

HEALTH FUND MEETING



SEPTEMBER 26, 2019

Kara Odom Walker, MD, MPH, MSHS
Cabinet Secretary
Department of Health and Social Services

AGENDA

- **Welcome and Introductions**
- **Approval of Minutes**
 - October 28, 2018 Meeting
- **Litigation Update**
- **Budget Update**
- **Overview of Delaware Health Trends**
- **Innovation Fund Update**
- **Process for Developing FY 21 Recommendations**
- **Public Comment**
- **Adjournment**





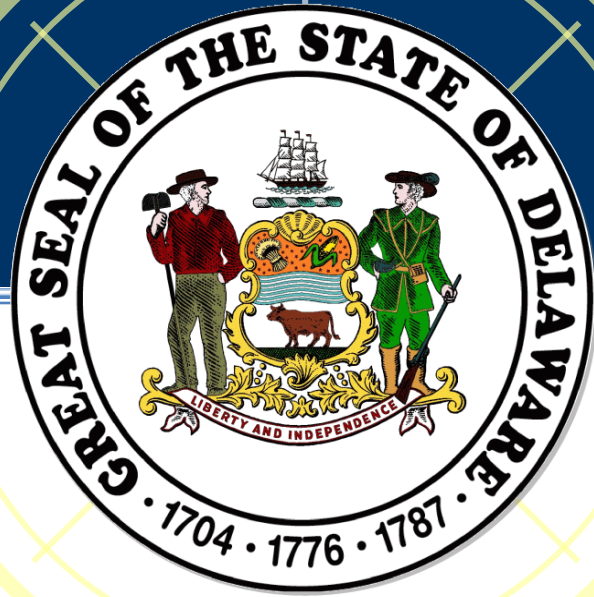
LITIGATION UPDATE

THOMAS BROWN, DEPUTY ATTORNEY GENERAL



FY 21 BUDGET UPDATE

NATHAN ROBY, OFFICE OF MANAGEMENT AND BUDGET (OMB)



State of Delaware

Financial Overview

Health Fund Advisory Committee
September 26, 2019

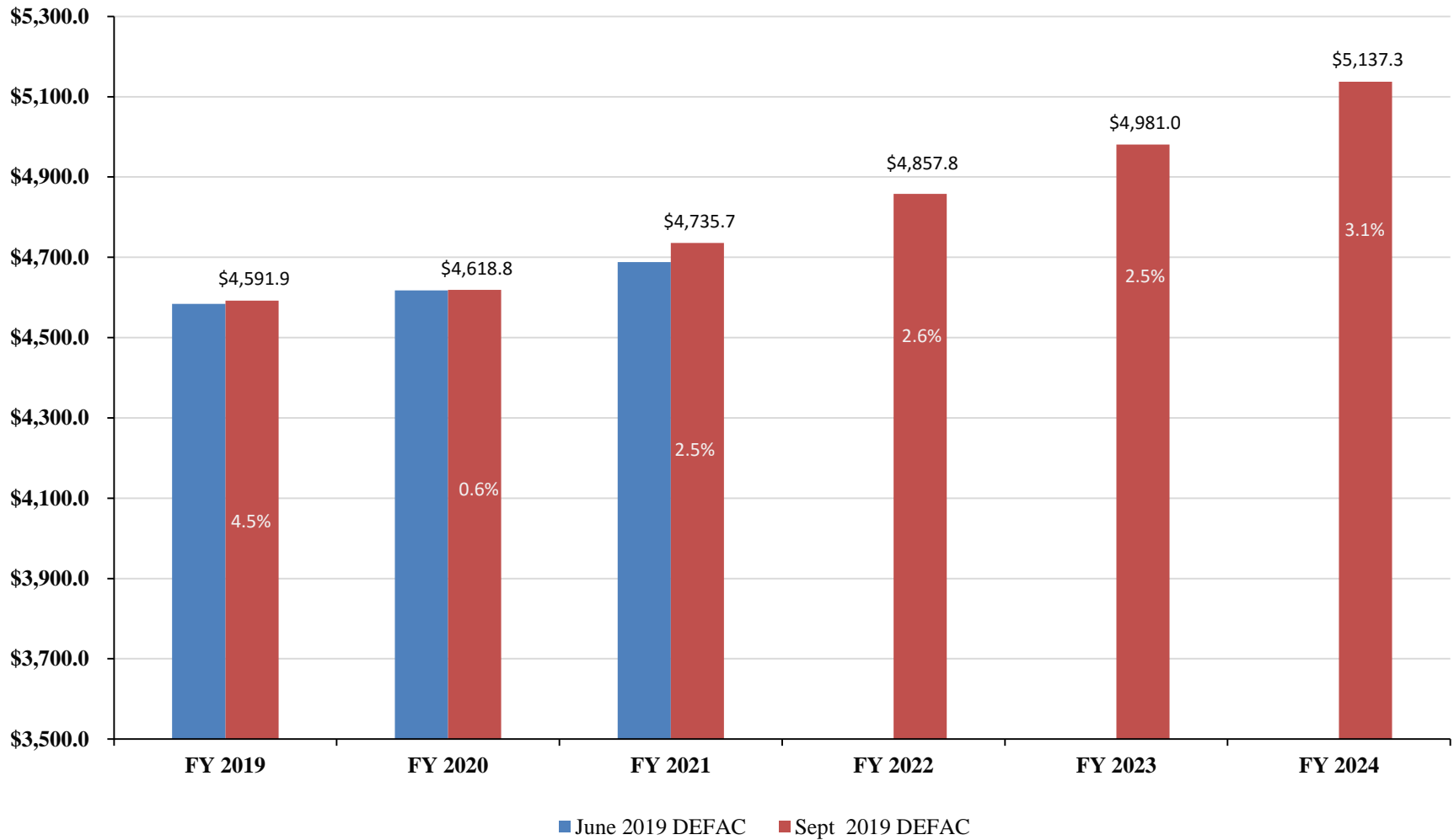
Agenda

- FY 2020 Budget Package Overview
- DEFAC Revenue Forecast
- Cost Drivers
- Spending Limitations
- FY 2021 and What's Next

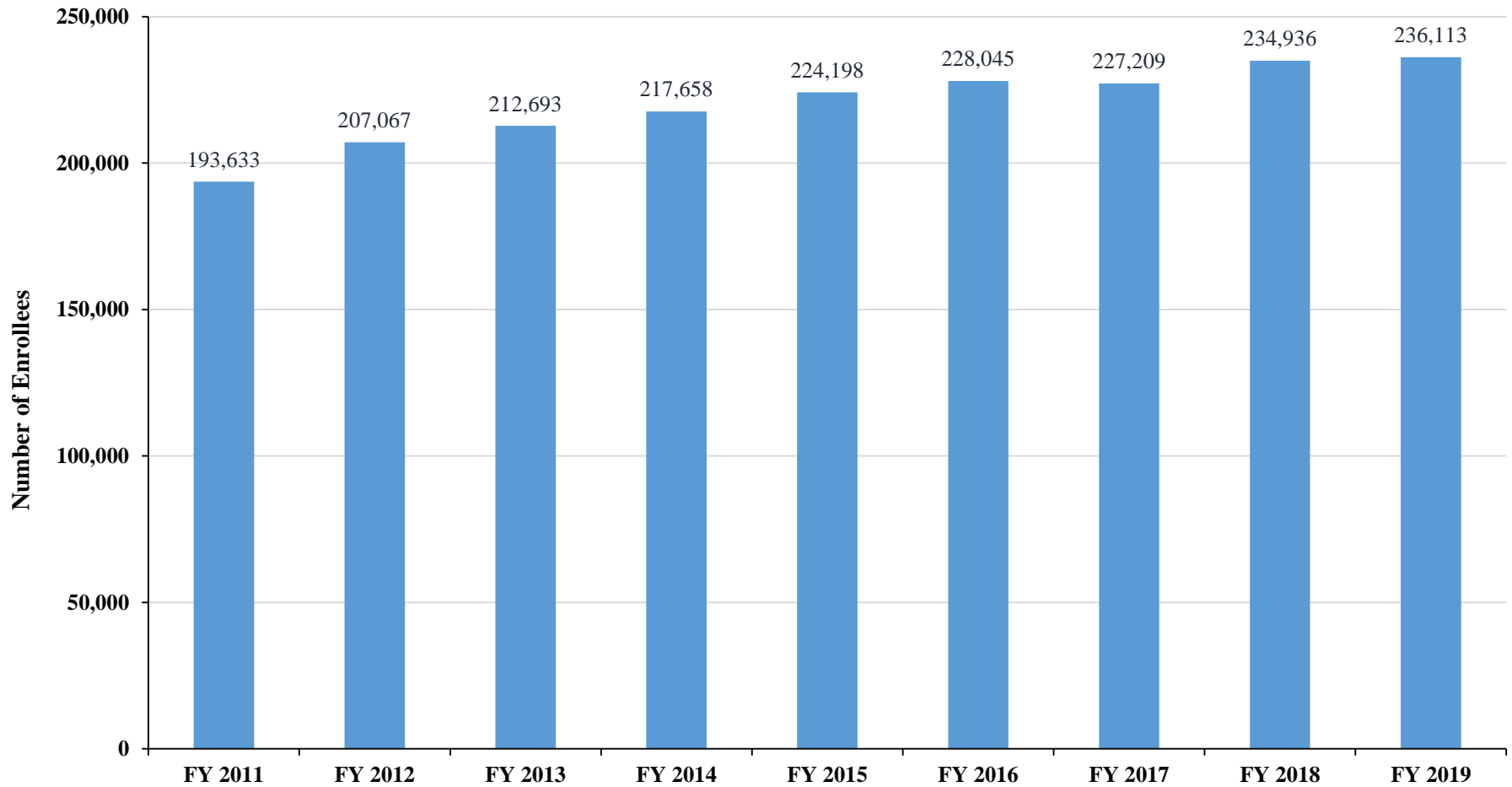
Fiscal Year 2020 Financial Package

- **General Fund Operating Budget.....\$4,451.9 M**
 - GF Operating Budget Growth 4.24% (\$181.1 M)
- **Bond and Capital Improvements Act.....\$862.9 M**
 - State Capital Projects \$437.6 M
 - G.O. Bonds \$230.5 M
 - Cash \$184.3 M
 - Other. \$22.8 M
 - Transportation Authorizations . . . \$425.3 M
- **Grants-In-Aid.....\$55.1 M**
- **One-Time Supplemental.....\$62.0 M**
- **Budget Stabilization Fund.....\$126.3 M**

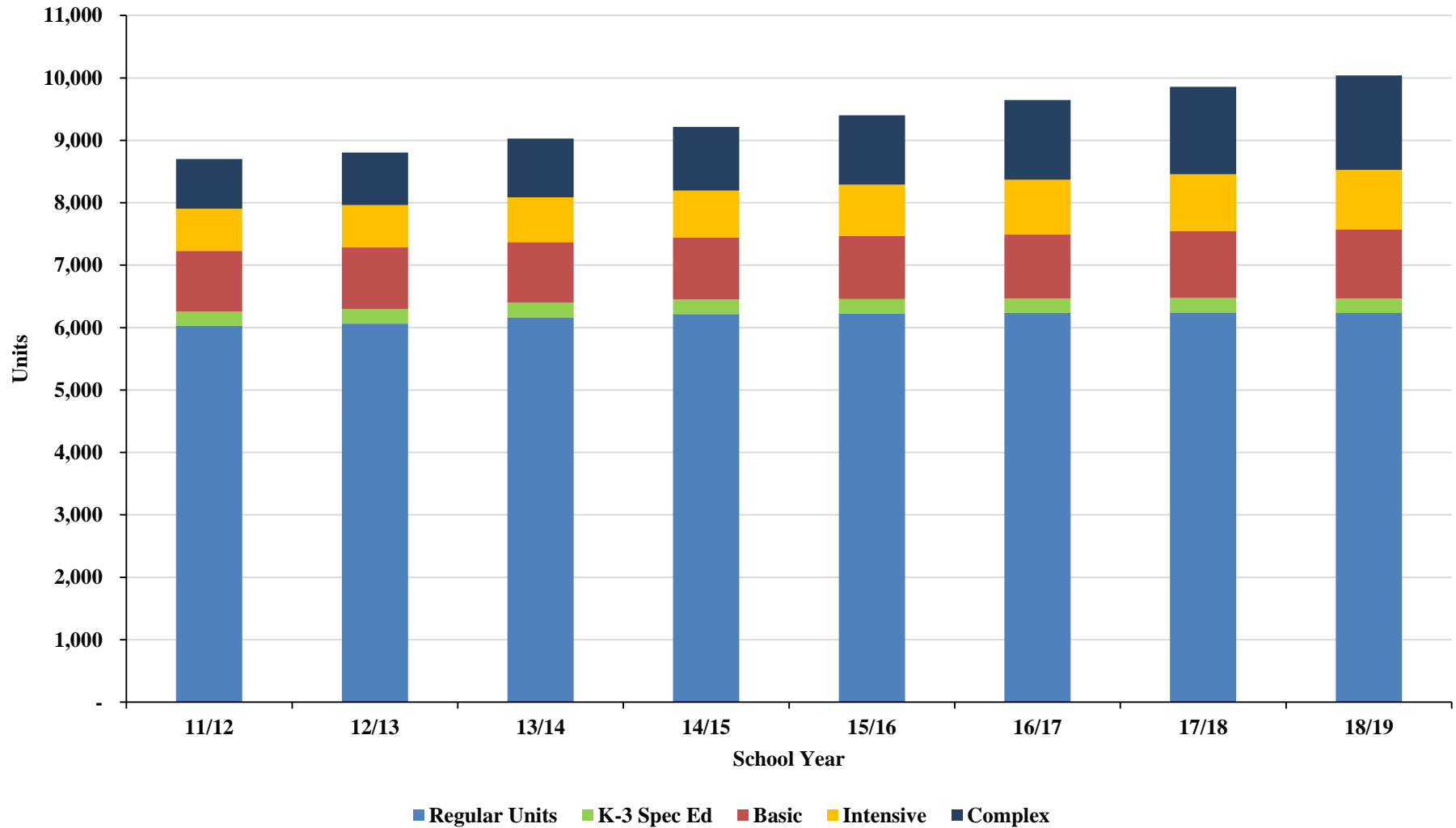
DEFAC: Five Year Revenue Forecast



Cost Drivers: Avg. Enrollment for Medicaid



Cost Drivers: Student Units



Spending Limitations

- 98% Appropriation Limit
- 2% Set-Aside
- 5% Rainy Day Fund
- Executive Order 21
 - EO is Non-binding to the General Assembly
- Debt Issuance

DE Constitution Article VIII: <https://delcode.delaware.gov/constitution/index.shtml>

29 Del. Code §7422: <https://delcode.delaware.gov/>

EO 21: <https://governor.delaware.gov/executive-orders/eo21/>

What does this mean for FY 2021?

- Continue to budget for a “sustainable” future
 - \$37.6 M of the \$47.4 M DEFAC FY 2021 revenue increase is related to Abandoned Property and Lottery
 - DEFAC five year revenue growth trend is approx. 2.3% annually...
 - One Time investments vs building the base
- Watchful eye on an economic downturn
 - DEFAC’s concern over the Yield Curve inverting
 - Recovery has lasted 10 years...how much longer?

What's Next?

