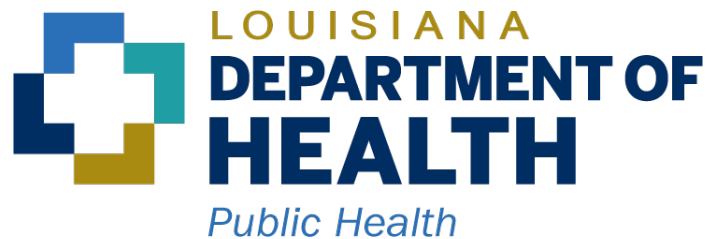




Louisiana's State Health Improvement Action Plan

Progress Report 2016

March 2017



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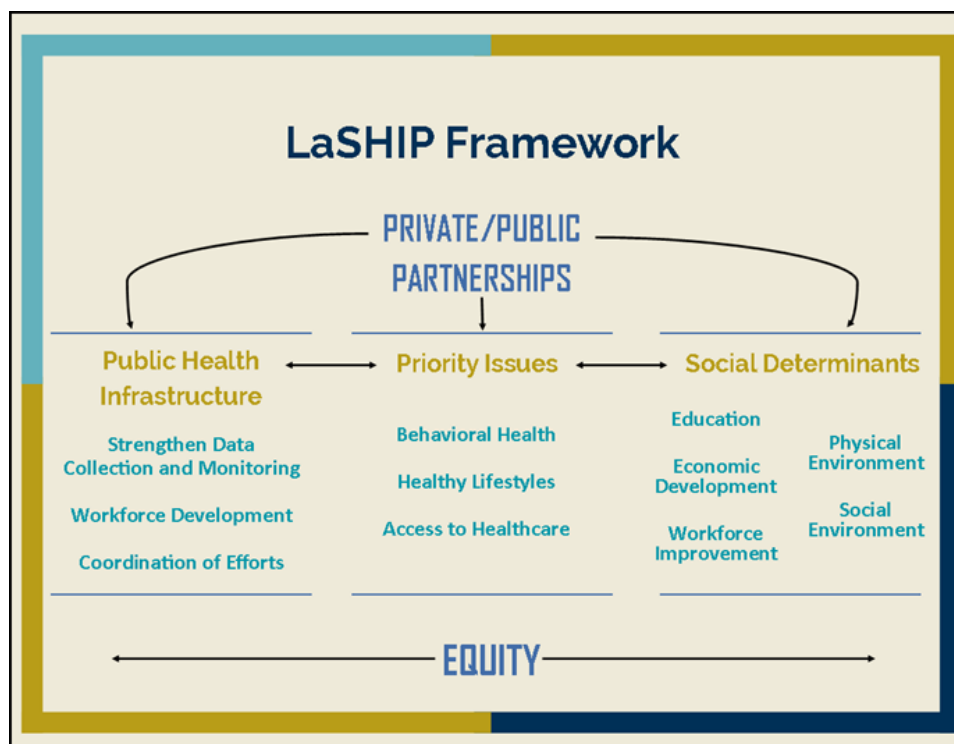


Preface

This is the first annual status report for the Louisiana health improvement plan (LaSHIP), *Creating a Blueprint for Our Future*. This report focuses on LDH-OPH activities through 2016 for each of the 17 health objectives and 3 system objectives. It also summarizes statewide data on progress made in achieving each health priority's objectives. The report describes only those key activities in which the LDH-OPH was involved, either in a leadership role or in collaboration with partners. It does not attempt to describe the many activities occurring around Louisiana undertaken by its public health system partners in government, the public, private, nonprofit, and voluntary sectors.

The LaSHIP is intended to serve as a blueprint for improving the public health system in Louisiana as well as improving specific health outcomes related to behavioral health, healthy lifestyles, access to healthcare, economic development, and building public health infrastructure. To achieve success in these areas the plan is built around the implementation of evidence-based prevention strategies and enhancing collaboration among public health stakeholders. While the LaSHIP serves as a blueprint for change, it was designed to be flexible enough to adapt to the continuous changes that impact public health. The LDH-OPH is serving as the backbone agency supporting the implementation of the LaSHIP, including performance management.

The figure below provides a broad outline of the LaSHIP's five priorities. The plan is split between three domains, with enhancements to the public health infrastructure, priority issues, and social determinants designed to improve social and institutional inequities and living conditions. This ambitious plan cannot be accomplished by any one individual agency or organization but intended to encourage cross-sector discussions and collaboration and systems integration that will create lifelong opportunities for the individual and collective health for all those that live, work, and play in Louisiana.



Performance Monitoring of LaSHIP

The purpose of this document is to examine progress through January 2016 on the five priorities in the state health improvement plan, LaSHIP. It provides statewide trend data on each health priority's objectives and qualitative information about the 17 health objectives and three system (infrastructure) objectives.

