



# ALL ABOARD! DESTINATION: HEALTH REFORM

THE NATIONAL ACADEMY FOR STATE HEALTH POLICY 22ND ANNUAL STATE HEALTH POLICY CONFERENCE

OCTOBER 5-7, 2009 / LONG BEACH, CALIFORNIA

NATIONAL ACADEMY  
*for* STATE HEALTH POLICY

# “PILOT BOATS”

## MA, ME, VT LEADING THE WAY TO HEALTH REFORM

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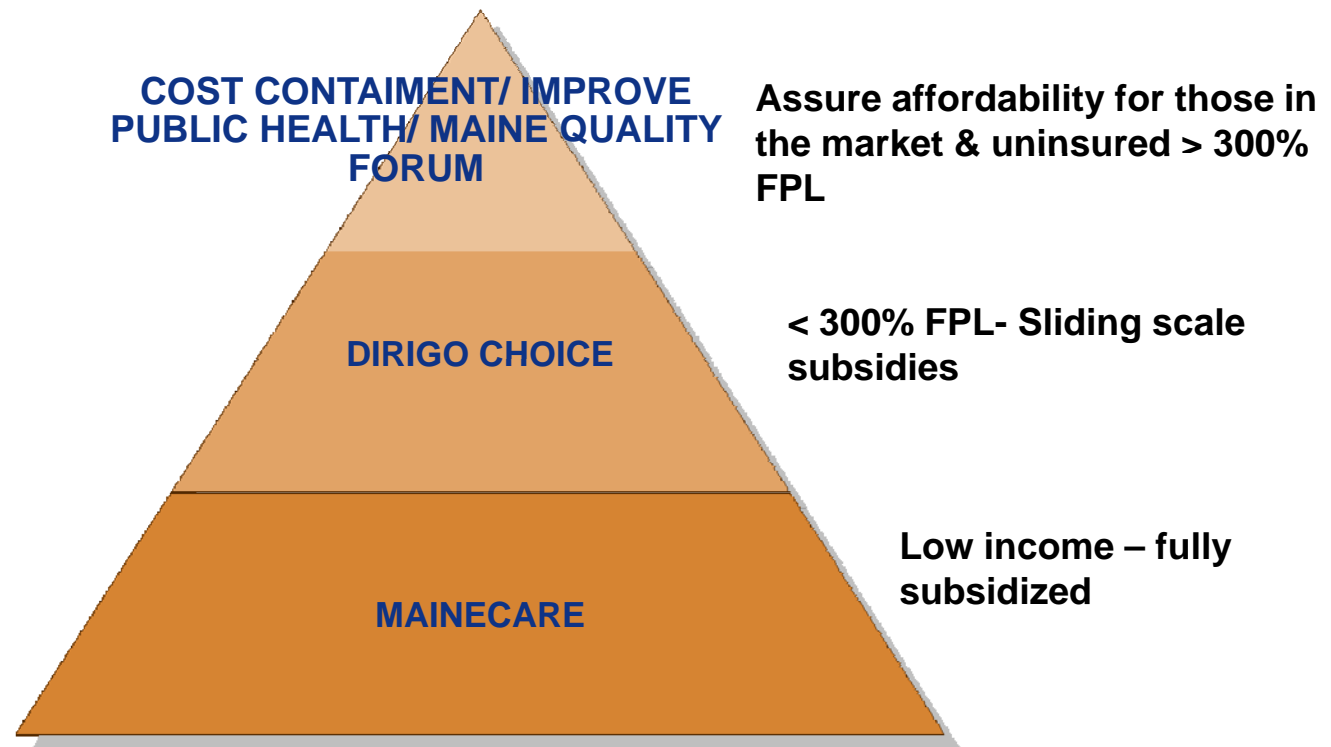
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[www.dirigohealth.com](http://www.dirigohealth.com)



# DIRIGO RECAP

## Cost, Quality, Access



- Financed by capturing savings in the health care system
- Compromises reduced available funding:
  - 30,000 served to date
  - 2003: ME ranked 19<sup>th</sup> in covering uninsured
  - 2008: ME ranked 5<sup>th</sup> best (Source: *America's Health Rankings*)
  - Saved over \$150M in health care spending

# DIRIGO: NEW DAY

- Legislature resolved financing controversy – fixed fee on insurers
- HRSA Grant
  - Dirigo as Exchange
    - Voucher program for uninsured part-time, seasonal, direct care workers to buy ESI (1/10)
  - New product designed for these workers without access to ESI
  - Sustainability – SHARED Responsibility
- Payment Reform Commission
  - MQF Variation Study

## LESSONS LEARNED

1. Reliable, adequate funding is essential first step.
2. Compromise is a value if it sustains program integrity.
3. Enactment is the “easy” part – Devil is in the details.
4. Go comprehensive (cost, quality, access):
  - Incremental success
5. Cover people immediately
6. Keep stakeholders at the table:
  - Ideologues / opponents won't stop
  - Health reform does not happen in a vacuum



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