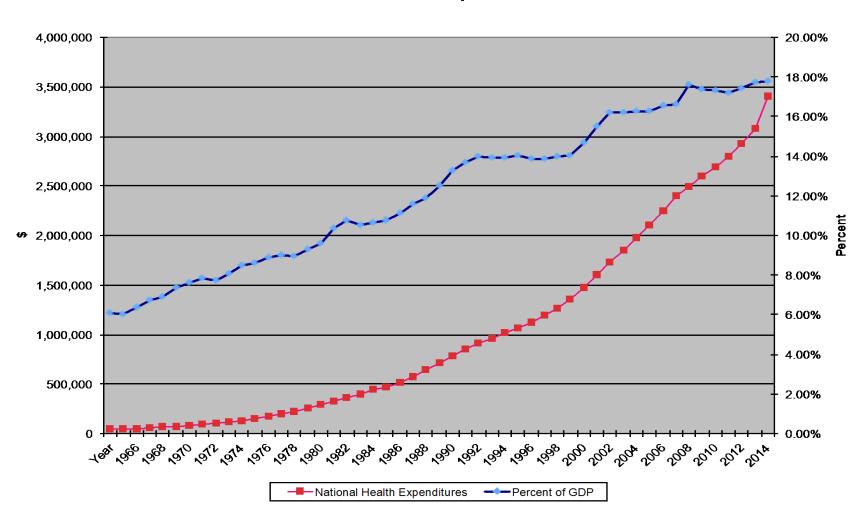
Health Care: Changes and Challenges

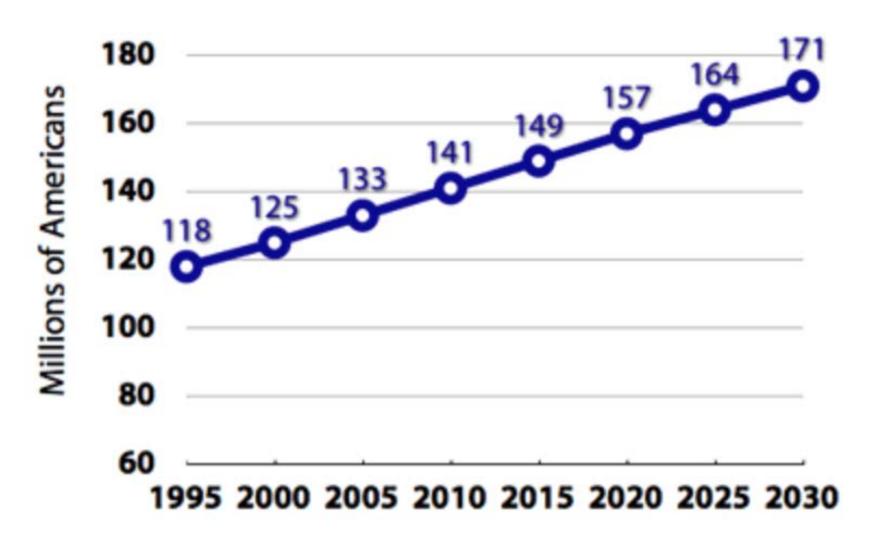
November 3, 2017 William S. Custer, Ph.D. Georgia State University

National Health Expenditures Total & as Percentage of GDP

National Health Expenditures



Prevalence of Chronic Disease in the U.S.



Source: Wu, Shin-Yi et al. 2000. Projection of Chronic Illness Prevalence and Cost Inflation. RAND Corporation.

Percentage of U.S. Adults with Chronic Conditions, by Number of Chronic Conditions (2014)