For each priority, qualitative information presented includes selected key accomplishments and activities in the Department of Health, Office of Public Health (LDH-OPH), accomplishments and new and emerging issues since the state health plan was adopted. In general, activities described are limited to those in which LDH-OPH was actively engaged and do not include many partner activities.



This report was prepared in the Louisiana Department of Health, Office of Public Health, Bureau of Performance Improvement. Each of the health and system priority chapters in this report was developed in close collaboration with the Office of Public Health directors and staff of the programs working to achieve the priority's objectives. This report would not have been possible without their contributions.

The value of tracking performance is to document the level of success of activities implemented under the LaSHIP. Knowing where there have been successes as well as limitations in the effectiveness of the plan will aid the broad array of agencies responsible for implementing the plan to coordinate and focus their efforts in order to build on achievements and improve deficiencies. Furthermore, many of the outcome measures may be influenced by factors beyond the scope of the LaSHIP. Keeping watch on these will help OPH and its partners to maintain a level of surveillance on the state of public health in Louisiana.

Summary Data Tables

Summary data tables for each health priority of *Creating a Blueprint for our Future*, the State Health Improvement Plan. Each table summarizes the available data on national standard alignment and progress toward meeting the measurable 2020 objectives for the priority.

Priority 1: Behavioral Health

NATIONAL AND STATE LONG-TERM OUTCOME MEASURES						
Source: HP 2020	Objective					Target
<i>Objective: Promote integration of behavioral health and primary care services</i>						
HP2020 MHMD-11.1	Increase the proportion of primary care physician office visits where adults 19 years and older are screened for depression					2.4%
MHMD-11.2	Increase the proportion of primary care physician office visits where youth aged 12 to 18 years are screened for depression					2.3%
<i>Objective: Support a coordinated continuum of behavioral health care and prevention services</i>						
MHMD-1	Reduce the suicide rate					10.2 per 100,000
MHMD-4.1	Reduce the proportion of adolescents aged 12 to 17 years who experience major depressive episodes (MDEs)					7.5%
MHMD-4.2	Reduce the proportion of adults aged 18 years and older who experience major depressive episodes (MDEs)					5.8%
<i>Objective: Improve community awareness of behavioral health services</i>						
Mental Health National Outcome Measures (NOMS)	Clients Served by Statewide Mental Health Agency in Community Settings in the United States					22.57 per 1,000
NOMS	Total Clients Served by Statewide Mental Health Agency in the United States					23.07 per 1,000
SAMHSA Behavioral Health Barometer	Past Year Treatment for Illicit Drug Use Among Individuals Aged 12 or Older with Illicit Drug Dependence or Abuse in the United States, by Age Group (2014)					13.9%
National Alignment	Performance Indicator	Baseline Data	Year	Source	2020 Target	
MHMD-11.1	Adults screened for depression	48.79%	2015	UDS-HRSA	54%	
MHMD-11.2	Youth screened for depression					
MHMD-1	Suicide rate	12.8 per 100,000	2015	CDC's National Vital Statistics System	10.7 per 100,000	
MHMD-4.1	Adolescents who experience MDEs	10.1%	2013-2014	NSDUH, SAMHSA-LA Behavioral Health Barometer	7.5%	
MHMD-4.2	Adults who experience MDEs	6.2%	2013-2014	NSDUH	5.5%	
NOMS	Clients Served in Community Settings	5.5 per 1,000	2015	CMHS Uniform Reporting System	6.1 per 1,000	
NOMS	Total Clients Served by Statewide Mental Health Agency	5.8 per 1,000	2015	NOMS	6.4 per 1,000	

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SAMHSA	Past Year Treatment for Illicit Drug Use Among Individuals Aged 12 or Older with Illicit Drug Dependence or Abuse	16.6%	2014	SAMHSA Behavioral Health Barometer	18.3%
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Priority 2: Healthy Lifestyles

