



**State Board of Health
State Board of Senior Services
Meeting Minutes**



**March 23, 2010
Director's Office Conference Room**

Board of Health Members Participating: Michael Weaver, Anne Petersen, Joseph Forand, Nathalie Tungesvik

Board of Senior Services Members Participating: Mary Anne Brown, Jeffery Kerr

DHSS Staff Present: Margaret Donnelly, Nancie McAnaug, Glenda Miller, Barb Wilbers

TOPIC	DISCUSSION	ACTION
Welcome <i>Margaret Donnelly</i>	Margaret welcomed and thanked everyone for participating on today's call.	
Department/Budget Update <i>Margaret Donnelly</i>	<p>Margaret mentioned that she just came from meetings with members of the Senate to discuss how to restructure state operations to cope with the dire economic straits.</p> <p>We continue to face declines in state revenue at levels never seen before. As a result, we had to make decisions about new expenditure restrictions of \$1M in the current year's budget. The Governor is beginning the process of working with the legislature and each Department to adjust next year's budget to keep in line with decreasing revenues.</p> <p>By direction of the General Assembly and the Governor's Office, we are trying to decrease the costs of the Boards and Commissions.</p> <p>At the end of January we took \$700,000 from the budgets of the Local Public Health Agencies (LPHA) and that is from the current fiscal year. We are now working with the LPHA's to reduce their requirements so they can meet their fiscal obligations.</p>	

	<p>In addition, we have had additional cuts to our Personal Service and E & E.</p> <p>Additional expenditure restrictions for FY 2010 included a \$1.5M reduction in DHSS funds used to fund non-Medicaid Home and Community Based Services (HCBS) for seniors and adults with disabilities. Approximately 2,600 clients have received letters informing them that payment for their services will end April 1. The state will no longer be able to pay for services that Medicaid does not cover due to the 'spenddown' status of the client. The state was using general revenue to pay clients' spenddown to ensure continuity of care for clients and continuity of payment for providers. Approximately 2,100 clients fall into this category. Many have a small spenddown and will opt to pay a monthly premium or will incur sufficient medical expenses in order to meet their spenddown. For clients who cannot pay their spenddown, they may have breaks in services. Affected clients have been encouraged to contact the Department of Social Services, Family Support Division to discuss their situation. The state was also using general revenue to provide HCBS to approximately 400 clients not eligible for Medicaid. These clients have been directed to contact their local Senior & Disability Services Regional Evaluation Team who can direct them to possible resources in their area, including services through Area Agencies on Aging (AAA).</p> <p>The AAA's suffered a reduction in the amount of \$1M.</p> <p>Based on expenditures to date, we may have some money lapsing in the Alternatives to Abortion program.</p> <p>For the FY 2011 budget, the House Budget Committee has voted out a bill and the full House is about ready to take up the budget.</p>	
--	---	--

	<p>Impact of House Committee Substitute reductions include:</p> <ul style="list-style-type: none"> • Community and Public Health contracts would experience \$1M cuts. Affected would be the Show-Me Healthy Women program (\$500,000 general revenue) and Adult Head Injury program (\$507,963). • The Office of Minority Health would be eliminated. • State Public Health Lab would be taking a 10% reduction in Personal Service and E & E. • Grants to the Alzheimer’s Association chapters to decrease premature institutionalization would be eliminated. • And funding that provides in-home services for 499 frail elderly and persons with disabilities, enabling them to stay in their homes in the least restrictive environment, would be eliminated • Division of Regulation and Licensure would be taking \$1M cut to Personal Service and E & E. 	
<p>Report on Meetings with Congressional Staff <i>Margaret Donnelly</i></p>	<p>Margaret reported on her and Patrick’s recent visit to Washington, DC to attend the annual Capitol Hill Days for State Health Officers. Meetings were held with members of the congressional delegation to make a plea to keep us steady with our federal funding.</p> <p>The new federal legislation, without the reconciliations they make, does include money for public health population based programs and prevention and wellness.</p> <p>Margaret also attended the 2010 State Health Leadership Initiatives (SHLI) Network Meeting and Public Policy Training while in DC.</p>	
<p>Legislative Update</p>	<p>Several pieces of legislation in the</p>	

<p><i>Margaret Donnelly</i></p>	<p>Department Package are moving on:</p> <ul style="list-style-type: none"> • HB1270 - Changes the name of “Crippled Children’s Service” to “Children’s Special Health Care Needs Service”. Bill is on the Consent calendar. • HB1375 – Allows physicians to use expedited partner therapy by dispensing and prescribing medications for partners of person with certain sexually transmitted diseases who are not their patients. This bill is on the Perfection calendar. • HB1682 – Authorizes the State Registrar to issue heritage birth certificates. The bill has been heard in committee and has several amendments. There is a similar bill that came over from the Senate which is a clean bill so hopefully we can get that passed. • SB991 & SB645: Eliminates, combines, and revises certain state boards, commissions, committees, and councils. This bill will affect several Boards/ Commissions within the Department. <p>Other legislation of interest to DHSS moving on includes:</p> <ul style="list-style-type: none"> • HB1472 - Changes the laws regarding the designation of controlled substances and SB887 - Makes spice cannabinoids, commonly known as "spice" or "K2", Schedule I controlled substances. The legislature is moving quickly to include K2 on the list of illegal drugs. The Department put out a Health Alert about two weeks ago on K2 synthetic marijuana use among teenagers and young adults in Missouri. • HB1822 – Authorizes the licensing of tanning facilities by DHSS. The bill has 	
---------------------------------	---	--

