

## In the Spotlight: Public-Private Partnerships

The Affordable Care Act (ACA) touches many areas across the health care sector, including [prevention](#) and [wellness](#), [quality](#), and [patient-centered care](#). However, while ACA began many of the shifts in health care, it left quite a bit in the hands of the private sector. In the interest of building on the ACA's momentum, the public and private sectors have come to discover that a well-known adage holds meaning, even to them – two heads are, in fact, better than one. There are several areas where the public and private interests align in health care and, with some creativity and coordination can be better served by private companies working in conjunction with public. Below are three examples of the countless ways public-private partnerships have grown in the last few years since ACA was signed into law.

### Farm to School Program

Much has been written about the childhood obesity epidemic that has been sweeping the United States for the past several decades. [According to the CDC](#), today about one in three children and adolescents were overweight or obese. ACA promotes prevention and wellness in many ways, but especially in the creation of the National Prevention Council. The Council released its first National Prevention Strategy in June of 2011 that details how \$15 billion in new public health spending will be doled out to increase physical activity and better nutrition, as well as other community-based initiatives that combat heart-disease, diabetes, and other chronic illnesses often linked with poor nutrition and lifestyle. In May of 2012 as a part of the Healthy Active Communities focus area, which seeks to increase physical activity and access to healthy food for North Carolinians, the Blue Cross and Blue Shield of North Carolina (BCBSNC) Foundation announced that it had teamed up with the North Carolina Department of Agriculture to expand the Farm to School Program to an additional 35 school systems. The Farm to School Program connects school systems with North Carolina-grown produce and as well as nutrition education in the classroom to encourage healthy choices and increase access to fresh fruits and vegetables, which supports efforts to reduce obesity. The investment by the Foundation totaled \$1.2 million and provided the funding for five additional refrigerated tractor-trailers to increase the distribution of local fruits and vegetables. The investment, as Commissioner of Agriculture Steve Troxler said, "is a win for our entire state."

### NC Program to Advance Technology for Health (NC PATH)

Originally called for in the American Reinvestment and Recovery Act (ARRA), meaningful use of electronic health records (EHR) has become increasingly important since ACA. Providers who can demonstrate that they are [using EHRs in meaningful ways](#) are eligible for financial incentives from the Centers for Medicare and Medicaid Services (CMS). ACA makes several changes to the way [Medicare providers are reimbursed](#), increasing the importance of quality care; at BCBSNC, we know that EHRs improve quality of care. So in 2011, BCBSNC partnered with Allscripts to make EHR available to independent primary care providers and free clinics across the state. About 750 providers, including many at 39 free clinics, benefit from this investment. At BCBSNC, the benefit was two-fold: the obvious being enhanced data exchange and efficiencies, but also savings associated with the proven improved health care outcomes of providers who use these tools. Patients experience better coordinated care from providers who use EHRs, many of whom are on track to become recognized as patient-centered medical homes.

## Carolina Advanced Health

ACA encourages a more patient-centered health care industry with changes in Medicare reimbursement and the [Patient-Centered Outcomes Research Institute](#) fee. Carolina Advanced Health (CAH) is an example of a public-private partnership that creates a more patient-centered approach to care. It represents a collaborative effort between University of North Carolina Health Care and BCBSNC. CAH employs a coordinated kind of care that encompasses doctors, pharmacists, nutritionists, and care managers under one roof, available at one visit. This kind of whole patient care improves health, increases satisfaction, and reduces patient health care costs. This type of relationship is especially beneficial for patients with chronic illnesses. CAH focuses care on BCBSNC customers and patients with chronic conditions, including coronary artery disease, hypertension, diabetes, obstructive lung disease, major depression and asthma.

## BCBSNC Views

While ACA got the ball rolling and accelerated many changes to the health care market, public-private partnerships are increasingly important players. BCBSNC and the BCBSNC Foundation have made many investment partnerships with the public to better the health of North Carolinians. The BCBSNC Foundation is a separate, independent, nonprofit Foundation dedicated to improving the health and well-being of North Carolinians. Since its founding in 2000, the BCBSNC Foundation has invested \$80.5 million into North Carolina communities through more than 600 grants. Separate and apart from the Foundation, BCBSNC supports many public-private partnerships that improve the health of North Carolinians and continues to seek opportunities to partner with providers in order to execute this goal.

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