

UTAH HEALTH POLICY PROJECT

HEALTH MATTERS

on the Hill...



Utah *Health Matters* E-Newsletter: 2011 Legislative Session Edition

January 31, 2011 (Week 2)

In this issue...

1. [Medicaid Matters on the Hill](#)
2. [State Health Reform Front](#)
3. [Health Bill Tracker for Week 2](#)
4. [Tools for Advocates](#)

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1. Medicaid Matters on the Hill

On Friday, January 28, the Social Services Subcommittee approved the Medicaid cuts proposed by the Legislative Fiscal Analyst, putting many programs and services **vital** to the health of our community and to **controlling health care costs** in the future on the chopping block.

Today, January 31, the Social Services Appropriations Subcommittee voted unanimously **not to cut** everything that was put on the chopping block on Friday! As revenue projections come in around Valentine's Day, they'll hopefully begin to "backfill" some of these cuts.

PLEASE TAKE A FEW MINUTES TODAY TO CALL MEMBERS OF THE SOCIAL SERVICES APPROPRIATIONS COMMITTEE TO THANK THEM FOR THEIR RECOMMENDATION TO RESTORE IMPORTANT PROGRAMS AND SERVICES TO MEDICAID AND TO URGE THEM TO UTILIZE ENOUGH REVENUE OPTIONS TO AVOID THE CUTS THAT REMAIN.

TALKING POINT OF THE WEEK (courtesy of Minority Leader David Litvack)

- ✓ **The structural deficit was not created in one year, so there is no reason to address it in one year.**
- ✓ **It is bad economic policy to attempt to fix the deficit when revenues are barely in the black.**

For each of the items at risk for elimination below, we provide you with angles for talking points. If you can speak from experience as a consumer, family member of consumer, or health care provider, please use your own talking points:

STILL ON THE CHOPPING BLOCK:

1. Medicaid: Eliminate medical interpreter services.
 - If cut, Utah's non-English speaking legal immigrant and refugee Medicaid population could lose access to quality medical care. Communication is *vital* to quality and effective medical care.
 - It is *imperative* that non-English speakers, while in the process of learning the English language, continue to have quality interpreter services.
 - Patients who cannot adequately understand what their doctor is saying will either give up on medical care, or fail to follow medical care instructions accurately, resulting in **poor health outcomes**.
 - If cut, will Utah's health care providers be able to keep non-English speaking Utahns as their patients? Is the liability for medical harm due to lack of compliance resulting for poor communication a risk our providers are willing to take?
 - This cut will result in **long term costs** as Utahns whose English language skills are not yet adequate for quality medical communication delay care and use Emergency Departments for basic medical care.
 - This is a **cost shift**, not a cost savings, strategy.
2. CHIP: Reduce health and dental plan rates.
 - Rather than cut any deeper into provider rates, the state should undertake comprehensive payment and delivery system reforms under the guidance and direction of Senator Dan Liljenquist and Rep. Dean Sanpei.
 - Our children are our future; they should not have to face any barriers to cost-effective health care.

Recommended for Restoration:

1. Medicaid: Reduce eligibility for breast and cervical cancer treatment and prevention from 250% FPL to 133%FPL.
 - If caught and treated early, these 2 conditions can be quite treatable.
 - The 3-to-1 federal match rate for this program serving otherwise uninsured women should make this a no-brainer.
3. Medicaid: Eliminate dental and vision services to pregnant women over the age of 21.
 - Good dental health is a proven, **cost effective** strategy to improve pregnancy outcomes.
 - If cut, the elimination of dental and vision services will end up **costing more** as a result of increased complications and poor pregnancy outcomes.
 - This is really a **cost shift**, not a cost saving, strategy.
4. Medicaid: Reduce Primary Care Network and Utah Premium Partnership eligibility from 150% to 133% FPL.
 - If cut, individuals no longer eligible for these subsidies (also not eligible for Medicaid) will join the ranks of the expensive uninsured who delay care and rely on expensive emergency room visits for basic care.
 - PCN and UPP subsidies are vital for maintaining health care access to working Utahns in low paying jobs.
 - This, too, is a **cost shift**, not a cost saving, strategy.
5. Medicaid: Eliminate physical and occupational therapy.
 - Physical and occupational therapy are proven strategies to promote swift recovery from injury and illness, and self-sufficiency.

