

From Health Services to Health: Follow up on Rep. Gene DiGirolamo's Bill

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Former Colleen McCann, state Reimbursement Chair Ilona Garrity and I joined to follow up on news learned at the hearing on April 9 that Rep. Gene DiGirolamo, R-Bucks, Chair of the Health Services Committee, was sponsoring a bill giving improved insurance reimbursement for medical nutrition therapy. A constituent, Gayanne Wolsett, Director of the Dietetic Internship, Sodexo Philadelphia, visited his district office. The portent was good as Gayanne had "known Gene and his family for many years and know that health and nutrition are important to him. Yesterday, when I met him, he was doing a project from Food Stamps that he had to live on \$5 a day. He was participating for a few days and saying how difficult it was for him."

First, "I started by reviewing with him the process to becoming a RD including the education and testing requirements. Since, I worked in wellness in one of our community hospitals, I also reviewed with him the laws that are current for reimbursement (diabetes and renal), and the frustration that I endured in not being able to obtain reimbursement for many conditions such as oncology, celiac disease, obesity etc. I also don't know that specifics of the bill but reviewed with him what I know about MNT reimbursement." Gayanne's testimony was compelling, Representative DiGirolamo replied was that "he would be very supportive of an MNT insurance bill and will do what ever he can to make sure this comes to his committee. However, he cautioned us about the difficulty in the process to even get it to his committee. He recommended for PADA to attempt to keep it from the insurance committee since they will attempt to squash such a bill and it will never come to light. Again, he feels as though it will be a challenge to move the bill to his committee. He also mentioned that the Chamber of Commerce will oppose such a bill, since it will be costly to the insurance companies."

Nevertheless, Representative DiGirolamo asked Melanie Brown, Aide to the Health Services Committee, to set up a meeting at the Main Capitol to discuss next steps. On Wednesday, May 3, the three of us met with Melanie Brown in an elegant conference room on the first floor of the Ryan Building. The upshot was, it didn't make sense for the Health Services Committee or us to pursue the bill; we learned that the State Assembly charged the House Health Committee to write the bill for **insurance exchanges** under Affordable Health Care Act (ACA). **The bill, HB627, must be passed by both chambers into law by November; however, the US Supreme Court won't rule until June, leaving little time to waste.**

MNT and RDs need to be included in the bill, HB627. We made plans to visit Rep. Clymer, 145-R-Bucks on May 9, as he was friendly with Rep. Matt Baker, 68-R-Tioga and Bradford, Chair of Health Committee. The meeting with Rep. Clymer went well (I could not attend.) That appointment is outstanding. Colleen reported that "He was his usual pleasant self, and listened attentively while we spoke of the need for recognition of RDs in relevant roles throughout state government as well as the specific matter of and/or its content." The appointment with Rep. Matt Baker is outstanding.

Like many other states, PADA probably should develop a Plan B in case the US Supreme Court rules that ACA is unconstitutional. I discussed this idea with my state representative, Gary Day R-187-Lehigh, Berks, who is part of the Health Committee as Subcommittee Chair on Health Care – and a member of the Appropriations and Insurance Committee. He was on the Insurance Committee two years ago that unanimously passed HB 2535, the Highmark Bill that sought to add registered dietitians to the Highmark Act 108 in 2008. Rep. Day, who had volunteered to help write HB627, said that he thought that even if the US Supreme Court finds the Health Care Reform Act to be unconstitutional, there may still be legislation that we would want to be part of as it was being written.

Indeed, from Melanie Brown to Rep. Gary Day to Ellen Kern, Chief of Staff for State Senator Patrick Browne, R-16, the Majority Whip of the Senate and Member & former Chair, Banking & Insurance, many legislators support the timing of our efforts. LVDA members must continue the admirable efforts of the Legislative Road Trip, conducting similar meetings with at least 15 local representatives and senators.

Here's what the Academy reported in Eat Right Weekly - April 25 about what other states are doing

<http://www.eatright.org/members/eatrightweekly/article.aspx?folderid=6442452091&mycontentid=6442469528>

States Move Forward with Health Care Reform before Supreme Court Ruling

States are charged with establishing public insurance exchanges as a part of the Affordable Care Act (ACA), providing access to health insurance for those currently uninsured. Since 16 states and the District of Columbia have already authorized implementation of exchanges, either through legislation or executive order, the outcome of these state initiatives will remain uncertain following the Supreme Court ruling, expected in June, on whether the federal law is constitutional. Some states, such as Rhode Island, Maryland and Oregon, may move forward with health-care reform even if the Supreme Court invalidates the Affordable Care Act.

If implemented, the exchanges and Medicaid expansion would extend coverage to 23 million uninsured Americans by 2019, according to the Congressional Budget Office. If Congress doesn't act, states that have made major investments in implementing the law could enact individual mandates on their own or adopt other rules aimed at encouraging enrollment.

But if the entire law is overturned, even supportive states will face challenges, since the exchanges would depend on federal subsidies for full implementation. Some states that have opposed ACA reforms are the same ones that may see a significant drop in the uninsured in their states. Urban Institute researchers found these states have higher average uninsured rates due to stingier Medicaid coverage and lower percentages of employers offering insurance to their workers.

Under the ACA, states including Texas, Florida, Louisiana, Alaska, Arkansas, Oklahoma, South Carolina and Georgia would see their percentage of residents without health insurance cut by half or more, due primarily to expansions in Medicaid and premium subsidies.