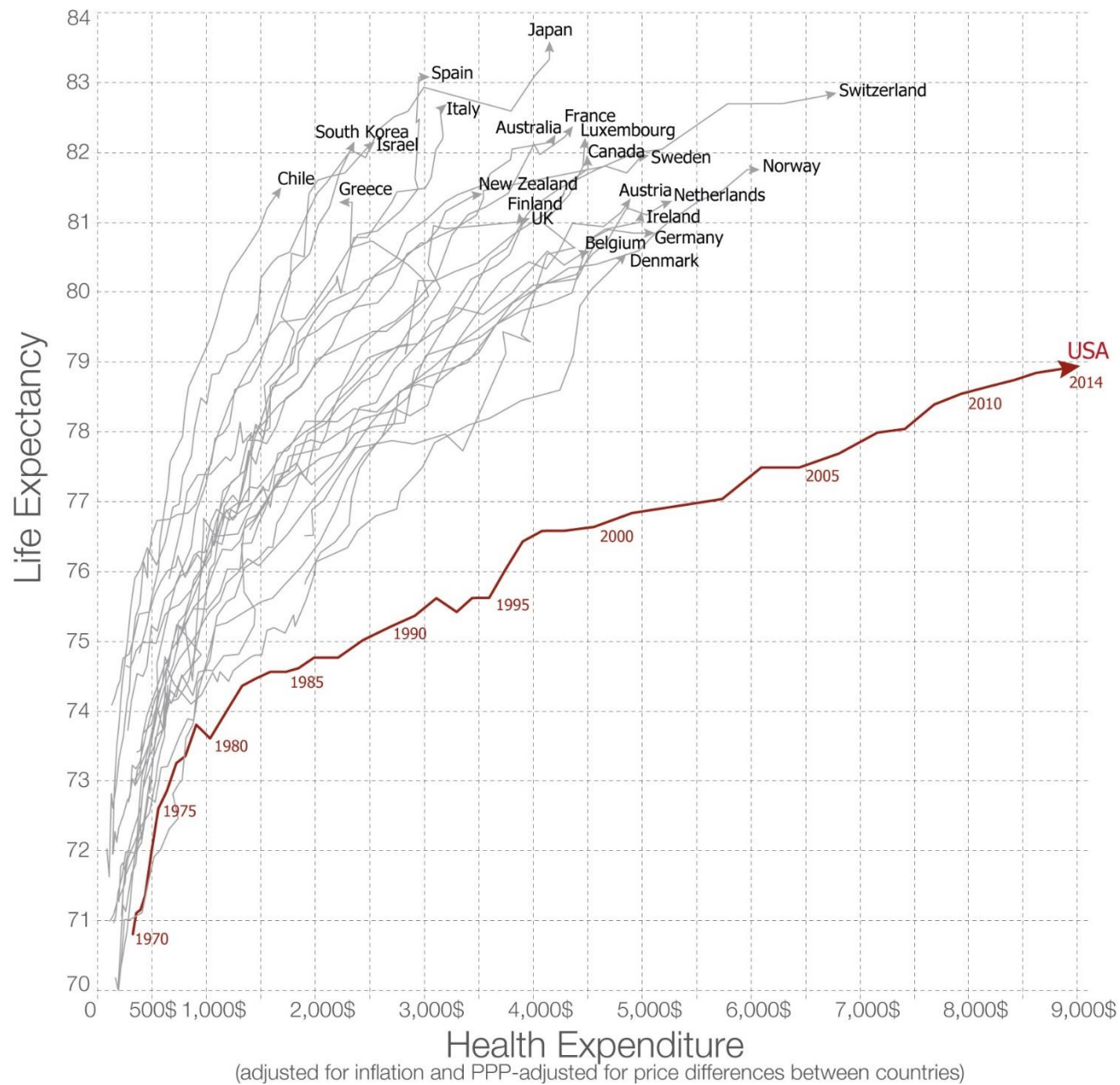
- October – review of agency budget request submission
- October/November – OMB Public Hearings – Operating and Capital Budget Requests
- December 18, 2019 – DEFAC Meeting
- January 2020 – Governor's Recommended Budgets
- February – JFC Public Hearings – Operating Budget
- February – Bond Bill Public Hearings – Capital Budget
- March – DEFAC
- April – DEFAC
- May – DEFAC
- May – JFC Markup – Operating Budget
- June – DEFAC
- June – Bond Bill Markup – Capital Budget

End





OVERVIEW OF DELAWARE HEALTH TRENDS



Delaware's Overall Health



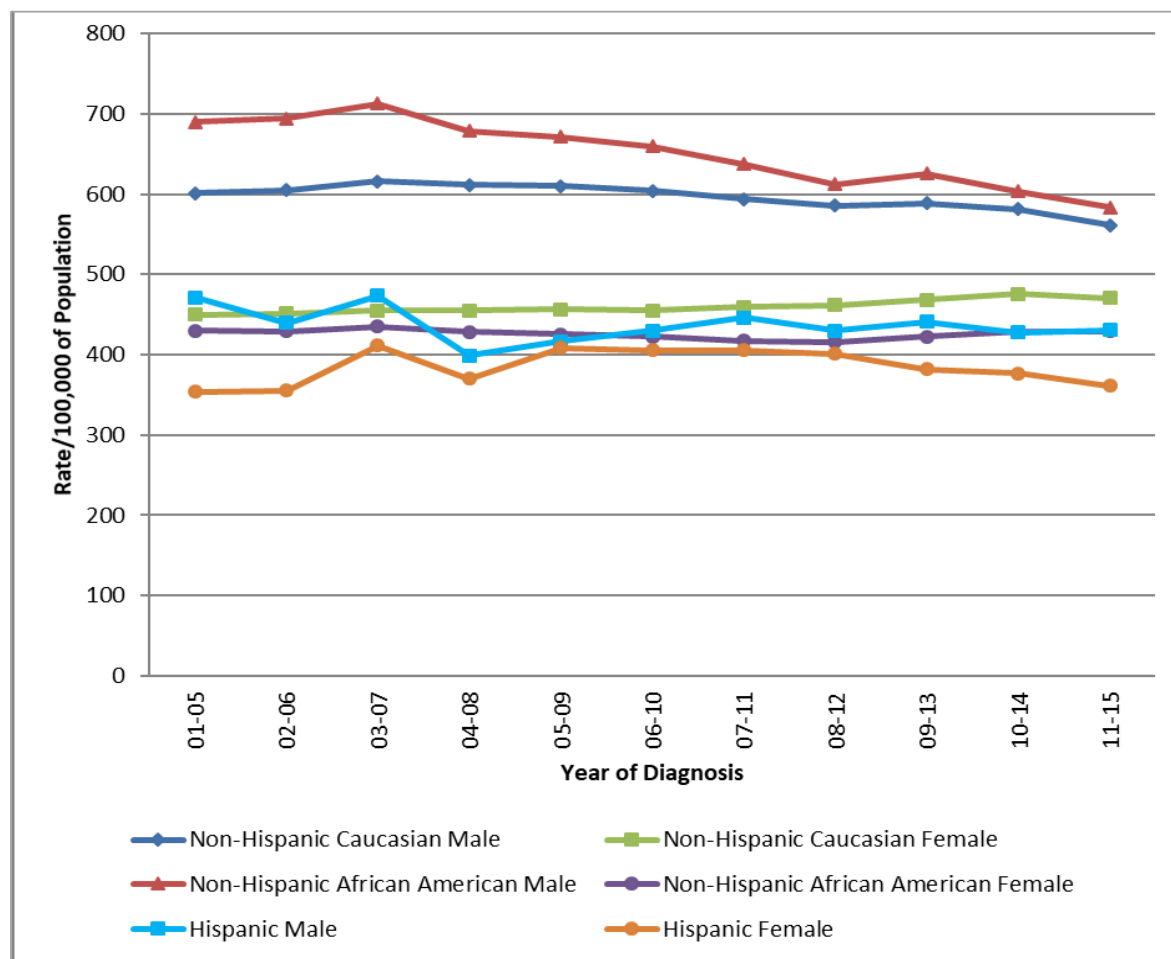
- Progress made, but we rank 31st in *America's Health Rankings*
- **Sicker** than average state
- **Older and aging** faster than other states

AMERICA'S HEALTH RANKINGS: OUTCOMES

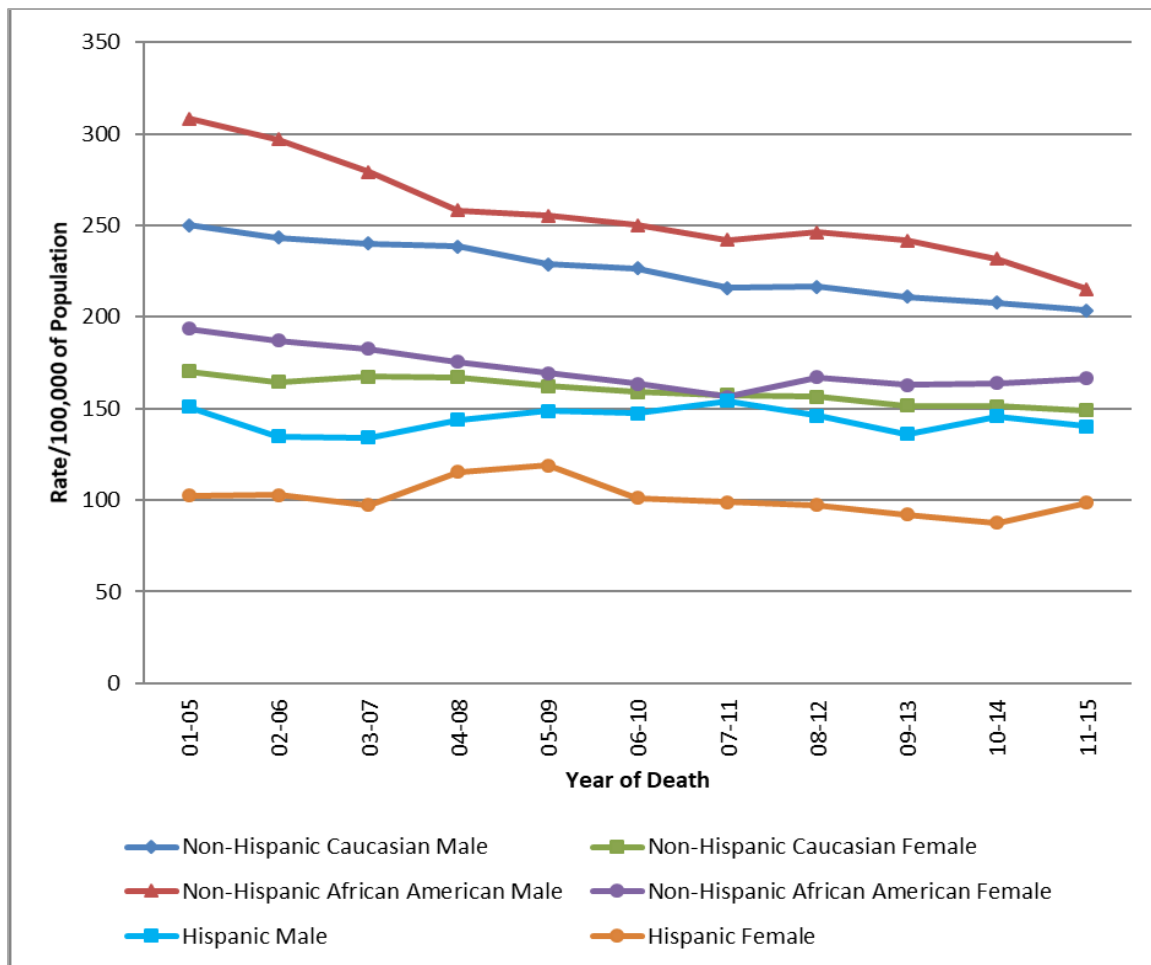
Measure	2018 Value	Rank
Drug Deaths	24.0 (deaths/100,000 pop)	42
Cancer Deaths	200.8 (deaths/100,000 pop)	36
Infant Mortality	8.4 (deaths/1,000 live births)	48
Diabetes	11.3% (% of adults)	36
High Blood Pressure	34.9% (% of adults)	40
High Cholesterol	34.6% (% of adults)	35
Health Status	47.8% (% of adults report high health status)	38

CANCER

Cancer Incidence by Race, Delaware, 2001-2005 to 2011-2015

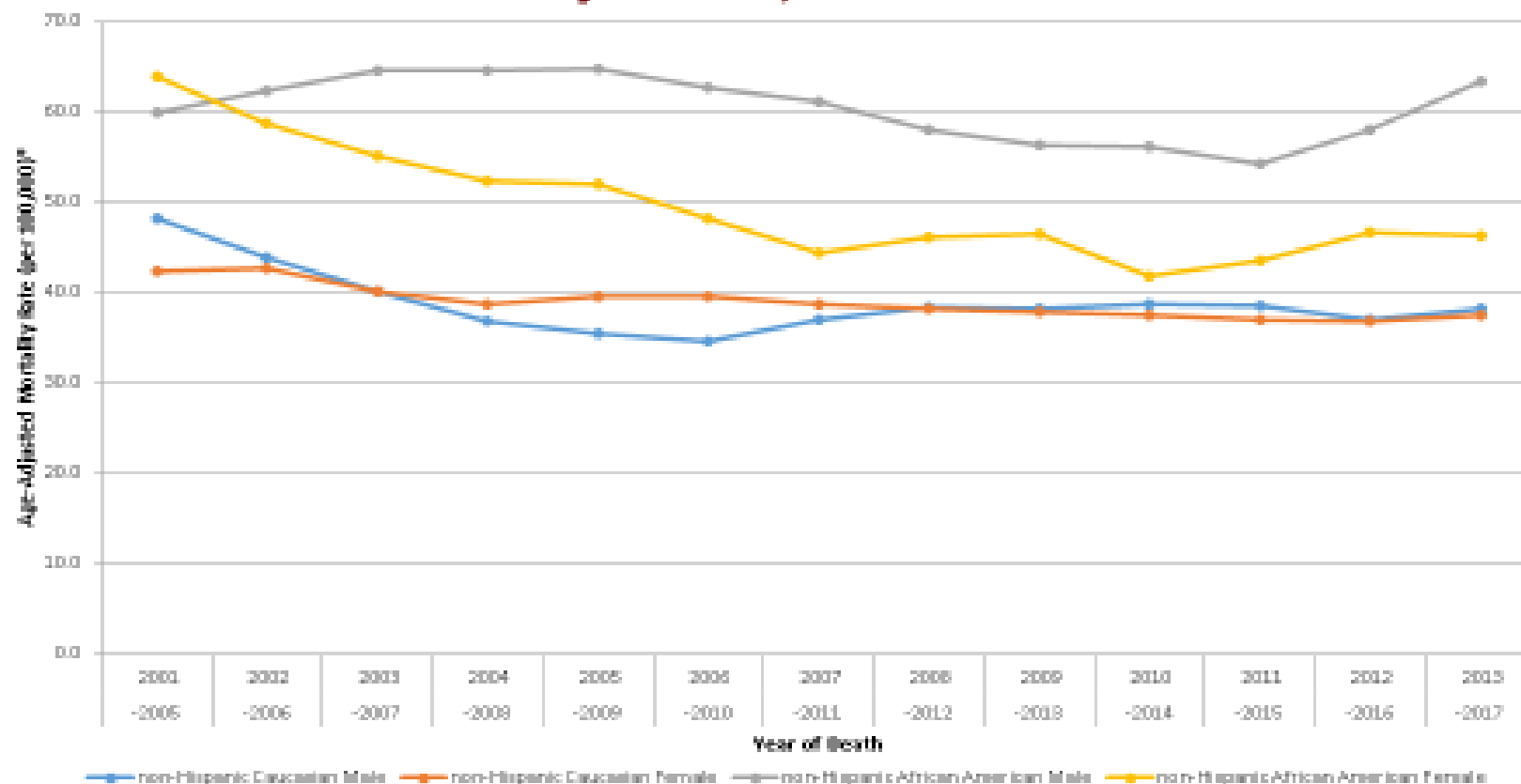


Cancer Mortality by Race, Delaware, 2001-2005 to 2011-2015



CARDIOVASCULAR DISEASE

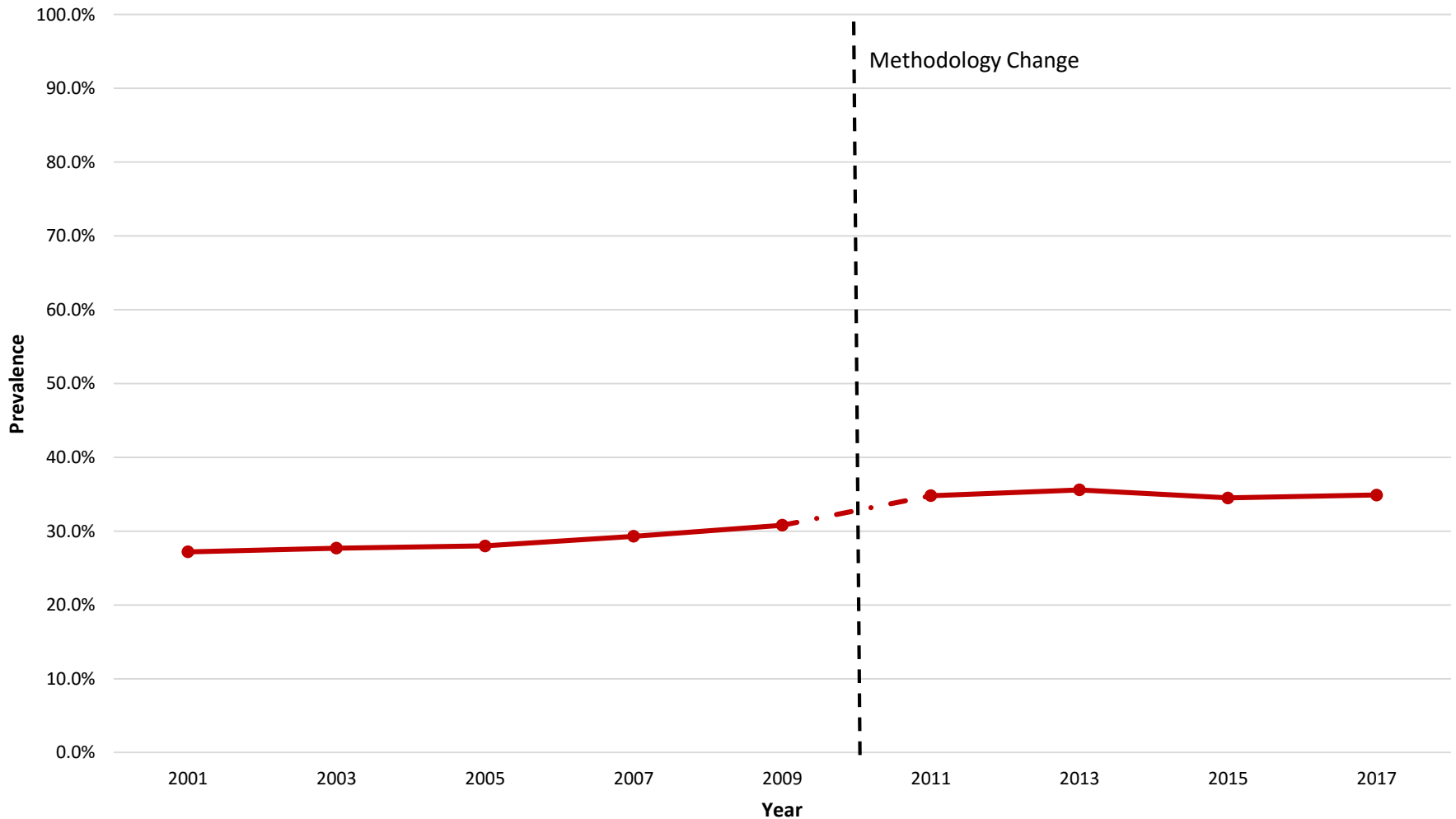
Five-Year Age-Adjusted Mortality Rates for Cerebrovascular Diseases, by Race-Sex, 2001-2017



*Rates per 100,000, adjusted to U.S. 2000 population.

