

# Northwest Regional Alliance Meeting

Friday, June 7, 2013 11:00 a.m. – 12:00 p.m. Conference Call

Attendance: Melissa Robinson, Daniel Landon, and Valerie Butler

## Welcome/Introductions

Those on the call introduced themselves.

# **DHSS Update**

Joseph Palm, Chief of the Office of Minority Health, was not able to be on the call due to a death in his family.

Valerie Butler gave an overview of how the regional alliances work. Melissa Robinson gave an update of what the Northwest Alliance is doing.

# **Introduction of Speaker**

Melissa Robinson, Chair introduced the speaker.

# **Medicaid Expansion**

Mr. Daniel Landon with the Missouri Hospital Association (MHA) gave an update on what happened in the legislative session as it relates to Medicaid Expansion and HB700. Please see attachment for more information.

Special notes:

The next Northwest Alliance Meeting Conference Calls will be held on September 6, 2013 at 11:00 a.m. The call-in number is 866-630-9356.

# **Medicaid Expansion**

The legislature heard a couple of bills on Medicaid Expansion, one in the House and one in the Senate. The bills were heard in various committees, but were defeated on a partisan vote.

House Bill 700 was introduced by Rep. Jay Barnes to establish the Show-Me Transformation Act which changes the requirements for delivery of health care benefits under the MO HealthNet program. The bill was approved in House Committee with a vote of 7-2. The Senate did not act on this bill. This bill would expand coverage, not up the Federal law of 133% of the poverty level, but instead only up to100% and the 100-133% to be covered under a federal exchange that would be set up. It seemed that CMS would not approve a waiver of this kind. whether states have the authority to do this. The idea was to get the federal government to agree to cover certain program reforms, which include delivery of reforms, etc. If any components of this package are not approved by CMS (Center for Medicare & Medicaid Services) then the bill will be void.

Legislative Committees will meet between now and next session, which begins in January 2014. House – committee is made up of legislators and representatives from private sector. Speaker will convene 20 representatives and a large group of private sector representatives. Senate – committee made up of legislators.

# Senate Interim Committee on Medicaid Transformation and Reform

MEMBERS (Senators):	Gary Romine, Chairman, 3 <sup>rd</sup>
	David Sater, Vice-Chairman, 29 <sup>th</sup>
	Dan Brown, 16 <sup>th</sup>
	Doug Libla, 25 <sup>th</sup>
	Rob Schaaf, 34 <sup>th</sup>
	Wayne Wallingford, 27 <sup>th</sup>
	Jay Wasson, 20 <sup>th</sup>
	Joseph P. Keaveny, 4 <sup>th</sup>
	Paul LeVota, 11 <sup>th</sup>
	Jamilah Nasheed, 5 <sup>th</sup>

Established pursuant to Senate Rule 31.

Duties of the committee shall be as follows:

(1) Development of methods to prevent fraud and abuse in the MO HealthNet system;

(2) Advice on more efficient and cost-effective ways to provide coverage for MO HealthNet participants;

(3) An evaluation of how coverage for MO HealthNet participants can resemble that of commercially

available health plans while complying with federal Medicaid requirements;

(4) Possibilities for promoting healthy behavior by encouraging patients to take ownership of their health care and seek early preventative care;

(5) Advice on the best manner in which to provide incentives, including a shared risk and savings to health plans and providers to encourage cost-effective delivery of care; and

(6) Ways that individuals who currently receive medical care coverage through the MO HealthNet program can transition to obtaining their health coverage through the private sector.

## Lessons Learned by the Association

- Strong support among business community
- Received endorsements from statewide business organizations and 62 state or local Chamber of Commerce on the Medicaid option

## **Concerns from Legislators**

- Political Fallout politically toxic among their constituents
- General Opposition to the Obamacare law
- Pull back illegibility if the program is not sustainable
- Possible cost overruns adding people to the Medicaid roll
- Reform instead of expansion

#### **Charge of the MO Hospital Association**

The Association's charge is to keep momentum going through interim period with a number of groups. Outreach to groups like the businesses, veterans, law enforcement (transporting psych patients), EMS, consumers and public groups...so people do not forget during the interim.

Compile new data if this reform is not approve: -What happens to hospitals -What happens to health care system

Talk about -Consumer Health Plans -HSA (Health Savings Account) -Follow Arkansas – enroll in state insurance exchange

Use media to keep issue in the forefront.

To get regular updates and MHA's newsletter, sign-up at http://web.mhanet.com/