How can academic health departments (AHDs) play a role in health reform? That was the question tackled by the AHD Learning Community on Wednesday, September 25, 2013 in a special meeting focused on opportunities for the public health community related to the Affordable Care Act (ACA). Specifically, the more than 25 public health professionals who participated in this meeting considered two key questions:

- How can AHDs assist in the education and training of public health workers to better inform vulnerable populations about new health insurance marketplaces?
- How can AHDs develop strategies for becoming “players” with Accountable Care Organizations and others at the community level who need to integrate population health into healthcare programs?

Facilitated by Kathy Miner, PhD, Associate Dean for Applied Public Health at Emory University’s Rollins School of Public Health, meeting discussion highlighted the following points:

- Governmental responses to health reform vary from state to state, and health departments may lack clear guidance, contributing to confusion and uncertainty about the extent to which they can engage in health reform efforts. Such political factors may prevent organizations from becoming active participants in health reform efforts, regardless of their desire to get involved, especially in states not supportive of the ACA. Academic institutions are also not exempt from these political concerns, and this reality may limit practice/academic collaboration in activities related to the ACA.

- Health departments may not currently have a role in educating vulnerable populations about health insurance or may walk a fine line between educating people without recommending health insurance. In theory, academic institutions may have more freedom to get involved, but this is again a fine line because they do not want to be seen as trying to create policy. It does not seem that health departments and public health academic institutions are very involved in developing health insurance marketplaces, nor do those who are involved appear to be reaching out to the public health community.

- One health department that is engaged in efforts around health insurance marketplaces indicated that its activities include ensuring staff have the information needed to answer questions, directing people to resources, publishing articles and editorials in newspapers, working with the Chamber of Commerce, providing information to other organizations to share, and pushing out information through social media.

- At present, much of the attention around health reform is focused on the health insurance marketplaces, but there is much more to the ACA. In addition to informing the public about the marketplaces, health department staff should also be able to provide information about preventive services and other benefits and should be thinking about how public health can add value in health reform implementation. Public health cannot wait for opportunities to be offered, but has to reach out and create them.
Time to plan and get organized is needed for public health to have an effective role in health reform. Where public health is engaged, health reform activities may be too new for much collaboration between practice and academia to be occurring. Health departments may still be trying to figure out what they need to be doing and may not yet be in the position to reach out to academic partners for help, or even to know what help would be beneficial. Health department staff may also lack the time to reach out to academia due to their workload. Academia may have little communication with health departments related to the ACA and see few opportunities for collaboration. Conversely, when health departments invite academia to collaborate, academia may not always respond.

The development of an Accountable Care Community (ACC) in Akron, OH, led by the Austen BioInnovation Institute in Akron, is one clear example of multi-sector collaboration to improve community health. This ACC involves public health practice, academia, healthcare organizations, the business community, and others working together to transform health.

Health reform offers a significant opportunity for change. There is an opportunity for public health to serve as a thought leader and convener to bring groups together to address health issues, and both health departments and academia have a role to play in improving community health. Leadership, a collaborative environment, and a willingness to take risks and step outside your comfort zone are important factors in moving from ideas to action.

Public health professionals are aware of the need to be engaged with health reform and to engage their colleagues and communities, but are not always aware of the opportunities to get involved or how they might share those opportunities. Having a way to share resources, experiences, and opportunities around health reform would be helpful. If public health does not engage in health reform in a more active way soon, it may miss the chance to do so.

What do you think? Is there a role for AHDs or other models of public health practice/academic collaboration in health reform? What are the opportunities, and how do we ensure a place for public health at the table? How is your organization involved? Share your thoughts with the AHD Learning Community and others by leaving a comment below or contacting Kathleen Amos. Your feedback will help determine next steps in addressing this issue.