NATIONAL AND STATE LONG-TERM OUTCOME MEASURES		
Source: HP 2020	Objective	Target
<i>Objective: Increase physical activity access and outreach</i>		
PA-1	Reduce the proportion of adults who engage in no leisure-time physical activity	32.6%
PA-2.1	Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes/week, or 75 minutes/week of vigorous intensity, or an equivalent combination	47.9%
<i>Objective: Promote health through the consumption of healthful diets</i>		
NWS-14	Increase the contribution of fruits to the diets of the population aged 2 years and older.	0.93 cup per 1,000 calories
NWS-15.1	Increase the contribution of total vegetables to the diets of the population aged 2 years and older.	1.16 cup per 1,000 calories
<i>Objective: Build community capacity for chronic disease prevention and management programs</i>		
	Rate of violent crime offenses reported by law enforcement per 100,000 residents. Violent crime includes homicide, rape, robbery, and aggravated assault. This indicator is relevant because it assesses community safety. (Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-university Consortium for Political and Social Research. 2010-12)	395.5 per 100,000
NWS-13	Reduce household food insecurity and in doing so reduce hunger	6%
	Percentage of the total population that experienced food insecurity at some point during the report year, but are ineligible for State or Federal nutrition assistance. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food. Assistance eligibility is determined based on household income of the food insecure households relative to the maximum income-to-poverty ratio for assistance programs (SNAP, WIC, school meals, CSFP and TEFAP). Feeding America	29%
<i>Objective: Increase the capacity for health systems to prevent, identify, and treat chronic disease</i>		
C-16	Increase the proportion of adults who receive a colorectal cancer screening based on the most recent guidelines	70.5%
HDS-12	Increase the proportion of adults with hypertension whose blood pressure is under control	61.2%
D-1	Reduce the annual number of new cases of diagnosed diabetes in the population	7.2 new cases per 1,000, aged 18 to 84 yrs
<i>Objective: Prevent initiation of tobacco use among young people</i>		
TU-3	Reduce the initiation of tobacco use among children, adolescents, and young adults	

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TU-13	Establish laws in States, District of Columbia, Territories, and Tribes on smoke-free indoor air that prohibit smoking in public places and worksites				
<i>Objective: Eliminate exposure to secondhand smoke</i>					
TU-11	Reduce the proportion of nonsmokers exposed to secondhand smoke				
TU-13	Establish laws in States, District of Columbia, Territories, and Tribes on smoke-free indoor air that prohibit smoking in public places and worksites				
<i>Objective: Promote quitting among adults and young people</i>					
TU-1.1	Reduce cigarette smoking by adults	12%			
TU-5.1	Increase recent smoking cessation success by adult smokers	8%			
National Alignment	Performance Indicator	Baseline Data	Year	Source	2020 Target
PA-1	Percent of adults in Louisiana who did not participate in any physical activities during the past month	31.9%	2015	BRFSS	30.1%
PA-2.1	Percent of adults in Louisiana who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes or more per week.	46.2%	2015	BRFSS	42%
	Percent of students in grades 9-12 in Louisiana who did not engage in at least 60 minutes of physical activity on any day.	21%	2015	YRBS	19.1%
NWS-14	Decrease percentage of adults who report consuming fruits less than one time per day.	50.3%	2015	BRFSS	46.7%
NWS-15.1	Decrease percentage of adults who report consuming vegetables less than one time per day.	31%	2015	BRFSS	29.3%
NWS-15.1	Percentage of adolescents consuming fruits and/or vegetables less than one time per day in the past 7 days.	28%	2011	YRBS	20.7%
	Rate of violent crime offenses reported by law enforcement per 100,000 residents	532.9 per 100,000	2010-2012	FBI UCR, Community Commons	479.7 per 100,000
NWS-13	Percentage of the total population and the population under age 18 that experienced food insecurity at some point during the report year, but are ineligible for State or Federal nutrition assistance.	28%	2014	Feeding America	25%
C-16	Adults aged 50+ who have ever had a sigmoidoscopy or colonoscopy.	66.4%	2015	BRFSS	77.7%
HDS-12	Decrease percentage of adults who have been told by a health professional they have high blood pressure.	39.3%	2015	BRFSS	35%
D-1	Decrease the percentage of adults who have ever been told by a doctor they have diabetes (excludes pre-diabetes and gestational diabetes).	12.7%	2015	BRFSS	11%

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TU-3	Create a statewide Strategic Plan for youth tobacco control efforts	Not present	2016	Rapides Foundation, TFL	Complete by 2018
TU-3	Add youth tobacco survey items for ever use of cigarettes, ENDS, and ATPs; past 30-day use; and lifetime use of 100 cigarettes	Not present	2016	BCDHP	Complete by 2017
TU-13	Enact an expanded statewide, comprehensive Clean Indoor Air Act to include all workplaces	Not expanded	2016	TFL Policy Tracker	Complete
TU-11	Number and reach of WellSpots with 100% tobacco- or smoke-free policies.	668	December 2016	WellSpot database (OPH, PBRC)	2,300
TU-1.1	Decrease the proportion of adults who are current smokers	21.9%	2015	BRFSS	17%
TU-5.1	Increase the proportion of former smokers	22.5%	2015	BRFSS	25%