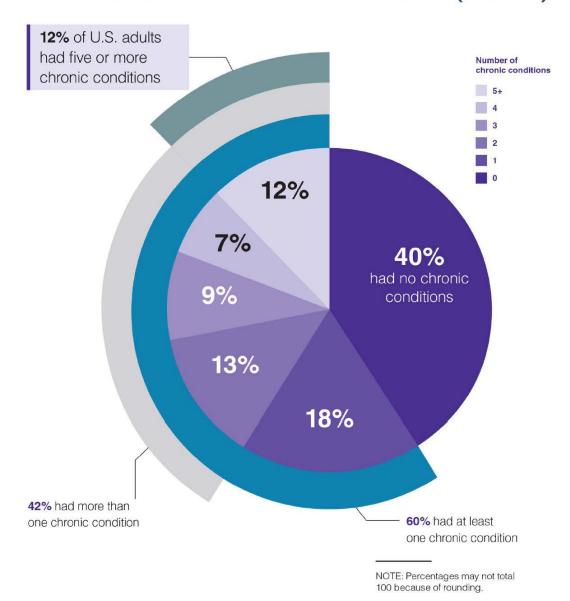
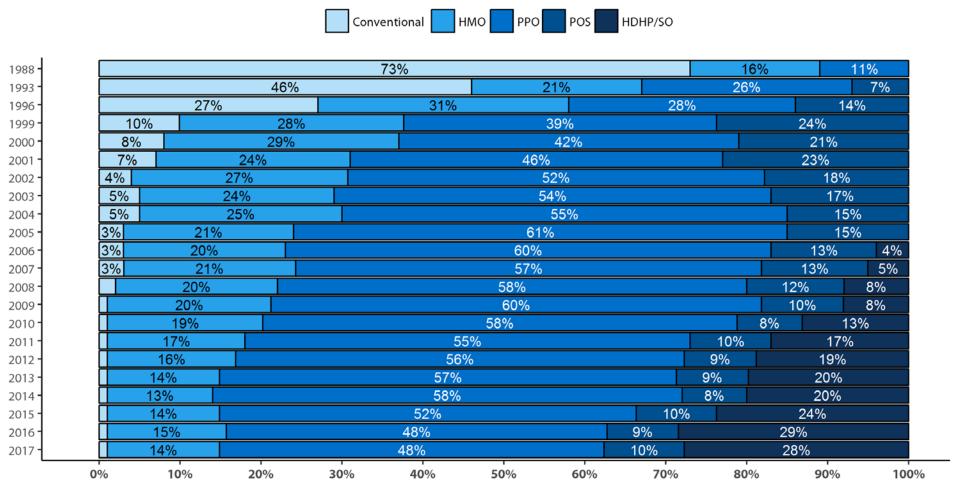


Figure 5.1
Distribution of Health Plan Enrollment for Covered Workers, by Plan Type, 1988-2017



NOTE: Information was not obtained for POS plans in 1988 or for HDHP/SO plans until 2006. A portion of the change in plan type enrollment for 2005 is likely attributable to incorporating more recent Census Bureau estimates of the number of state and local government workers and removing federal workers from the weights. See the Survey Design and Methods section from the 2005 Kaiser/HRET Survey of Employer-Sponsored Health Benefits for additional information.

SOURCE: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2017; KPMG Survey of Employer-Sponsored Health Benefits, 1993, 1996; The Health Insurance Association of America (HIAA), 1988.