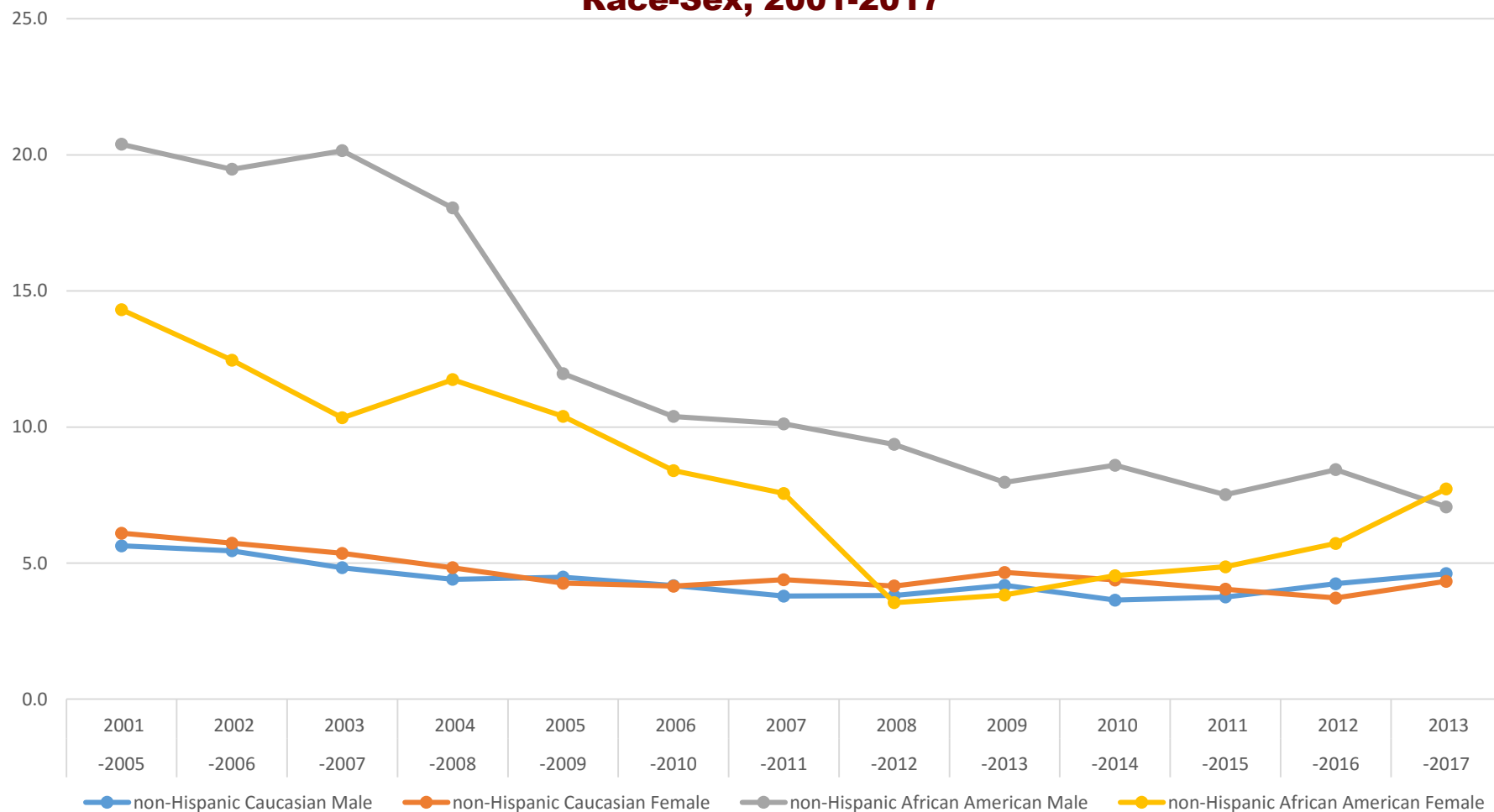
Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Prevalence of Delaware Adults Diagnosed with Hypertension, 2001-2017



Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2001-2017

Five-Year Age-Adjusted Mortality Rate for Essential Hypertension and Hypertensive Renal Disease, Race-Sex, 2001-2017



*Rates per 100,000, adjusted to U.S. 2000 population.

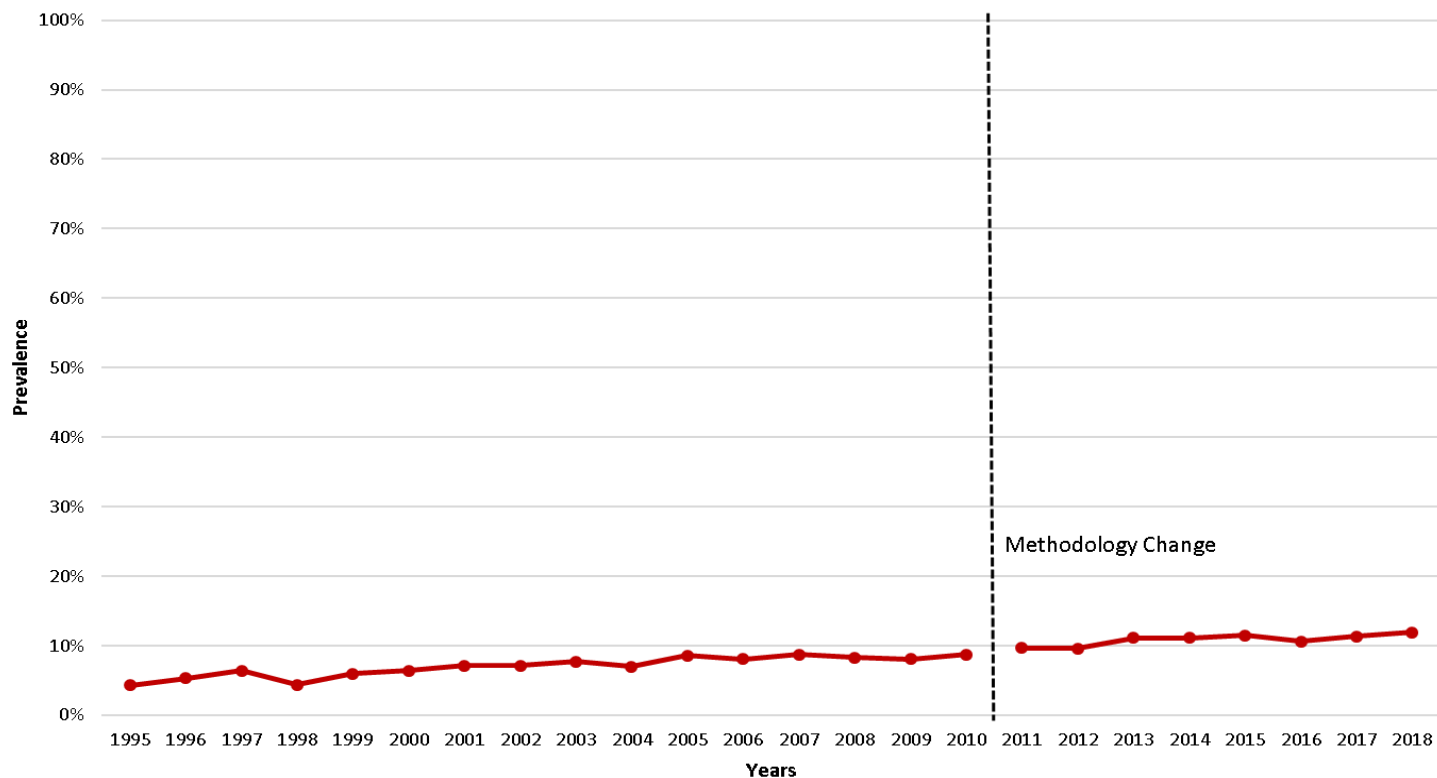
Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

AMERICA'S HEALTH RANKINGS: NOTABLE RISK FACTORS

Measure	2018 Value	Rank
Physical Inactivity	31.0% (% of adults)	41
Physical Inactivity Among Women	29.5% (% of women aged 18-44)	50
Frequent Mental Distress	13.7% of adults (increase of 23%))	35
Insufficient Sleep	36.8% (% of adults)	39
Missed School Days	4.4 (% aged 6-17)	38

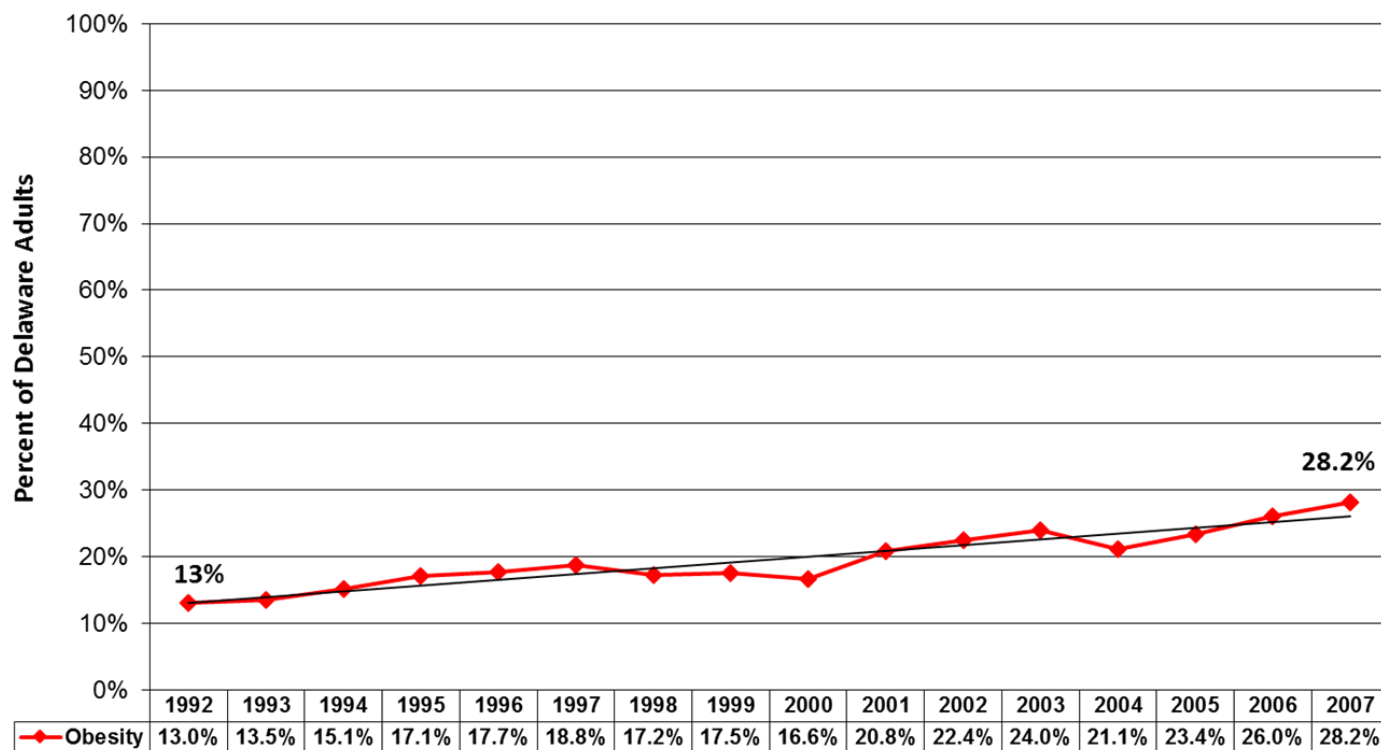
DIABETES

Prevalence of Delaware Adults Diagnosed with Diabetes, 1995-2018



OBESEITY

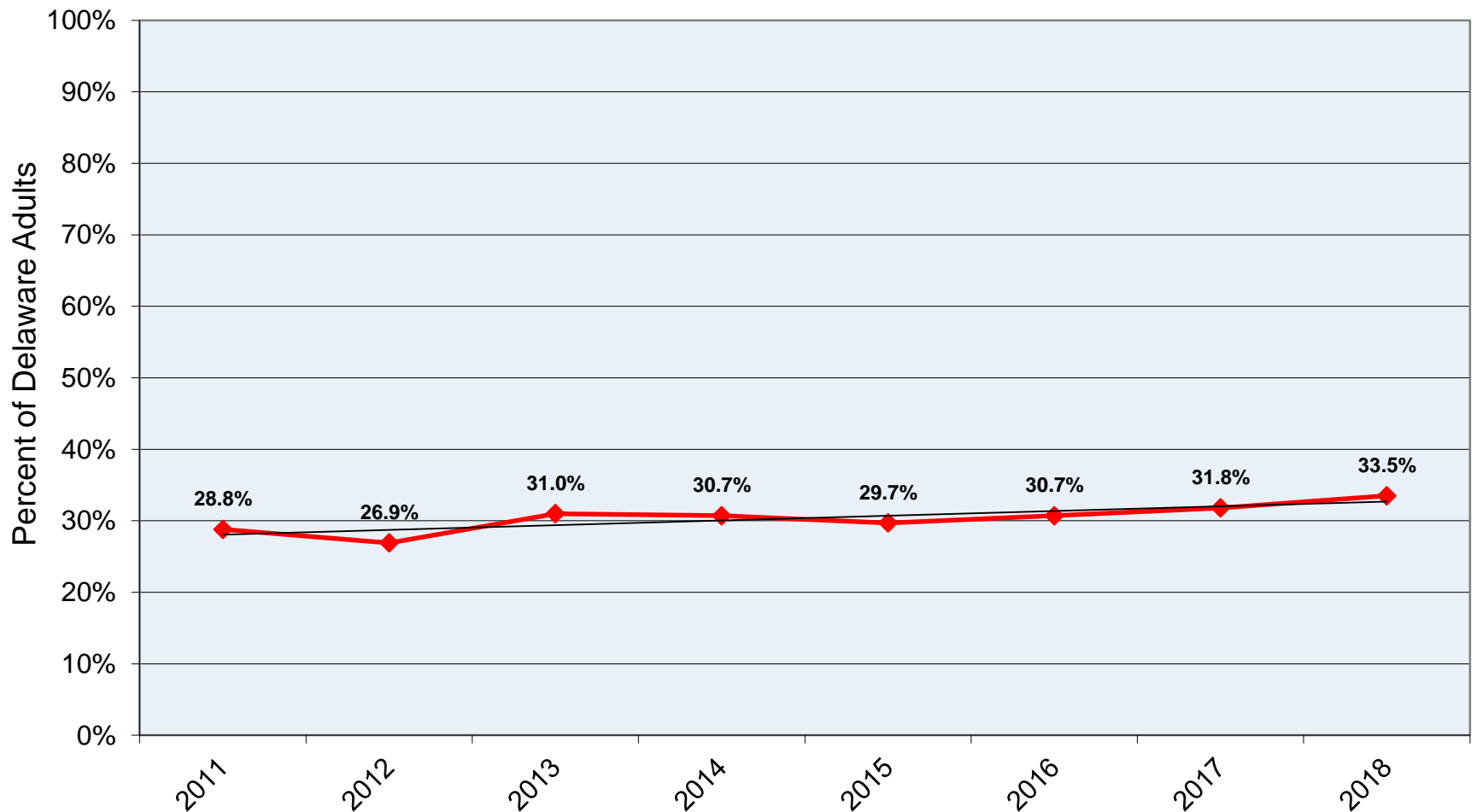
Obesity Doubled Among Delaware Adults Between 1992 and 2007



Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 1992-2011.