Priority 3: Access to Healthcare

NATIONAL AND STATE LONG-TERM OUTCOME MEASURES					
Source: HP 2020	Objective				Target
<i>Objective: Increase individual and family insurance coverage</i>					
AHS-1.1	Increase the proportion of persons with medical insurance				100%
<i>Objective: Increase provider participation in Medicaid</i>					
N/A	N/A				
<i>Objective: Provide pathways to healthcare access for underserved populations</i>					
AHS-3	Increase the proportion of persons with a usual primary care provider				83.9%
<i>Objective: Improve appropriate use of health facilities and consumer understanding of health systems</i>					
N/A	N/A				
National Alignment	Performance Indicator	Baseline Data	Year	Source	2020 Target
AHS-1.1	Increase proportion of persons with medical insurance	88.1%	2015	American Community Survey	100%
	Increase number of providers that accept Medicaid (<i>Count of distinct Medicaid providers who prescribed during SFY 2016 (July 2015 –June 2016), as evidenced by paid pharmacy claims</i>)	22,570	2016	Medicaid, LDH	TBD
	Number of National Health Services Corp providers practicing in LA	108	2016	LaPAS	134
Unique count of Hospitals	Increase the number of eligible providers (professionals and hospitals) who receive an incentive payment from the CMS Medicare and Medicaid EHR	126	January 2017	https://www.cms.gov/regulations-and-guidance/legislation/ehrincentiveprograms/dataandreports.html	

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Unique count of Eligible Providers	Incentive Programs for the successful adoption or meaningful use of certified EHR technology.	6,720			
AHS-3	Increase proportion of people that have one person they think of as a personal doctor or health care provider	68%	2015	BRFSS	77%
	Percent of people living with HIV who have at least one HIV-related medical care visit in a 12 month period	55%	2015	STD/HIV Program, OPH	
	Number of students who have a signed parental consent form to access School-Based Health Center services	62,279	2017	LaPAS	43,700
	Decrease the discharge rate among Medicare population for diagnoses that are amenable to non-hospital based care	67.5 per 1,000 beneficiaries	2014	Dartmouth Atlas of Health Care	60 per 1,000 beneficiaries

Priority 4: Economic Development

NATIONAL AND STATE LONG-TERM OUTCOME MEASURES					
Source: HP 2020	Objective	Target			
<i>Objective: Improve cross-sector collaborations to improve understanding of population health and economic health relationships</i>					
N/A	N/A				
<i>Objective: Increase opportunities for workforce training and development</i>					
N/A	N/A				
<i>Objective: Increase educational attainment and literacy levels to meet market demands</i>					
AH-5.1	Increase the proportion of students who graduate with a regular diploma 4 years after starting 9th grade				87%
SDOH-2	Proportion of high school completers who were enrolled in college the October immediately after completing high school				No target, 68.1%
<i>Objective: Reduce barriers to employment</i>					
SDOH-3	Proportion of persons living in poverty, 2010				14.3%
PA-15.3	(Developmental) Increase transportation and travel policies for the built environment that enhance access to and availability of physical activity opportunities				TBD
National Alignment	Performance Indicator	Baseline Data	Year	Source	2020 Target
	Number of new collaborations with economic and community development partners			Administrative Regions	18 (at least two per region)
	Total unemployment in Louisiana of the civilian, non-institutionalized population age 16 and older.	4.9%	2011-2015	American Community Survey	4%

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	Median earnings for full-time, year-round workers (dollars) by gender	\$49,005 (Male) \$32,523 (Female)	2011-2015	American Community Survey	Equivalent
SDOH-3	Percentage of families and people whose income in the past 12 months is below the poverty level	15.5%	2011-2015	American Community Survey	14%
	Completed inventory of organizations providing basic education, ESL, and adult literacy, including statewide and local initiatives	Incomplete	2016	LAPCAE	Complete
Educational Attainment (25 years and over)	No high school diploma (includes Less than 9 th grade and 9 th -12 th grade, no diploma)	16.6%	2011-2015	American Community Survey	
	High school graduate	33.9%			
	Associate's degree	5.5%			
	Bachelor's degree	14.8%			
AH-5.1	Percentage of incoming ninth graders who graduate in 4 years from a high school with a diploma.	72.7%	2013	Common Core of Data (CCD), ED/NCES	US Average: 81.9%
SDOH-2	Proportion of high school completers that enroll in college the October immediately after completing high school.	64.7%	2012	Common Core of Data (CCD), ED/NCES	71.2%
PA-15.3	Number of parishes with elderly and handicapped transit service	49	Varies by Parish	Louisiana Department of Transportation & Development (DOTD)	64
PA-15.3	Number of parishes with general transit service	41			48
PA-15.3	Use of Federal Funds for Bicycle and Pedestrian Efforts (on a scale of 0-100)	31	2016	US Department of Transportation	50