Shifting RISK

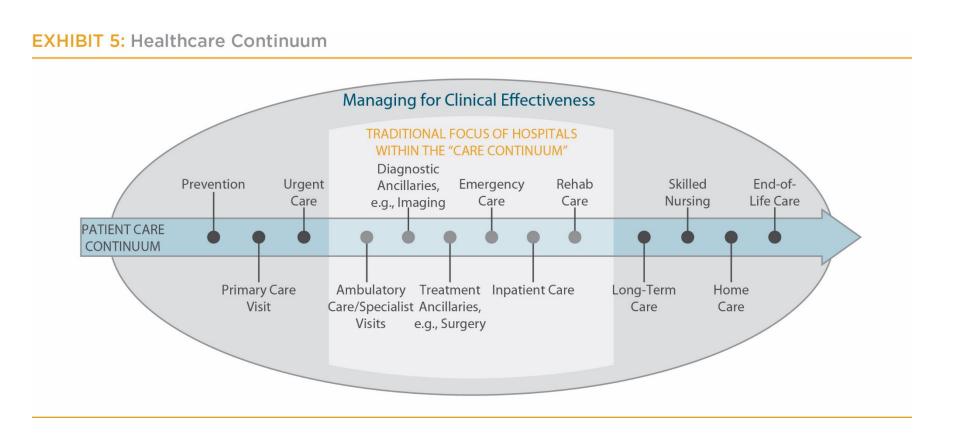
Low

Degree of Population Risk Transferred to Provider by Payment System

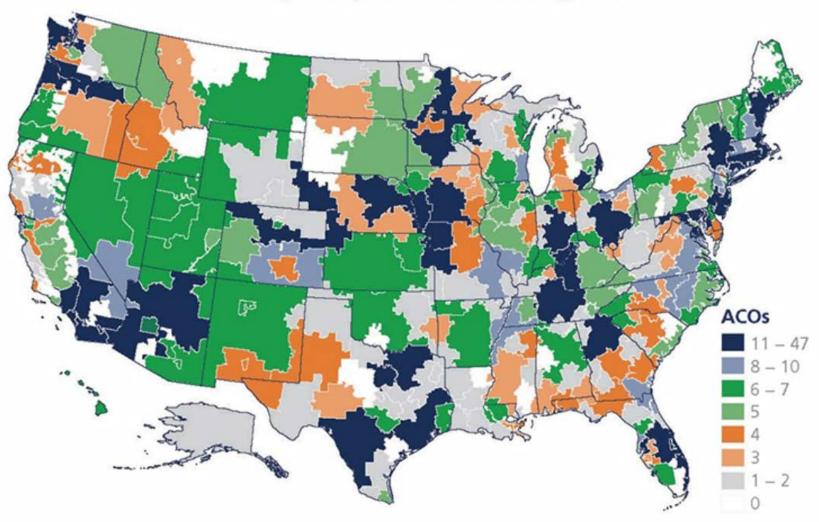
High

Episodic Pay for Pay for **Shared** Coordination **Performance Payments** Fee for Service **Capitation Savings Pavment Shared Providers** Additional per Payments tied Paid for each unit capita payment to objective based on savings from share of service w/o measures of better care savings from based on delivery of constraint on services within coordination ability to performance better care spending a given and disease coordination manage care Reform: timeframe management and disease Reform: -Value Based management **Primary Care** Reform: **Purchasing** Reform: **Medical Home** - Bundled - ACO's **Payment**

Continuum of Health Services in the U.S.



ACOs by Hospital Referral Region



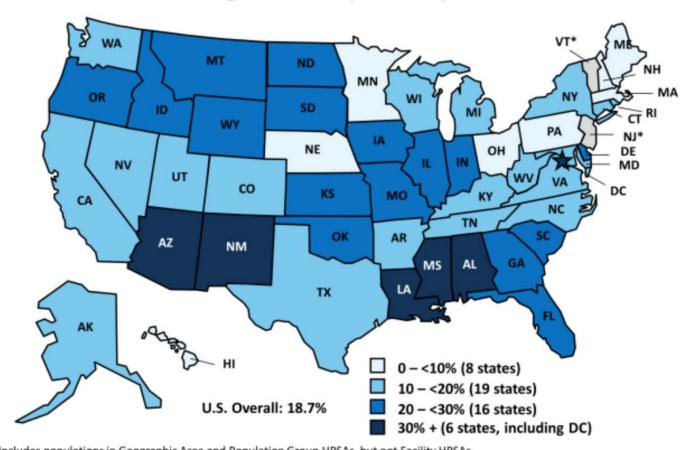
<u>David Muhlestein</u>, <u>Robert Saunders</u>, and <u>Mark McClellan</u>, Growth of ACOs and Alternative Payment Models in 2017

http://healthaffairs.org/blog/2017/06/28/growth-of-acos-and-alternative-payment-models-in-2017/

Availability

Figure 1

Percent of Population Residing in Primary Care Health Professional Shortage Areas (HPSAs), 2014



NOTES: Includes populations in Geographic Area and Population Group HPSAs, but not Facility HPSAs. *HRSA data show no population living in Geographic or Population Group Primary Care HPSAs in NJ and VT.

March 2014 Annual Social and Economic (ASEC) Supplement to the Current Population Survey (CPS).



