

New York Academy of
Medicine

Working Group on
Primary Care and
Population Health

May 15, 2017

Strategic Assessment of New York State's Regional Population Health Investments

Acknowledgments

- Support from New York State Health Foundation (NYSHHealth). The views are those of the author and not necessarily those of the New York State Health Foundation or its directors, officers, and staff.
- Additional support from Taconic Education and Research Fund (TERF).
- Contributions of NYS DOH Office of Public Health Practice and its efforts to assemble the data set analyzed in this report.
- Nancy Stedman, Sharrie McIntosh, Bronwyn Starr, and Sylvia Pirani reviewed this report and offered constructive feedback.



NYS HEALTH
FOUNDATION

Improving the state of New York's health

New York State Health Foundation's Investments in Population Health

NYSHealth's Investments in Population Health

- Population Health Summit
- Prevention Agenda
- Strategic Assessment of NYS' Regional Population Health Investments

AGENDA

1.1. Project goals, methods and limitations

2. Findings from data analysis

3. Key informant interview themes

4. Recommendations

AGENDA 1.1. Project goals, methods and limitations

The Thesis

New York State is often cited as a national model in public health because of its strong support for improving the health of its population. New York State has a well-defined strategy for pursuing population health through its 2013–2018 Prevention Agenda, and it has aligned State policy and grant funding to achieve its goals.

To maximize the value of the State's investments, stakeholders should be clear on their roles in the overall State population health strategy, how resources are being allocated within New York State's communities, and how they can create synergies from these investments.


Project Goals



Assemble data on NYS's population health funding and map how those funds are being used



Analyze NYS's population health funding and make recommendations about how the state can derive more value from existing investments



Disseminate the report and seek to inform policymakers that influence population health policy in New York

Key Questions

- How much funding is being provided to meet New York State's various Prevention Agenda goals?
- Which entities are receiving these grants?
- How can New York State's existing efforts be organized to maximize the State's investments in population health and grantmaking?
- How can population health efforts and funding be better synergized, promoted, and coordinated by New York State?

Framing: Total Population Health

- NYAM's Primary Care and Population Health workgroup defines as:
“improving the health and wellbeing of all people in a population in a given geographic area while eliminating health inequities. Substantive partnerships with communities, and across sectors affecting health (including but not limited to public health, health care, housing, education, and social services), as well as shared responsibility/accountability and supportive financing models, are required to achieving these goals.”

Data Set

- State fiscal year (SFY) 2015–16 spending data including federal, State sources and private foundations
- Appropriations data; expenditure plans and spending matrices from NYSDOH program staff; and grant contract information from HRI
- The data fields included:
 - Source of funding (State, federal);
 - The purpose and total amount of the funding;
 - The grant recipients and their individual award amounts;
 - The county or counties served (when available); and
 - The start and end dates of funding.

Data Set: Spending Categories

NYSDOH categorized spending by priority areas of the Prevention Agenda:

1. Prevent chronic diseases
2. Promote healthy and safe environment
3. Promote healthy women, infants, and children
4. Prevent HIV, STDs, vaccine-preventable diseases, and health care-associated infections
5. Promote mental health and prevent substance abuse
6. Public health capabilities (not a Prevention Agenda area), includes
 - assessment functions (such as surveillance and epidemiology); preparedness and response activities; efforts to reduce health disparities; non-lab research relevant to the Prevention Agenda; core public health funding not addressed within the Prevention Agenda (e.g., rabies and tuberculosis); food programs; public health workforce development

Data Set Exclusions

- Funding deployed by NYS OMH
- Funding deployed by other state agencies
- Early intervention services
- Most direct health care services
- Health care insurance

