Systems for Action

Systems and Services Research to Build a Culture of Health



Model Simulation Techniques to Estimate the Cost of Foundational Public Health Services (FPHS)

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Toward a deeper understanding of costs & returns in public health

2012 Institute of Medicine Recommendations

Identify the components & costs of a minimum package of

public health services

- Foundational capabilities
- Array of Basic programs
- Implement a national chart of accounts for tracking spending & flow of funds
- Expand research on costs & effects of public health delivery



Institute of Medicine. For the Public's Health: Investing in a Healthier Future. Washington, DC: National Academies Press; 2012.

Defining What to Cost: The Public Health Package

- Washington State's Foundational Public Health Services
- Ohio's Public Health Futures Committee: Minimum Package of Services
- Colorado's Core Public Health Services



National Workgroup on Foundational Public Health Capabilities – Public Health Leadership Forum (PHLF)

The National Workgroup developed definitions of foundational public health capabilities, specified in the *Public Health Leadership Forum's* Articulation of Foundational Capabilities & Foundational Areas (funded by RWJF, facilitated by RESOLVE):

http://www.resolv.org/site-healthleadershipforum/

FPHS Categories articulated and defined (V1)

DEFINITIONS

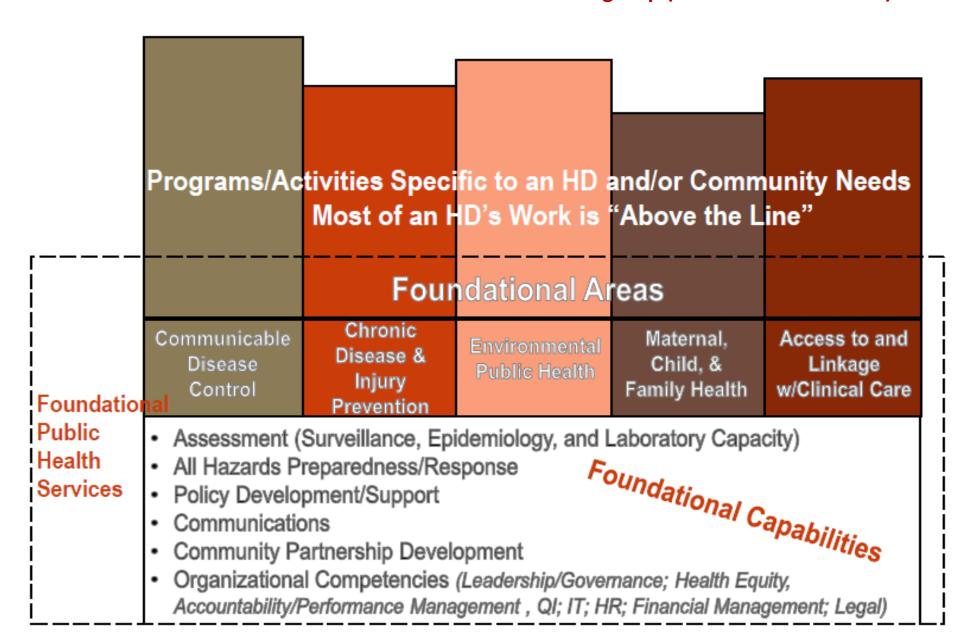
Foundational Capabilities (FC): Cross-cutting skills that need to be present in state & local health departments **everywhere** for the health system to work **anywhere**. Needed to support the foundational areas, & other programs & activities, key to protecting community health & achieving equitable health outcomes.

Foundational Areas (FA): substantive areas of expertise or programspecific activities in all state & local health departments essential to protect the community's health.

Foundational Public Health Services (FPHS): Suite of skills, programs, & activities that must be available in state & local health departments system-wide; includes foundational capabilities & areas.