SOURCE: KCMU analysis based on HRSA Designated Primary Care Health Professional Shortage Area Statistics as of August 12, 2014 and the

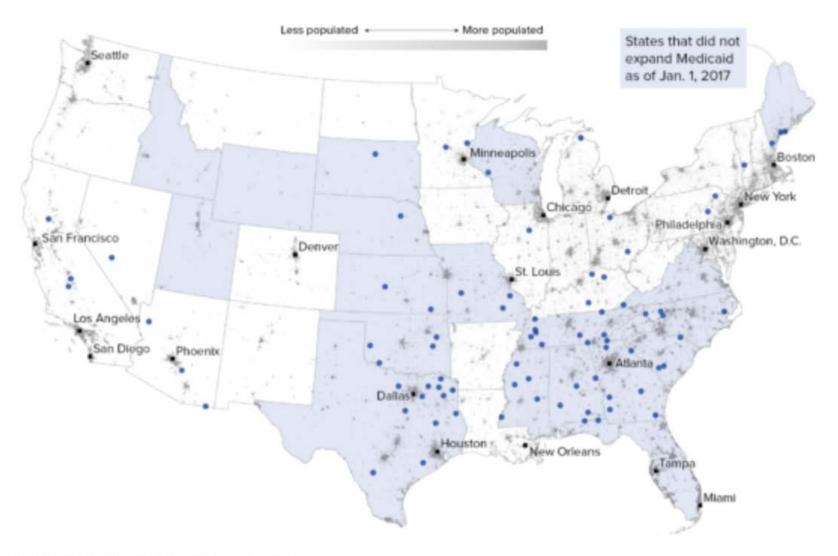




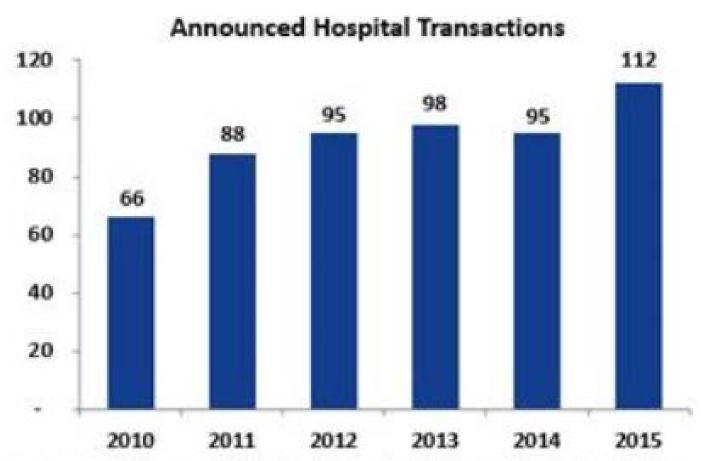
Rural Hospital Closures Concentrated In The South

