



NATIONAL CONFERENCE *of* STATE LEGISLATURES

The Forum for America's Ideas

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To: Members of NCSL's Task Force on Innovations in State Health Systems

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Subject: Capitol Forum Meeting Follow-up

Task Force Members:

Thanks to those of you who were able to attend NCSL's Task Force on Innovations in State Health Systems meeting on December 7 in Washington, D.C. This memo includes a summary of the meeting and additional resources related to the topics that were discussed. You may also find these resources and those from the Task Force's August 2015 meeting on the [Task Force on Innovations in State Health Systems webpage](#). Please let us know if you have any corrections to the summary, questions about the meeting, or if there is any additional information we can provide regarding any of these topics.

Thank you,

Martha King and Samantha Scotti

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December 7, 2015 Meeting Summary:

After sharing highlights of “hot health topics” from their own states and personal interests, task force members prioritized the following topics as areas of interest for further discussion as the Task Force continues its work around innovations in state health systems (in no particular order):

- Mental health/drug abuse
- End of life issues
- Telehealth
- Payment and delivery system reform
- Using health data to achieve cost effectiveness (e.g., the Pew “Results First” initiative)
- Volunteer health services

Following is a brief synopsis of the topic(s) presented by each member, in the order they were presented.

Lonnie A. Edgar Jr., *Joint PEER Committee* (Mississippi)

- [SB 2563](#): Preventing Unplanned teen pregnancy
- Mississippi has an initiative that targets students at community and junior colleges

Representative Art Wittich (Montana)

- Montana recently expanded Medicaid, using an 1115 demonstration waiver; issues remain to ensure maximum state flexibility

Senator Patricia Miller (Indiana)

- [SB 464](#)- Medicaid coverage for prisoners re-entry into society (continuity of treatment), relates to new addiction treatment programs, among other things
- Needle exchange program to reduce HIV infections (noting Indiana’s recent HIV outbreak)
- Heroin/prescription drug abuse
 - Use of “rescue” drugs such as Naloxone

Senator Elizabeth Steiner Hayward (Oregon)

- Look at elective deliveries/inductions to promote healthy babies and prevent expensive neonatal ICU costs
- Standardized quality metrics among insurers
- Examine percentage of premiums that support primary care; use these data to achieve the triple aim related to cost, coverage and quality.

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Representative April C. Weaver (Alabama)

- Long-term care issues
- Community support (respite care) for family caregivers
 - Includes good Samaritan protections (limited liability laws)
 - Has faced opposition from trial lawyers “civil immunity”

Representative Matt Hudson (Florida)

- Workforce issues and shortage of physicians
 - Expanding residencies/physician recruitment
 - Incentivizing hospitals to open residencies in shortfall areas
- Big Data use within child welfare system to assess child placements and keep kids safe
- Volunteer health services -- Incentivize retired physicians (and other providers) to volunteer in rural areas by providing civil immunity to limit their liability

Delegate Dan Morhaim (Maryland)

- Improving access to emergency services by requiring all phone exchanges to reach 911 directly (e.g., hotels, a capitol building, etc.)
 - Ensure people connect regardless of whether the outside line is dialed
- Crack down on scam charities, which helps protect legitimate health charities (and others)
[HB 1352](#)
 - Coordinated with Maryland’s non-profit associations
 - The attorney general and regulating agencies are alerted of the issue with the charity

Representative Della Au Belatti (Hawaii)

- Transferred the state’s exchange to the federal exchange
- E-cigarette regulation
- Medical marijuana
- Allow prescriptive authority for psychologists, with specified training, to help with workforce needs in rural areas; initiative by federally qualified health centers

Mark Andrews, Utah Office of Legislative Research & General Counsel

- State still exploring Medicaid expansion
- Medicaid dental for adults – expanded to blind and disabled adults; may tap state dental schools for the Medicaid match; Medicaid Fraud control for substance abuse providers; established licensure standards for substance abuse providers

Representative Cindy Rosenwald (New Hampshire)