Priority 5: Public Health Infrastructure

NATIONAL AND STATE LONG-TERM OUTCOME MEASURES		
Source: HP 2020	Objective	Target
<i>Objective: Facilitate public health system strengthening through networking and relationship building</i>		
N/A	N/A	
<i>Objective: Build systems to analyze and share data</i>		
N/A	N/A	
<i>Objective: Address long-standing health inequities through collaboration with diverse partners and community members</i>		
ECBP-12	Increase the inclusion of core clinical prevention and population health content in M.D.-granting medical schools.	100%
<i>Objective: Implement an ongoing cycle of health assessments and planning</i>		
PHI-14.1	Increase the proportion of State public health systems that conduct a public health system assessment using national performance standards	78%
PHI-15.4	Increase the proportion of local public health agencies that have health improvement plans linked to their State plan	72%

National Alignment	Performance Indicator	Baseline Data	Year	Source	2020 Target
	Number of communities or parishes to join or create a Community Advisory Board or Health Council.	4	2016		64 (All parishes)
	Increase number of regions with a health system summit.	1	2015	OPH	9 (All)
	Increase data-sharing agreements across agencies and entities				
PHI-14.1	Conduct a Louisiana public health system assessment using national performance standards				
PHI-15.4	Increase number of regions implementing a local community health improvement plan linked to the Louisiana SHIP plan.	0			9 (All)



Actions and Accomplishments of LaSHIP

STRATEGIC PRIORITY

Support Behavioral Health

Action Steps	Accomplishments
1. Promote integration of behavioral health and primary care services	<ul style="list-style-type: none"> • Meeting with Capital Area Human Services District, a local governing entity that manages the behavioral health and is advocating for behavioral and primary care integration. • The Office of Behavioral Health has applied for the Promoting Integration of Primary Care and Behavioral Health Care grant through SAMHSA.
2. Support a coordinated continuum of behavioral health care and prevention services.	Received Prescription Drug Overdose: Data-Driven Prevention Initiative grant from Centers of Disease Control and Prevention. This grant is being used to create an opioid use and abuse surveillance system in order to link and analyze data collected about opioid-related events and surrounding trends and treatment. The system will be up and running with a basic indicator set by September 2017. Partners for this grant include: Medicaid, Office of Behavioral Health, Louisiana Emergency Response Network, Board of Pharmacy, etc.
3. Improve community awareness of behavioral health services.	Participating in the State Epidemiology Workgroup (SEW), which maintains a public online portal of behavioral health indicators. (http://www.bach-harrison.com/lasocialindicators/Indicators.aspx)
<p>In the Items for Future Consideration:</p> <ul style="list-style-type: none"> • Addition of opioid indicators to SEW online data portal • Addition of non-health data to Louisiana Opioid Surveillance System 	



STRATEGIC PRIORITY

Promote Healthy Lifestyles

Action Steps	Accomplishments
1. Increase physical activity access and outreach.	
2. Promote health through the consumption of healthful diets.	<ul style="list-style-type: none"> • The Louisiana Obesity Prevention and Management Commission (LOPMC) was reinstated on August 1, 2016, under Governor John Bel Edwards as Act 186. The legislation sought to bring together a small group of dedicated advocates from public and private organizations to work collaboratively to address the obesity epidemic in Louisiana. • LOPMC, in November 2016, elected to provide consultative and technical assistance to OPH within the Promote Healthy Lifestyles priority area.
3. Build community capacity for chronic disease prevention and management programs.	
4. Increase the capacity for health systems to prevent, identify, and treat chronic disease.	<ul style="list-style-type: none"> • Statistics compiled by the Louisiana Department of Health show that more than 58,700 adults have now received at least one preventive or primary care service after getting coverage under expansion. The most recent data shows how newly enrolled members are benefitting from Medicaid coverage by accessing care and beginning treatment for chronic illness: <ul style="list-style-type: none"> ○ 58,713 members have received preventive care visits with a care provider. ○ 5,412 adults had colonoscopies, and 1,536 patients had precancerous polyps removed. ○ Treatment has begun for 1,193 adults newly diagnosed with diabetes. ○ 2,954 patients have been newly diagnosed with hypertension. • One hospital executive recently noted access to preventive care has improved. “In the seven months since the expansion, North Oaks has seen a 60 percent increase in mammograms and a 61 percent increase in bone density screenings for Medicaid patients, a 26 percent increase in cervical cancer screenings, a 20 percent increase in A1C screenings for diabetes and an 18 percent increase in cholesterol screenings. These are all real people, with real needs, who have had their lives changed for the better,” said Michele Kidd Sutton, FACHE, President/Chief Executive Officer of North Oaks Health System.
5. Prevent initiation of tobacco use among young people	<p>Quarterly Youth Prevention workgroup was founded, purpose and scope have been established.</p>
6. Eliminate exposure to secondhand smoke	<ul style="list-style-type: none"> • State legislator has been identified to support the Tobacco-Free schools bill. • Identified local municipalities interested in comprehensive clean indoor air policies and provided