Rural hospitals that have closed since 2010

As of September 2017

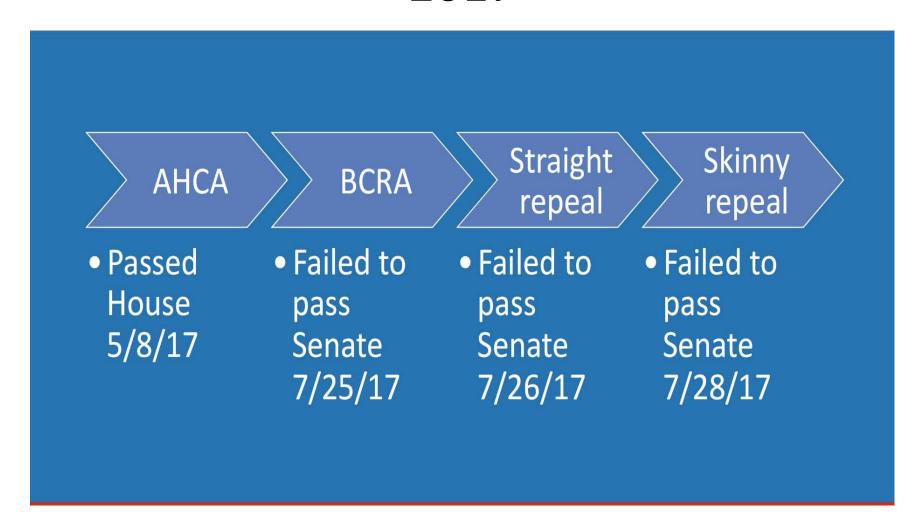


Health Care Is Consolidating and Integrating

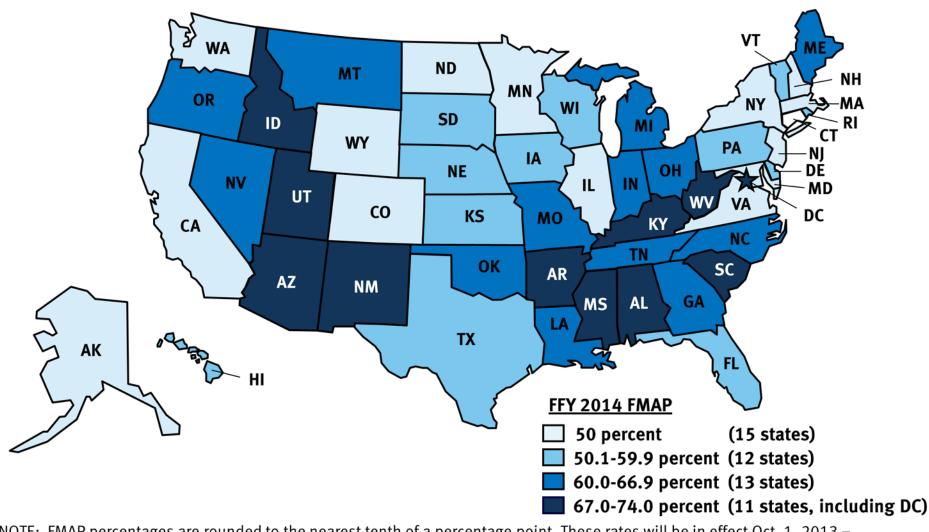


Note: Includes reported combinations of acute-care hospitals in the U.S., including mergers, acquisitions, joint ventures, and member substitutions.

Congressional Health Reform Attempts 2017



Medicaid Costs are Shared by the States and the Federal Government



NOTE: FMAP percentages are rounded to the nearest tenth of a percentage point. These rates will be in effect Oct. 1, 2013 – Sept. 30, 2014.

SOURCE: Federal Register, November 30, 2012 (Vol. 77, No. 231), pp 71420-71423, at http://www.gpo.gov/fdsys/pkg/FR-2012-11-30/html/2012-29035.htm.



Kathryn Lawler Executive Director klawler@archicollaborative.org 404.413.0288



REINVENTING AMERICA

10/30/2014 @ 3:34PM 9,647 views

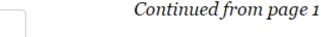
Aging America: The U.S. Cities Going Gray The Fastest

Our continuing coverage

Reinventing America

Presented By





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In first place on our list is Atlanta, where the share of seniors in the population rose from 7.7% in 2000 to 10.4% in 2013, the biggest increase in the nation. In raw numbers, the over-65 population of the metro area rose to 572,534, an increase of 73.5% since 2000.

The percentage of the population in fast-growing Raleigh, N.C., that is over 65 grew from 8.0% to 10.2% in 2013, putting it in second place.

