

# NEWSLETTER

March 2007

## ANNOUNCEMENTS

### **Latest Issue Brief**

'Consumerism in Health Care' available online!

### **Research Updates**

One-page updates of FCMU's most current research will now be available on our Web site.

### **New Associate Director**

Dr. Bob Cook has joined the Florida Center for Medicaid and the Uninsured as an associate director.

### **Presentations at the American Public Health Association Annual Meeting, Boston MA**

Allyson Hall, Ph.D., gave a talk entitled "Predictors of Breast Cancer Fatalism among Women," a project co-authored by Ellen Lopez, Ph.D., and Amal Khoury, Ph.D.

Jingbo Yu, MHA, presented her work "Role of Private Village Clinics in Tuberculosis Control in Three Counties of Shandong, China," at the poster session.

<http://fcmu.phtml.ufl.edu/>



## **The Florida Center for Medicaid and the Uninsured Welcomes New Associate Director**

As the Florida Center for Medicaid and the Uninsured begins its seventh year of research and policy analysis at the University of Florida, we are happy to welcome Dr. Bob Cook to our leadership team. FCMU's management now includes an executive director, two associate directors and a scientific advisory board. In addition to his position with FCMU, Dr. Cook holds joint appointments as an Associate Professor in the Department of Epidemiology & Biostatistics and the College of Medicine.

Before he arrived at the University of Florida, Dr. Cook served as Faculty at



the University of Pittsburgh, where he held joint appointments in the Departments of Medicine and Behavioral and Community Health Sciences from 1996 to 2006. He received his M.D. and MPH in Epidemiology at the University of North Carolina at Chapel Hill in 1991. After completing residency training in internal medicine at the University of Virginia, he completed a two-year fellowship in the Robert Wood Johnson Clinical Scholars Program.

As associate director, Dr. Cook will seek to diversify FCMU's funding portfolio, possibly to include federal grants. He is committed to establishing FCMU's reputation as a premier setting for research, policy, education and advocacy related to health care for underserved Floridians.

### **Mark your calendar...**

### **State Innovation~ Cost, Quality, & Access**

6<sup>th</sup> Annual Medicaid

Research and Policy

Conference

**June 28-29 - Tallahassee, FL**

## **Florida Medicaid Reform**

The Florida legislature granted approval to implement Medicaid reform on December 8, 2005. In February of 2006, the Agency for Health Care Administration began accepting letters of intent from health plans interested in participating in Medicaid Reform in Broward or Duval Counties. Administrators of 21 plans expressed interest, of which 18 submitted applications. Twelve of these plans were contracted as of July 1, 2006. As part of the selection process, the Agency defined sub-groups of the Medicaid population and then evaluated each plan's ability to target the needs of one of these specific groups.

According to the Medicaid Reform January 2007 Enrollment Report, 129,073 people are currently enrolled in reform plans. More than 60% of these enrollees have chosen or been assigned to HMOs. The leading plan is an HMO called HealthEase, operated by WellCare, a nationwide provider dedicated to government-sponsored health plans such as Medicare, Medicaid, State Children's Health Insurance Programs and others. The HealthEase plan offers expanded benefits such as adult vision and hearing services and basic adult dental care.

**Some of our  
CURRENT RESEARCH**

*"Investigation of the Impact of Weight Status on Health Care Utilization & Costs."*

-Our previous research has shown that children with obesity-related health conditions have higher rates of psychological diagnosis than children with other chronic health conditions. In the current project, we will conduct a prospective investigation examining how weight status interacts with psychosocial, demographic, and other health risk factors to impact health care utilization and health care costs for children enrolled in Medicaid.

*"Racial/Ethnic and Language Differences in Patient Assessments of Health Care"*

-This study examines the role of perceived racial discrimination in the health care encounter and its impact on patient experiences with care and analyzes the relationship between access to and quality of language services and differences in patient experiences with care by language.

*"Comparing Experiences with Care among Patients Enrolled in Medicaid MCOs"*

- The purpose of this project is to compare consumer satisfaction among enrollees in various Medicaid Managed Care Organizations and in Medicaid Fee-for-Service Arrangements using the Consumer Assessment of Health Plans Survey (CAHPS).

*"Best Practices for Locating Medicaid Respondents for Survey Research"*

- Because it is common that fewer than 50% of survey respondents be located, our project will compare various methods for obtaining accurate contact information and formulate recommendations for the methods that have the highest yield and are most cost efficient.

