

Rhode Island Medical Society Council

Meeting of Monday, June 4, 2012

Meeting Highlights

Guest: Steven M. Costantino, Secretary of the Executive Office of Health and Human Services (EOHHS)

EOHHS oversees 4 state departments: Health, Human Services (which administers Medicaid and now includes Elderly Affairs and Veterans' Affairs), DCYF (Children, Youth and Families) and BHDDH (Behavioral Health, Developmental Disabilities and Hospitals).

Mr. Costantino is a graduate of LaSalle Academy and Providence College. He served 8 terms in the RI General Assembly, rising to the position of chair of the House Finance Committee, a post he held for several years.

Mr. Costantino noted that EOHHS' purview includes a substantial portion of the state budget, including the \$2.8 billion Medicaid program.

He praised Rhode Island's "**Global Medicaid Waiver**," which was negotiated by his predecessor. The waiver is a 5-year agreement with the federal government covering 2009-2013. Stressing that the waiver agreement is often mischaracterized as a "block grant," Mr. Costantino said it is "very beneficial" and is permitting the state to rebalance long-term care by shifting more people from institutions to home and community-based settings.

He alluded to a new initiative of EOHHS with the federal government. This plan would let the state better align the benefits of Medicare and Medicaid to integrate financing and care for those who are eligible for both programs ("**dual eligibles**"). This is important, he said, because "dual eligibles" tend to be high utilizers who would benefit from a managed care structure.

The Secretary asserted that Rhode Island is "at a crossroads" with the ACA-mandated Health Benefit Exchange and the coming **expansion of Medicaid**, under which childless adults will become Medicaid-eligible for the first time. He questioned whether access will be adequate to serve the expanded Medicaid population. Much turns on the design and cost of the "**basic benefit plan**," he said.

DHS' **Unified Health Information Project** (UHIP) will integrate Medicaid with existing "wrap-around" service programs (e.g. SNAP, aka Food Stamps; Rhode Island Work, aka Family Independence Program; etc.) at a cost of \$100 million over two years, 90% of which will be borne by the federal government.

Secretary Costantino asserted that the long absence of **state-wide, coordinated health planning** in Rhode Island has rendered the CON (Certificate of Need) process and the Health Services Council ineffective in shaping an efficient delivery system for health care services. He praised the recent resurrection of state health planning efforts and speculated that a new CON process and a new definition of health services "need" might be among the desirable outcomes.

He decried the receiverships of **Westerly and Landmark Hospitals**, suggesting that the affected institutions could have moved earlier to realign and reintegrate

themselves successfully into the evolving health care system. Once the receivership process is initiated, he said, the opportunity for adjustment and realignment is lost, and the objective then becomes merely bail-out.

Regarding the economic importance of hospitals as employers, the Secretary asserted that the trend away from in-patient services and toward out-patient services need not lead to a net loss of community jobs. He suggested that adapting to change is more likely to sustain the economies of communities than propping up obsolete structures.

Licensure fee increases for many professionals, including doctors and hundreds of other state licensees, remain in the revised state budget proposal for FY 2013 that is now before the General Assembly, much to the displeasure of the Medical Society and others. The Secretary observed that the state must both control spending and find new revenue; he noted that elected officials have little appetite for generating revenue through a broad-based tax increase. He expressed relief that he is no longer Finance Committee chair.

Legislative agenda The licensure fee issue has been a particular focus of Dr. Damle, who appeared personally before the Finance Committees and has raised the issue personally on multiple occasions with the Director of Health. In addition to RIMS' own written testimony, RIMS drafted and delivered to State House leaders a statement endorsed by 22 medical organizations protesting the proposed 68% increase. RIMS also issued a call to action to the membership, generating about 80 physician constituent contacts with legislators. The General Assembly will be voting on the budget soon.

Other advocacy Dr. Damle reported on his meetings with State Treasurer Gina Raimondo and Health Director Fine, and his addresses before the Newport Hospital staff and Kent Hospital staff.

He noted the promised availability of a new prescription drug monitoring system before the end of the summer. He also noted the Licensure Board's reported unease with physicians' role under the state's "medical marijuana" statute.

Brown University Representatives of the AMA student chapter at Brown reported on two resolutions they are submitting at the AMA Annual Meeting later this month. The resolutions pertain to legacy admissions to medical schools and the importance of school nurses in primary and secondary school settings.

Bicentennial video The Council viewed RIMS' 23-minute bicentennial video, which was screened for first time at the Society's April 21 gala at Rosecliff. The video provides some history of the Society and includes comments by Drs. Nitin Damle, Stanley Aronson, Jordan Celeste, Yul Ejnes, Arthur Frazzano, Kathleen Hittner, Elizabeth Lange, Steve Lee, Charles McDonald, Michael Migliori, Herbert Rakatansky and Newell Warde. The narration is by Dr. David Carter. The video is accessible through the RIMS website at www.rimed.org/video-2012-RIMS200/asp