	<p>been heard and voted out of the Health Care Policy Committee.</p> <ul style="list-style-type: none"> • HB1977 – Includes emergency medical technician-intermediate in various provisions regarding licensure of emergency medical technicians. Bill has been heard and voted out of Public Safety Committee. 	
<p>H1N1 Update <i>Margaret Donnelly / Glenda Miller</i></p>	<p>We don't have a lot of new activity right now, but because flu pandemics often come in waves, and there's no guarantee that we won't see a new wave of infection, we are still encouraging people to get their H1N1 vaccine.</p> <p>As of March 16, the percentage of total emergency department visits due to influenza-like illness was 2.7%. The average number of visits during a moderate influenza season is 2.6%.</p> <p>We have had a total of 17 deaths. Eight were diagnosed H1N1 and nine were Influenza A.</p> <p>In Missouri, 81% of all reported Influenza A cases have occurred in persons less than 25 years of age.</p> <p>State health departments report the estimated influenza activity in their states each week to CDC. Missouri is reporting sporadic influenza activity for the week ending March 13, 2010.</p> <p>As of March 15, Missouri has received 1,629,000 doses of H1N1 flu vaccine. Missouri has received just 300 doses in the last three weeks.</p> <p>Health departments continue to administer vaccines as necessary/requested. We still have things to learn and continue to evaluate how we get people to get their flu shots. We've got our work cut out for us.</p> <p>Margaret recently attended a National</p>	

	<p>Public Health Partners H1N1 In-Progress Review meeting in Atlanta along with approximately 90 federal, state, and local public health leaders and subject matter experts. The goal of the meeting was to conduct a review of the current ongoing public health response to the 2009 H1N1 Influenza outbreak to identify what worked well, what has not worked well, and what can be done additionally or differently to “finish strong” during the months remaining of the current wave of the pandemic with an eye toward the 2010-2011 influenza season. Issues were pretty consistent throughout the country.</p> <p>Any of you who have thoughts/feelings that you’d like to share now or in the future in regards to seasonal flu / H1N1, our messages (radio commercials, television, bill boards, etc.) we’d be happy to hear any of it.</p> <p>Joe Forand commented that the main problem was that the vaccine was not ready early enough. A lot of people had flu prior to flu season.</p> <p>Jeff Kerr suggested that if we do this again, we don’t set priority groups.</p>	
<p>Missouri Health Information Exchange Update <i>Margaret Donnelly</i></p>	<p>The Strategic Plan was submitted on 3/17/2010 to the Office of National Coordinator (ONC) for Health IT. Operational plan is due to ONC end of July. Our projection is to submit end of May or mid-June.</p> <p>MO-HITECH Advisory Board continues to meet monthly and Workgroup meetings are being held biweekly.</p> <p><i>Legal & Policy Workgroup</i> is debating patient consent issues.</p> <p><i>Consumer Engagement Workgroup</i> cuts across the privacy and security issues. This workgroup is mapping out a plan to educate the consumer and get their buy-in.</p>	

	<p><i>Governance Workgroup</i> is working with attorneys (Posinelli) on draft articles of incorporation and draft by-laws for a not-for-profit health information exchange.</p> <p><i>Finance Workgroup</i> continues to work on a more detailed analysis of sustainable financing for the exchange.</p> <p><i>Business & Operations Workgroup</i> and <i>Technical Infrastructure Workgroup</i> are combining their efforts. They will begin meeting together to develop a Request for Information (RFI) to be released soon.</p> <p>Margaret is a member of the Advisory Board and Co-Chair of the Consumer Engagement Workgroup. She indicated that things are moving really quickly. Manatt Health Solutions is engaged to act as counsel and advisors to provide strategic advice and implementation/technical assistance. Staff from Primaris is also engaged to support the strategic planning process.</p> <p>Dr. Forand commented that this is long overdue.</p> <p>For more information regarding MO-HITECH, you can access their website at www.dss.mo.gov/hie.</p>	
<p>Approval of Minutes from December 10, 2009 Meeting <i>Margaret Donnelly</i></p>	<p>Michael Weaver asked that the December 10, 2009 minutes be amended to reflect his comment regarding the need to have a statewide sexual assault policy and his request to be included in any discussion on sexual assault.</p>	<p>Joseph Forand made the motion to approve the minutes with amendment to include Michael Weaver’s comment regarding the need to have a statewide sexual assault policy and his request to be included in any discussion on sexual assault.</p> <p>Michael Weaver seconded the motion</p>

		with amendment included. All in favor. None opposed.
Questions/Open Discussion	Glenda Miller provided a brief overview highlighting some important MCH-related provisions included in the Patient Protection and Affordable Care Act passed by the U.S. Senate on December 24, 2009 that might impact the Department.	
Adjourn	Meeting adjourned at 2:54 p.m.	
Next Meeting	The next meeting is scheduled for June 22, 2010. Due to budget, the meeting will likely be held via conference call again. Margaret mentioned that there may be a need to call a meeting before June 22 because of the pseudoephedrine tracking rules. We put out for bid and we got the bid back from the industry organization and they are willing to help states by paying for the tracking system. We will be able to put the tracking system in place at no cost. We hope we can get the rules in place quickly.	

Approved: _____ Date: _____
Chair, Board of Health

Approved: _____ Date: _____
Chair, Board of Senior Services