AGENDA 1.2. Findings from data analysis

Three areas

1.A. National context for NYS public health spending



B. NYS population health spending by Prevention Agenda categories

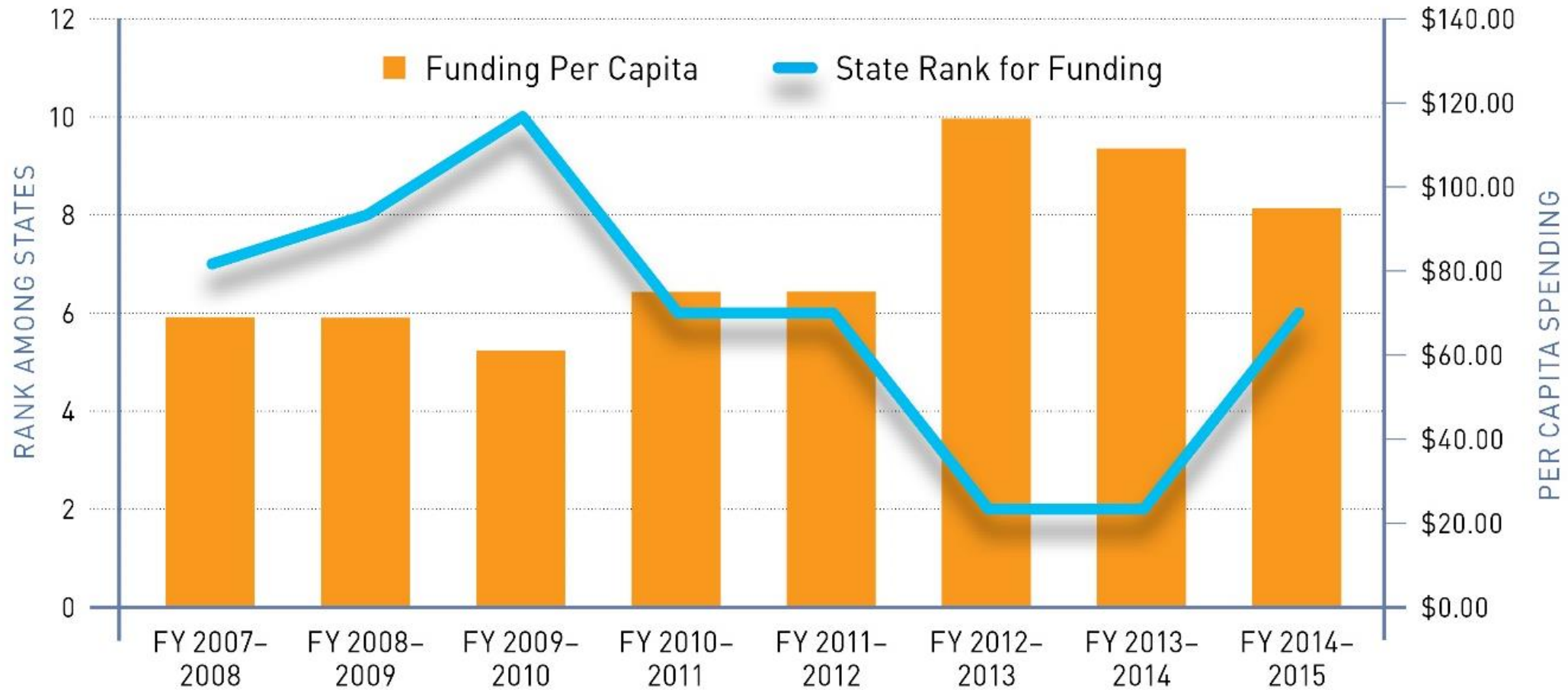


C. NYS population health grant spending by geography and recipient



FIGURE 1

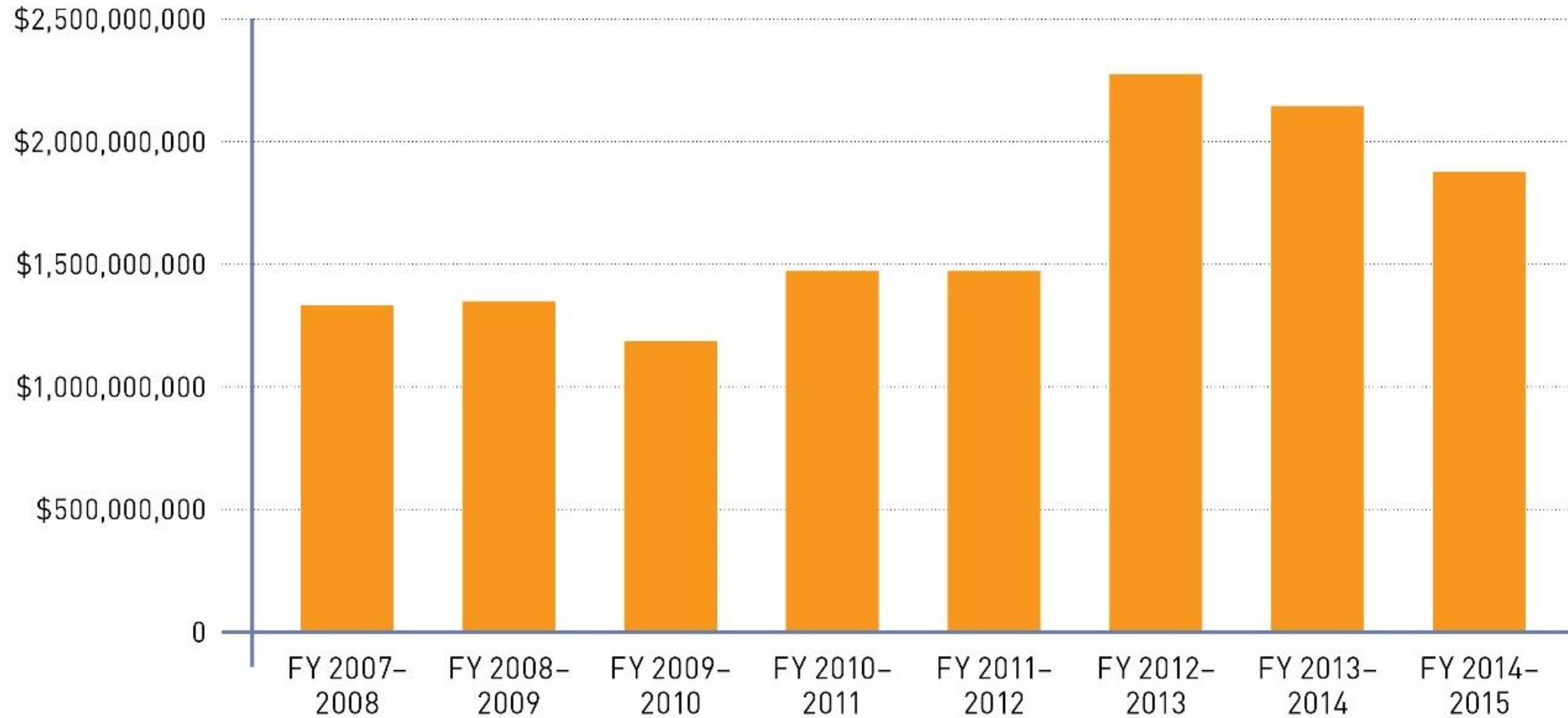
New York State Public Health Funding Per Capita
and Rank Among States 2007-2015



Source: Trust for America's Health 2009-2016

FIGURE 2

Reported New York State Public Health Budget 2007–2015
(Includes Agency Operations)



Source: Trust for America's Health 2009–2016

TABLE 3. SFY 2015–16 Funding by Prevention Agenda Priority Area

PREVENTION AGENDA SPENDING BY PRIORITY AREA	2015-16 APPROPRIATION	PERCENT
HIV, STDs, Vaccine-Preventable Diseases, HAI	\$226,624,713	15%
Chronic Diseases	\$80,715,468	5%
Healthy Women, Infants, and Children	\$157,130,687	10%
Healthy and Safe Environment	\$17,873,000	1%
Mental Health and Substance Abuse*	\$722,000	0%
Public Health Capabilities	\$1,062,488,570	69%
Total	\$1,545,554,438	100%

*Note: The funding for promoting mental health and preventing substance abuse is understated, as funds awarded through the New York State Office of Mental Health and New York State Office of Alcoholism and Substance Abuse Services are not included in this data set.

