The ability to track Ohio’s progress in improving health value — the relationship between health outcomes and health costs — is critical to evaluating efforts aimed at improving the health of Ohioans.

As a first step in identifying a meaningful set of indicators for tracking the health of Ohioans, HPIO has created a health outcomes and costs dashboard (see box above).

Next, HPIO is convening a multi-stakeholder health measurement advisory group to review, prioritize and select a streamlined and standardized set of health measures that reflect the many factors that impact population health outcomes and health care costs. This comprehensive set of indicators may include categories such as health care system performance (access, quality and utilization, patient outcomes), public health system performance, social and economic environment, physical environment, health behaviors and health equity. A refined and expanded dashboard will include the measured selected by the advisory group. If you are interested in learning more about this health measurement initiative, please contact Reem Aly at raly@healthpolicyohio.org.

**Pathway to improved health value: A conceptual framework**

<table>
<thead>
<tr>
<th>Systems &amp; environments that affect health</th>
<th>Improvements in health value (in order of importance)</th>
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<td>Equitable, effective and efficient systems</td>
<td>• Health behaviors</td>
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<td>Optimal environments</td>
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<td>Cross-cutting factors</td>
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**HPIO health outcomes and costs dashboard**

One of the primary goals of health policy is to improve health outcomes while also controlling health care costs. The relationship between health outcomes and costs is referred to as “health care value.” HPIO has developed a health outcomes and costs dashboard to track Ohio’s progress in improving health value over time.

This dashboard is a concise, easy-to-use tool that provides policymakers and other stakeholders with an annual snapshot of health value in Ohio relative to other states. A high-level summary of how Ohio ranks nationally on 10 population health outcomes and three health care cost outcomes, the dashboard draws upon publicly available data from national scorecards and rankings.
HPIO works to inform Ohioans about coverage changes in 2014

Fall forums
Health coverage options for Ohioans, especially those without access to affordable employer-sponsored health insurance, will change significantly in 2014. Open enrollment for Ohio’s federally facilitated marketplace begins Oct. 1, 2013, for coverage beginning Jan. 1, 2014. Whether or not Ohio expands Medicaid, the process for enrolling in Medicaid will change dramatically, with the introduction of an online eligibility and enrollment system, also in October 2013.

To explain these new coverage options, HPIO is hosting forums in Columbus (Oct. 7) and Akron (Nov. 4) to explore questions such as:

• What are the new coverage options and who is eligible?
• What consumer assistance programs are in place to help consumers?
• What messaging and outreach strategies work?
• How can organizations get involved in this work?

The keynote speaker for the Columbus event is Jocelyn A. Guyer, Director, Manatt Health Solutions.

Guyer provides policy expertise, strategic advice and technical support to states, foundations, and a broad array of other clients on implementation of the Affordable Care Act, Medicaid and the Children’s Health Insurance Program.

The keynote speaker for the Akron forum is Tricia Brooks, Senior Fellow, Center for Children and Families, Georgetown University Health Policy Institute. Brooks works on policy and implementation issues affecting coverage for children and families with a focus on children who are eligible but not enrolled in Medicaid and the Children’s Health Insurance Program (CHIP).

Partnering with Philanthropy Ohio
In anticipation of new health insurance options for Ohioans in 2014, and open enrollment beginning Oct. 1, the Philanthropy Ohio Health Initiative (POHI) and HPIO are convening stakeholders throughout the summer to discuss outreach, education and consumer assistance issues.

The purpose of this new collaborative, titled the Ohio Network for Health Coverage and Enrollment (ONCE), is to ensure that outreach, education and enrollment efforts in Ohio are coordinated and effective so that uninsured Ohioans understand and enroll in health care coverage.

This diverse group with varied perspectives is engaging in strategic planning, building partnerships and providing guidance, advice and leadership for Ohio efforts. HPIO and POHI are leading ONCE through the first phase of the work, which will result in a strategic work plan by the end of Summer 2013.

Telehealth Leadership Summit spurs dialogue
About 70 leaders from a variety of health sectors from across the state gathered July 16 at HPIO’s Telehealth Leadership Summit. The purpose of the day-long event was for stakeholders to identify realistic reforms, policy changes or guidance that can facilitate implementation of telehealth in Ohio.

After engaging in intensive workgroup policy sessions related to telehealth, small groups reported on areas where they see challenges and opportunities for telehealth implementation. HPIO will summarize the findings and recommendations from the summit in a publication to be shared widely with stakeholders and policymakers in the coming months.

Workshops co-hosted by HPIO assist Ohio health and wellness organizations
HPIO and the Ohio Department of Health co-hosted two days of workshops on July 18 and 19 sponsored by the National Network of Public Health Institutes and the Association of State and Territorial Health Organizations.

On July 18, Robert Ogilvie of ChangeLab Solutions led a training on shared-use agreements. Ogilvie described joint use agreements as valuable tools to build healthy communities. By “unlocking the gates” on schools and other publicly funded facilities for after-hours use, agreements for shared use can significantly increase people’s opportunities for free and low cost physical activity.

On July 19, Ruth Wageman, Director of ReThink Health and a psychology professor at Harvard and Karen Minyard, Executive Director of the Georgia Health Policy Center led a training on collective impact, the concept that every sector needs to be involved in creating healthier places to live. That training was combined with a workgroup meeting for ODH’s State Health Improvement Plan Chronic Disease workgroup.