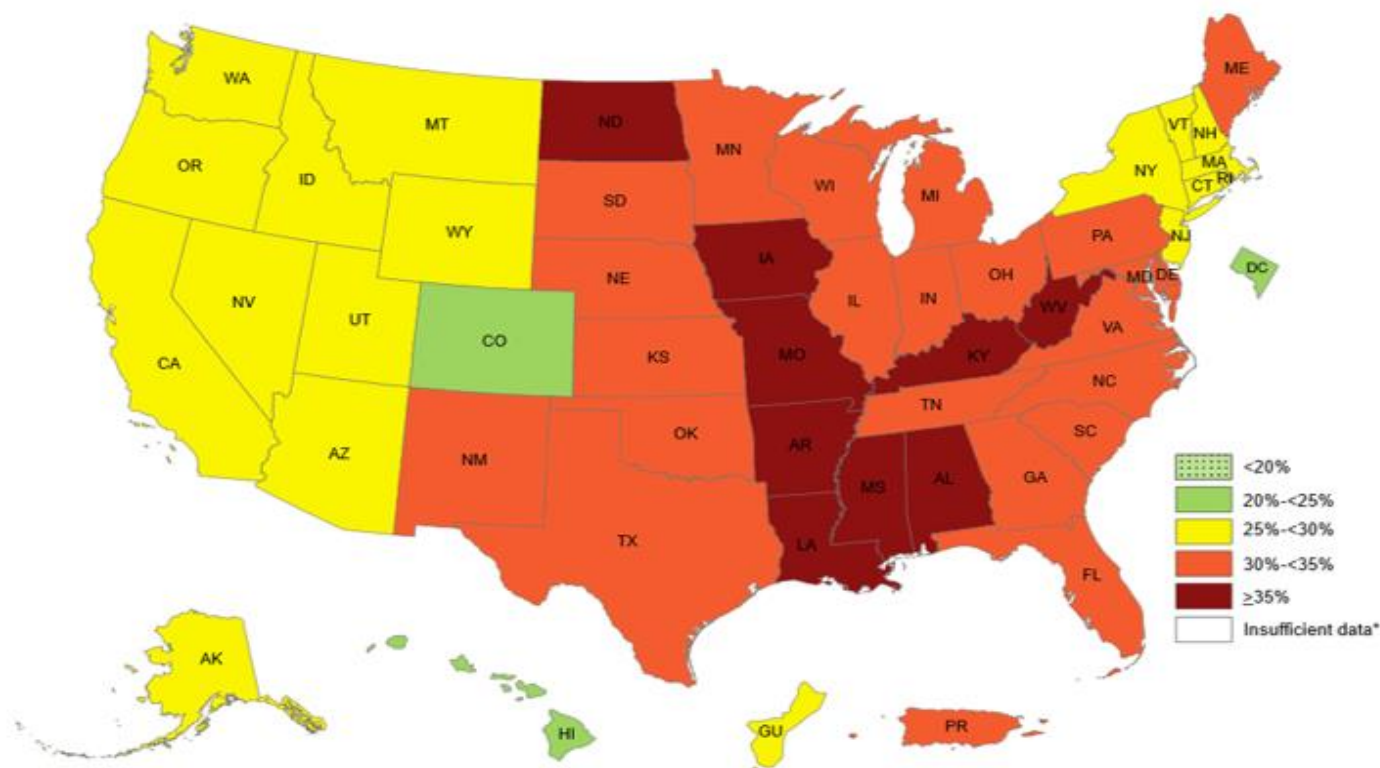
Obesity Among Delaware Adults: 2011 - 2018 Trend



Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2011-2018.

Prevalence[†] of Self-Reported Obesity Among U.S. Adults by State and Territory, BRFSS, 2018

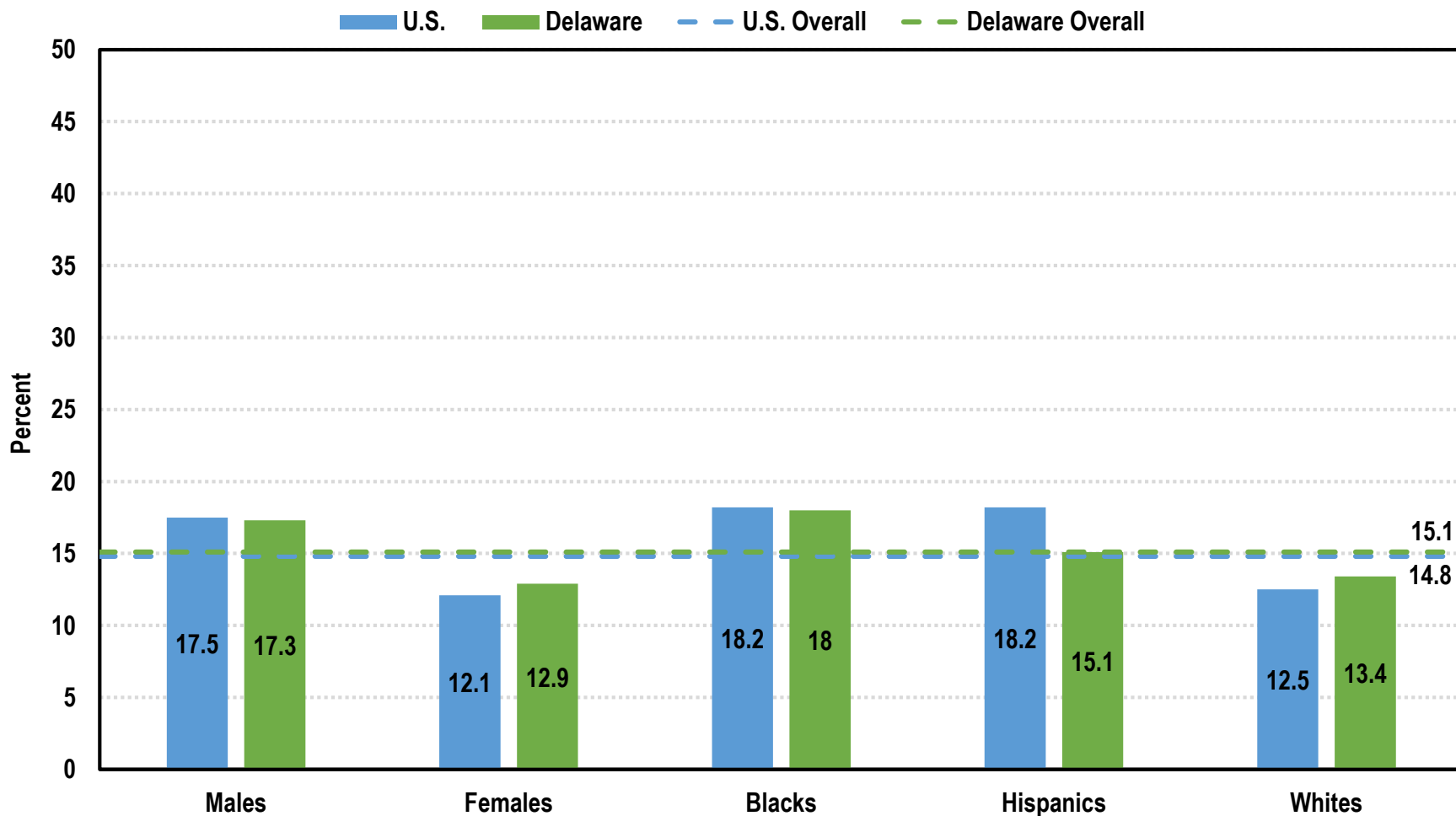
[†]Prevalence estimates reflect BRFSS methodological changes started in 2011. These estimates should not be compared to prevalence estimates before 2011.



*Sample size <50 or the relative standard error (dividing the standard error by the prevalence) ≥ 30%.



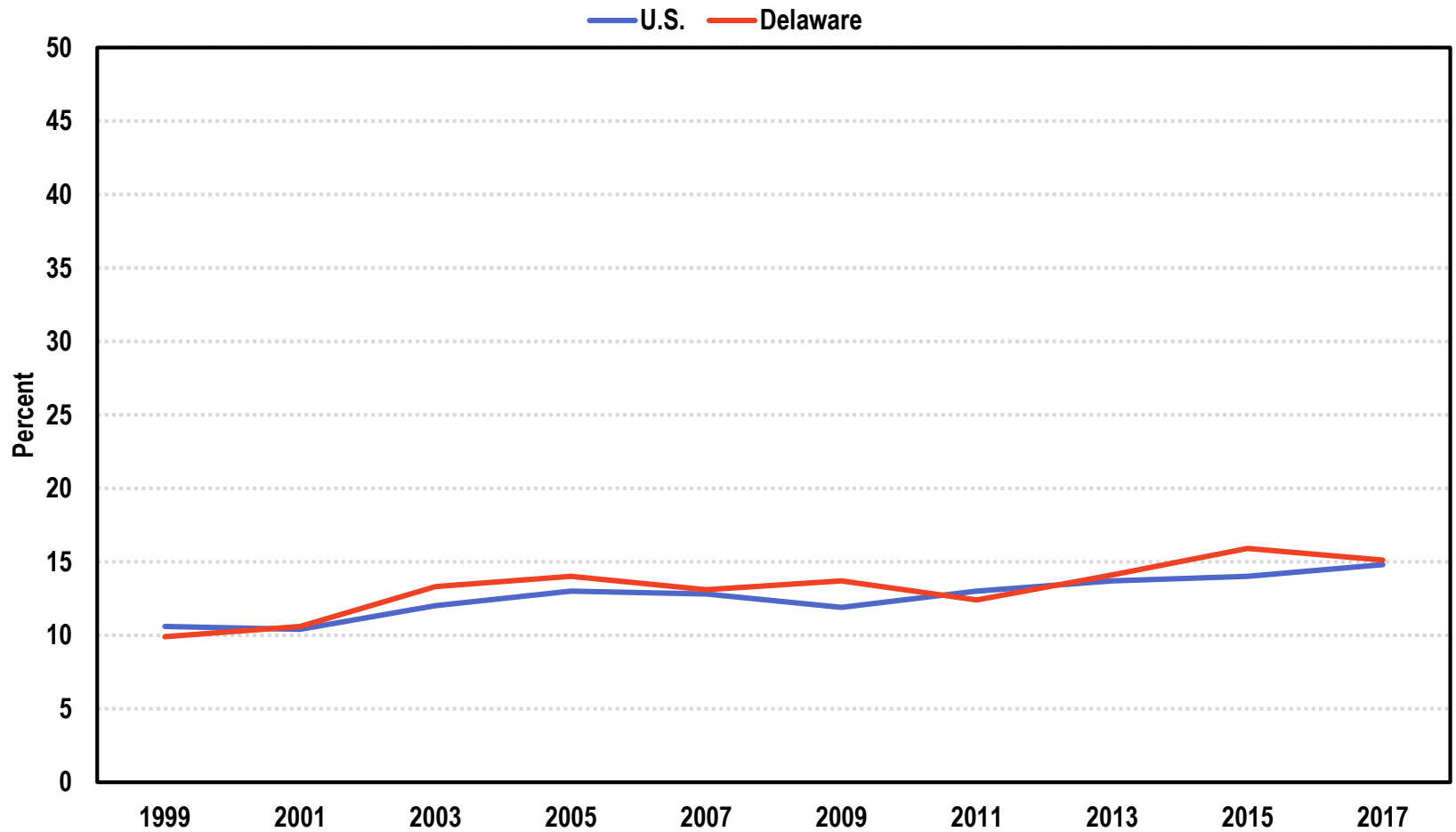
Percentage of High School Youth Who Are Obese*, 2017



Source: Centers for Disease Control and Prevention (CDC), Youth Risk Behavior Survey (YRBS), 2017

* \geq 95th percentile for body mass index, based on sex- and age-specific reference data from the 2000 CDC growth charts

Percentage of High School Youth Who Are Obese*, 1999 -2017

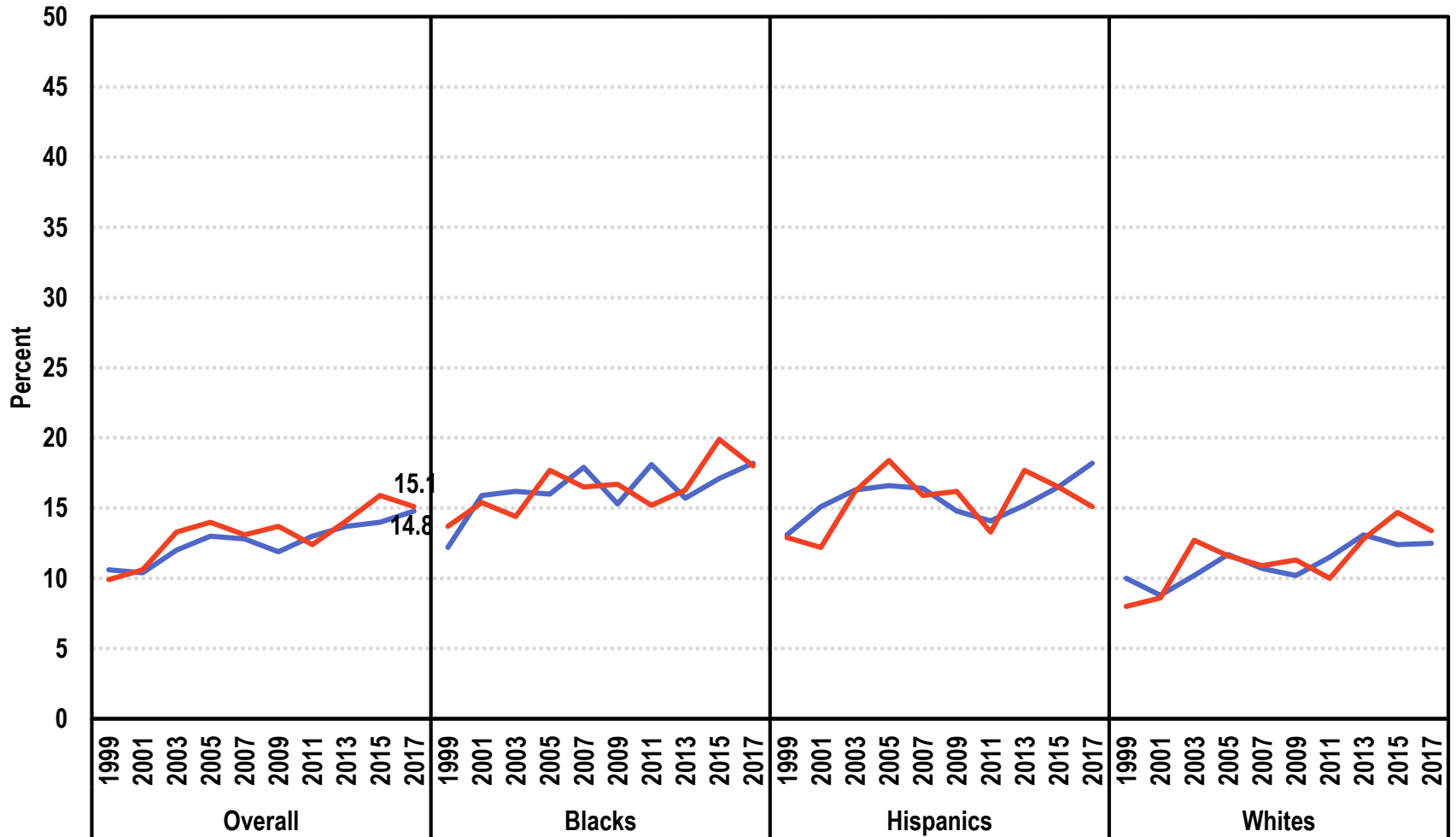


Source: Centers for Disease Control and Prevention (CDC), Youth Risk Behavior Survey (YRBS), 2017

* \geq 95th percentile for body mass index, based on sex- and age-specific reference data from the 2000 CDC growth charts