TABLE 4. New York State Population Health Appropriation 2015–16: Direct Service Exclusions

PREVENTION AGENDA PRIORITY AREA	FOCUS AREA	APPROPRIATION TITLE	SOURCE OF FUNDING	2015–16 ENACTED
HIV/STDs, Vaccine-Preventable Diseases, HAI	Immunization	Vaccine for Children	Federal	\$103,000,000
	Prevent HIV & STDs	Ryan White Part B	Nonfederal Private	\$11,715,801
Healthy Women, Infants, and Children	Child Health	School-Based Health Clinics and Health Center Providers	State	\$7,932,000
		School-Based Health Centers	State	\$10,400,000
		School-Based Health Centers	State	\$826,354
	Maternal and Infant Health	Supplemental Nutrition Assistance (SNAP)/WIC	State	\$26,255,000
Public Health Capabilities	Health Equity	Indian Health	State	\$22,500,000
	Preparedness and Response Activities	Public Health Emergencies	State	\$40,000,000
	Food Programs	Hunger Prevention and Nutrition Assistance Program	State	\$34,547,000
		Child and Adult Care Food Account	Federal	\$247,694,000
		Federal Food and Nutrition Services Account	Federal	\$502,970,000
Total				\$1,007,840,155

**TABLE 5. 2015–16 Funding by Prevention Agenda Priority Area:
Total and Direct Service Exclusions**

PREVENTION AGENDA PRIORITY AREA	2015-16 APPROPRIATION	DIRECT SERVICE EXCLUSIONS	TOTAL AFTER EXCLUSIONS
HIV/STDs, Vaccine Preventable Diseases, HAI	\$226,624,713	\$114,715,801	\$111,908,912
Chronic Disease	\$80,715,468	\$0	\$80,715,468
Healthy Women, Infants, Children	\$157,130,687	\$45,413,354	\$111,717,333
Healthy and Safe Environment	\$17,873,000	\$0	\$17,873,000
Mental Health and Substance Abuse*	\$722,000	\$0	\$722,000
Public Health Capabilities	\$1,062,488,570	\$847,711,000	\$214,777,570
Total	\$1,545,554,438	\$1,007,840,155	\$537,714,283

*Note: The funding for promoting mental health and preventing substance abuse is understated, as funds awarded through the New York State Office of Mental Health and New York State Office of Alcoholism and Substance Abuse Services are not included in this data set.

FIGURE 3

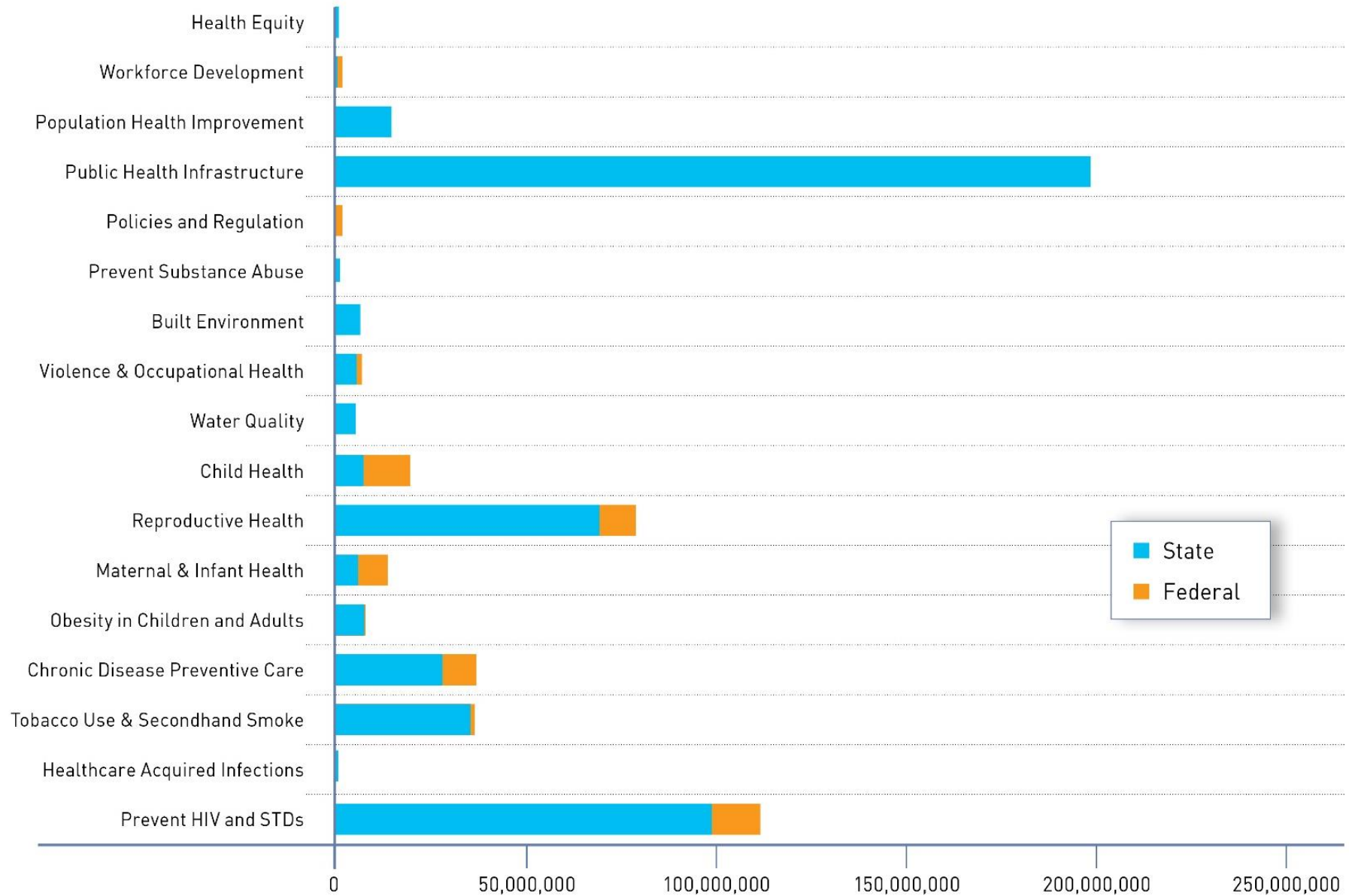
New York State Prevention Agenda Spending by Category:
Total and with Direct Services Excluded