Defining what to cost

RESOLVE/Articulation of Definitions
Workgroup (as of November 2014)



FPHS CE Workgroup & Research Team

Workgroup on Foundational Public Health Services (FPHS) Cost Estimation (CE) convened to develop a methodology for estimating the resources required by governmental public health agencies to implement foundational public health services. Released a report on recommended methodology:

Estimating the Costs of Foundational Public Health Capabilities: A Recommended Methodology

Accessible at http://works.bepress.com/glen_mays/128/

- Pilot-Tested Methodology with KHDA Finance Workgroup comprised of 6
 Kentucky Health Departments (June-October 2014)
- Pre-Tested web-based survey questionnaire using FPHS V2 definitions with selected Ohio LHDs from AOHC (February 2015-May 2015).
- Ongoing national survey of LHDs in selected states (July 2015-present)

DATA COLLECTION INSTRUMENT: Basic Process Flow

- Adapted & modified Washington PBRN Delivery and Cost Studies (DACS)
 FPHS CE data-collection instrument.
- Questionnaire is divided into six sections:
 - 1) LHD workforce composition (# of employees per category)
 - 2) LHD labor resource use (average hrs/wk per occupational category)
 - 3) Salary and Indirects (wage rate scale: min-ave-max)
 - 4) Total **Annual Non-Labor** Costs (per FPHS category)
 - 5) **Needs assessment** (current relative to full attainment of projected need)
 - 6) Scenario costing of Community Health Assessment (Anchoring Vignette)
- Participating FPHS CE respondents receive a <u>unique link</u> to access questionnaire. Supporting documents include <u>Articulation of FPHS V2</u>
 <u>Definitions</u> + <u>Excel version of survey instrument</u> + <u>survey instructions</u>.
- FPHS CE respondent answers survey based on understanding of each FPHS capability and area as defined and articulated.

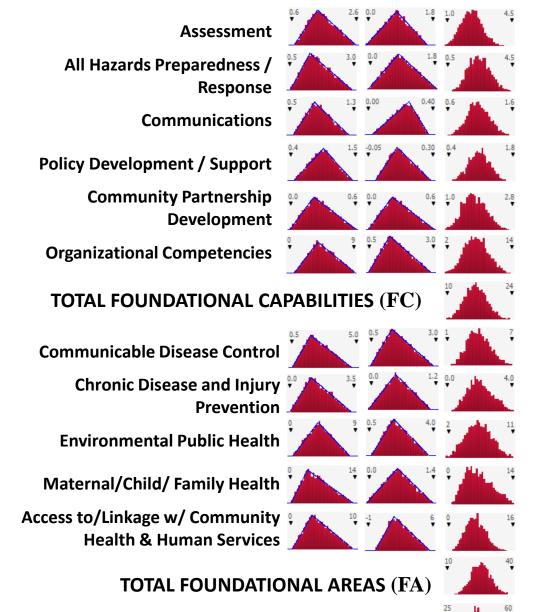
Development of FPHS CE Methodology

- Given inherent burden of complex survey, goal of efficiently selfadministered to capture estimates that account for variation in costs due to the dynamic nature of public health.
- Pragmatic Empirical approach: Simulation modelling approach to estimate cost of implementing FPHS by modeling variation (i.e. uncertainty) associated with collected cost data
- Generate probability distributions of costs the range of all possible cost values & the likelihood of their occurrence (versus point estimate).
 - Input costs distribution → Output value distribution
 - Distribution of output values calculated from all possible combinations ('scenarios'=iterations) of input costs.
 - Since probability distributions can be graphed, useful as a analytical, decision-making tool & planning aid.

Illustrating the Model Simulation Approach: Current Per Capita Costs

In summary, the FPHS CE Methodology produces a **cost distribution** (as opposed to point estimates) or each Foundational Capability (FC) & Foundational Area (FA) specified in the National FPHS Definitions_V2 document ...and for separate estimates of "current" & "projected/need" costs

- Current: cost of resources currently used to produce FCs & FAs
- Projected/Need: cost of resources estimated to be required to fully meet FC & FA definitions, based on current levels of attainment.



Labor Non-Labor Total

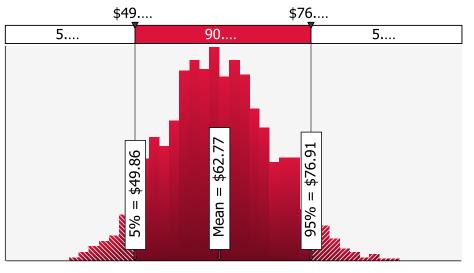
Total Foundational Public Health Services (FPHS) Costs = $\sum FC + \sum FA$

