Identifying Technical and Adaptive Challenges of the ACA for State and Local Stakeholders
Technical vs. Adaptive* Challenges

Technical Challenges
• Ready made solution exists
• Someone has *The Answer*
• Standard Operating Procedures (SOPs)
• Even if they require intense skills, some expert knows exactly what to do...
• Examples
  – Building a hospital
  – Fixing a broken computer
  – Brain surgery

Adaptive Challenges
• Never solved issue
• Perhaps new, never seen before
• No one’s got *The Answer*
• Must be solved by collaboration
• Examples
  – Poverty
  – Reforming public education
  – Health reform

*Adaptive challenges is a concept by Ron Heifetz, Kennedy School of Government
Adaptive vs. Technical Problems*

<table>
<thead>
<tr>
<th>Type</th>
<th>Problem Definition</th>
<th>Solution and Implementation</th>
<th>Kind of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type I</td>
<td>Clear</td>
<td>Clear</td>
<td>Technical</td>
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<td>Type II</td>
<td>Clear</td>
<td>Requires Learning</td>
<td>Technical and Adaptive</td>
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<tr>
<td>Type III</td>
<td>Requires Learning</td>
<td>Requires Learning</td>
<td>Adaptive</td>
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</tbody>
</table>

* Leadership without Easy Answers, Ronald A. Heifetz, 1994
Process

- Request for Letters of Interest
- Telephone Assessment Interview
- Background Research
- Document Review
- Health Reform Work Group Input
- On-site Strategic Consultation
- Team Debrief on Site Visits
- Think Session on Cross-Cutting Themes
- Report on Consultations & Symposium
15 Health Reform Strategic Consultations

- Academy of Independent Pharmacy
- Board of Regents of the University System of Georgia
- BrownRichards & Associates, Inc.
- Community Health Works
- Division of Aging Services, Georgia Department of Human Services
- Effingham Hospital
- Georgia Association of Community Service Boards
- Georgia Dental Association
- Georgia Free Clinic Network
  - Coastal Medical Access Project
  - Good Samaritan Health & Wellness Center
  - Troup Cares Network
- Georgia Nurses Association
- Laurens County Health Department
- Meriwether County Health Department
- Primary Care Practice, Piedmont Physicians Group
- Primary Care of Southwest Georgia, Inc.
- Richmond County Board of Health
Strategic Health Reform Questions
(Examples)

• The state’s aging network’s role
• Impact on Critical Access Hospitals
• Impact on expanding access to community mental health services
• How dentists will be affected as small business owners
• Impact on number and utilization of Nurse Practitioners
• Impact on rural free clinics
• Impact on primary care services in local public health
• Impact on independent community pharmacy
• Impact on primary care practitioners in the private sector
• Impact on demand for FQHC services
• Do we qualify for a small business tax credit
Strategic Actions
(Examples)

• Plan for impact of CLASS act on the need for service providers
• Plan for volume of Medicare inquiries
• Take advantage of community grants
• Commitment to a rehabilitative model for behavioral health care
• Pursue participation in national decision-making
• Analyze workforce demand
• Expand patient navigator role
• Educate community and employers about health reform
• Influence state design of maternal-infant home visiting grant
• Help shape regulation
• Build local partnerships
• Develop “Go Live” timeline plan
• Engage in comprehensive strategic planning around reform
• Develop a “health reform futures” group to chart the path for the community
Areas of Actions to Consider
Perspectives of Health Reform
The “lenses” through which we view the changes

The System as a Whole
Organizational/Trade
Personal
Forces Shaping Health Reform

Legal
Legislative
Financial
Administrative
## Strategic Conversations About Health Reform

<table>
<thead>
<tr>
<th>Adaptive Challenges</th>
<th>Strategic Actions</th>
<th>Forces for Change</th>
<th>Revised Strategic Actions</th>
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</thead>
<tbody>
<tr>
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<td>Legal</td>
<td>Administrative</td>
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<tr>
<td>Influence Decisions</td>
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<td>Educate Others</td>
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<tr>
<td>Strategically Plan Under Uncertainty</td>
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<td>Stay Abreast of New Information that Emerges</td>
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<td>Create New Partnerships</td>
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<td>Build Capacity: Work Force</td>
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Conclusions and Implications for Policy, Delivery, and Practice