Percentage of High School Youth Who Are Obese*, 1999 -2017

— U.S. — Delaware

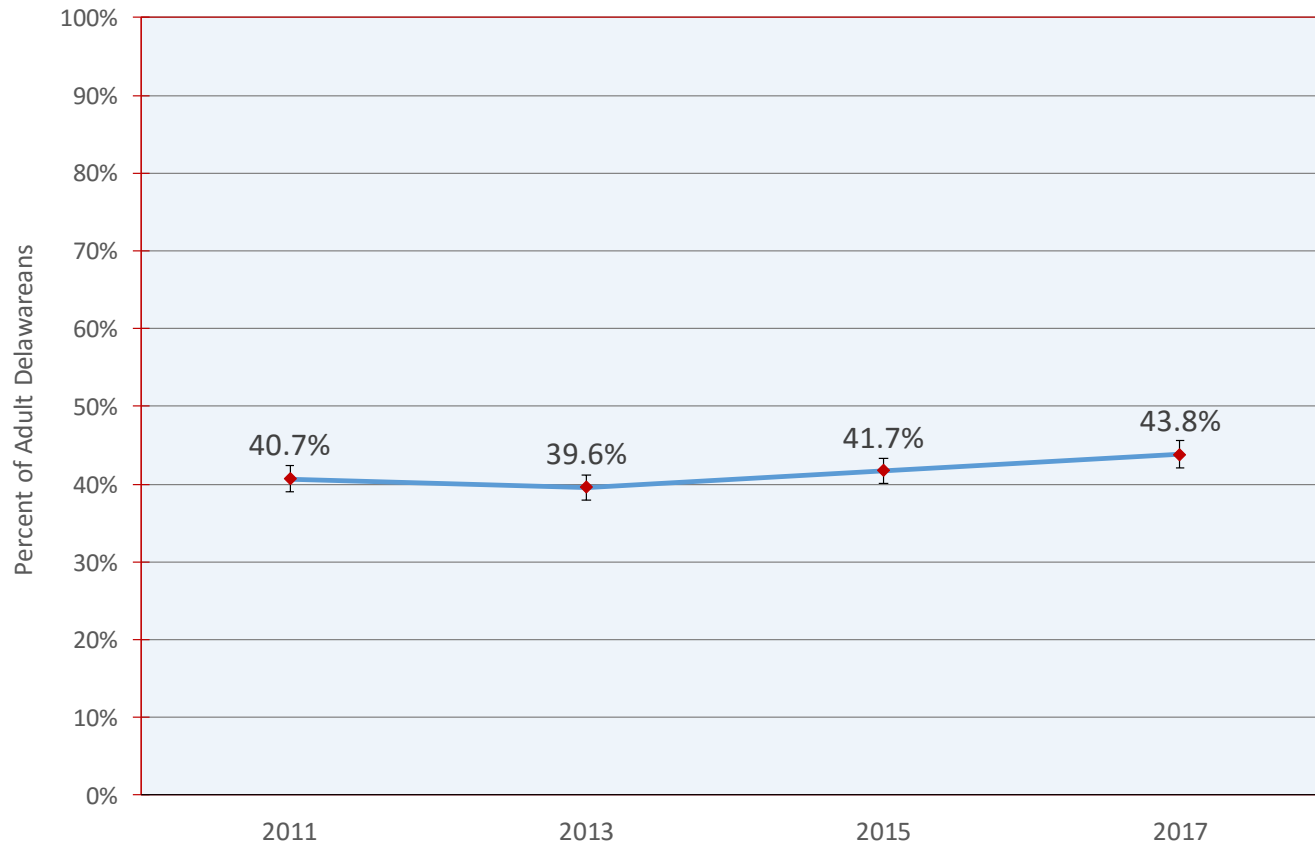


Source: Centers for Disease Control and Prevention (CDC), Youth Risk Behavior Survey (YRBS), 2017

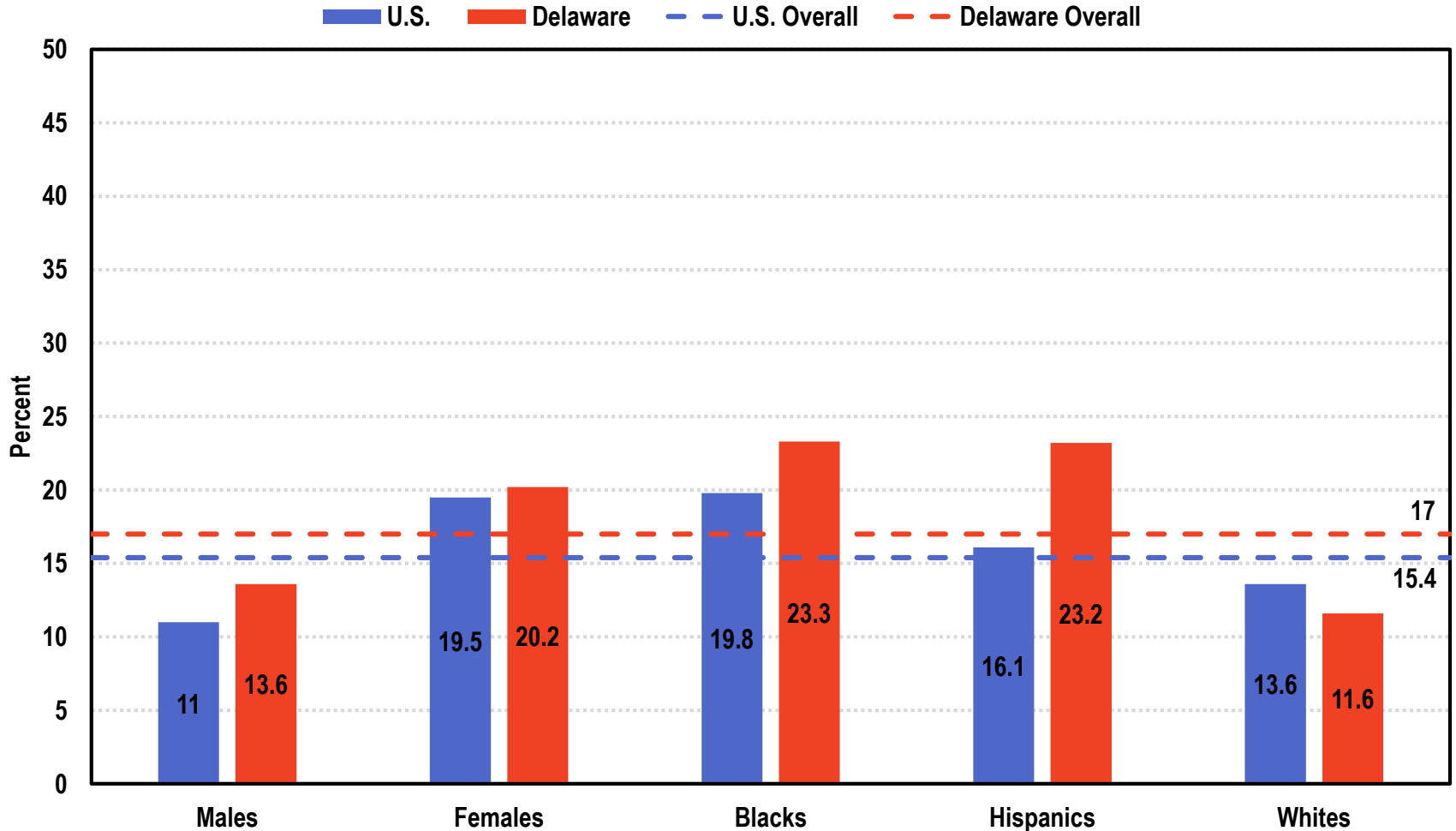
*≥ 95th percentile for body mass index, based on sex- and age-specific reference data from the 2000 CDC growth charts

PHYSICAL ACTIVITY

Delaware Adults Who Did **Not** Meet CDC Guidelines
for Physical Activity, 2011-2017



Percentage of High School Youth Who Were Not Physically Active*, 2017

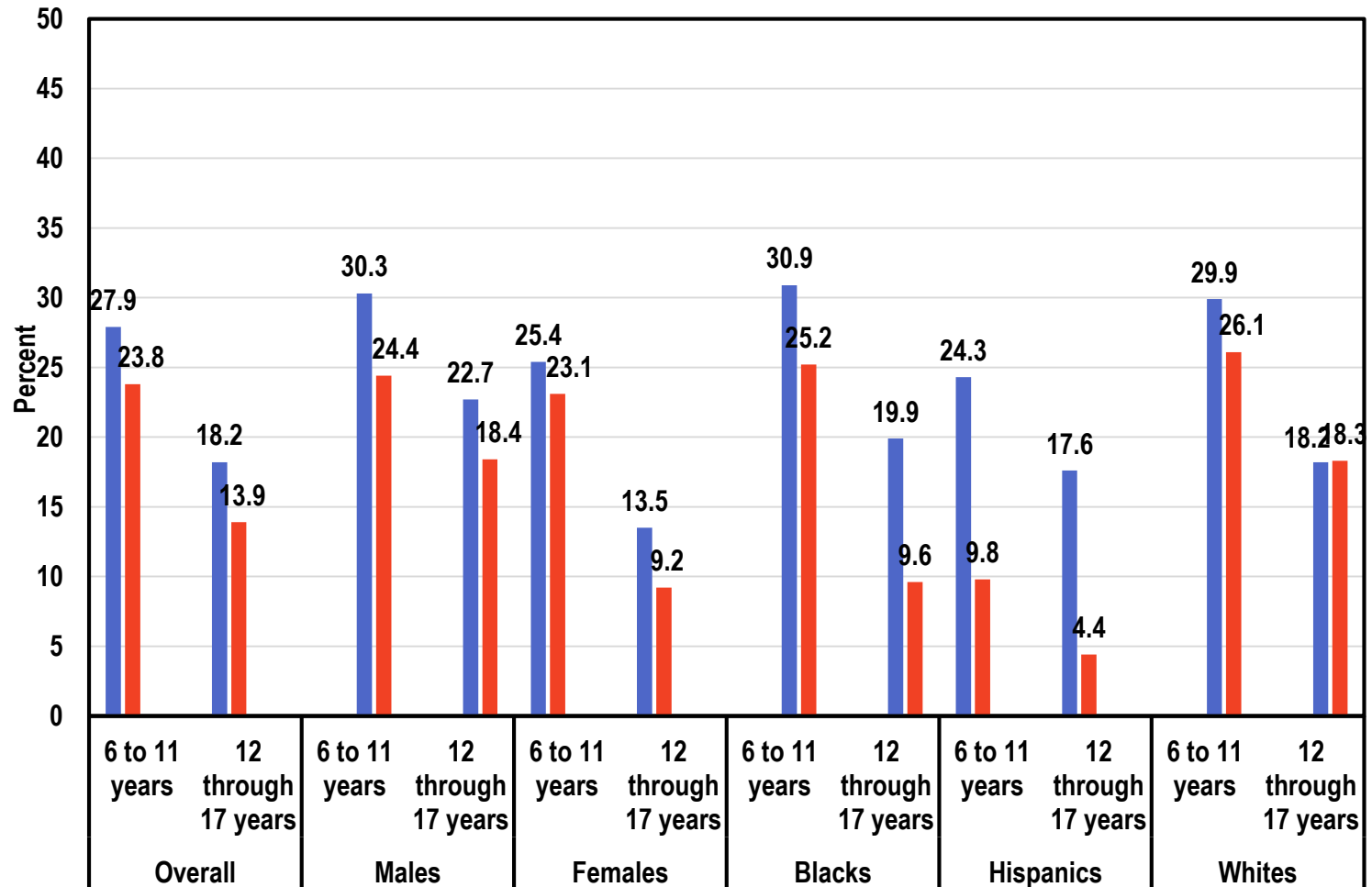


Source: Centers for Disease Control and Prevention (CDC), Youth Risk Behavior Survey (YRBS), 2017

*Not physically active at least 60 minutes per day on all 7 days (doing any kind of physical activity that increased their heart rate and made them

Percentage of Adolescents, Ages 6 through 17, Who Are Physically Active* at Least 60 Minutes Per Day Everyday, 2016-2017

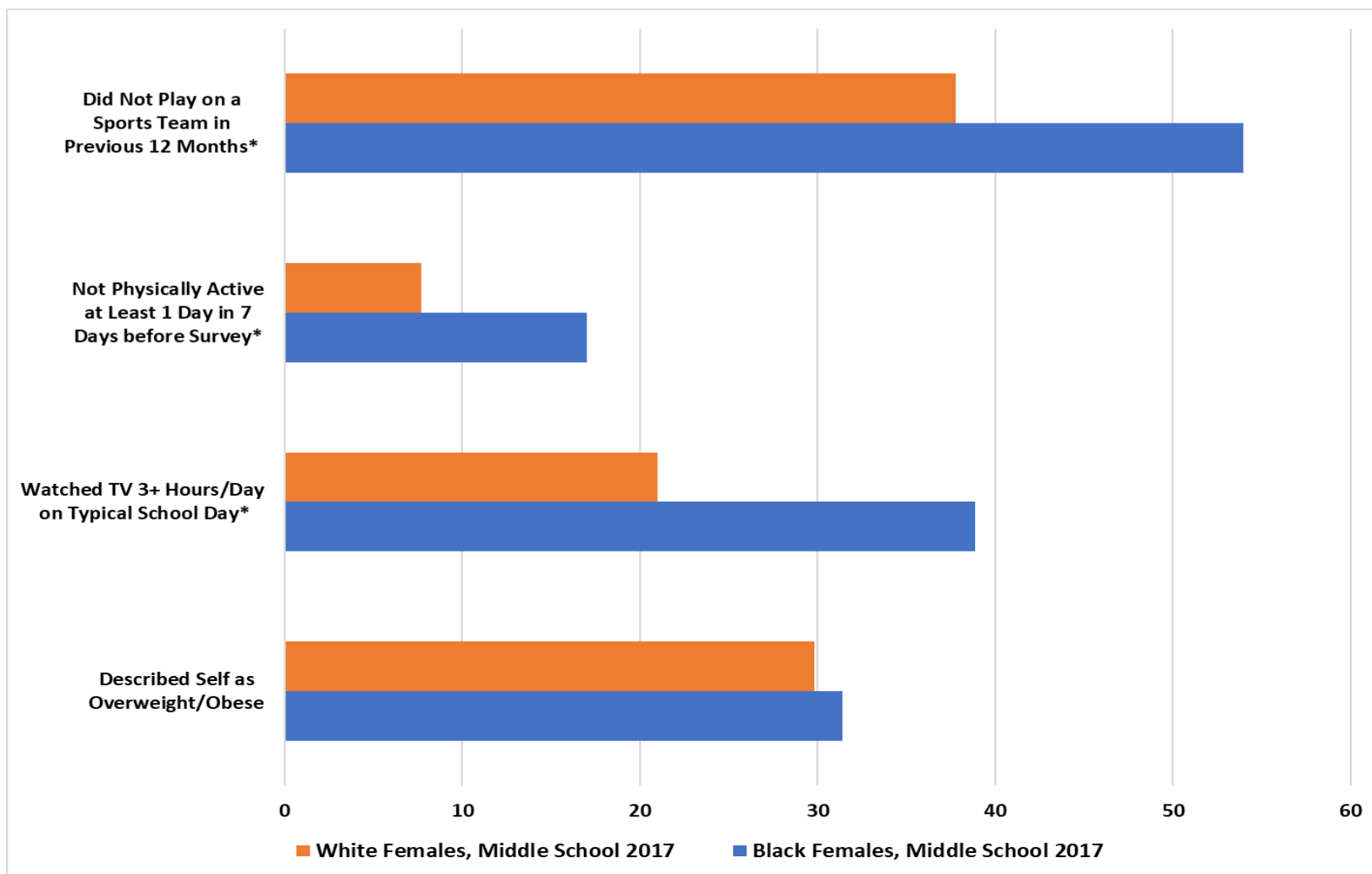
■ U.S. ■ Delaware



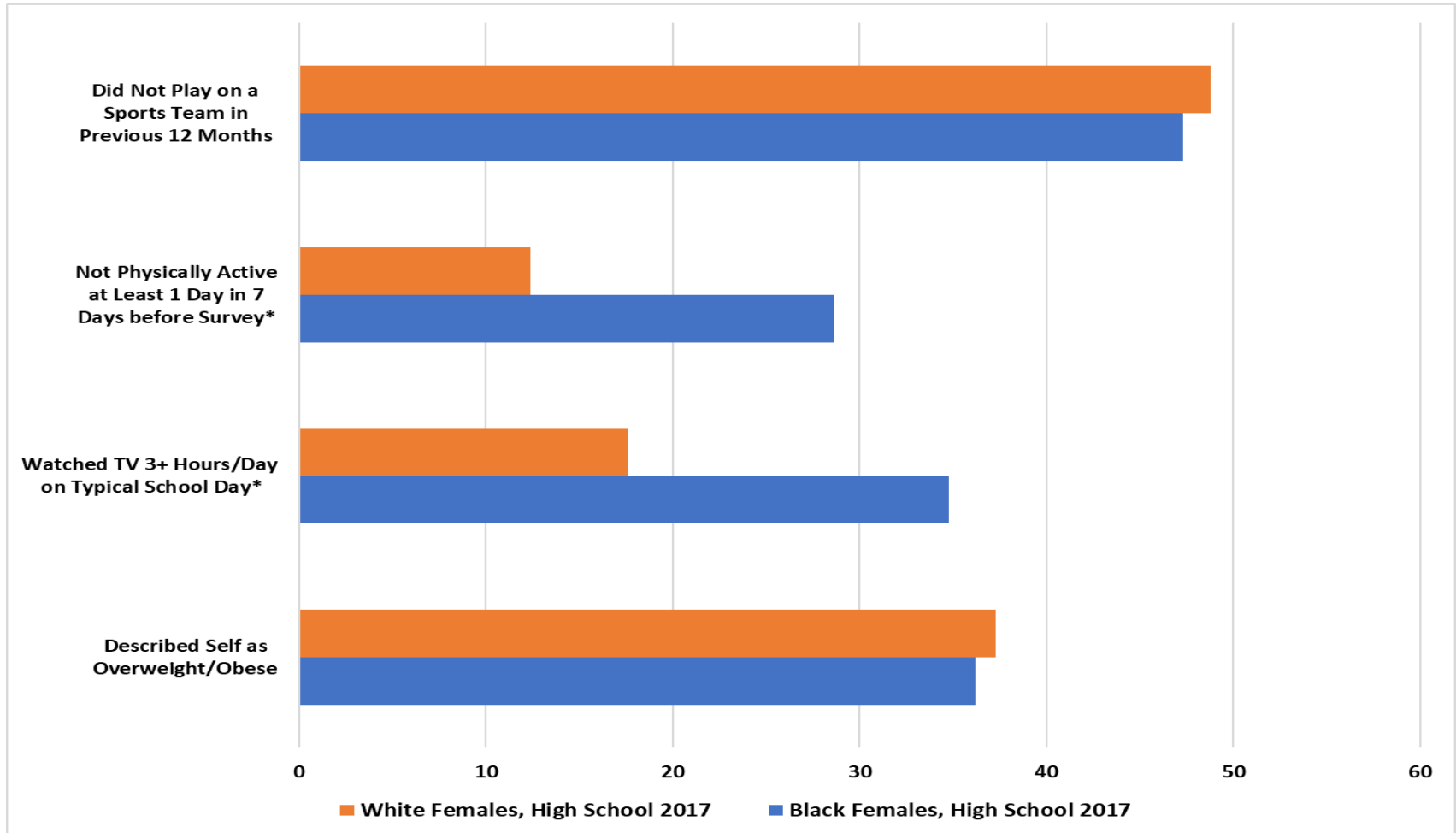
Source: National Survey of Children's Health (NSCH). Delaware sample size for stratification are small for race and ethnicity and estimates are unreliable.