*Note: The funding for promoting mental health and preventing substance abuse is understated, as funds awarded through the New York State Office of Mental Health and New York State Office of Alcoholism and Substance Abuse Services are not included in this data set.

FIGURE 4

SFY 2015-2016 Appropriations by Focus Area (Direct Service Excluded)



Grant Awards by Geography and Recipient

- Grant awards receiving funding in SFY 2015-16
 - 1,566 grant awards
 - Total spending of \$838,441,92
 - Multiyear grants with start and end dates ranging from 2009 to 2019
- Counties: 852 (54%) of the 1,566 grant awards had a county area assigned
 - Partial picture of how grants are distributed to communities
- Entity type: Manually coded entity type using 9 categories
 - An entity type was assigned to 921 of the 1,566 grant awards
 - These 921 accounted for 59% of the grant awards and 69% of the grant dollars
 - 9 entity types: counties, hospitals, FQHCs, New York City-related entities (Fund for Public Health and Public Health Solutions), DOHMH, RHNS, PHIPs, BOCES, and universities/SUNY
 - 645 remaining grants within the entity type of “community organizations and other unassigned”. Ex. community-based organizations, such as community gardens, AIDS coalitions, family planning, disease advocacy groups, and rape crisis and anti-violence groups

TABLE 6. NYSDOH Grant Awards to Counties Ranked by Health Outcome

COUNTY NAME	SINGLE COUNTY GRANTS	MULTICOUNTY GRANTS	ALL GRANTS	POPULATION	HEALTH OUTCOME RANK
Bronx	15	53	68	1,455,444	62
Sullivan	8	12	20	74,877	61
Cattaraugus	9	16	25	77,922	60
Greene	4	19	23	47,625	59
Chautauqua	11	15	26	130,779	58
Erie	25	18	43	922,578	57
Broome	14	13	27	196,567	56
Niagara	8	17	25	212,652	55
Hamilton	5	7	12	4,712	54
Franklin	4	13	17	50,660	53
Kings	16	66	82	2,636,735	52
St. Lawrence	5	10	15	111,007	51
Chemung	7	14	21	87,071	50
Schenectady	14	23	37	154,604	49
Allegany	8	15	23	47,462	48
Fulton	4	15	19	53,992	47
Montgomery	4	21	25	49,642	46
Oswego	10	10	20	120,146	45
Orleans	7	17	24	41,582	44
Oneida	10	17	27	232,500	43
Delaware	4	11	15	46,053	42
Cortland	11	11	22	48,494	41
Jefferson	4	12	16	117,635	40
Chenango	5	10	15	48,844	39
Washington	5	23	28	62,230	38
Essex	6	15	21	38,478	37
Tioga	7	10	17	49,453	36
Albany	20	18	38	309,381	35
Onondaga	21	16	37	468,463	34
Monroe	25	15	40	749,600	33
Rensselaer	7	19	26	160,266	32
Steuben	7	13	20	97,631	31
Clinton	11	23	34	81,251	30