ZURICH INSUR FOR THOSE TRULY THEIR BUS



CONFERENCES AND MORE as a reputation as a youthful place,





2017's Best & Worst Places to Retire

Aug 15, 2017 | Richie Bernardo, Senior Writer

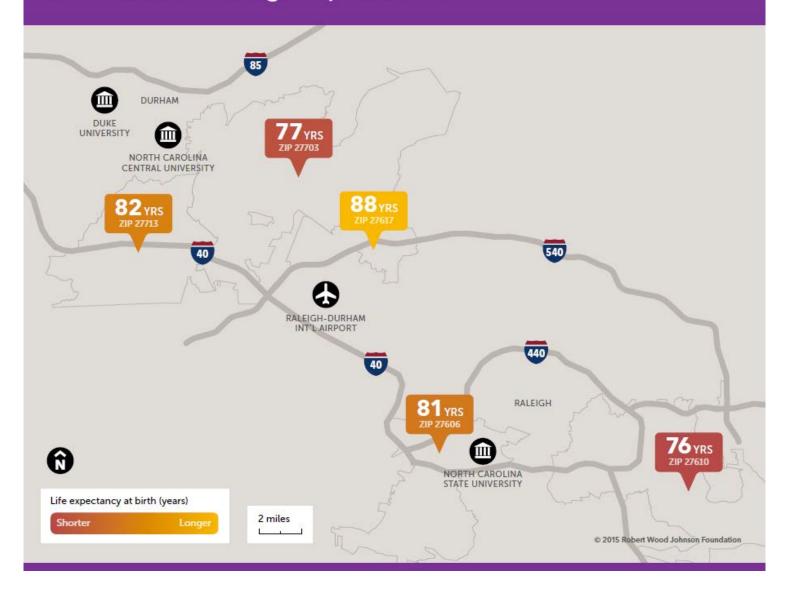


Atlanta, Georgia #5

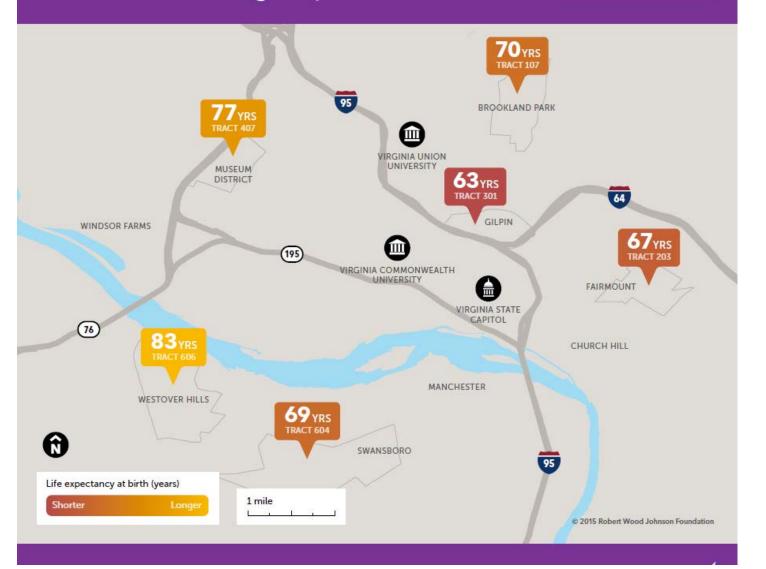
Over 20 out of 150 cites are in the southeast

#CloseHealthGaps

Short Distances to Large Gaps in Health



Short Distances to Large Gaps in Health



ATLANTA, GEORGIA

Short Distances to Large Gaps in Health

#CloseHealthGaps









NEW ECONOMIC STRENGTH



Billion in 65+ Wages

- In 2013 Q1, those aged 65+ held 3.7% of the jobs in the 10-county ARC area
- The average monthly wage is \$1,208 for those 65+, which does lag the overall average monthly wage for all others (18-64) in the workforce at \$1,400
- ...For some higher-paying industries, e.g.
 Professional Services, Mgmt. of Companies, average wages for 65+ are higher

What if more retirees move to Metro Atlanta???

\$40_{Billion}

PERSONAL INCOME

\$7.8 Billion

IN ADDITIONAL GDP

What if more working $age_{(18-64)}$ people move to Metro Atlanta?