	<p>them with educational material on the dangers of secondhand smoke, vaping, and inhaling.</p> <ul style="list-style-type: none"> • Eleven municipalities have enacted 100% Comprehensive Smoke-free Ordinances, including electronic cigarettes, tobacco retailers, parks and recreation and footage from doorways.
7. Promote quitting among adults and young people	Progress is taking place on the feasibility of a central data source for referrals to cessation services.
<p>Items for Future Consideration:</p> <ul style="list-style-type: none"> • Concerted efforts among health professionals, communities, businesses and industries, organizations, governments, and other segments of society are needed to support individuals and families in making dietary and physical activity choices that align with the 2015-2020 Dietary Guidelines. 	

STRATEGIC PRIORITY

Assure Access to Healthcare

Action Steps	Accomplishments
1. Increase individual and family insurance coverage.	<p>Medicaid Expansion enrollment in Louisiana reaches 400,635 new members enrolled, and the most recent Gallup report shows the uninsured rate in Louisiana has decreased by nearly half to 12.5 percent in 2016, down from 21.7 percent in 2013. Gallup cites expansion as the key contributor for the reduction in the uninsured rate.</p> <p>“Louisiana is ranked in the top 10 list of states with the largest reductions in uninsured rates,” said Governor John Bel Edwards. “The primary goal for Medicaid expansion was to ensure that more Louisiana residents had access to health care coverage and access to health care services. This report is conclusive proof that expansion is working.”</p> <p>Medicaid expansion has reduced Louisiana’s number of uninsured residents, and has offered 400,635 newly covered adults the opportunity to seek care from a primary care physician instead of in an emergency room.</p>
2. Increase provider participation in Medicaid.	New National Health Services Corp. awards were completed Sept. 16, 2016; showing an increase in the number of providers practicing in Louisiana. This increase in funded applications was due to a rise in the number of qualifying applicants from high scoring Health Professional Shortage Areas. Expanded Medicaid in Louisiana may have been a factor.
3. Provide pathways to healthcare access for underserved populations.	Statistics compiled by the Louisiana Department of Health show that more than 58,700 adults have now received at least one preventive or primary care service after getting coverage under expansion.

4. Improve appropriate use of health facilities and consumer understanding of health system	
Items for Future Consideration: <ul style="list-style-type: none"> • Continued rising costs of health care • Funding cuts for public health 	

STRATEGIC PRIORITY

Promote Economic Development

Action Steps	Accomplishments
1. Improve cross-sector collaborations to improve understanding of population health and economic health relationships	Formed new state collaborations: <ul style="list-style-type: none"> • Department of Corrections educational programming, job skills and employment readiness • Louisiana Community and Technical College System • Louisiana Economic Development • WorkReady U
2. Increase opportunities for workforce training and development	
3. Increase educational attainment and literacy levels to meet market demands	
4. Reduce barriers to employment	
Items for Future Consideration:	

STRATEGIC PRIORITY

Build Public Health Infrastructure

Action Steps	Accomplishments
1. Facilitate public health system strengthening through networking and relationship building.	<ul style="list-style-type: none"> • Provide annual updates on Robert Wood Johnson Foundation’s County Health Rankings health statistics to regional stakeholders • 5 Regional Health Summits completed, across 3 regions
2. Build systems to analyze and share data.	
3. Address long-standing health inequities through collaboration with diverse partners and community members.	SHIP implementation is committed to increasing the number of community- or parish-level health coalitions
4. Implement an ongoing cycle of health assessments and planning.	
Items for Future Consideration:	

Policy Changes Needed to Accomplish Health Outcomes

LaSHIP Priority Area	Policy Change(s)
Support Behavioral Health	<ul style="list-style-type: none"> • HB 497: Requires the Department of Health to implement the Medicaid health home option for persons with serious mental illness • HB 762: Provides to require referrals of Medicaid enrollees for mental health counseling or treatment by managed care providers in certain cases
Promote Healthy Lifestyles	<ul style="list-style-type: none"> • Act 580: A commission designated the Louisiana Obesity Prevention and Management Commission to assist the executive departments and agencies in achieving programmatic goals. • HB 218: Prohibits the use of tobacco products on elementary and secondary school property • Smoke-Free Air Act: RS 40:1291.1 • School Tobacco Prohibition RS 17:240
Assure Access to Healthcare	<ul style="list-style-type: none"> • On January 12, 2016, Governor John Bel Edwards signed an executive order (JBE 16-01) to begin the process for expanding Medicaid in Louisiana no later than July 1, 2016. Expansion has made Medicaid available to more than 300,000 people living in Louisiana who did not previously qualify for full Medicaid coverage and could not afford to buy private health insurance. • House Concurrent Resolution 170: To create a study committee to evaluate Louisiana’s statewide system of healthcare delivery, and to require the committee to report findings and recommendations concerning this system to the legislature.
Promote Economic Development	<ul style="list-style-type: none"> • Workforce Innovation and Opportunity Act of 2014: To help job seekers access employment, education, training, and support services to succeed in the labor market and to match employers with the skilled workers they need to compete in the global economy
Build Public Health Infrastructure	<ul style="list-style-type: none"> • HB 595: Provides relative to the delivery of nutrition services through telehealth • SB 328: Provides for telehealth access • HB 480: Provides relative to the practice of telemedicine in licensed healthcare facilities • HB 570: Provides relative to the practice of telemedicine

