

Louisiana Rural Health Policy and Program Update

Kristy Nichols

Bureau of Primary Care and Rural Health

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Overview

- National policy update
- State policy update
- State program update

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National Policy Update

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National Policy Update

- SCHIP reauthorization
 - HR 976 - Congress reauthorized SCHIP
 - \$144.1 million for LA
 - Allows LA to expand coverage to 18,000 additional children
 - HR 976 vetoed by the President
 - Congress will vote to overturn the veto on October 18, 2007

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National Policy Update

- SCHIP reauthorization
 - Louisiana Impact
 - 111,019 children currently enrolled – coverage is up to 200% of the federal poverty level (FPL)
 - Without the passage of HR 976, coverage for LA children will be reduced to cover children up to 150% of the FPL
 - 75,600 low-income children (32% reduction)

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National Policy Update

- Center for Medicare and Medicaid Services (CMS)
 - 9/28/07 proposed rule - clarification of outpatient clinic and hospital facility services definition and upper payment limit
 - Changes the definition of allowable outpatient services for purposes of Medicaid to include a facility rather than by an institution and qualifies that these services are limited to the scope of facility services
 - Narrows the definition of what may be claimed as outpatient services and excludes rural health clinics (RHCs) from these services
 - Disqualifies provider-based RHCs from DSH
 - Comment period ends October 29,2007

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National Policy Update

- CMS
 - 8/2/07 proposed rule – proposed changes affecting critical access hospitals (CAHs) and hospital conditions of participation – ‘Necessary Provider CAHs’
 - Necessary provider CAHs cannot enter into co-location arrangements between CAHs and hospitals unless arrangement is in effect on or before 1/1/2008
 - Change of ownership will not be considered a new co-location arrangement
 - Off campus facilities of CAHs must satisfy the current 35 mile rule to the next nearest hospital after 1/1/2008
 - Comment period ended 9/14/2007

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State Policy Update

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2007 Legislative Session

- Act 407 – Expansion of LaCHIP
 - Expands Louisiana’s CHIP eligibility to 300% FPL
 - Requires personal participation on a sliding fee scale
 - Additional state funding and federal match (if HR 976 is passed) allows LA to enroll the additional 18,000 children

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2007 Legislative Session

- Act 243 (SB 1) – Health Care Reform Act of 2007
 - Directs DHH to develop a medical home system of care for uninsured parents and childless adults
 - Three main components
 - Builds systems of care
 - Invests in health information technology (HIT)
 - Quality focus

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2007 Legislative Session

- Act 243 (SB 1) – Health Care Reform Act of 2007
 - Medical home pilots in Regions 1 and 5 (Greater New Orleans and Lake Charles areas)
 - Medicaid expansion for parents up to 200% FPL
 - No waiver required
 - Primary care benefits provided out of the medical home system care

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2007 Legislative Session

- Act 243 (SB 1) – Health Care Reform Act of 2007
 - Coverage for childless adults
 - Need DSH flexibility –waiver or state plan amendment from CMS required
 - DHH is working with Congress and HHS to get flexibility – state plan amendment expected within the next month

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2007 Legislative Session

- Funding for HIT
 - \$10 million for HIT integration within the medical home pilot
 - Executed out of the Medicaid program
 - May include HIT provider incentives
 - \$13 million for North Louisiana LSU/rural hospital network
 - 7 rural hospitals partnering with LSU Shreveport on HIT implementation and exchange
 - Bunkie General
 - Richland Parish
 - Union General
 - LaSalle
 - Desoto
 - Hardtner
 - Homer

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2007 Legislative Session

- SCR 35 - Louisiana Health Care Quality Forum
 - Directs DHH to work with private stakeholders to create a private, non-profit organization to plan, promote and conduct quality improvement activities
 - Private non-profit organization governed by a 12 member board
 - \$1 million state appropriation

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2007 Legislative Session

- Enhanced Medicaid reimbursement for small rural hospitals
 - House Bill 588 – mandates DHH to submit a state plan amendment to CMS by 9/1/07 for 110% Medicaid reimbursement to rural hospitals and their rural health clinics
 - State plan amendment to CMS submitted

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2007 Legislative Session

- Funding for federally qualified health center and rural health clinic capital improvements within the Division of Administration's (DOA) budget
 - \$41.5 million for FQHCs
 - \$9 million for RHCs

(DOA is required to consult with DHH to ensure that funded projects meet the health care redesign standards set forth in Act 243)

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Regulatory

- October 2007 – DHH/Medicaid Rulemaking
 - Rule promulgated to define the primary service area of a small rural hospital for the purposes of the location of physician-owned health care practices in rural areas
 - FQHCs and RHCs - reimbursement methodology - payment for adjunct Services: adopts provisions to allow for the reimbursement of FQHC and RHC services provided during evening, weekend or holiday hours.
 - \$14 add on to visit rate for services provided (excluding dental) between 5 p.m. to 8 a.m. and weekends and holidays
 - Effective 10/20/07

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Bureau Program Update

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Community Health Grants

- Community-based and Rural Health Program grants
 - 14 grants awarded
 - \$20,000 – 75,000
 - FQHC, RHC and school-based health center development
 - Dental and mental health services
 - Electronic medical records
 - Chronic disease programs
 - Health and wellness education