According to Medicaid Reform's first quarterly progress report, only one enrollee had chosen to 'opt-out' of a Medicaid plan and use the medical premium to pay the employer portion for single coverage. The opt-out program is intended to encourage more Medicaid enrollees to seek coverage through their work place. The choice counselors contracted through Medicaid reform assist individuals in determining whether they are eligible for employer-sponsored care, and whether the opt-out program is a good fit for their health care needs. In the first quarter of implementation, the opt-out call center received five telephone calls regarding this program. More recent data is not yet available.

Enrollment in Medicaid Reform continues to grow, and a research team from the University of Florida's College of Public Health and Health Professions has actively begun evaluating the program, as contracted with the Agency for Health Care Administration.

**Governor Crist's Health Care Agenda**

Florida's new governor, Charlie Crist, has announced four initiatives to keep Florida healthy. To **make health care more affordable**, Crist intends to lower the cost of prescription drugs by negotiating volume discounts with the drug industry and issuing discount prescription drug cards. He said he will work with Congress to foster the safe importation of drugs from Canada. The Crist administration has proposed insurance solutions that include permitting small businesses to purchase more flexible plan designs and allowing small groups to join together to leverage purchasing power. He also hopes to work at the federal level to bring funding to states that develop strategies for the uninsured, and to garner support for the creation of interstate purchasing pools.

Crist proposes to **increase access to care** by strengthening County Health Department clinics and helping rural communities develop stronger health care infrastructures. Increasing the availability of Home and Community Based Services (HCBS) and simplifying the approval process for new health care facilities would also help heighten access. Another key element of Crist's plan to increase access is to attract students to health care professions through scholarships and outreach, and to increase in-state residency programs for Florida medical students as a way to retain doctors. A final aspect of the plan to expand access is the improvement of Medicaid through eradication of fraud, ongoing evaluation and expansion of Medicaid reform, and boosting enrollment and outreach for Florida's KidCare program.

To ensure that Florida is a healthy state, Crist recommends a **heightened commitment to prevention**. Crist has appointed Dr. Ana Viamonte Ros as the Secretary of the Department of Health, with the added title of Surgeon General. Crist envisions the State Surgeon General becoming the state's leading voice on wellness and disease prevention. He also intends to promote school and workplace-based obesity and healthy-eating initiatives. His efforts include the creation of the Governor's Commission on Physical Fitness. Crist will also promote intervention and awareness about mental health and create the Governor's Task Force on Suicide Prevention.

*"Crist envisions the State Surgeon General becoming Florida's leading voice on wellness and disease prevention."*

Finally, Crist will try to **improve the quality of care** by relying on best practices for the reduction of hospital-acquired infections, improved outcomes, and the provision of more consumer health care information.<sup>1</sup>

<sup>1</sup> "Charlie Crist's Prescription To Keep Florida Healthy:Policy Overview."

## States Take the Lead in Health Care Reform

A new trend in health policy is sweeping the United States. A lack of action on the federal level has led many state lawmakers to set ambitious agendas to expand coverage and decrease rates of uninsurance. A combination of increased flexibility in Medicaid spending and design, the successful implementation of reforms in other states, and bipartisanship at the state level have fostered a political environment favoring increased state-level innovation in health policy. In turn, this innovation has the potential to shape national health policy.

While some states, such as Florida, have focused on reforming Medicaid, many others are pursuing comprehensive health reforms that will apply to the entire population. Massachusetts and California have proposed an individual mandate – a requirement that residents purchase health insurance – coupled with governmental support for those who cannot afford premiums. Massachusetts' plan was signed into law in April of 2006, while California's proposal awaits approval. The California proposal is attracting a great deal of attention due to breadth of the reform it proposes: the plan will address an uninsured population that is six times as large as and much more diverse than that of Massachusetts.

It is widely believed that the emergence of these proposals will lead presidential candidates to place health care reform high on their agendas during the 2008 election campaigns. Both proposals have enjoyed bipartisan support and were introduced by Republican governors. The apparent consensus over the need for universal coverage suggests a significant shift from a decade ago, when Clinton's health reform proposal faced opposition from both parties.

In the coming years, many more states are expected to create innovative plans to increase access to care at the state level.

