Louisiana Health Care Commission Meeting Minutes Poydras Building Hearing Room Baton Rouge, Louisiana November 4, 2016	
<u>Members present:</u>	Diane Davidson, Dr. Rachel Durel, Dr. John Fraiche, Dr. William Ferguson, Lisa Gardner, Arnold Goldberg, Dr. Faye Grimsley, Korey Harvey, Linda Hawkins, Dr. Eva Lamendola, Barbara Morvant, Ronnell Nolan, Clay Pinson, Theresa Ray, Debra Rushing, Dr. James "Butch" Sonnier, Chris Vidrine and Thomas Wright
<u>Members absent:</u>	Robelynn Abedie, Jeff Albright, Rusty Eckel, Lauren Gleason, Dr. Anthony Grieco, Hedy Hebert, Rep. Mike Huval, Dr. Marlon Henderson, Dr. Jesse Lambert, Jesse McCormick, Jennifer McMahon, Dr. Rachel Moore, Andrew Muhl, John Overton, Daniel Paquin, Ed Parker, Katie Parnell, Bryan Wagner and Senator Rick Ward
Staff present:	Crystal M. Campbell and Julie Freeman

Chairperson Fraiche called the meeting to order at 9:05 a.m.

Dr. Fraiche asked for a motion to approve the minutes from the September 16 meeting. Arnold Goldberg moved to approve the minutes, Dr. Ferguson seconded the motion, and with no objections, the minutes were approved.

Roll call was conducted and a quorum was noted for the record.

Chairperson Fraiche then introduced Dr. SreyRam Kuy, Chief Medical Officer of the Louisiana Department of Health and Hospitals. Dr. Kuy began with a presentation of a current overall health survey in Louisiana and discussed the state's struggle with poverty being the top social determinant affecting health care in Louisiana. She reported Louisiana ranked 50th in the country for overall health and recommended the following 5-step strategy to improve the state's ranking:

- 1. Improve Access Through Expansion
- 2. Assess Expansion
- 3. Engage Stakeholders in Quality
- 4. Define Quality Targets
- 5. Integrate Quality, Transparency & Benchmarks

Next, Dr. Kuy provided an overview of Medicaid expansion results. She reported that 331,000 new adults signed up for Medicaid expansion since July 1, resulting in:

- 29,568 preventative health check-ups
- 2,661 women screened for breast cancer, with 25 diagnosed
- 2132 adults received a colonoscopy; 537 patients had polyps removed and 20 patients were diagnosed with colon cancer
- 923 adults with hypertension were treated

Dr. Fraiche commented on the challenge of getting Medicaid recipients serviced by health care specialists and the need to address access points for servicing the additional 300,000 Medicaid recipients, as well as those who have issues with chronic pain and chemical dependency. Dr. Kuy stated that prior to Medicaid expansion, Louisiana had one of the lowest reimbursement rates in the country for Medicaid providers and that many doctors are paying to take care of an indigent population through the overhead of patients' private insurance, subsidizing a patient population that is unaffordable. To remedy the problem, she recommended the increase of Medicaid reimbursement rates and stated great efforts are being made on behalf of Dr. Gee and the Department of Health and Hospitals in this endeavor. Dr. Fraiche asked Dr. Kuy to follow up and speak to the commission at a later date and provide an update on access points and how many Medicaid recipients are being treated in the emergency room. Dr. Fraiche also cited the rate of "no-shows" at appointed doctors' office visits having a billion-dollar impact on the country as a whole which Dr. Kuy stated is being addressed through educational outreach campaigns.

Dr. Fraiche then introduced Dr. Stephanie Mills, President and CEO of the Franciscan Health and Wellness of Franciscan Missionaires of Our Lady Health System (FMOLHS) who presented on the Cost Effectiveness of Preventive Health. She reported that FMOLHS provides care to over 40 percent of the state's population. With health care reform, a new business model went into effect compelling FMOLHS to formulate other skills and competencies to care for communities in terms of managing risks and groups of people. Since the program's implementation, FMOLHS has achieved over \$20 million in savings within five years going into the sixth year with flat premium rates for open enrollment, reducing risks and working to reduce costs and improve quality of health care. She also reported an increase in costs of self-insured and fully funded plans for employers and the actual workforce.

Additionally, Dr. Mills reported on the success of the Healthy Lives program achieved though participation incentives, outcome incentives, linked to employer and community activities, customized for each population and automated incentive management. She stated the program is managed by focusing on health wellness and atrisk groups with special emphasis on preventive care, nutrition, exercise and avoiding chronic disease by working closely with primary care physicians and health coaches. For more information on *Healthy Lives*, see <u>www.ourhealthylives.org</u>.

Crystal Campbell, Executive Director of LHCC, gave an update on the Pharmaceutical and Health Care Costs Working Group that met on Tuesday, November 1. She stated the group examined the following issues:

- 1. General Prescription Drug Costs
- 2. The High Drug Cost of Epipen
- 3. Drug Lifecycle
- 4. Compounding Pharmacies (and associated issues)
- 5. Increase of Claims for Unapproved Drugs
- 6. Drug Utilization and Medicine Management

Ms. Campbell stated that given how broad the topic of health care costs was, a few topics would be examined, gathering as much data and expertise as possible from both our workgroup members and outside experts to bring some reasonable recommendations forward to the commission, to Commissioner Donelon and ultimately to our legislators through LHCC's Annual Report to the Legislature. She advised the next subcommittee meeting is scheduled for Tuesday, November 29 at 9:30 a.m. at the Department of Insurance.

Finally, Commissioner Donelon advised that the department is assisting with Open Enrollment and reported the final number on premium rate increases to be above the national average. He stated the department anticipated an approximate 27 percent average increase in the individual market, however, the actual average increase in the individual market was 33 percent; on the national average there is a 25 percent increase on individual market plans; and a nine percent cost increase for small group plans after being relatively stable for the past two years. Lastly, he reported that Cigna is reconsidering its participation in the exchange next year potentially joining Aetna in its retreat from participation in the ACA exchange, and cited by the end of the year Blue Cross will have lost \$200 million on the Marketplace exchange for the past three years.

With no further business, Chairperson Fraiche asked for a motion to adjourn the meeting. Dr. Ferguson moved to adjourn and Ms. Lisa Gardner seconded the motion. Hearing no objections, the meeting was adjourned at 11:00 a.m.