Changes made to 2017 SHIP

PRIORITY AREAS AND INDICATORS SUMMARY OF SHA/SHIP REVISIONS AND CLARIFICATIONS

Below are lists of revisions and clarifications made from the Creating a Blueprint for our Future.

YEAR TWO MEASURE AND TOPIC	YEAR TWO REVISIONS	YEAR TWO CLARIFICATIONS
LOUISIANA HEALTH FACTORS		
Figure 13	Source: BRFSS 2013	
Figure 14	Source: BRFSS 2013	
LOUISIANA HEALTH STATUS		
Figure 16	Source: BRFSS 2013	
Figure 17	Source: BRFSS 2013	
Figure 20	Removed percentages. Should be reported as rates per 1,000	
Figure 22	Removed percentages. Should be reported as rates per 1,000	
LOUISIANA HEALTH PRIORITIES		
		Updated to latest year indicators
Appendix A	Add United Houma Nation's SWOT and CHA	
GOAL 1: SUPPORT BEHAVIORAL HEALTH		
Regional Highlights	Add United Houma Nation's How's Your 5? Program	
1.1	Compiled adults and youth screened for depression, baseline 48.79% and added a goal of 54%	Updated Strategies
1.2.3	Updated baseline of 6.2% and added a goal of 5.5%	Updated Strategies
1.3	<ul style="list-style-type: none"> Remove all Year One Indicators New Indicator: Clients Served in Community Settings; Baseline: 5.5/1000; Target: 6.1/1000 New Indicator: Total Clients Served by Statewide Mental Health Agency; Baseline: 5.8/1000; Target: 6.4/1000 	Updated Strategies

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	<ul style="list-style-type: none"> • New Indicator: Past Year Treatment for Illicit Drug Use Among Individuals Aged 12 or Older with Illicit Drug Dependence or Abuse; Baseline: 16.6%; Target: 18.3% 	
GOAL 2: HEALTHY LIFESYLES		
All Objectives		Updated Strategies
2.1.1	<ul style="list-style-type: none"> • Revised Target to 30.1% 	
2.1.2	<ul style="list-style-type: none"> • Revised most recent data to 46.2% and Target to 42% 	
2.1.3 Youth PA	<ul style="list-style-type: none"> • Change most recent data to 21% and Target to 19.1% 	
2.2.1	<ul style="list-style-type: none"> • Revised most recent data to 50.3% and Target to 46.7% 	
2.2.2	<ul style="list-style-type: none"> • Revised most recent data to 31% 	
2.2.3 Youth Diet	<ul style="list-style-type: none"> • Revised to the most recent data to 28% and Target to 20.7% 	
2.3	<ul style="list-style-type: none"> • Remove all Year One Indicators • New Indicator: Rate of violent crime offenses reported by law enforcement per 100,000 residents. Violent crime includes homicide, rape, robbery, and aggravated assault. This indicator is relevant because it assesses community safety. • New Indicator: Percentage of the total population that experienced food insecurity at some point during the report year, but are ineligible for State or Federal nutrition assistance. • New Indicator: Income Inequality using the Gini coefficient. Gini index values range between zero and one. A Gini coefficient of zero expresses perfect equality, where all values are the same (for example, where everyone has the same income). 	
2.4.1	<ul style="list-style-type: none"> • Change baseline to 66.4% 	
2.4.2	<ul style="list-style-type: none"> • Change baseline to 39.3% (2015) and Target to 35% 	
2.4.3	<ul style="list-style-type: none"> • Change baseline to 12.7% (2015) and Target to 11% 	
2.5-7	<ul style="list-style-type: none"> • Add Tobacco Use Objectives: <ul style="list-style-type: none"> ○ Prevent initiation of tobacco use among young people ○ Eliminate exposure to secondhand smoke ○ Promote quitting among adults and young people • Add Strategies to each new Objective 	