- Expanded Medicaid and enrolled consumers into managed care
 - State is transitioning to a premium assistance plan (through waiver - beneficiaries will purchase plans through the exchange using Medicaid premiums)

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- Medicaid expansion has a sunset provision (when federal share diminishes)-- Looking at how to cover increases in cost as federal share is lessened
- Substance abuse prevention
 - Expand drug courts/expand services
 - Prescription Drug Monitoring Program (PDMP)- Make participation more mandatory
 - Rules for opioid prescribing - Scope of practice

Note: In response, Oregon Sen. Steiner Hayward shared her state's new guidelines for safe prescribing of opioids – see the link below on p. 6 under “Opioid abuse.”

[CDC also has new draft guidelines](#) for Prescribing Opioids for Chronic Pain.

Representative Neal M. Kurk (New Hampshire)

- Managed care - Beyond just acute care - covers long-term care and developmentally disabled community
- Substance abuse—under expanded Medicaid, one of the 10 required benefits.
- Certificate of Need (CON) board was dismantled; state working on a non-CON approach to determining needs – would like ideas from other states; NH doesn't have a true “free market.”

State Health Activities and Priorities Shared by non-Task Force members in attendance:

Rep. Deb Soholt, South Dakota

- Improving access for Native Americans – wants to have a policy change to free up Medicaid funds at a 100% match for services to Native Americans.
- Reducing child sexual abuse – look at changing mandatory reporting requirements; educate the public

Sen. Forrest Knox, Kansas

- Challenge of rural hospital closures
- Foster care adequacy – lack of data

Delegate Karen Young, Maryland

- Opioid addiction (abuse deterrent formulations for prescribed drugs; strengthen the state's prescription drug monitoring program)
- Medical cannabis – struggling with implementation (heard that states with medical cannabis have experienced a reduction in opioid overdoses by about 25%)

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Senator Novelle Francis, Jr. and Sen. Kurt Vialet, U.S. Virgin Islands

- Their (and other territories') Medicaid reimbursement is much lower than for states – do not get the enhanced ACA match for expansion.
- Challenge with having only one hospital – need CMS certification
- Difficult time recruiting specialists

(Note: Task Force members recommended asking NCSL for assistance with proposing an NCSL policy to address the territories' Medicaid match rates)

Tamara Dodge, Wisconsin legislative staff

- Opioid addiction – mentioned legislative champion for the issue, Rep. John Nygren, whose daughter became addicted.
- Medicaid waiver to enroll the “aged, blind, disabled” population into managed care
- Alzheimer's Task Force

Nolan Langweil, Vermont legislative staff

- Focus on payment reforms/accountable care organizations (ACOs); state looking at an “all-payer” model, similar to Maryland, but more providers than hospitals

Rep. Sue Wilson, Wyoming

- State has not expanded Medicaid
- State has no medical school
- Only one insurer in the exchange
- Will consider legislation for a nurse licensure compact

Rep. Bill Lippert, Vermont

- State is seeking a Medicare waiver; voluntary model with hospitals and other providers to form a “coalition of the willing.”
- Good Samaritan law for administering Naloxone for drug overdose cases.
- State eliminated the philosophical exemption for children's vaccines (but people get around it by checking the box for religious exemption)
- Spoke from personal experience to support territories' desire for better Medicaid match

Resources Shared by Task Force members:

The following resources relate to the topics discussed in the Task Force meeting and were shared by Task Force members or NCSL staff (noted by sharing source). Any documents that are not linked within the text are attached to this email. Note that sharing these resources does not mean that all Task Force members or NCSL necessarily endorse any views expressed in them.