## Are HSAs an Option for Vulnerable Families?

President Bush has said that the United States government will work toward a system in which all Americans have affordable and available health care. By enacting Health Savings Accounts (HSAs) under the Medicare Prescription Drug Improvement and Modernization Act of 2003, our government intended to take a step closer to this ideal. HSAs are high deductible health plans with very low premiums, designed to encourage consumers to save health care dollars in tax-exempt accounts and make cost-conscious decisions in the health care market.

Do these plans attract low-income families that are currently uninsured? Research suggests they do not.<sup>2</sup> Although premiums for HSAs are approximately 30% lower than standard plans, deductible costs for these plans were nearly six times higher than those of traditional plans. According to the Department of Treasury, most low income families do not face high enough tax liabilities to benefit from putting money into an HSA plan. It is also important to consider that almost 30% of the population currently has no retirement savings and 25% have no checking account. Moreover, many people already face significant medical debt.

Although HSAs are an attractive coverage option for many Americans<sup>3</sup> and have potential to reshape the way we approach health care spending as a society, many believe that the new plans do not appeal to the uninsured and therefore do not offer a meaningful solution to the problem of uninsurance.

<sup>2</sup> Hoffman, Catherine and Jennifer Tolbert. Health Savings Accounts and High Deductible Health Plans: Are They An Option for Low-Income Families? Kaiser Commission on Medicaid and the Uninsured. October 2006.

<sup>3</sup> In 2006, 1.4 million people were enrolled in HSA-qualified plans offered by their employers, and at least 855,000 people were covered in the non-group market.

## Faculty Spotlight: FCMU Researcher



Dr. Almut Winterstein serves as an Assistant Professor in the College of Pharmacy's Department of Pharmacy Health Care Administration. She holds a pharmacy degree and a Ph.D. in Pharmacoeconomics. Her research interests focus on the evaluation of drugs post-approval, as well as patient safety and quality of care. Her studies have addressed a variety of indications and populations, including diabetes, cardiology, and pediatrics. Winterstein's interest in quality of care issues is primarily defined through her appointment as an epidemiologist on UF&Shands quality and medication safety committees. Her interest focuses on the safe and effective use of high-risk medications in acute and critical care.

Using Florida Medicaid data, Dr. Winterstein examined the use and safety of pharmaceuticals among young people with attention-deficit/hyperactivity disorder (ADHD) who were enrolled in Florida Medicaid over a ten-year period. Winterstein's research was motivated by the growing prevalence of ADHD in children and adults and safety concerns about adverse cardiac events associated with central nervous system stimulants, the drug class most commonly used for the pharmacological treatment of ADHD.

Her newest study investigates the utilization, effectiveness and cost of palivizumab among Florida Medicaid recipients. Palivizumab is a vaccine approved for the prevention of severe respiratory syncytial virus (RSV) infections in high-risk infants. It is approved, for example, for children younger than 24 months with chronic lung disease, and certain pre-term infants. Because the major limiting factor for the use of palivizumab is its high cost, Winterstein's study will address Florida Medicaid's concerns about palivizumab utilization and its impact on RSV incidences, and propose how utilization could be optimized from both a health care cost and public health perspective.

Dear Readers,

Established in 2000, the Florida Center for Medicaid and the Uninsured is dedicated to the improvement of health care in Florida through interdisciplinary collaboration of academic and policy making experts. The primary mission of the Center is to foster and develop research and analysis on issues related to access to quality health care for Florida's low-income populations. Critical to the Center's mission is the timely dissemination of information to policy makers, providers, and health care advocates.

The **FCMU Newsletter** enables us to disseminate findings and increase public access to our research. The newsletter contains announcements of upcoming events and changes within FCMU, as well as discussions of our most pertinent work, recent publications, and issues relevant to health care in Florida and the United States. This newsletter is intended to make the Center more accessible to the public as we continue to establish ourselves as a resource for stakeholders in Florida's health care system.

We are pleased to send you the third edition of the **FCMU Newsletter**. Feel free to contact us with further comments or feedback.

**CENTER STAFF**

Director

Robert G. Frank, PhD

Associate Directors

Allyson Hall, PhD

Robert Cook, MD, MPH

Research Program Manager

Heather Steingraber

Statistical Analyst

Jianyi Zhang, PhD

Research Coordinator

Lisa R. Chacko, MPH

Project Coordinator

Lorna Chorba, CCNA

Office Assistant

Michele Romano

Student Assistants

Andrea Lee, MS

Jingbo Yu, MHA

Naya Hrabovsky

FCMU  
University of Florida  
P.O. Box 100227  
Gainesville, FL 32610