- If cut, individuals who would otherwise be able to return to health and self-care will remain in costly medical care, requiring assistance for daily living activities they could otherwise accomplish on their own.
 - This is...you guessed it...a **cost shift**, not a cost saving, strategy.
6. Medicaid: Limit optional coverage of transplant surgeries to achieve 20% savings.
 - This puts clinical decisions in the hands of bureaucrats, in effect creating a “death panel” in Utah’s Medicaid program.
 - Coverage of transplants should be decided as it is today, by medical expertise: if the patient is a good candidate, he or she should be placed on the transplant list.
 - The transplant list should not be reserved for people with the good fortune to have private insurance.
 7. Medicaid: Limit optional Hospice services to achieve 20% savings.
 - Along the same lines as above, this will amount to rationing hospice services.
 - Bureaucrats will find themselves in the impossible position of having to decide who shall die with dignity (at home, surrounded by family) and who shall die in institutional settings, without the comprehensive and humane approach to palliative care that hospice care typically offers.
 8. Medicaid: Limit optional personal care services to achieve 20% savings.
 - Personal care services make it possible for certain individuals with physical disabilities—like our good friend and fellow advocate Andrew Riggle— to live independently and work in the community.
 - Typically, a personal care attendant helps people with disabilities get showered and dressed and ready for work. This makes it possible for people with disabilities to contribute their skills and talents (and income taxes) to the workforce.

Take 2 Actions by January 31st

- Before you do anything else...**Please sign on to the Utah Medicaid Partnership/U-SHARE coalition’s Principles for Guiding Medicaid Budget Decisions and the Structural Deficit.** See the latest principles here: http://www.healthpolicyproject.org/Publications_files/Medicaid/UMP/UMPprinciplesFINALfor1-24-11.pdf

To sign on, send email to <mailto:stacey@healthpolicyproject.org?subject=Endorse Medicaid Budget Principles> (please specify the name of your organization or your full name if you are endorsing as an individual).

- If there ever was a time to pick up the phone and call ANY members in the SSA committee, that time is now. Yes, you can and should call *any* members of the committee, even if you do not live in their district. Why? Because their decisions impact all of us, no matter where we live. During the day you can call the representatives at (801) 538-1029 and senators at (801) 538-1035. If the operator cannot patch you through to their phone, ask to leave a message on their blackberry: leave a short message and ask the member to call you back. Please call in this suggested order...

| Prefix | First | Last Name | Party | Dist | City | Home Phone | Public Cell | EMAIL |
|---------|-------|-------------|-------|------|--------------|----------------|--------------|--|
| Senator | Allen | Christensen | R | 19 | N. Ogden | (801) 782-5600 | | achristensen@utahsenate.org |
| Senator | Peter | Knudson | R | 17 | Brigham City | (435) 723-2035 | 435-730-4569 | pknudson@utahsenate.org |
| Rep | Brad | Last | R | 71 | Hurricane | (435) 635-7334 | | blast@utah.gov |

| | | | | | | | | |
|---------|----------|--------------|---|----|------------------|----------------|----------------|--|
| Rep | Dave | Clark | R | 74 | Santa Clara | (435) 628-5108 | | dclark@utah.gov |
| Rep | Johnny | Anderson | R | 34 | Taylorsville | (801)205-7574 | | janderson34@utah.gov |
| Rep | Jim | Bird | R | 42 | West Jordan | (801) 280-9056 | | jbird@utah.gov |
| Senator | Daniel | Liljenquist | R | 23 | Bountiful | (801) 294-2378 | | dliljenquist@utahsenate.org |
| Rep | John | Dougall | R | 27 | American Fork | (801) 492-1365 | | jdougall@utah.gov |
| Rep | Ronda | Menlove | R | 1 | Garland | (435) 458-9115 | (435) 760-2618 | rmenlove@utah.gov |
| Rep | Kraig | Powell | R | 54 | Heber City | (435) 654-5986 | | kraig@housepowell.com |
| Senator | Wayne | Niederhauser | R | 9 | Sandy | (801) 742-1606 | | wniederhauser@utahsenate.org |
| Senator | Patricia | Jones | D | 4 | Holladay | (801) 322-5722 | | pjones@utahsenate.org |
| Senator | Luz | Robles | D | 1 | Salt Lake City | (801) 5506434 | | lrobles@utahsenate.org |
| Rep | Rebecca | Chavez-Houck | D | 24 | Salt Lake City | | (801) 891-9292 | rchouck@utah.gov |
| Rep | David | Litvack | D | 26 | Salt Lake City | (801) 596-0187 | (801) 792-7172 | dlitvack@utah.gov |
| Rep | Larry | Wiley | D | 31 | West Valley City | (801) 487-8095 | | lwiley@utah.gov |
| Senator | Margaret | Dayton | R | 15 | Orem | (801) 221-0623 | | mdayton@utahsenate.org |

For a complete contact sheet, click here: <http://dl.dropbox.com/u/19013878/UtahElectedOfficials1-23-11.xls>. Please use the [Principles](#) as Talking Points and also take from the alternatives to cuts described above.