- Cost containment
 - [Pew-MacArthur Results First Initiative](#) - this project works with states and localities to develop tools to help policymakers assess whether programs are effective, accomplish intended results and yield returns on investment.
 - The NCSL Cost Containment Handout (attached) provides a compilation of NCSL's cost containment resources with links to more than a dozen topical issue briefs. These are somewhat outdated, but much of the core information remains relevant and useful.
- Innovations
 - [Health Innovations State Law Database](#): This NCSL database of recently enacted laws includes information on state health transformation initiatives and related changes in state statutes, as well as a description of topics and categories of legislation for 2015-2016.
- Opioid abuse
 - [Opioid Prescribing in a Cross Section of US Emergency Departments](#): This study analyzes characteristics of patients and opioid prescriptions, using a national sample of Emergency Department (ED) patients. It also examines the indication for opioid pain reliever prescribing characteristics of opioids prescribed both in the ED and at discharged and the characteristics of patients who received opioid pain relievers compared with those who did not.
 - Del. Morhaim
 - [Medical Cannabis Laws and Opioid Analgesic Overdose Mortality in the United States 1999-2010](#) examines the relationship between implementation of state medical cannabis laws and opioid analgesic overdose deaths in the United States between 1999 and 2010.
 - Del. Morhaim
 - Oregon – [Portland Metro Regional Safe Opioid Prescribing](#) Standards. In December 2015 a coalition of Portland Metro Area Hospitals, Health Systems, Coordinated Care Organizations (CCOs), and County Health Departments announced a regional agreement on safe opioid prescribing. A press release, opiate report, and the consensus guidelines for opioid use for chronic non-cancer, non-terminal pain can be found [here](#).
 - Sen. Steiner Hayward
 - [Indiana pain management prescribing rules](#) regulates physicians engaged in the practice of pain management prescribing, pursuant to Senate Enrolled Act 246.
 - Sen. Miller
 - [CDC's new draft guidelines](#) for Prescribing Opioids for Chronic Pain.

- Workforce/volunteer health services
 - Volunteer health services
[FL 2013 HB 1093](#) relates to volunteer health services; revises criteria required for limited licensure for physicians; revises requirements for patient referral under the Access to Health Care Act; eliminates requirement that governmental contractor approve all follow-up or hospital care; requires Department of Health to post specified information online concerning volunteer providers; permits volunteer providers to earn continuing education credit for participation in program up to specified amount.

The legislation is courtesy of Rep. Hudson, as are the following attachments:

Volunteer care model legislation

Volunteer care informational one-pager

Volunteer care research paper

- Civil immunity for volunteers:
[Indiana HB 1145](#) specifies criteria for civil immunity from liability for certain volunteer health care providers; requires the professional licensing agency to establish and maintain a process for the approval of locations at which volunteer health care services may be provided and a health care volunteer registry; provides validity time period for location approval; requires a person who meets the criteria for immunity from civil liability to provide certain records and test results to the patient.
 - Sen. Miller
 - Medical Residency
[Florida Stat. 409.909 Statewide Medicaid Residency Program](#). This statute relates to The Statewide Medicaid Residency Program, aimed to improve the quality of care and access to care for Medicaid recipients, expand graduate medical education on an equitable basis, and increase the supply of highly trained physicians statewide.
 - Rep. Hudson
 - Telehealth
NCSL's new issue brief "[Policy Trends and Considerations](#)" covers emerging trends in coverage and reimbursement, licensure, and patient safety and security.
- Medical Marijuana
 - [Medical Cannabis Laws and Opioid Analgesic Overdose Mortality in the United States 1999-2010](#) (see summary in opioid section above).

- Del. Morhaim
- [Dr. Sanjay Gupta: "I am doubling down on medical marijuana,"](#) Dr. Gupta discusses the benefits of medical marijuana.
 - -Del. Morhaim
- "American Academy of Pediatrics: Adolescent Medical Marijuana Use," Dr. Ammerman finds that "Medical Marijuana for adults in all states that have approved medical marijuana, with one exception, has not led to an increase in recreational marijuana use in adolescent populations."
 - - Del. Morhaim
- [New Study: Marijuana not nearly as dangerous as other drugs-](#) Researchers sought to quantify the risk of death associated with the use of a variety of commonly used substances. They found that at the level of individual use, alcohol was the deadliest substance, followed by heroin and cocaine, and that marijuana was comparably not as dangerous.
 - Del. Morhaim