*Parent's report of child's physical activity. During the past week, on how many days did this child exercise, play a sport, or participate in physical activity for at least 60 minutes (0 days; 1-2 days; 3-5 days; Everyday)

Prevalence of Selected Lifestyle Factors, Delaware Middle School Girls



Prevalence of Selected Lifestyle Factors, Delaware High School Girls

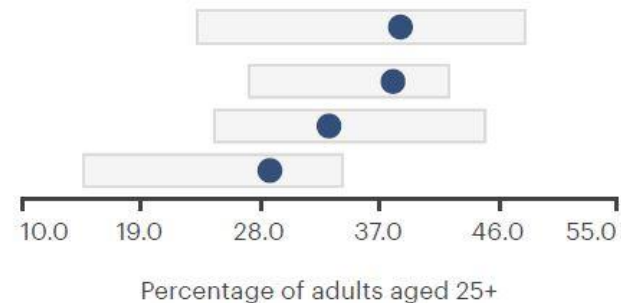
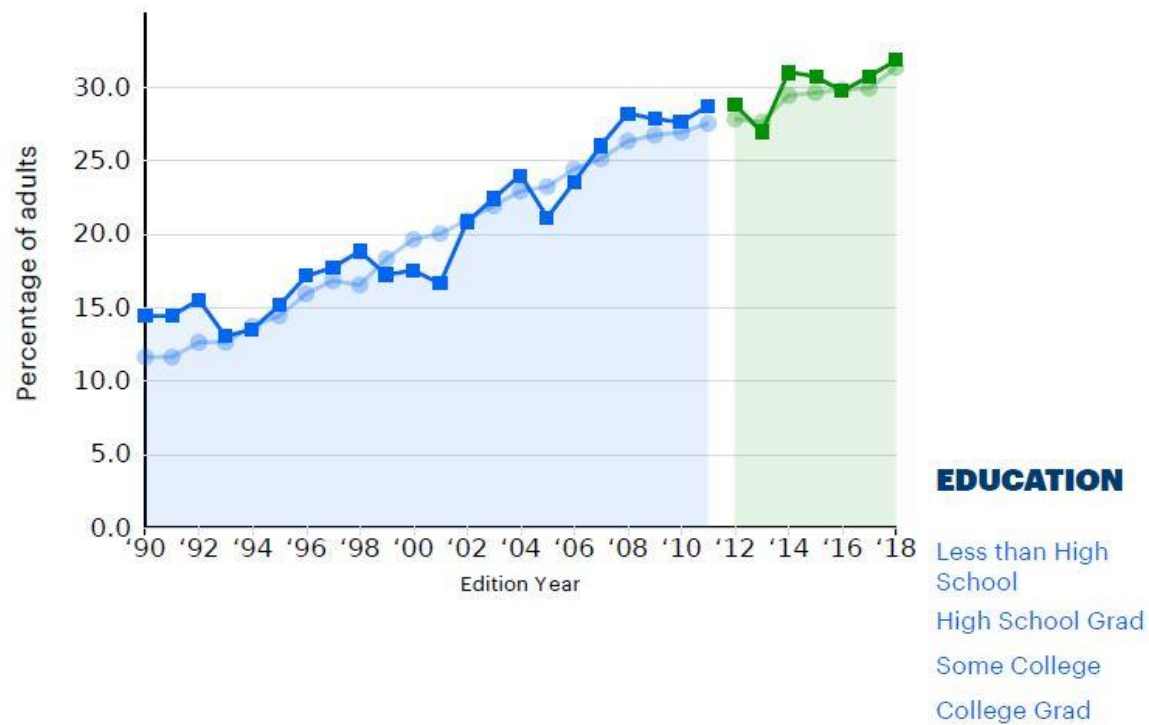


*Difference is statistically significant

Source: Youth Risk Behavior Survey, Delaware public schools, 2017

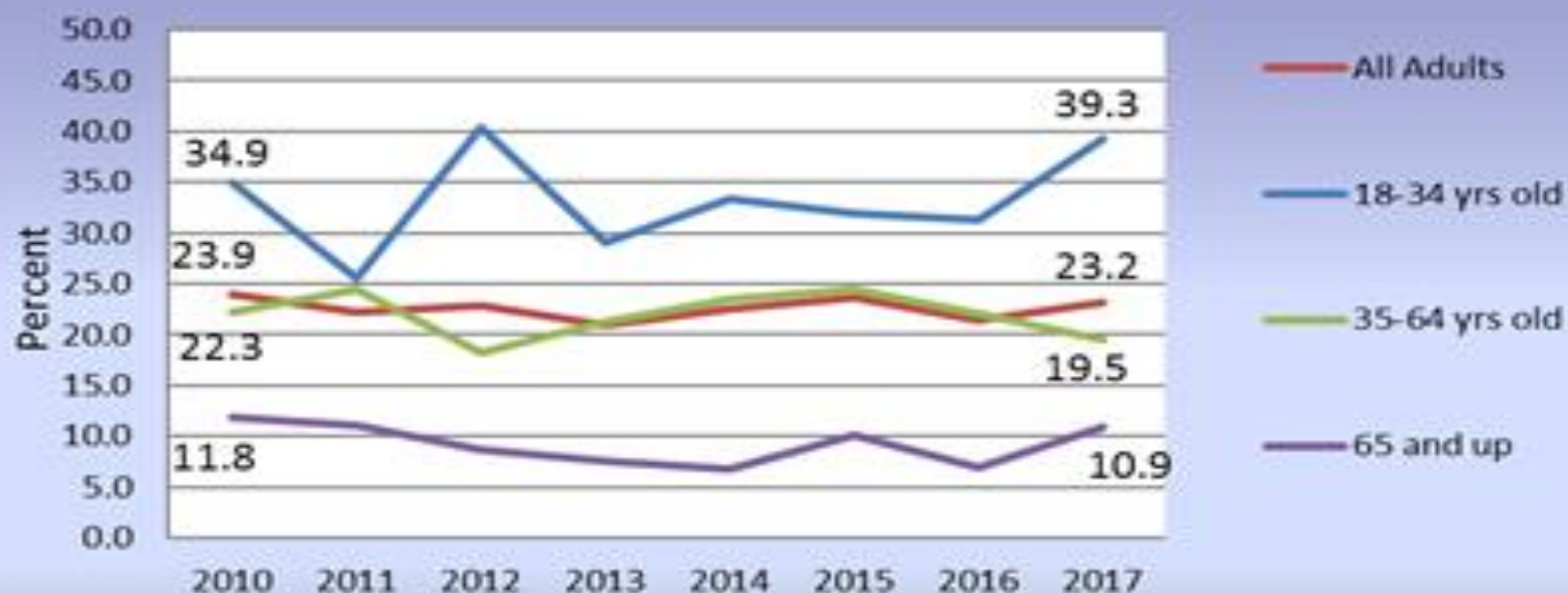
WHY EDUCATION MATTERS

Obesity



TOBACCO USE

Percent of Delaware Adults Reporting Any Tobacco Use. 2010-2017



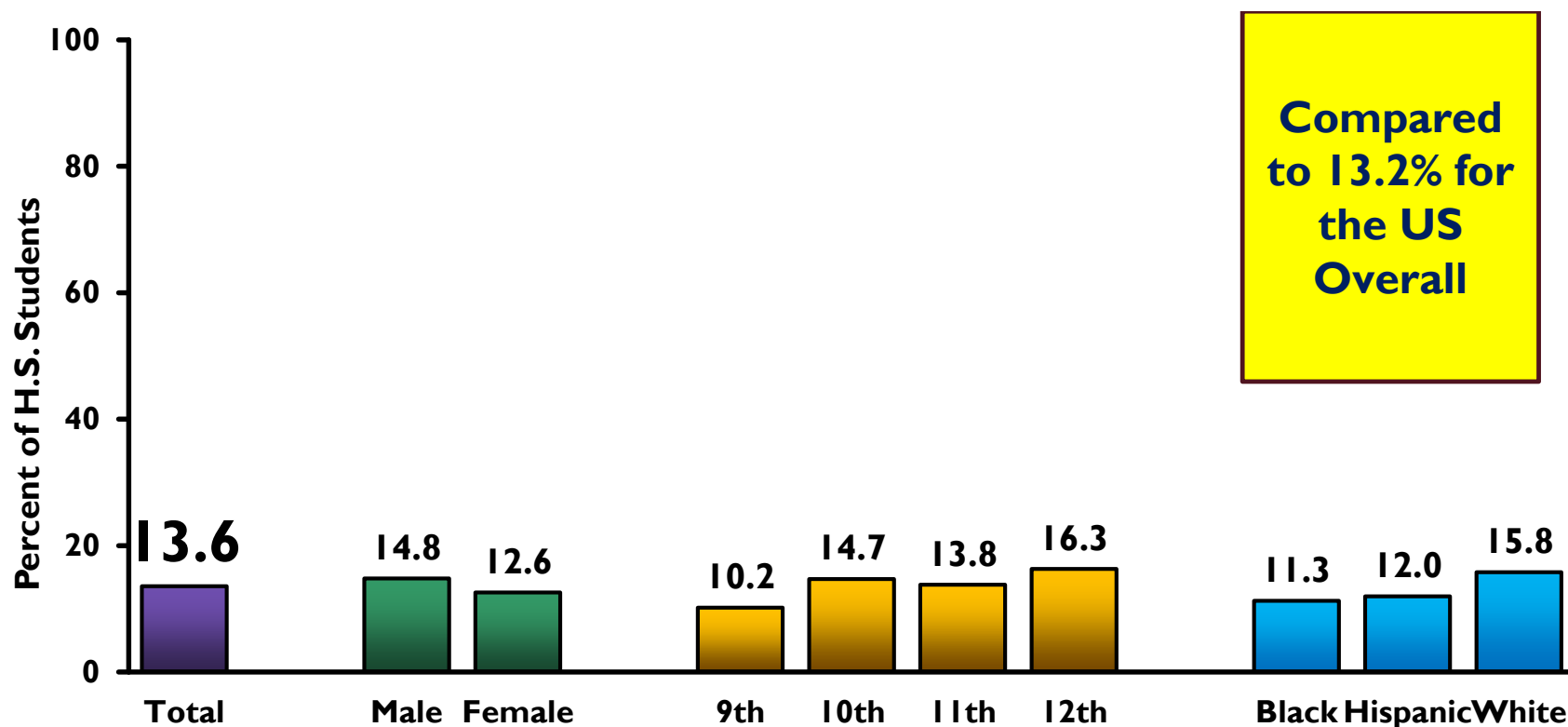
Source: DHSS/DPH, *Tobacco Attitudes and Media Surveys* from 2010-2017.
Surveys conducted by UD Center for Applied Demography & Survey Research

CIGARETTE SMOKING IS NO LONGER THE BEST INDICATOR



Source: Delaware Health & Social Services, Division of Public Health, Youth Risk Behavior Survey (YRBS), 1999-2017

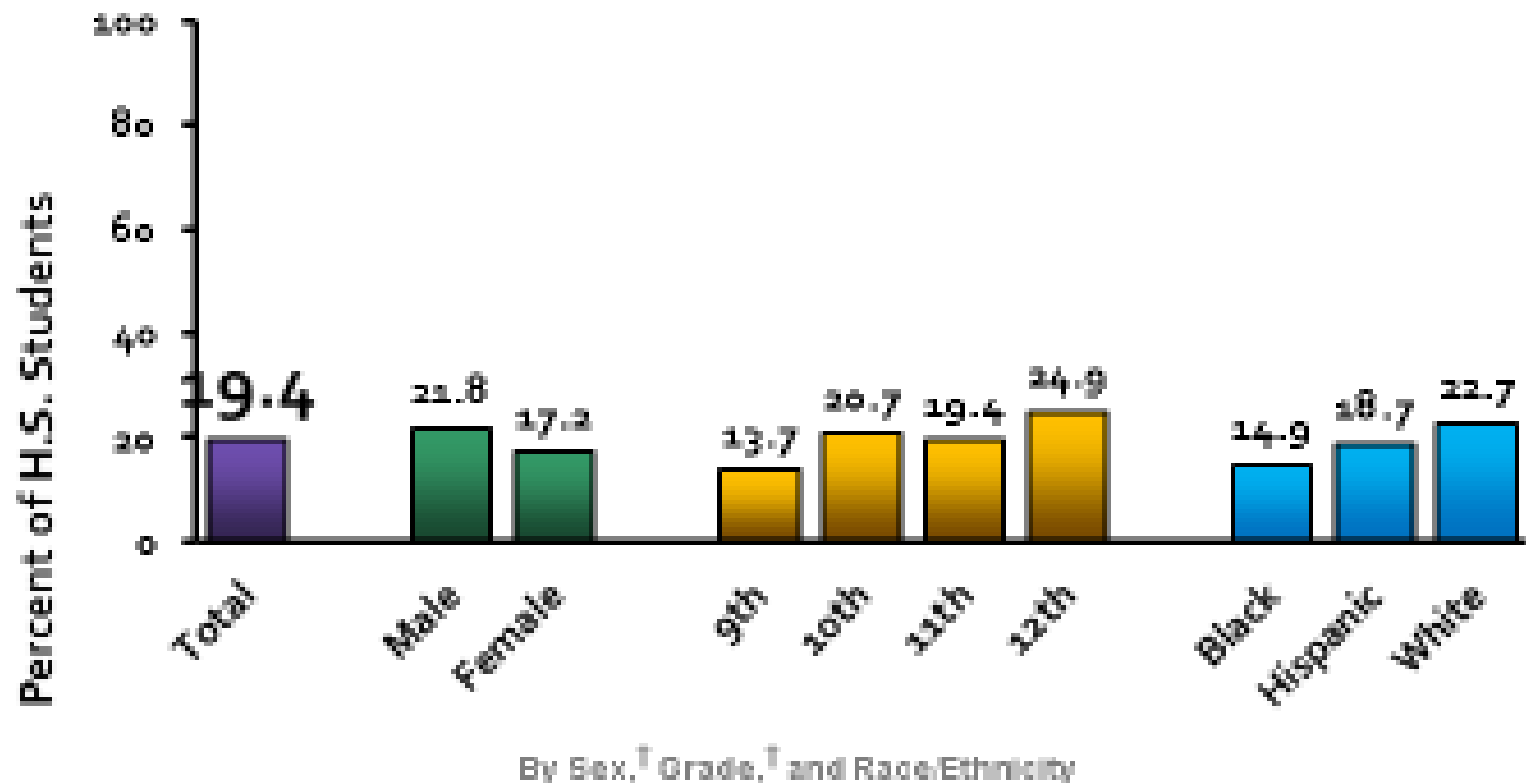
Percentage of Delaware High School Students Currently Using Electronic Vapor Products,* 2017



*Including e-cigarettes, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, and hookah pens [such as blu, NJOY, Vuse, MarkTen, Logic, Vapin Plus, eGo, and Halo], on at least 1 day during the 30 days before the survey

Source: Delaware Health & Social Services, Division of Public Health, Youth Risk Behavior Survey (YRBS), 1999-2017

Percentage of Delaware High School Students Who Currently Use Any Tobacco Products,* 2017



*On at least 1 day during the 30 days before the survey; includes cigarettes, cigars, little cigars, smokeless tobacco, and electronic devices or e-cigarettes

Source: Delaware Health & Social Services, Division of Public Health, Youth Risk Behavior Survey (YRBS), 1999-2017