TABLE 6. NYSDOH Grant Awards to Counties Ranked by Health Outcome *(continued)*

COUNTY NAME	SINGLE COUNTY GRANTS	MULTICOUNTY GRANTS	ALL GRANTS	POPULATION	HEALTH OUTCOME RANK
Columbia	6	19	25	61,509	29
Herkimer	5	10	15	63,100	28
Genesee	6	13	19	58,937	27
Richmond	6	15	21	474,558	26
Seneca	6	14	20	34,833	25
Cayuga	12	12	24	78,288	24
Orange	15	13	28	377,647	23
Lewis	6	10	16	26,957	22
Wayne	5	13	18	91,446	21
Schoharie	6	10	16	31,330	20
Otsego	4	11	15	60,636	19
Schuyler	4	14	18	18,186	18
Queens	4	46	50	2,339,150	17
Ulster	8	13	21	180,143	16
Yates	5	11	16	25,048	15
Warren	5	8	13	64,688	14
Ontario	4	15	19	109,561	13
Livingston	8	14	22	64,717	12
New York	23	83	106	1,644,518	11
Dutchess	12	16	28	295,754	10
Suffolk	14	17	31	1,501,587	9
Wyoming	8	16	24	41,013	8
Tompkins	8	11	19	104,926	7
Madison	6	11	17	71,849	6
Westchester	23	15	38	976,396	5
Putnam	7	9	16	99,042	4
Rockland	13	11	24	326,037	3
Nassau	20	20	40	1,361,350	2
Saratoga	6	16	22	226,249	1

Sources: Population from United States Census Bureau, 2015.

Health Outcome Rank from the University of Wisconsin, 2016.

Note: Count of all grants to a county includes both single county grant awards and multicounty awards involving that county.

Figure 5: Number of NYSDOH Public Health-related Grant Awards to Counties (with Grant Year, Including FY2015–16)