Model Simulation Results from FPHS CE Pilot Sample Survey Sites

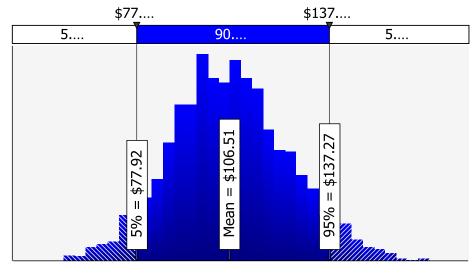
(Population weighted per capita cost estimates from pilot survey of 6 LHDs in Kentucky & 8 LHDs in Ohio and preliminary results incorporating data from Washington DACS)

Total Per Capita Costs of Foundational Public Health Services (FPHS)

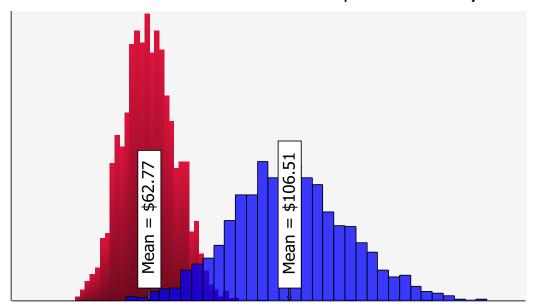
(Full Combined Sample: Current Per Capita Costs in Red – Projected/Need in Blue)



Current Per Capita Costs (\$) – Full Sample



Per Capita Cost of Projected / Need (\$) - Full Sample

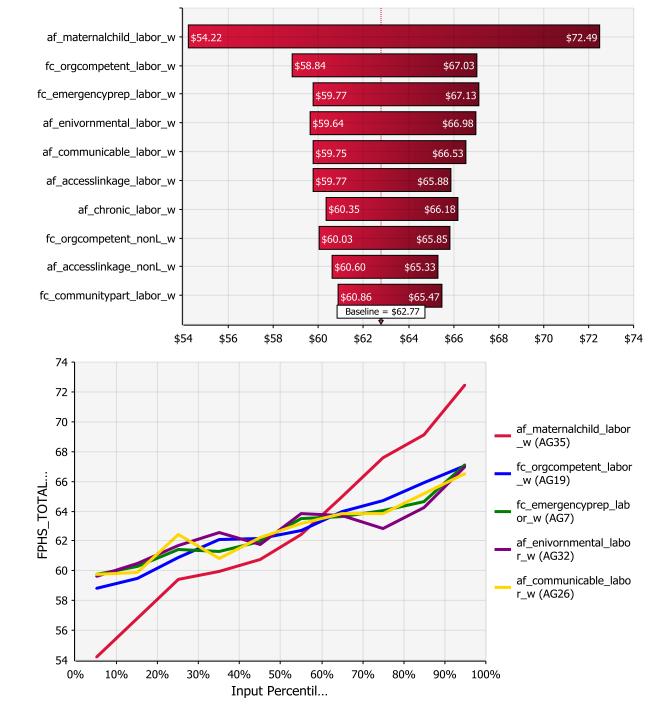


Graph Overlay of Current & Projected / Need – Full Sample

"Tornado Chart"

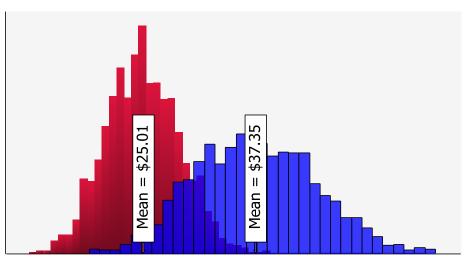
– inputs ranked
by effect on
output mean (i.e.
total per capita
FPHS costs)

"Spider Graph" – change in output mean across range of input values (i.e. total per capita FPHS costs)

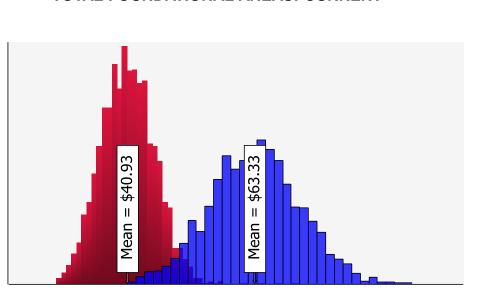


Total Per Capita Costs of Foundational Public Health Services (FPHS)

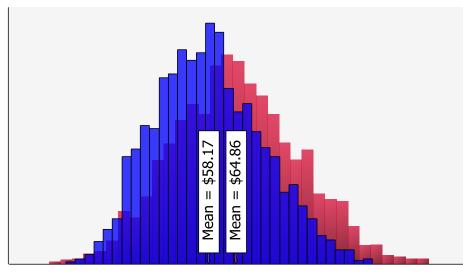
(**Between** States: Graph Overlay of **Kentucky in Blue / Ohio in Red**)