National Vaping Trends Among Youth

Table 1. Prevalence of Nicotine Vaping among Adolescents, 2017–2019.*

Reporting Interval and Grade in School	Prevalence in 2017 (95% CI)	Prevalence in 2018 (95% CI)	Prevalence in 2019 (95% CI)	Change, 2018 to 2019 (95% CI)†
Past 30 days				
12th grade	11.0 (9.2–13.0)	20.9 (17.7–24.5)	25.4 (22.6–28.4)	4.5 (0.9–8.1)
10th grade	8.2 (6.6–10.2)	16.1 (14.0–18.6)	20.2 (17.8–22.8)	4.1 (0.9–7.2)
8th grade	3.5 (2.9–4.2)	6.1 (5.1–7.4)	9.0 (7.6–10.5)	2.8 (1.2–4.4)
Past 12 months				
12th grade	18.8 (16.5–21.4)	29.7 (26.1–33.6)	35.1 (31.8–38.6)	5.4 (1.1–9.6)
10th grade	15.8 (13.6–18.3)	24.7 (21.9–27.7)	31.1 (28.3–34.0)	6.4 (2.7–10.1)
8th grade	7.5 (6.6–8.5)	10.9 (9.4–12.6)	16.1 (14.1–18.2)	5.2 (2.8–7.6)
Ever				
12th grade	25.0 (22.4–27.7)	34.0 (30.3–38.0)	40.5 (37.3–43.8)	6.5 (2.3–10.7)
10th grade	21.4 (19.2–23.9)	28.6 (25.8–31.6)	36.4 (33.5–39.4)	7.7 (4.0–11.5)
8th grade	10.6 (9.5–11.8)	13.5 (11.8–15.3)	20.7 (18.5–23.1)	7.2 (4.6–9.9)
Daily‡				
12th grade	—	—	11.7 (9.8–14.0)	—
10th grade	—	—	6.9 (5.7–8.0)	—
8th grade	—	—	1.9 (1.4–2.5)	—

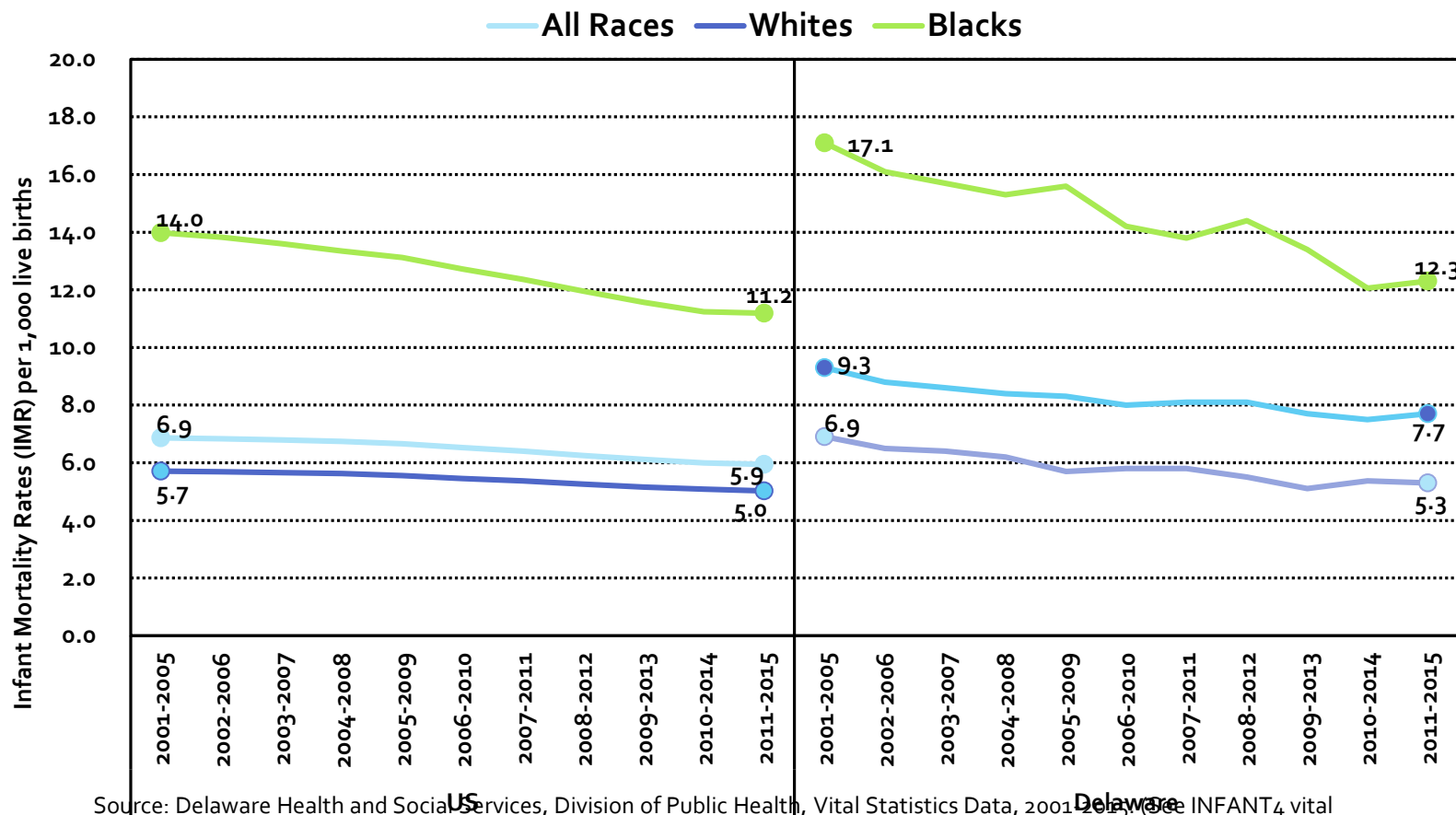
* In all years, increases in prevalence are significant at $P < 0.05$. The 95% confidence intervals (CI) have not been adjusted for multiple comparisons. Unweighted sample sizes vary slightly by outcome. In 12th grade, the range is from 4077 to 4310; in 10th grade, from 4420 to 4721; and in 8th grade, from 4382 to 4909. (For trends in cigarette smoking during the previous 30 days in 2018–2019, see the Supplementary Appendix.)

† Values may differ slightly from the difference between the 2019 and 2018 estimates because of rounding.

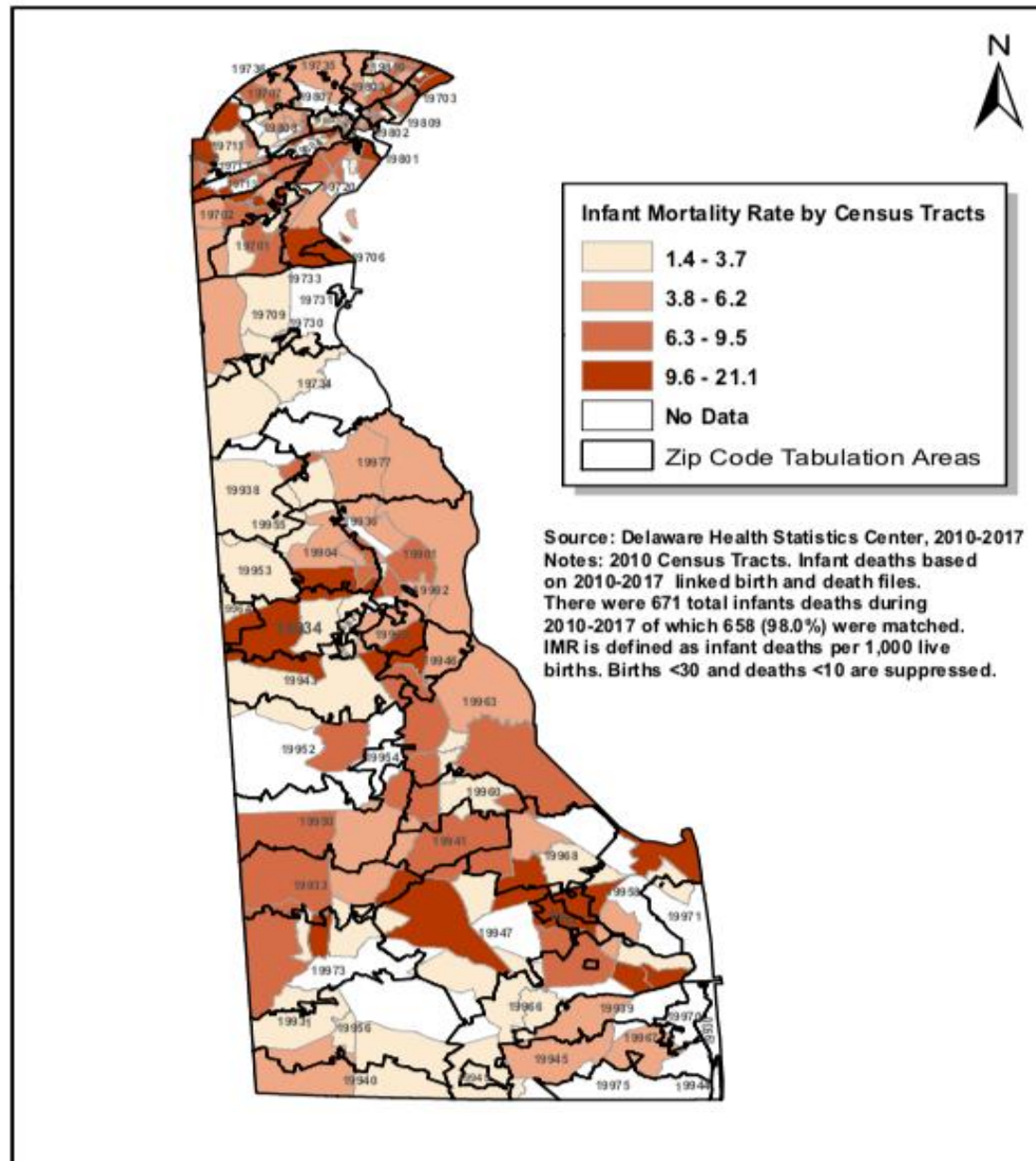
‡ Daily nicotine vaping was defined as vaping nicotine on 20 or more of the previous 30 days and was first assessed in 2019.

INFANT MORTALITY

Five-Year Infant Mortality Rates, 2001-2015



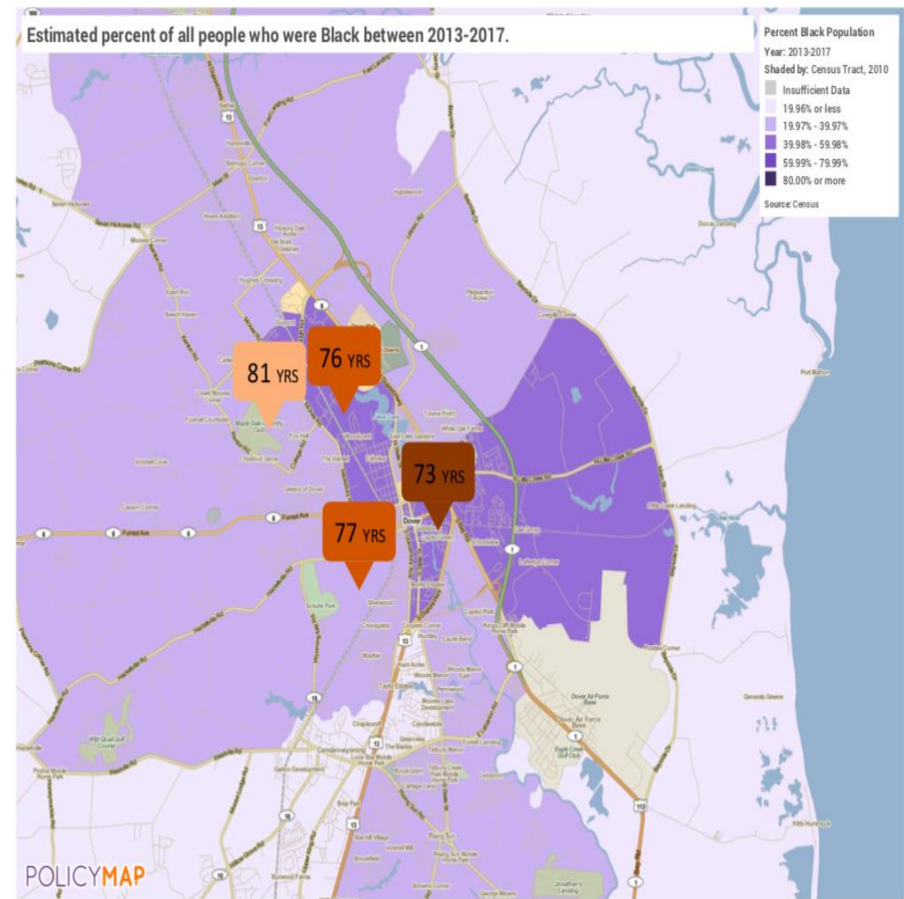
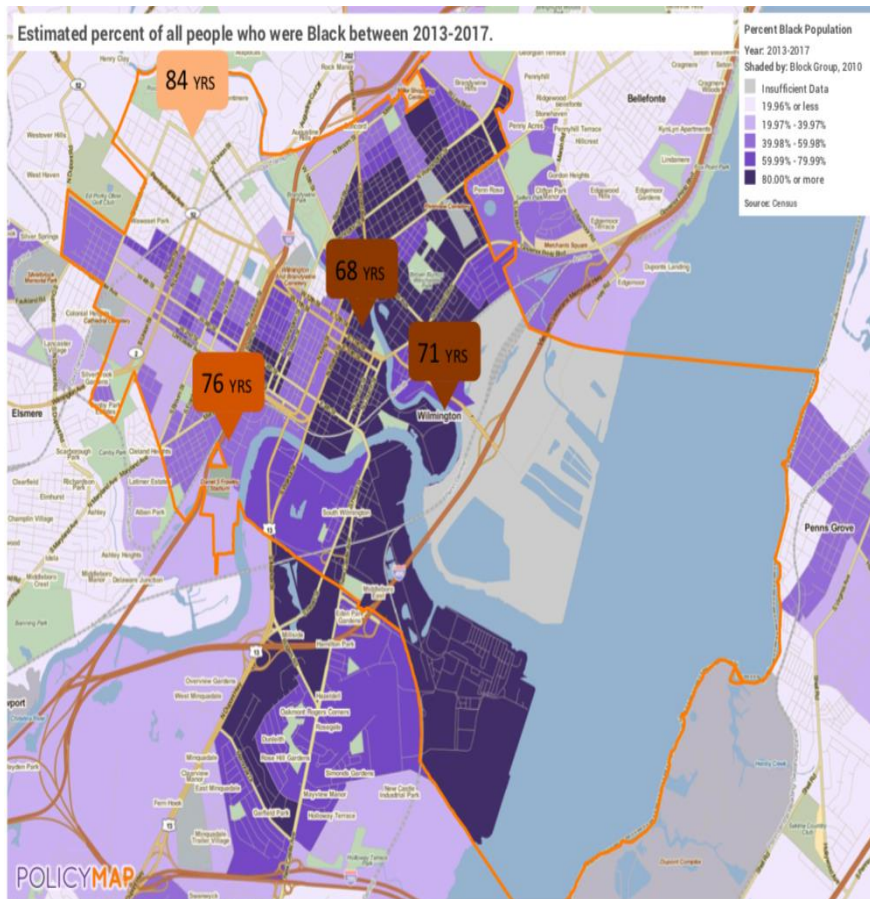
Infant Mortality Rates (IMR) in Delaware by Census Tracts, 2010-2017



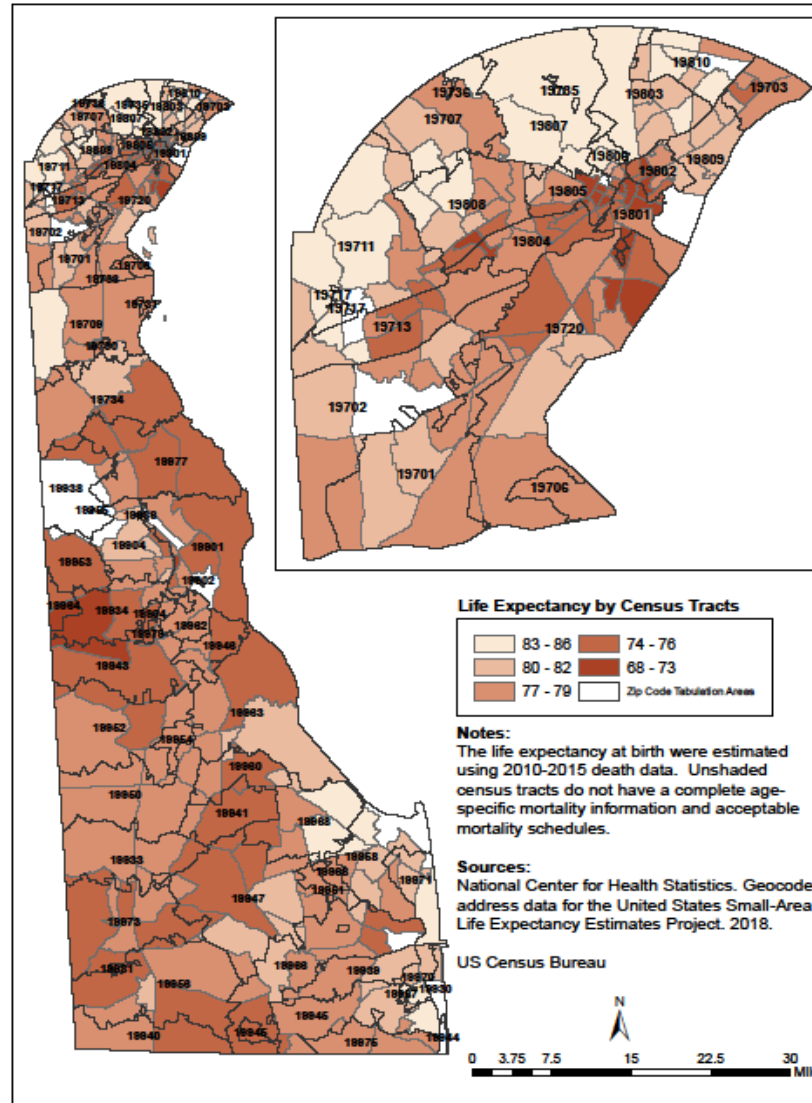
AMERICA'S HEALTH RANKINGS: SOCIAL DETERMINANTS OF HEALTH (SDOH)

