

## MINUTES

### HOUSE & SENATE INTERIM COMMITTEES ON PUBLIC HEALTH, WELFARE AND LABOR

October 5, 2015

The House and Senate Interim Committees on Public Health, Welfare and Labor met Monday, October 5, 2015 at 1:00 p.m. in Committee Room A of the Big MAC Building, Little Rock, Arkansas.

**Public Health Senate Members Attending Were:** Senators Cecile Bledsoe, Chair; Stephanie Flowers, Vice Chair; John Cooper, Scott Flippo, Missy Irvin, David Sanders, and Gary Stubblefield.

**Public Health House Members Attending Were:** Representatives Kelley Linck, Chair; Ken Bragg, David Branscum, Charlene Fite, Kim Hammer, Ken Henderson, Fredrick Love, Robin Lundstrum, David Meeks, Josh Miller, Betty Overbey, John Payton, Chris Richey, Dan Sullivan, Jeff Wardlaw, and Richard Womack.

**Other Legislators Attending Were:** Senators Jonathan Dismang, and Greg Standridge. Representatives Charles Blake, Andy Davis, Jim Dotson, Charlotte Vining Douglas, Jon Eubanks, Joe Farrer, Kenneth Ferguson, David Fielding, Jeremy Gillam, Justin Gonzales, Michael John Gray, Greg Leding, Reginald Murdock, Sue Scott, James Sorvillo, and Brent Talley.

#### **Comments by the Chairs**

Representative Kelley Linck called the meeting to order.

#### **Consideration to Approve the September 24, 2015 Meeting Minutes (EXHIBIT C)**

Representative Kelley Linck stated that without objection the minutes from the September 24, 2015 meeting are approved.

#### **Importance of Fluoride in Public Water Systems in Arkansas (Handout #1)**

Nate Smith, M.D., Director, Arkansas Department of Health; Jeff Stone, Engineer, Arkansas Department of Health; and Lindy Bollen, Jr., D.D.S., Director, Office of Oral Health, Arkansas Department of Health, presented the discussion on fluoride.

Dr. Smith gave a brief history of fluoride and the process of fluoridation across the United States. Then with the assistance of Mr. Stone and Dr. Bollen, Jr., he explained the importance and benefits of fluoridating the drinking water in Arkansas. Dr. Smith stated that fluoride is a natural element of water. However, since the fluoride level is very low, people have been adding this element to the drinking water for over 70 years.

Dr. Smith also distinguished between the facts and the myths surrounding fluoride, verified that it is closely monitored for appropriate levels, it is completely safe, and it has resulted in a tremendous reduction in cavities along with huge cost savings.

Sandra Young, M.D., a graduate of UAMS and recently retired, testified in opposition to fluoride and the fluoridation of public drinking water systems.

#### **Licensure of Community Paramedics (Act 685 of 2015) (Handout #2) (EXHIBIT E-2)**

Gerald Cantrell, RN, Director of Ambulance Services, Baxter County Regional Hospital, James Bledsoe, M.D., Fellow American College of Surgeons (FACS), Chief Physician Specialist, Emergency Medical Services, Arkansas Department of Health, and Greg Brown, Associate Branch Chief, Preparedness & Emergency Response; spoke to the Community Paramedic Mobile Healthcare Initiative that has been in operation for approximately 2-3 years in Baxter County, Arkansas.

Mr. Cantrell said this program began as a result of a large number of patients who were discharged from Baxter Regional Hospital without any healthcare provider to follow up on their health care. Without healthcare follow-up, there were significant readmissions to Baxter Regional Hospital and their emergency room (Medicare levies readmission penalties to the hospitals for patients who are readmitted within a few weeks).

Aspects of Baxter Regional Hospital's Community Paramedic Mobile Healthcare Initiative:

- ◆ Receive referrals from physicians, hospitals, & case management providers
  - Enroll patients in the program for 30-60 days
- ◆ Helps patients find a primary healthcare provider
- ◆ Collaborates with Home Health & Area Agencies on Aging
- ◆ Manages healthcare for patients in their home instead of calling the ambulance to go to the hospital
- ◆ Reducing hospital readmissions—thereby saving millions in payment to Medicare
- ◆ Reduce costs to the community in health care
- ◆ Manage patient healthcare in a manner to improve their health
- ◆ Help patients to feel satisfied with the provided treatment services

Mr. Cantrell said that Baxter County Regional Hospital realizes value from this program. Baxter County Regional Hospital would like to see this program replicated throughout Arkansas; because it would generate Medicare savings for Arkansas and provide better healthcare for Arkansas residents.

Dr. Bledsoe, M.D. stated that the goal of the Community Paramedic Mobile Healthcare Initiative is to improve patient care, and at the same time, cut costs to hospitals. The hospital medical director must be involved in every aspect of this program, and the medical director in charge must be board certified and licensed in Arkansas. The State EMS Medical Director and the Community Paramedics are all under the direction of the Arkansas Department of Health.

Mr. Brown provided a brief overview of the rules process and licensure. There is a collaboration effort across the medical community to initiate this program statewide.

**Status of The Department of Human Services (DHS) Eligibility & Enrollment System and Other Issues**

John Selig, Director, Department of Human Services, discussed implementation of the new Eligibility & Enrollment System (EES); the savings of approximately \$30 million from the implementation of the Patient Centered Medical Homes (PCMH), and the implementation of the ICD-10 coding system.

Mr. Selig stated that the EES is mostly funded by the federal government and it has been a challenge to implement. The Department of Human Services (DHS) is still trying to complete renewal of eligibility for about 600,000 people.

The deadline for conversion from the ICD-9 coding system to the ICD-10 coding system was October 1, 2015. Mr. Selig stated that it appears implementation of the ICD-10 Coding System has gone well and is running smoothly.

Representative James Sorvillo asked Mr. Selig how much did it cost additionally to update the data for the new EES system. Mr. Selig said he will get that information to the committee.

**Arkansas Commission on Eye & Vision Care of School Age Children, Report of Vision Screenings in Arkansas, Public & Charter Schools (A.C.A. 6-18-1803) (EXHIBIT F)**

Kenny Wyatt, M.D., Chair, Eye & Vision Commission, presented an overview of the eye and vision screenings of Arkansas students for the 2014-2015 school year.

Senator Bledsoe asked if setting up a mobile screening van had been considered to help with accessibility. Dr. Wyatt said the Arkansas Commission on Eye & Vision Screenings looked into that possibility, but the commission could not afford the expense.

The meeting adjourned at 3:55 p.m.