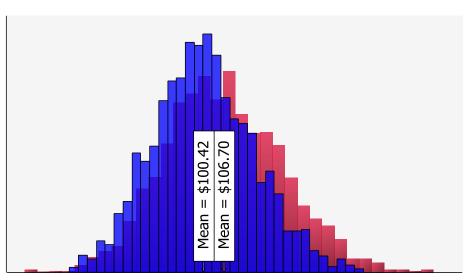
TOTAL FOUNDATIONAL AREAS: CURRENT



TOTAL FPHS COSTS: CURRENT



TOTAL FOUNDATIONAL AREAS: PROJECTED/NEED



TOTAL FPHS COSTS: PROJECTED/NEED

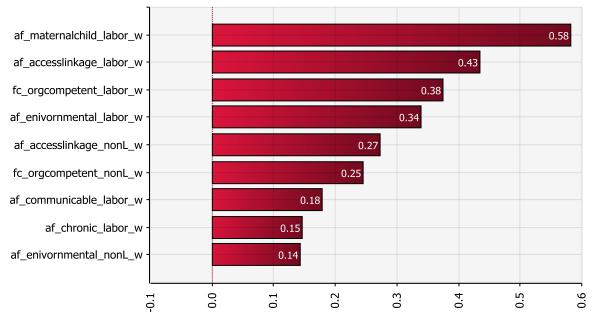
SENSITIVITY ANALYSIS (Standardized Regression Coefficients)

af_maternalchild_labor

Kentucky



Ohio

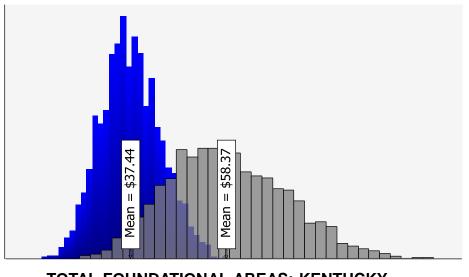


Current Per Capita Total FPHS Costs

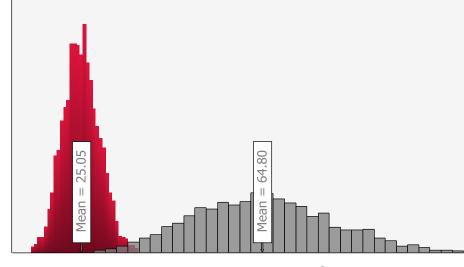
0.67

Total Per Capita Costs of Foundational Public Health Services (FPHS)

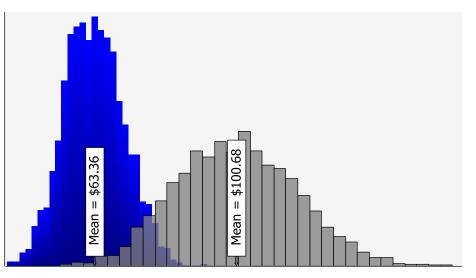
(Within State: Current vs Projected/Need Graph Overlay in Kentucky & Ohio)