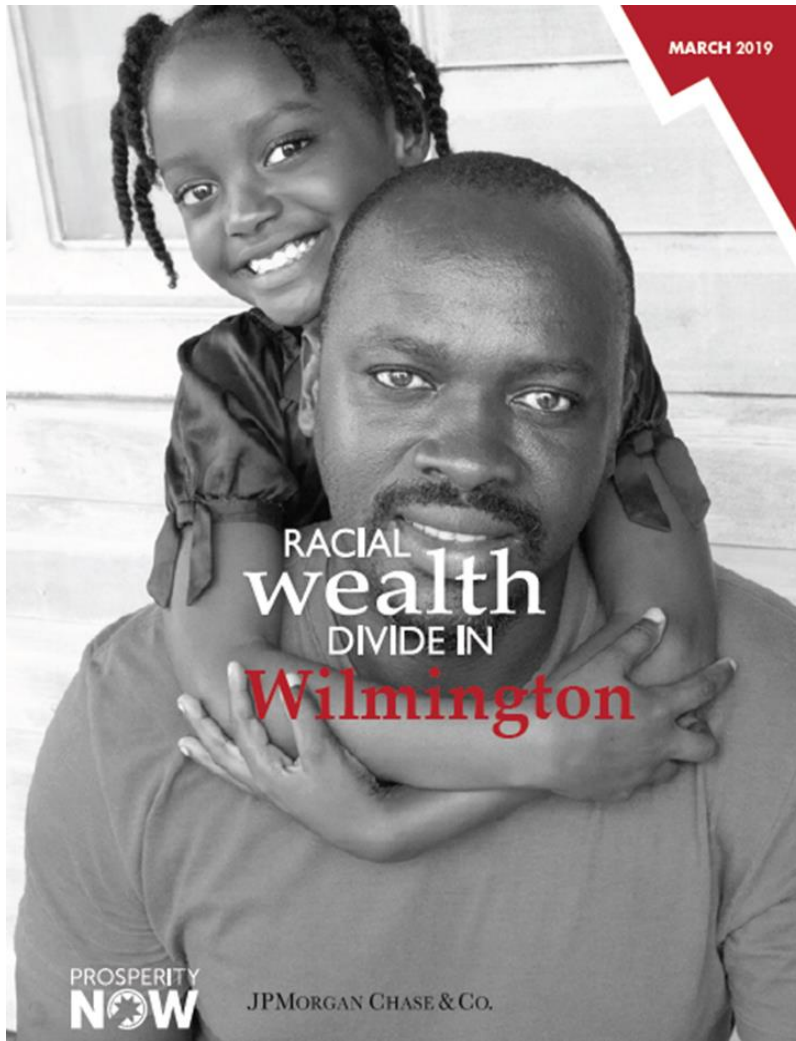
Measure	2018 Value	Rank
Violent Crime	45.3 offenses/100,000 pop	38
Disconnected Youth	14.3% of youth ages 16-24	41
Income inequality	0.481 (Gini Ratio)	41
Neighborhood Amenities	28.8% (% of children aged 0-17)	38
Supportive Neighborhoods	52.5% (% of children aged 0-17)	39
Underemployment Rate	9.7% (% of civilian workforce)	43
Unemployment Rate	4.8% (% of civilian workforce)	38

SNAPSHOTS OF WILMINGTON AND DOVER: % OF BLACK POPULATION AND LIFE EXPECTANCY

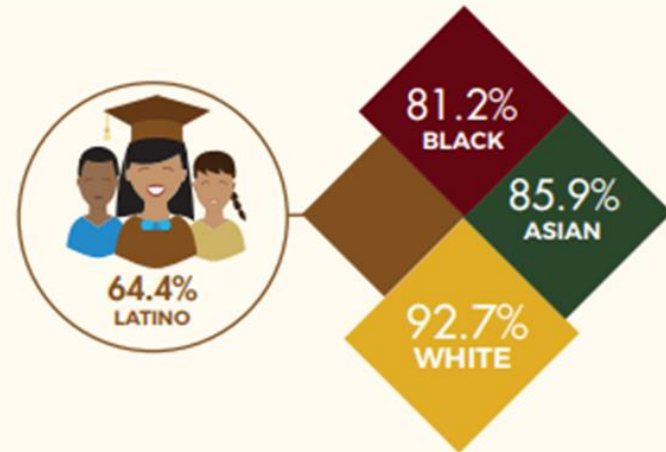


Life Expectancy at Birth by Census Tracts, Delaware





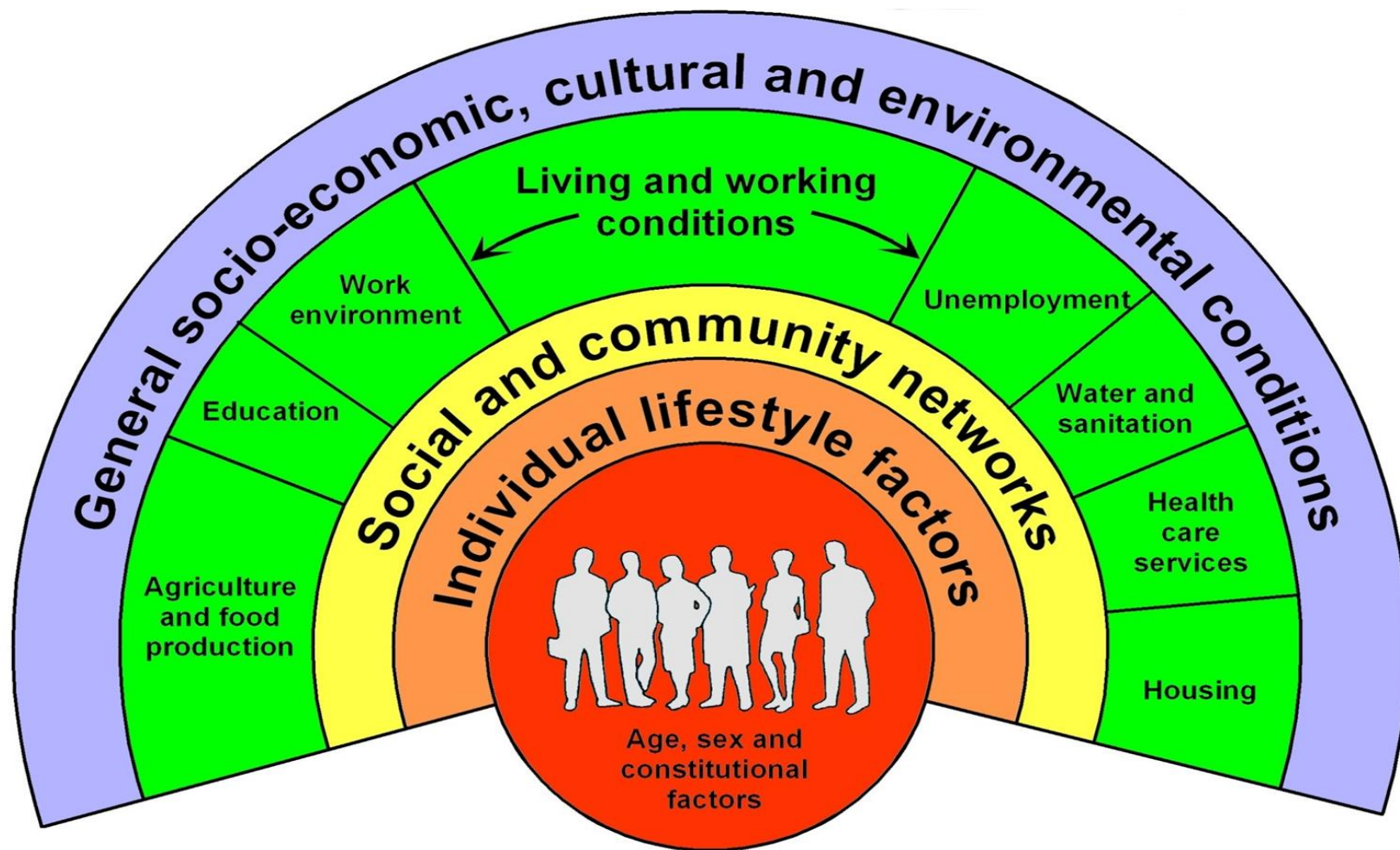
HIGH SCHOOL DEGREE OR HIGHER



Over 35% of Latinos do not have at least a high school degree

MEDIAN HOUSEHOLD INCOME





Source: Dahlgren and Whitehead, 1991

- School-Based Programs to Increase Physical Activity
- School-Based Violence Prevention
- Safe Routes to School
- Motorcycle Injury Prevention
- Tobacco Control Interventions
- Access to Clean Syringes
- Pricing Strategies for Alcohol Products
- Multi-Component Worksite Obesity Prevention

Counseling
and Education

Clinical Interventions

Long Lasting
Protective Interventions



Changing the Context

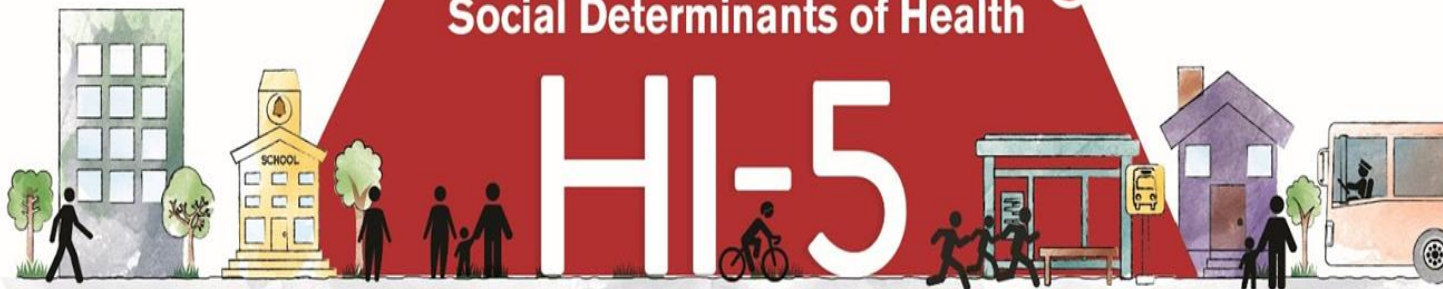
Making the healthy choice the easy choice

- Early Childhood Education
- Clean Diesel Bus Fleets
- Public Transportation System
- Home Improvement Loans and Grants
- Earned Income Tax Credits
- Water Fluoridation



Social Determinants of Health

HI-5



HEALTH **IMPACT** IN 5 YEARS

health happens **here**

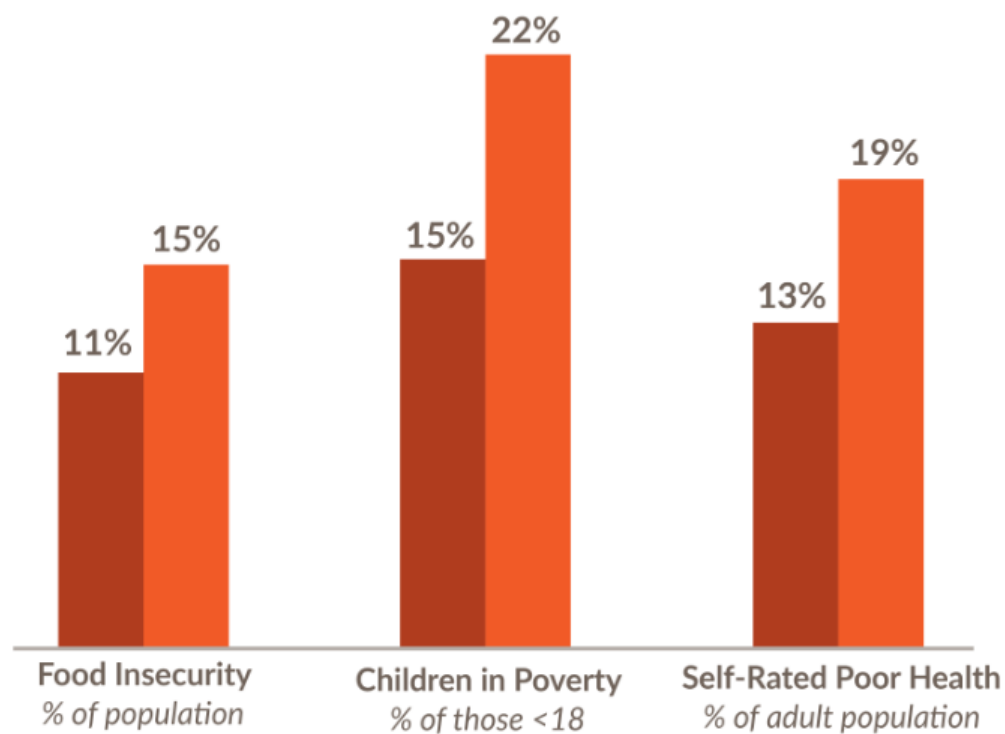


SDOH: HOUSING

Health Factors and Outcomes in Top and Bottom Performing Counties for Severe Housing Cost Burden

Severe Housing Cost Burden

- Top Performing (10%) Counties
- Bottom Performing (10%) Counties



Shortage of Affordable Rental Homes in Delaware

KEY
FACTS

27,522
OR
27%

Renter households that are
extremely low income

\$24,600

Maximum income for 4-person
extremely low income
household (state level)

-17,114

Shortage of rental homes
affordable and available for
extremely low income renters

\$45,439

Annual household income
needed to afford a two-bedroom
rental home at HUD's Fair
Market Rent.

70%

Percent of extremely low
income renter households with
severe cost burden

Across counties, every 10% increase in the share of households severely cost burdened is linked to...



29,000

more children
in poverty



86,000

more people who
are food insecure



84,000

more people in fair or
poor health



[L. Taylor, 2018: https://www.healthaffairs.org/doi/10.1377/hpb20180313.396577/full/](https://www.healthaffairs.org/doi/10.1377/hpb20180313.396577/full/)

Adapted by the author from Gibson et al. 2011, Sandel et al. 2018, Maqbool et al. 2015, and Braveman et al. 2011.



INNOVATION FUND

UPDATE & PATH FORWARD

- The FY 20 budget included the \$1 million for the Innovation Fund proposed by HFAC.
- Division of Public Health Block Grant review committee will solicit and review applications for projects that fit categories proposed by HFAC.
 - DPH will report back to HFAC annually on funded projects.
- Applications will be requested starting in January and will be evaluated and funded on a rolling basis.



PROPOSED PRIORITIES

- Vaping Prevention
- Social Determinants of Health
 - Focus on housing access
- School Health
 - Physical Activity
 - Asthma
 - Vision
 - Mental Health
- Increasing Dental Access
- Reducing obesity and increasing physical activity throughout the lifespan





PROCESS FOR DEVELOPING FY 21 RECOMMENDATIONS

FY 21 TIMELINE

- September
 - **9/26- Meeting #1**
 - Overview of settlement and budget
 - Review of applications and recommendation scenarios
- October
 - **10/16- Meeting #2**
 - TBD
 - **10/30- Meeting #3**
 - TBD
 - Vote on final recommendations
- November
 - **11/15- Recommendations due to Governor Carney and the General Assembly**
- Questions?





PUBLIC COMMENT

NEXT PUBLIC MEETINGS:

- Wednesday, October 16, 2019
 - 2:00 pm – 4:00 pm
 - Chapel, DHSS Campus, 1901 N. DuPont Highway
- Wednesday, October 30, 2019
 - 2:00 pm – 4:00 pm
 - Chapel, DHSS Campus, 1901 N. DuPont Highway





THANK YOU