★ GOLD STAR ADVOCATES ★

Each week we will suggest 1-2 advocacy activities for those willing to go above and beyond the standard actions (like calling committee members). At the end of the session, we will award 1 of 3 fabulous donated prizes (1 restaurant and 2 massage gift certificates) to each of the 3 individuals with the highest # of ★. Please share documentation of your ★-approved activity so we can enter you in the contest.

★ To earn this week's gold star, please take a few minutes to either...

- Submit a letter to the editor. Your letter could elaborate on any of the points above. Be sure to ask your readers to call or visit with committee members or legislative leaders (Executive Appropriations Committee).
- Share a personal story that underscores the need for any of the above Medicaid services or provider rates. If you are a health care provider or small business owner, please introduce us to someone you know with a good story or share a story from your angle on the given issue. Contact Kim Myers, if you can refer us to someone with a good story or want help sharing your story: kim@healthpolicyproject.org.

POLICY UPDATE: Proposal to Privatize and Outsource Eligibility Systems Dropped—at least for now

Last Wednesday's testimony by "outside experts" at the Social Services Appropriations Subcommittee (listen to audio here: <http://le.utah.gov/ASP/interim/Minutes.asp?Meeting=8311#Audio>), raised the specter of privatizing eligibility systems for government programs using a company, ACS, which has created major access problems in several states. Over the course of the week it became clear that the proposal was being advanced by Senator Dan.

Liljenquist. The good news came last Wednesday when Sen. Liljenquist decided to drop the proposal (details [here](#)). The bad news is that he dropped the idea on condition that DWS find \$9 million in additional savings! DWS Director Kristen Cox agreed to trim 142 eligibility jobs—what's not clear is how eligibility systems can survive such a drastic reduction. For additional details see these recent Tribune stories: <http://www.sltrib.com/sltrib/home/51136151-76/services-medicaid-cox-million.html.csp>

Utah's E-REP eligibility systems are certainly not without flaws (see Tribune story linked above). However, Utah taxpayers have invested far too much in the E-REP eligibility platform to throw it all away—and for what exactly? For the costly access problems experienced in Indiana, Texas, Florida, and the other states who learned the hard way of the problems with outsourcing to an unproven entity like ACS.

Stay Current with UMP/U-SHARE

Big scary changes are happening fast this Session. The Utah Medicaid Partnership meets every Wednesday during the legislative session from 1:15 to 2:00 in the Olmstead room in the East building of the Capitol Complex. UMP's next meeting is this Wednesday February 2. Please join us!

BIG THANKS to Dr. Tom Metcalf!

Please take a moment to thank Dr. Tom Metcalf for his passion and constant presence on the Hill *all* of last week. Thanks to his dedication and passionate commitment to communities impacted by proposed Medicaid cuts, we know the services you all care about will come out stronger in the budget process. Dr. Tom also made it easier for UHPP staff Judi & Kim to spend the week in DC at a critical health reform implementation conference—more on that later.

2. State Health Reform Front

UHPP has taken a sharp #2 pencil to the latest version (13.0!) of [HBXXXX Health Reform Amendments](#) and warmly commends Rep. Dunnigan (the bill's sponsor) for including **stronger consumer representation** on the Utah Health Exchange Advisory Board and broker training about **cultural + linguistic competency** and **public and premium subsidy programs**. Both of these UHPP additions will strengthen the [Utah Health Exchange](#) moving forward.

Utah's *market-based reform strategy* rests almost entirely on a fully functioning Exchange. We know from the Massachusetts experience with the [Connector](#) that **subsidies** are vital to a vibrant and **sustainable** Exchange. Utah's premium subsidy program, the Utah Premium Partnership ([UPP](#)), is key to meeting Utah's health reform goals. Thus eligibility for UPP should be **seamlessly integrated** into the enrollment process. At the very least, the Exchange should include a **trigger to UPP** for anyone who might be eligible for assistance and is buying insurance through the Exchange—and we have word from Rep. Dunnigan that it **will be included in the bill!** Without access to UPP, working families will not be able to access decent coverage on the Exchange.

. Send a quick note to Rep. Dunnigan thanking him for working to improve the Exchange. He is open to feedback and he certainly has the best interests of consumers and small businesses at heart. Send your email to jdunnigan@utah.gov.

Utahns deserve complete and accessible information by which they can make good insurance plan choices. In fact, any **sustainable market-based health system reform** requires full **transparency**: accessible, accurate, and timely

information about, for example, health insurance plan design, benefits, and provider networks; and percent of claims paid by insurers within 30 days, claims denial rate, and medical loss ratio (the percent of each premium dollar that goes directly to medical care). Rep. Dunnigan's bill meets these minimum standards for a transparent Exchange.