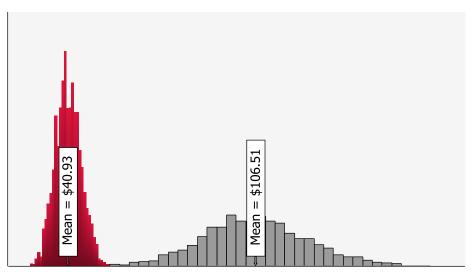
TOTAL FOUNDATIONAL AREAS: KENTUCKY



TOTAL FOUNDATIONAL AREAS: OHIO



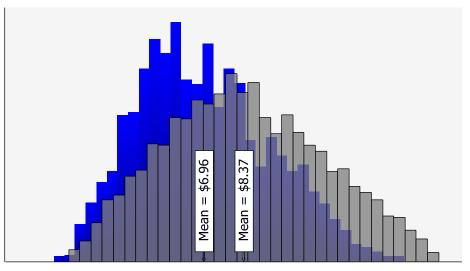
TOTAL FPHS COSTS: KENTUCKY



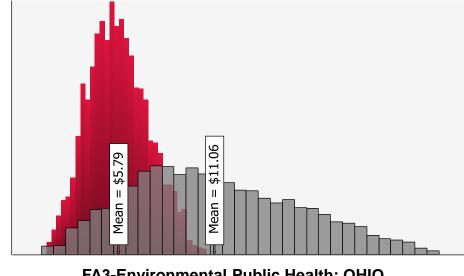
TOTAL FPHS COSTS: OHIO

Per Capita Costs of Foundational Areas By Sample Site

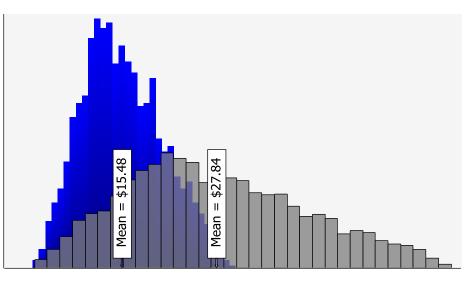
(Within State: Current vs Projected/Need Graph Overlay in Kentucky & Ohio)



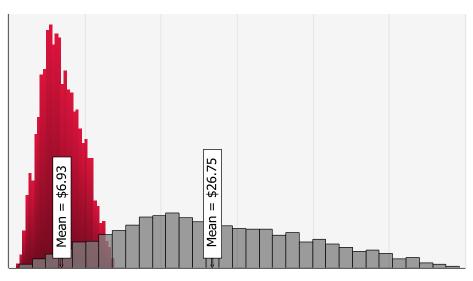
FA3-Environmental Public Health: KENTUCKY



FA3-Environmental Public Health: OHIO



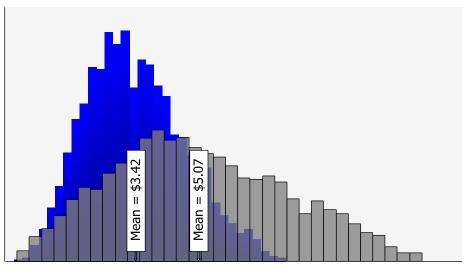
FA4-Maternal/Child/Family Health: KENTUCKY



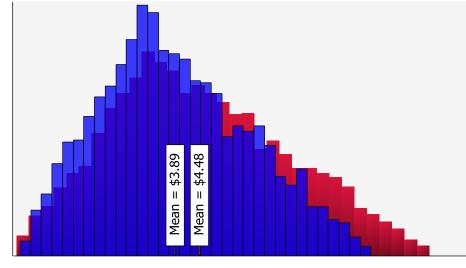
FA4-Maternal/Child/Family Health: OHIO

Per Capita Costs of Foundational Capabilities in each Sample Site

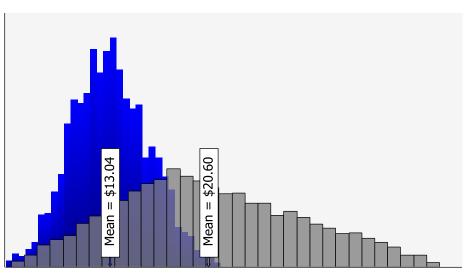
(Within State: Current vs Projected/Need Graph Overlay in Kentucky & Ohio)



