Polling data repeatedly shows that healthcare affordability is the number one issue that state residents, on both sides of the political aisle, want their policymakers to work on. This checklist identifies areas where Delaware is doing well and areas where it can improve.

1. **Curb Excess Healthcare Prices:**
   - Implement free, public-facing healthcare price transparency that reflects negotiated rates and features treatment- and provider-specific prices. ✗
   - Create an all-payer or multi-payer claims database to analyze healthcare price inflation, price variation and utilization. ✔
   - Create a permanently convened health spending oversight entity.
   - Create all-payer healthcare spending and quality benchmarks for the state. ✔

2. **Reduce Low-Value Care:**
   - Require validated patient-safety reporting for hospitals. N/A
   - Universally implement antibiotic stewardship programs using CDC’s 7 Core Elements. ✔
   - Analyze claims and EHR data to understand how much is spent on low- and no-value services. ✗

3. **Extend Coverage to All Residents:**
   - Expand Medicaid to cover adults up to 138% of the federal poverty level. ✔
   - Provide high-quality, affordable coverage options for people whose incomes are too high to qualify for Medicaid, e.g., Basic Health Plan, reinsurance or augmented premium subsidies. ✔
   - Provide options for immigrants that don’t qualify for the coverage above. ✗
   - Conduct strong rate review of fully insured, private market options. Ø

4. **Make Out-of-Pocket Costs Affordable:**
   - Protect patients from inadvertent surprise out-of-network medical bills. Ø
   - Limit the availability of short-term, limited-duration health plans. ✔
   - Waive or reduce cost-sharing for high-value services. ✔
   - Require insurers in a state-based exchange to offer evidence-based standard plan designs. ✗

Additional detail is available at: [www.healthcarevaluehub.org/affordability-scorecard/delaware](http://www.healthcarevaluehub.org/affordability-scorecard/delaware)
Notes

1. DE has a healthcare spending oversight entity that targets all spending.
2. DE has all-payer spending benchmarks or price controls that are mandatory for all. As of 2020, DE is the only state that combines their spending benchmark with quality benchmarks.
3. Central line-associated bloodstream infections (CLABSI) and catheter-associated urinary tract infections (CAUTI) are two common forms of hospital-acquired infections. Data on patient safety reporting is not available for Delaware. For more information, see: https://www.cdc.gov/hai/data/portal/progress-report.html#Data_tables.
4. 100% of DE hospitals have adopted antibiotic stewardship. For more information, see: https://www.cdc.gov/antibiotic-use/stewardship-report/current.html.
5. DE has implemented a 1332 waiver for a reinsurance program since 2020.
6. DE provides Medicaid coverage for eligible lawfully residing immigrant pregnant women and children without a 5-year wait. DE does not offer Medicaid coverage for undocumented children/pregnant people/adults.
7. Looking Forward: In November 2020 the Office of Value-Based Health Care Delivery released draft affordability standards that would use rate review to enforce new targets for primary care investment, unit price growth for non-professional services and adoption of alternative payment models. These draft rules have not yet been enacted and will be open for public comment in 2021. https://dhss.delaware.gov/dhss/dhcc/files/affordablestandard.pdf.
8. DE has partial protections against surprise medical billing. ‘Comprehensive’ surprise medical billing protections include emergency departments and hospitals, apply to all insurance types, hold consumers harmless/prevent balance billing and adopt adequate payment standard or dispute resolution process. States with only some of these policies have ‘partial’ protections. For more information, see: https://www.commonwealthfund.org/publications/maps-and-interactive/2021/feb/state-balance-billing-protections.
9. The federal No Surprises Act prohibits surprise medical billing in most plans effective January 2022. However, it does not cover ground ambulances which often result in surprise bills for consumers. An analysis by Johns Hopkins University conducted specially for Altarum revealed that 24% of ground ambulance rides in DE charged to commercial insurance plans had the potential for surprise medical billing.