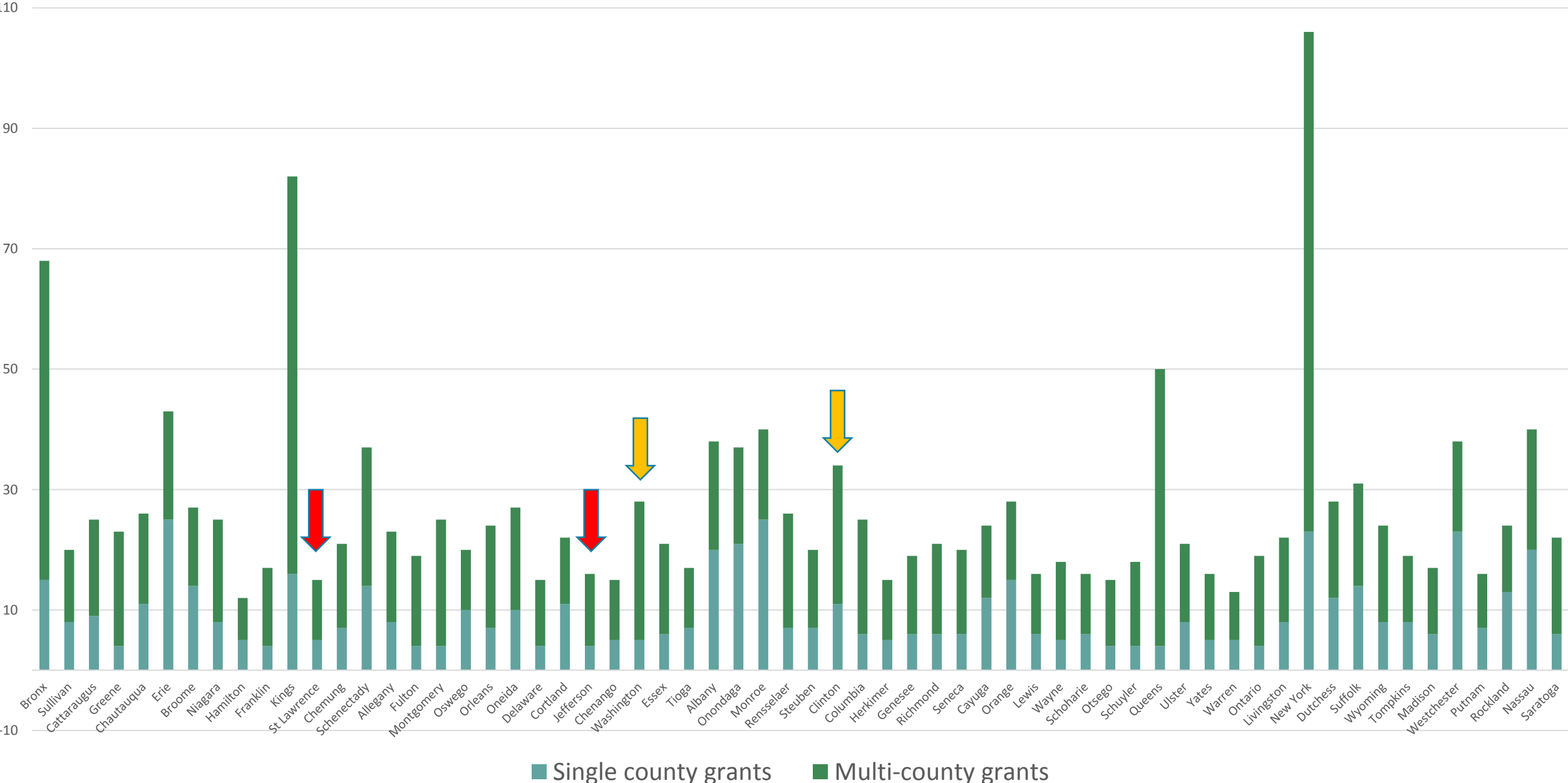


TABLE 7. 2015–16 Public Health-Related Grant Awards by Entity Type

ENTITY TYPE	# GRANT AWARDS	FUNDING TOTAL	% OF TOTAL
Counties	462	\$156,415,239	18.7%
Hospitals	227	\$184,693,740	22.0%
FQHCs	96	\$44,440,636	5.3%
New York City Department of Health and Mental Hygiene and City Entities*	23	\$162,113,318	19.3%
Rural Health Networks	38	\$10,022,471	1.2%
PHIPs	12	\$8,578,692	1.0%
SUNY	26	\$7,101,441	0.8%
University	16	\$6,921,388	0.8%
BOCES	21	\$1,190,094	0.1%
Subtotal for Assigned Entity	921	\$581,477,019	69.4%
Community Organizations and Other Unassigned	645	\$256,964,901	30.6%
Total	1566	\$838,441,920	100.0%

* City Entities include Public Health Solutions and the Fund for Public Health in New York City.