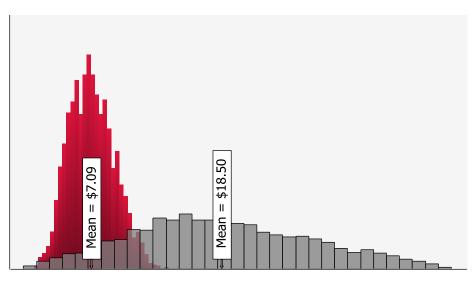
FC5-Community Partnership: KENTUCKY



FC5-Community Partnership: OHIO

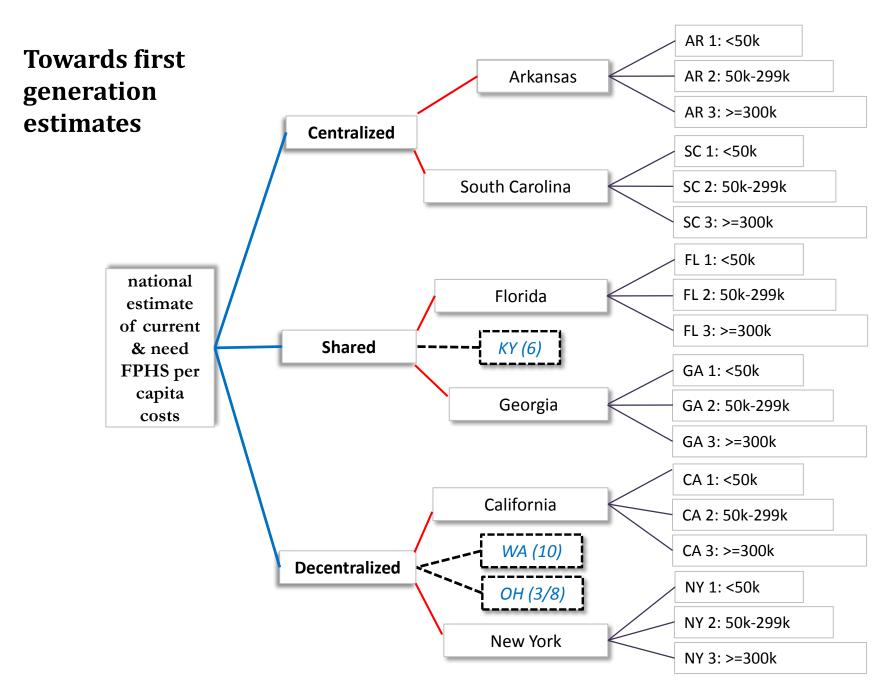


FC6-Organizational Competencies: KENTUCKY



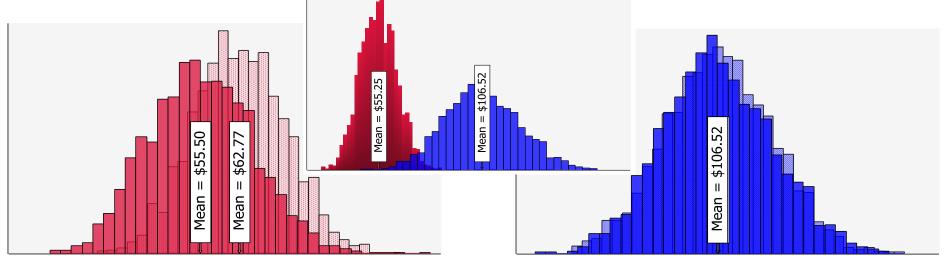
FC6-Organizational Competencies: OHIO

Strata 2: Population of Jurisdiction



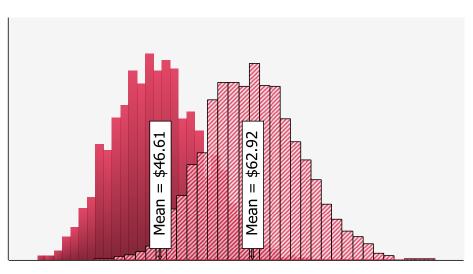
Total FPHS – Pilot KY+OH with Washington DACS (10 LHJs)

(<u>Combined & separate</u>: Current Per Capita Costs in Red – Projected/Need in Blue)

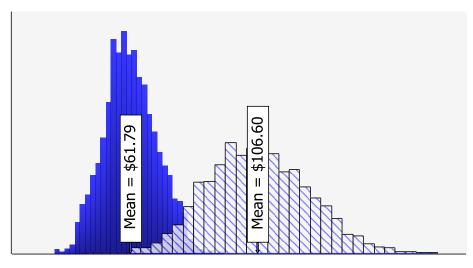


Current Per Capita Costs (\$) - Full Sample

Per Capita Cost of Projected / Need (\$) - Full Sample



Current Costs (WA DACS vs. KY-OH Pilot/)



Projected Need (WA DACS vs. KY-OH Pilot/)

Towards first-generation FPHS cost estimates...

- Part of the critical step outlined in 2012 IOM Report
- Model simulation results show both the variation across FPHS categories and the substantial gap between current costs of FPHS implementation and the projected costs to fully meet FPHS needs.
- Implications for D&I Research: This study demonstrates the feasibility and value of a hybrid cost-estimation methodology that combines survey-based cost allocation approaches with model simulation techniques to quantify the geographic variation of costs in implementing public health services
 - Includes the data-collection instrument and model simulation approach for analytical, decision-making, and policy related purposes.

Questions?



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