	<ul style="list-style-type: none"> • Add indicators to correspond with Healthy People 2020 tobacco use objectives and the Louisiana Tobacco Control Strategic Plan: <ul style="list-style-type: none"> ○ Reduce the initiation of tobacco use among children, adolescents, and young adults ○ Establish laws in States, District of Columbia, Territories, and Tribes on smoke-free indoor air that prohibit smoking in public places and worksites ○ Reduce the proportion of nonsmokers exposed to secondhand smoke ○ Reduce cigarette smoking by adults ○ Increase recent smoking cessation success by adult smokers 	
GOAL 3: ACCESS TO HEALTHCARE		
All Objectives		<ul style="list-style-type: none"> • Updated Strategies
3.2.1		<ul style="list-style-type: none"> • Count of distinct Medicaid providers who prescribed during state fiscal year, as evidenced by paid pharmacy claims
3.2	<ul style="list-style-type: none"> • Add indicator: The number of eligible providers (professionals and hospitals) who receive an incentive payment from the CMS Medicare and Medicaid EHR Incentive Programs for the successful adoption or meaningful use of certified EHR technology. 	
3.3	<p>Add indicators:</p> <ul style="list-style-type: none"> • Percent of people living with HIV who have at least one HIV-related medical care visit in a 12 month period • Number of National Health Services Corp providers practicing in LA (LaPAS) • Number of students with access to School-Based Health Center services (LaPAS) 	
3.4	<ul style="list-style-type: none"> • Change baseline from “92.1” to “67.5” (2014) • Change Goal from “73.7” to “60” (10% decrease) 	
3.5	Remove Objective 5: Transportation strategies will be incorporated into Economic Development priority.	
GOAL 4: PROMOTE ECONOMIC DEVELOPMENT		
All Objectives		Updated strategies

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4.1.1		Update: Number of new collaborations with economic and community development partners
4.1.2	Remove: Number of educational resources developed	
4.2.1	Remove: Number of new companies enrolled in LED FastStart program to number of new jobs	
4.2.2	Remove: Number of new apprenticeship opportunities in emerging labor fields	
4.2	<ul style="list-style-type: none"> • Add: Total unemployment in Louisiana of the civilian, non-institutionalized population age 16 and older. • Add: Median earnings for full-time, year-round workers (dollars) by gender • Add: Percentage of families and people whose income in the past 12 months is below the poverty level 	
4.3.3	Remove: Completed assessment of educational and training needs of key industries and employers	
4.3	<p>Add Educational attainment (25 and older):</p> <ul style="list-style-type: none"> • No high school diploma (includes Less than 9th grade and 9th-12th grade, no diploma) • High school graduate • Associate's degree • Bachelor's degree 	
4.3.2 & 4.3.4		Update: Source: Common Core of Data (CCD), ED/NCES
4.4	<ul style="list-style-type: none"> • Add: Number of parishes with elderly and handicapped transit service • Add: Number of parishes with general transit service • Add: Use of Federal Funds for Bicycle and Pedestrian Efforts (on a scale of 0-100) 	
4.4.1	Remove: Number of incarcerated individuals with full or part-time employment/enrollment in job training programs (this indicator is not carefully tracked enough by Department of Corrections)	
4.4.2	Remove: Number of healthcare employers represented at the annual Louisiana Public Transportation Conference	

GOAL 5: BUILD PUBLIC HEALTH INFRASTRUCTURE		
All Objectives		Updated Strategies and Healthy People 2020 Objectives
5.1.2 → 5.4		Update: Move Percentage of regions implementing a local community health improvement plan linked to the LaSHIP plan
5.1	Add: Number of communities or parishes to join or create a Community Advisory Board or Health Council.	
5.2	Add indicator: Increase data-sharing agreements across agencies and entities	Taking advantage of data across sectors, especially data on upstream challenges related to income, education, housing, crime, interpersonal violence and trauma, environmental hazards, transportation, and education. Sources of these data include programs such as the Supplemental Nutrition Assistance Program (SNAP), the Homeless Management Information System, the American Community Survey, and the National Committee on Vital and Health Statistics (NCVHS) report, <i>Environmental Scan of Existing Domains and Indicators to Inform Development of a New Measurement Framework for Assessing the Health and Vitality of Communities</i> .
5.4	Add indicator: Increase the proportion of local public health systems that conduct a public health system assessment using national performance standards. Numerator: Number of local public health systems that have ever submitted Local Public Health System Performance Assessment data to the National Public Health Performance Standards Program; Denominator: Number of public health systems	The National Public Health Performance Standards Program (NPHPSP) is a collaborative effort to enhance the nation's public health systems. Seven national public health organizations have partnered to develop national performance standards for state and local public health systems. The NPHPSP helps agencies quantify how well they provide the 10 essential public health services.