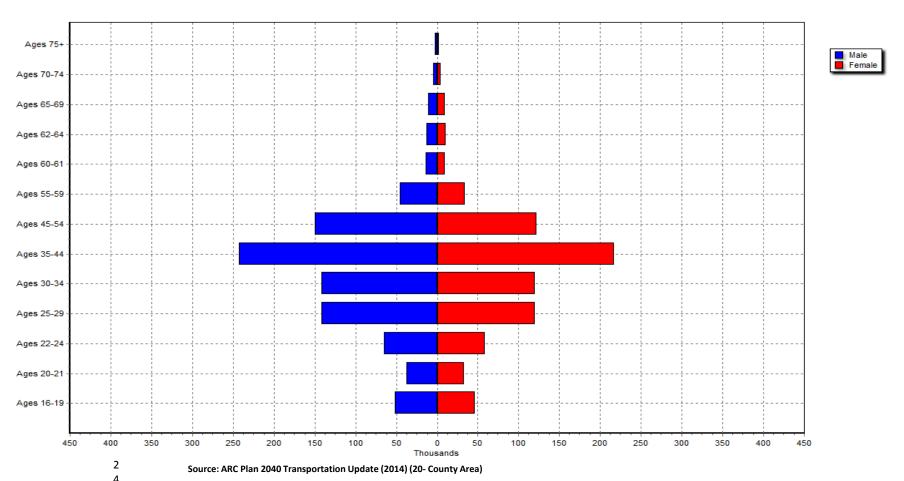
\$4_{Billion}

More in Personal Income

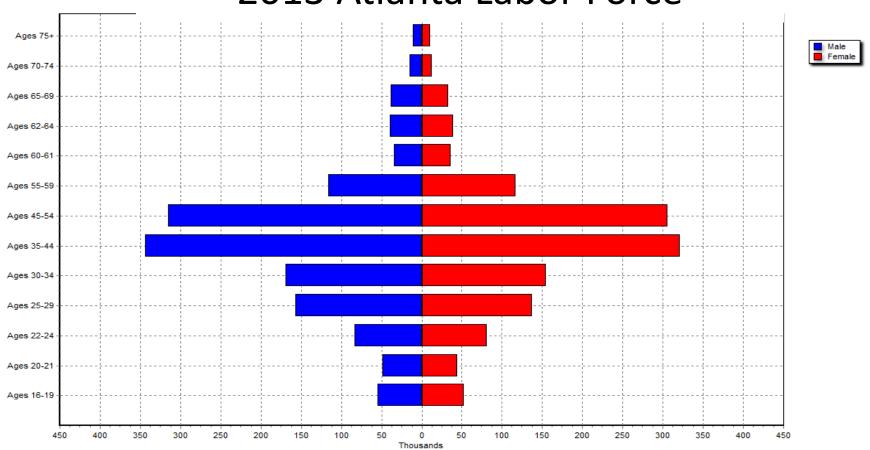
\$2.6Billion

IN ADDITIONAL GDP

1990 Atlanta Labor Force

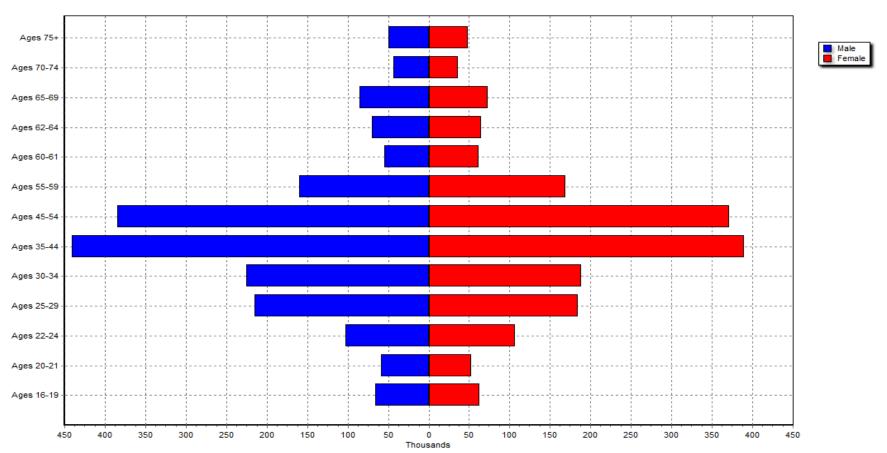


2013 Atlanta Labor Force



Source: ARC Plan 2040 Transportation Update (2014) (20- County Area)

2040 Atlanta Labor Force



Source: ARC Plan 2040 Transportation Update (2014) (20- County Area)

Value Proposition:

Aging Population Solves Community Challenges

Aging in Community = Diversified Tax Base

Transportation options = Lower transit costs

Diverse Age Structure = Maximized Infrastructure