Whether we can strengthen the bill further or not, without upsetting the applecart, Utah needs the *Health Reform Amendments* bill to pass during the 2011 legislative session. Utah's Exchange could be a tool to help Utah's uninsured working people gain access to health care coverage. Let's work with Rep. Dunnigan to make the Exchange the best it can be. You will find the most recent draft of Rep. Dunnigan's bill and UHPP fact sheets here: <http://www.healthpolicyproject.org/CoverageInitiatives.html>

3. Health Bill Tracker for Week 2

See our Health Bill Tracker here:

http://www.healthpolicyproject.org/Publications_files/Billtrackers/UHPPHealthBillsMatrix1-30-11.pdf.

4. Tools for Advocates 2011

Health Action Calendar: Keep track of health-related events happening during the session. UHPP's [Health Action Calendar](#) has dates, time, and information. Please join us for weekly meetings of Utah Medicaid Partnership and U-SHARE (Health Reform Coalition): **every Wednesday 1:15-2:00 PM, Olmstead Room of East Capitol Bldg.** A wonderful chance to compare notes and coordinate strategy on the many Medicaid, CHIP, and health reform issues for the Session.

The [UHPP Health Advocate Toolkit](#) provides tools and information to keep you informed this session. Be sure to download our latest version of the Excel list of Legislators. This one shows committee assignments.

Legislator Contact List!

Check out our handy 2011 spreadsheet of legislators and their contact information. Use it to track your conversations with legislators, find out who sits on the committees that oversee health issues, count votes on bills, or mail merge to contact legislators individually! To download in Excel, click here:

<http://dl.dropbox.com/u/19013878/UtahElectedOfficials1-23-11.xls>

Fact Sheets

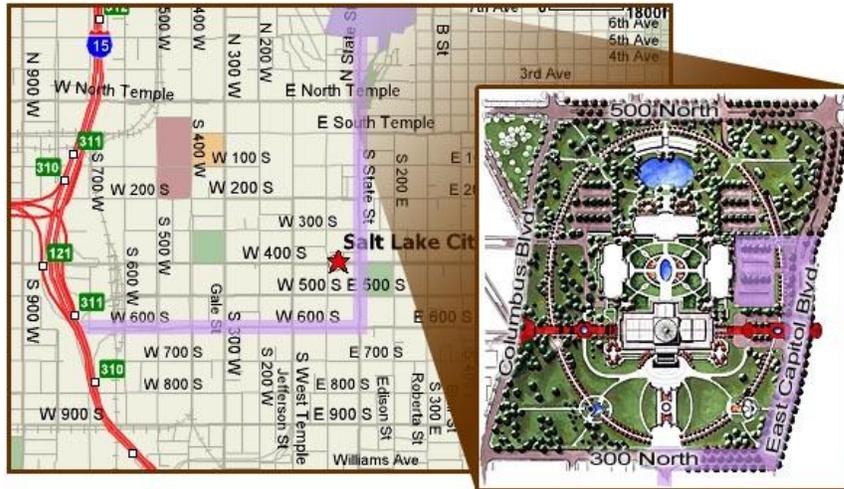
UHPP is continually preparing materials to give you the latest nonpartisan information and talking points. You'll find one-page factsheets to help you with your advocacy, as well as in-depth issue briefs to give you a thorough explanation of the issues. [Check out our Publications Page for our latest materials.](#)

<http://www.healthpolicyproject.org/PublicationsMini.html>

Getting to the Utah State Capitol

Public Transportation: If you are downtown, the UTA bus is a great option to get up to the Hill. Route 500 will take you right to the East Building's front door! The Capitol is in the Downtown Free Zone and buses run every 15 minutes. [The bus schedule is posted here, along with the route map here.](#) UTA has a great [trip planner tool](#), as well.

Driving from outside of Salt Lake: simply take I-15 (either north or south) to the 600 South exit and head east on 600 South. Turn left on State Street and head up the hill to the State Capitol. See map and follow route highlighted in purple. Be sure to allow plenty of time to drive from the freeway through the city. Because Salt Lake City is experiencing unprecedented construction activity, you may experience traffic delays in your travels.



Where to park?

Parking at the Capitol should be somewhat improved this session. There are two parking lots available to the public. The largest is on the NE Corner of the Capitol Complex. The second lot is right next to East Building (Now also know as the Senate Building). In addition, the 450 construction workers that have been at the Capitol the past few sessions are largely gone. Thus there should much more street parking available to the public this year. If you must drive, your best bet is to carpool and arrive early.

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