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CAH HIT Grant

- Pointe Coupee Parish HIT Partnership
 - 9/2007 - HRSA awarded the Bureau \$1.5 million to fund the partnership
 - 11 rural health providers in the Pointe Coupee area will implement HIT within and across the network to improve patient care and allow for shared patient health information
 - Network includes RHCs, a CAH, FQHCs, a community clinic, private practice physician offices, a home health agency and an urban transfer hospital

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Health Information and Data

- 2004 – 2006 - Behavior Risk Factor Surveillance Report release November 2007
 - Current data on Louisiana related to:
 - Access
 - Quality of life
 - Chronic diseases
 - Tobacco and alcohol use
 - Immunizations
 - Oral health
 - Women's health
 - Colorectal cancer screening

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Med Job Louisiana Expansion

- Med Job Louisiana is the state's non-profit, health professional recruitment program and is a partnership of the state's four AHECs and the Bureau
- In 2007-2008, the Bureau is providing funding to Med Job Louisiana to expand the program to:
 - Include allied health and nurses
 - Provide additional infrastructure support for the program

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Chronic Disease Programs

- Asthma
- Heart disease and stroke
- Diabetes
- Tobacco

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New Pharmacy Program

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Gaps in Pharmacy Services

- Statewide access to patient assistance programs that is timely and reliable
- Achieving economies of scale across pharmacy programs
- Provider enrollment in and utilization of available pharmacy resources, e.g. 340b participation
- Case management and literacy
- Physician buy-in and participation
- System connectivity and information sharing

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LA's Pharmacy Access Initiative

- Objectives
 - Increase direct and timely access to prescription medication for the uninsured
 - Leverage all reduced costs prescription drug resources
 - Provide valuable and relevant technical support to community providers and patients that improves their ability to enroll in and access reduced priced prescription drug programs

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LA's Pharmacy Access Initiative

- Objectives
 - Provide case management services and education for consumers and providers utilizing prescription assistance programs statewide
 - Network the state's pharmacy programs to achieve better coordination of services and economies of scale

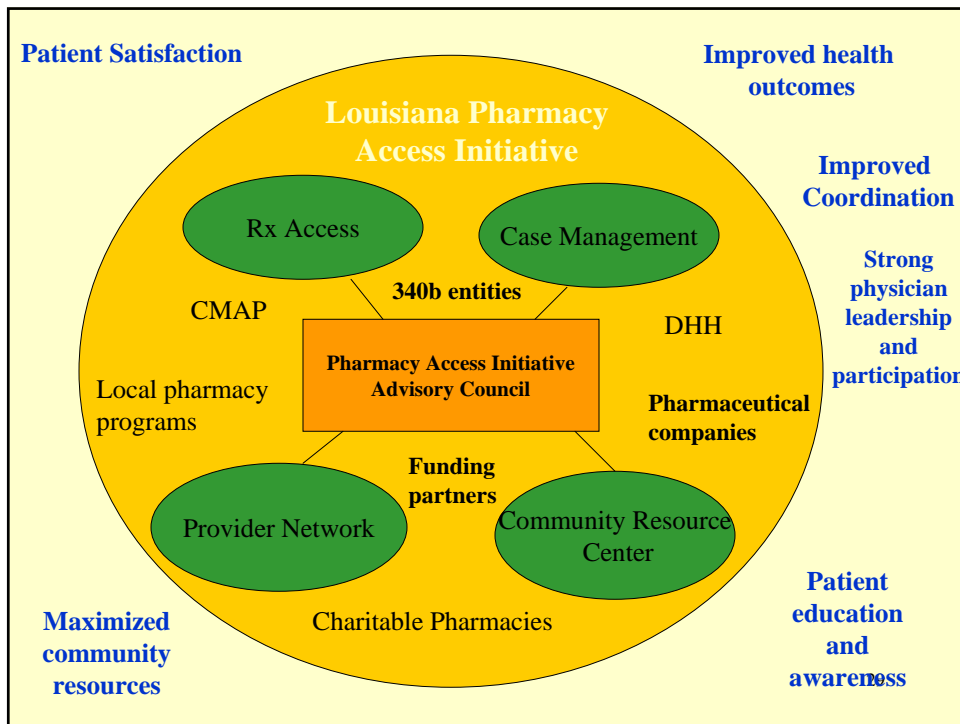
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LA's Pharmacy Access Initiative

4 Main Components

- Central fill patient assistance program
- Community support center
- Case management/chronic disease education
- Statewide pharmacy network

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Central Louisiana Medication Assistance Program (CMAP)

- The Rapides Foundation funded and began CMAP in May of 2001
- The goal of the program is to ensure appropriate medication access and education, as well as, promote other preventive health practices among residents of Central Louisiana with limited incomes
- Central Louisiana service area

CMAP Express

- CMAP recently opened a bulk donation pharmacy called *CMAP Express*
- Prescriptions are forwarded to pharmacy from PAP staff, filled, and shipped to physician's office
- This process normally take 1-2 weeks for patients to receive initial shipment of medications
- Currently we have Abbott, Merck and Novartis medications in stock and other manufacturer contracts are being negotiated

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CMAP Impact

- 23% reduction in emergency room visits by the patients they have helped and a 44% reduction in the number of hospitalizations

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Questions

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