AGENDA 1.3. Key informant interview themes

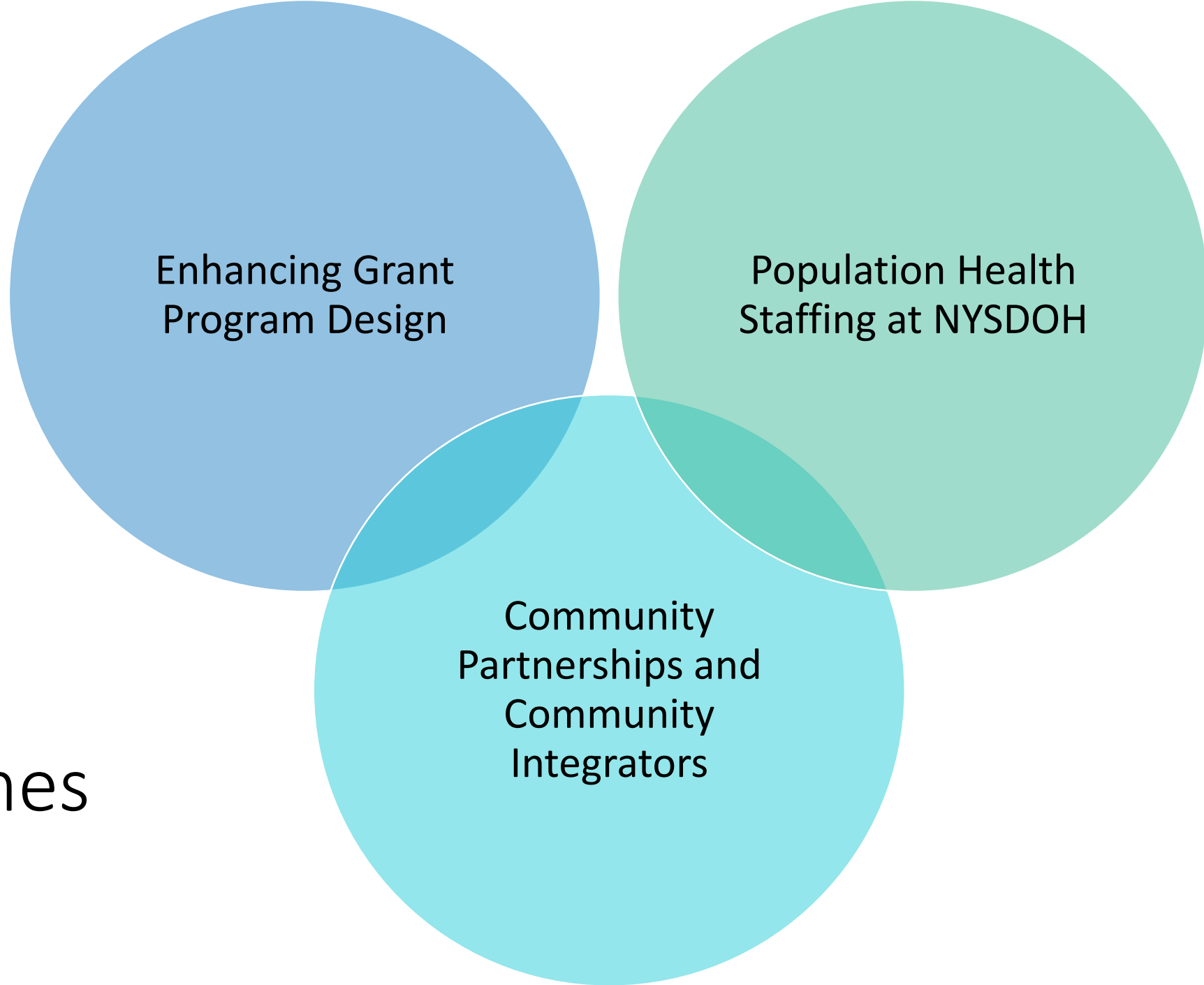
Interviews

- 13 qualitative interviews were conducted between July and December 2016
- Local health departments, rural health networks, community collaboratives, private foundations, hospitals, government agencies, and policy organizations

Overall Frame

- Much to be proud of in their own community efforts and in the State's support of the Prevention Agenda
- Many communities have self-organized to support population health
- Community backbone organizations: LHDs, PHIPs, DSRIP's PPSs, and RHNs

Key Themes



AGENDA 1.4. Recommendations

Recommendations

1. Provide more resources within NYSDOH to support the operation of the Prevention Agenda framework.
2. Develop, maintain, and make publicly available a population health grant data set.
3. Take a collaborative approach to grant design that further involves community stakeholders.
4. Engage private and community foundations. Consider formation of a philanthropic collaborative to support New York State's population efforts.

Recommendations

5. Given the critical role they play, invest in community integrator organizations by providing secure base funding and more technical assistance.
6. Provide dedicated funding to increase local health departments' participation in local and regional collaboratives.
7. Identify an accessible, public-facing champion for population health within NYSDOH

Report

- Can be accessed from NYS Health Website at :
<http://nyshealthfoundation.org/resources-and-reports/resource/strategic-assessment-of-new-york-regional-population-health-investments>

Slides

- Feel free to use slide(s) and please include a source citation:
- Stuard, S. (2017). Strategic Assessment of New York State's Regional Population Health Investments. New York State Health Foundation. Retrieved *insert date*, from <http://nyshealthfoundation.org>

Questions

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