



MINUTES

Legislative Commission on Affordable Health Care Plans for Small Businesses and Families Public Hearing

September 27, 2007

Bettendorf, IA

CO-HOSTS AND ATTENDEES PRESENT:

Former Governor Terry Branstad, Co-host
Senator Joe Bolkcom
Senator Joe Seng
Senator Roger Stewart

Representative Ro Foege, Co-chairperson
Representative Linda Miller
Representative Cindy Winckler
Dr. David Carlyle

MEETING IN BRIEF

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- I. Procedural Business.
- II. Invited Speaker — Local Initiatives.
- III. Hearing Testimony Themes.



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I. Procedural Business.

The third public hearing of the Legislative Commission on Affordable Health Care Plans for Small Businesses and Families was called to order by Co-chairperson Foege on Thursday, September 27, 2007, at the Mississippi Bend Area Education Agency 9, Bettendorf, Iowa. Co-chairperson Foege introduced Commission member Dr. Carlyle; local legislators Senators Seng and Stewart and Representatives Miller and Winckler; and Ms. Susan Salter, Chairperson of the Healthy and Well Kids in Iowa (hawk-i) Board. Co-chairperson Foege introduced and welcomed former Governor Branstad as moderator and co-host of the hearing. A list of those who registered and provided oral testimony is attached to these minutes.

II. Invited Speaker — Local Initiatives.

Testimony concerning a local initiative to improve health care was provided by Ms. Amy Thoreson of the Scott County Health Department. The community-wide initiative was developed after collecting and reviewing senior citizens' data and focus group results and pulling together community partners. The initiative focuses on three areas: transportation needs, medication administration, and independence for senior citizens. The program includes training for senior partners who provide assistance to their peers, driver refresher courses, wellness information regarding exercise and fall prevention, and cooperation with pharmacies to ensure that seniors' needs are met and to assist seniors as needed in understanding the federal Medicare Part D prescription drug program. Ms. Thoreson also described a developing program that utilizes community resources to help advise seniors on the prevention of falls and to provide in-home assessments.

III. Hearing Testimony Themes.

Twenty presentations were made by 21 persons who registered at the public hearing. The following themes were addressed in the testimony:

- **Child Health Care.** Iowa's long-term vitality is dependent on the healthy development of its children. A child's healthy development requires quality primary, preventive, and developmental health care coverage to ensure that each child receives adequate health care. A health model structured to achieve important child outcomes must be developed. If children's health needs are addressed, future serious problems are minimized, resulting in lower health care costs in the long term. In developing its own recommendations, the Commission should draw upon the recommendations of the Off to a Good Start Coalition.
- **Lifestyle Choices.** A recurring theme was the impact of lifestyle choices on health costs, especially use of tobacco. Recommendations were made to raise the tax further, give local communities authority to establish smoke-free areas, and increase funding for smoking cessation programs. Former Governor Branstad opined that he should have vetoed a bill which included a provision prohibiting local communities from establishing smoking regulation ordinances stronger than the state's.
- **Health Care Reform.** Reform should be based on the following principles: do no harm, including not establishing unfunded mandates on providers; make health care an economic

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development tool; establish uniform, affordable access; avoid nationwide models, as one size does not fit all; act in concert with neighboring states; emphasize the value of the system to the public; and provide listening posts to get public input. Also recommended was establishment of a single-payer system; reducing the debt load of primary care physicians; mandating that all people carry health insurance as the state currently requires drivers to carry auto insurance; and use of a payroll tax to pay for a universal system.

- **Dental Care.** Dental services are essential to prevent a variety of health problems. The I-Smile Program should be expanded. Support for the Title V Maternal and Child Health Services Block Grant database system was indicated. Reimbursement to dentists under the Medicaid program is insufficient. Dentists should be reimbursed at the same level as physicians are under the hawk-i Program. More dentists are retiring than are entering the profession. The impending quandary of an inadequate number of dentists to serve Iowa's population can be minimized with the establishment of dental student loan repayment programs and expansion of dental scholarships.
- **Medicaid-Medicare.** A consistent theme among service providers is that Medicaid reimbursement is insufficient. Hospitals require adequate reimbursement to keep up with technology and employ adequate staff. Rural areas with large Medicare populations face difficulties recruiting and providing access to services. High overhead costs prevent doctors from accepting many Medicare patients.
- **Home Care.** Home care is growing in use and improving in quality and provides a welcome solution to seniors who would otherwise be placed in nursing or long-term care facilities. Reimbursement for home care should be increased. Many seniors would prefer to remain in their homes and such care is more cost-effective than care in an institutional setting. However, many who provide home care find that such employment is not cost-effective because of the high cost of traveling from home to home. Home care service providers include registered nurses, licensed practical nurses, and home health aides. Providers are carefully screened and provide excellent service, but there is rapid turnover because the jobs are generally low paying and only about 25 percent of the jobs provide health insurance. When an employer can provide its home care providers with a health insurance plan, the employees often cannot afford the employee contribution rate. The legislation Senator Tom Harkin recently introduced to ensure that home care workers receive a living wage should be supported.
- **Physician Care.** Low reimbursement rates can discourage physicians from locating in Iowa. Often new physicians have over \$150,000 in loans, which discourages them from going into primary health care because they can make more money in a specialized area. It was also noted that tort reform would help by capping noneconomic damages.
- **Pharmacy.** The pharmacist is a health care professional who can provide great assistance to patients in the area of medication management and consultation. The drug industry discourages and actually interferes with the marketing of lower-cost generic medications. To be cost-efficient and effective, patient care should be managed by a collaborative team that includes a pharmacist who manages all of the patient's medications.



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- **Chronic Disease.** Addressing chronic disease is important in improving the health care system.
- **Prosthetic Devices.** Private coverage for prosthetic devices has been withdrawn in recent years. Reimbursement for prosthetic devices is capped at a low level, imposing a large out-of-pocket expense on the amputee. Amputees are able to function in society as contributing members with appropriate support. Senate File 508, which eliminates the cap and was passed by a bipartisan vote of the Iowa Senate in 2007, should be supported and enacted in 2008.
- **Mental Health Care.** Any health plan developed should include adequate mental health care and institutional support. Currently, many people in need of mental health care are incarcerated. However, it is more cost-effective to provide these people with mental health care than to imprison them for their inability to function appropriately in society.
- **Physician Orders for Scope of Treatment (POST) Initiative.** To ensure that a patient's wishes are honored, many people complete an advance planning directive. However, advance planning documents are often not available in emergency situations. The POST Initiative was designed to convert wishes for life-sustaining treatment into medical orders. Participation by a patient is voluntary. A POST form is completed by a health care provider during an interview with the patient. The initiative should be implemented in Iowa.
- **Insurance Division of the Department of Commerce.** The Insurance Division of the Department of Commerce should require all companies to submit complete records of health care plans and benefits for retirees and the premium charges paid.

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