

**Provider Advisory Council – Interim Report  
Recommendations Presented to the KHPA Board – 8/20/2007**

**Health Reform Framed Around Three Draft Messages –  
Providing and Protecting Affordable Health Insurance  
Paying for Prevention and Primary Care  
Promoting Personal Responsibility**

**Providing and Protecting Affordable Health Insurance**

**Benefits Package:**

Summary: The general consensus of the Provider Advisory Council was support for comprehensive health insurance plans that support a variety of packages and a variety of costs and incorporate best practices into the purchasing of any health insurance plan to stretch available dollars.

**Small Business:**

Summary: The general consensus of the Provider Advisory Council members was to support incentives for all small businesses as opposed to limiting incentives to only those small businesses that have not previously offered health coverage.

**Employer Responsibility:**

Summary: The general consensus of the Provider Advisory Council members was recognition that to achieve health care for all Kansans employers should be required to contribute considering the current employer-based model, however is it practical in Kansas?

**Individual Responsibility:**

Summary: The general consensus of the Provider Advisory Council was support for choices and individual ownership when determining what constitutes an affordable health plan for individuals and how much they should pay for a health plan.

**Health Insurance Connector:**

Summary: The general consensus of the Provider Advisory Council members was support for exploring more extensively a health insurance connector/exchange, along with support for exploring reinsurance.

**Mandates:**

Summary: The general consensus of the Provider Advisory Council was overall support for an individual health insurance mandate, but reservations and concerns regarding the impact on the current delivery system and the potential cost of comprehensive health insurance plans.

**Revenue Streams:**

Summary: The general consensus of the Provider Advisory Council members was recognition of inefficiencies in the current health care delivery system and the need to invest dollars in health reform efforts wisely to avoid unnecessary cost increases, and recognition that funding of health reform must be shared by individuals, employers, state and federal governments.

**Paying for Prevention and Primary Care****Healthy Lifestyles:**

Summary: The general consensus of the Provider Advisory Council members was to acknowledge that the challenges of having healthy lifestyles for Kansans exist at all levels, regardless of age, education or income.

**Interventions:**

Summary: The general consensus of the Provider Advisory Council members was interventions can be effective in improving health behaviors, based on successful experiences previously and currently implemented.

**Health Benefit Designs to Incentivize and Reward Health:**

Summary: The general consensus of the Provider Advisory Council members was recognition that changes to be included in health benefit designs to incentivize and reward health need to address both the current health care delivery system and individual behavior.

**Decrease Obesity and Tobacco Use:**

Summary: The general consensus of the Provider Advisory Council members was support for policies that target children specific to obesity and tobacco use, and consider reinstating premium differentials in health plans as policies are developed to decrease obesity and tobacco use overall.

**Health Benefit Designs to Manage Chronic Disease:**

Summary: The general consensus of the Provider Advisory Council was recognition that to better manage chronic diseases, health plan benefit designs should include health screen assessments, evidence-based practices, case management, disease management, and medication management options.

**Patient-Centered Medical Home:**

Summary: The general consensus of the Provider Advisory Council members was acknowledgement of the benefits of a medical home and how changes might be included in health benefit plan designs to drive the delivery of care to a patient-centered medical home.

**Prevention Effort Priorities:**

Summary: The general consensus of the Provider Advisory Council members was to focus prevention efforts on children and chronic disease management, given the state's limited resources.

**Promoting Personal Responsibility****Personal Responsibility:**

Summary: The questions regarding personal responsibility triggered responses from the Provider Council members that support healthy schools and healthy workplaces; encouraging the use of cost-effective health care services by putting the buying power of health care services into the hands of individuals, recognizing the need for health care services to extend beyond 9:00 – 5:00, and promoting contributions to the cost of health insurance based on one's ability to pay.