the 2015 – 2016 annual UW – Eau Claire Health Care Administration Program and Center for Health Administration and Aging Services Excellence (CHAASE) research study, utilizing approximately 60 sites across seven states gathering research on this topic.

Preliminary Common Themes and High-Impact Practices

Based on the conducted literature review, the following key themes have been identified for further research:

1. Improving the ability to measure and report quality indicators and outcomes driven by value-based payment efforts in the ACA;

2. Enhancing and broadening the transparency of data related the efficiency and quality of services provided;

3. Finding new and creative ways to provide care and services to older adults;

4. Renewing the emphasis on assessing and meeting the needs and wants of older adults;

5. Exploring affordable senior housing options and home- and community-based services;

6. Fostering partnerships and affiliations with providers and MCOs;

7. Having talented leaders in the field with an acute awareness of the provisions and changes in the ACA; and

8. Innovating leadership approaches to meet changing demands.

The guidance of health care administration faculty, the CHAASE Board, and an industry expert panel will continue to be utilized as this effort advances.

References

An executive summary of the various literature sources reviewed in this study is available upon request, and the summary will be further developed in the paper as expertise is sought from members in the field. A list of initial resources follows:


• Douglas Olson, Health Care Administration Program, University of Wisconsin- Eau Claire.  Contact: olsondou@uwec.edu

Draft Survey Instrument

• An initial draft of a research survey instrument is currently being constructed, which will be utilized with the 2015 – 2016 UWEC practicum sites.

• A qualitative feedback tool will be used to solicit feedback from practitioners in the field to help further develop this research survey instrument.

• Please take a moment to fill this survey out.  The responses provided will help position this next study for CHAASE, and will be used in consultation with the health care administration faculty and CHAASE Board in 2015 – 2016.

Initial Conclusions

• The literature currently available identifies several areas of feasible exploration for research in the field with day-to-day practitioners.

• The expansion of care and service delivery sites presents a unique challenge to senior care organizations to develop more creative and innovative partnerships to better serve older adults.

• This research effort begins to disseminate some of the current information of the health reform changes and its impact on senior care, and also serves to help raise the awareness of ACHCA members.

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