NOT HERE, NOT YET:
Moving Forward & Keeping the Faith in Non-Medicaid Expansion States

Friday, April 1, 2016
WHY THIS WORKSHOP

NOTES: Current status for each state is based on KCMU tracking and analysis of state executive activity. *AR, IA, IN, MI, MT, NH, and PA have approved Section 1115 waivers. Coverage under the PA waiver went into effect 1/1/15, but it has transitioned coverage to a state plan amendment. Coverage under the MT waiver went into effect 1/1/2016. LA’s Governor Edwards signed an Executive Order to adopt the Medicaid expansion on 1/12/2016, but coverage under the expansion is not yet in effect. WI covers adults up to 100% FPL in Medicaid, but did not adopt the ACA expansion. See source for more information on the states listed as “adoption under discussion.”

Percent of Patients with Insurance at HCH Projects and Other Health Centers in Expansion and Non-Expansion States, 2012-2014

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<th>2012</th>
<th>2013</th>
<th>2014</th>
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<td><strong>Expansion States</strong></td>
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<tr>
<td>HCH Projects</td>
<td>45%</td>
<td>49%</td>
<td>67%</td>
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<tr>
<td>Non-expansion States</td>
<td>26%</td>
<td>26%</td>
<td>30%</td>
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<td><strong>Non-expansion States</strong></td>
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<tr>
<td>Other Health Centers</td>
<td>59%</td>
<td>59%</td>
<td>62%</td>
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<td><strong>Expansion States</strong></td>
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<tr>
<td>Other Health Centers</td>
<td>68%</td>
<td>69%</td>
<td>78%</td>
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<td><strong>Non-expansion States</strong></td>
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SPEAKERS TODAY

• Barbara DiPietro, Sr. Director of Policy, National HCH Council

• Alan Pruhs, Executive Director, Association for Utah Community Health, Salt Lake City, Utah

• Laura Michalski, Chief Executive Officer, Fourth Street Clinic/Wasatch Homeless Health Care, Inc., Salt Lake City, Utah
Brief State History of Medicaid Expansion in Utah

2013
- October hearing for Utah Access Plus
- October Closed House/Senate Caucuses voted against Utah Access Plus
Medicaid Expansion V. Extension
2016 Legislative Update

MEDICAID EXPANSION EXPLAINED

OBAMACARE:
- Utah pays $50M
- Taxpayers $25M
- Hospitals $25M
- Federal Match $500M

Utahns covered 60,000

THE UTAH PLAN:
- Utah pays $30M
- Taxpayers $17M
- Hospitals $13M
- Federal Match $70M
- Utahns covered 16,000

Dead Utahns as Legislature dawdling

Obama is the Devil
WHAT HAS ASSOCIATION FOR UTAH COMMUNITY HEALTH BEEN DOING?

1. Recent developments in legislature
2. Activity over last 3-4 years
3. Governor’s workgroup
4. General approach to balance relationships with advocacy
5. Challenges uniting fractured coalitions
6. Challenges when traditional partners oppose Medicaid expansion
ENVIRONMENTAL FACTORS
SALT LAKE CITY

- Salt Lake County Collective Impact on Homelessness
- Increased Media Attention

- Increased Attention to Homelessness

- Homeless Site Evaluation Commission (City)
- Increase Criminal Activity
- Public Perception of Downtown Area

Downtown Gentrification

- Lack of access to mental health services
- Lack of access to substance abuse service
- Increase use of EDs

Increase Demand on Community Resources
WHAT HAS FOURTH STREET CLINIC BEEN DOING?

1. Working with Board members
2. Engaging consumers
3. Holding press conferences
4. Promoting issues of housing & homelessness
5. Connecting Medicaid to ending homelessness
6. Bringing people together
FOURTH STREET CLINIC’S APPROACH

Board Engagement
- Submission of Opinion Editorials
- Participation in Public Input
- Support Specific Collective Initiatives

Consumer Engagement
- Educate Consumers
- Participation in City and County Focus Groups
- Participation in Public Input

Media
- Proactive Engaging Media
- Brand FSC “the place” to hold press events
- Connect Publicly with Key Political Officials Around Health Care and Homelessness

Community Awareness
- Host Community Events at FSC
- Participation in Various Committees and Commissions
- Meet with Key Stakeholders Regarding Lack of Resources

Education
- Hold Media Events
- Participation in Public Speaking Events to Connect Homelessness and Health Care
- Connect with Key Student Organizations
WHAT DID TEXAS DO?

• Medicaid 1115 Demonstration Waiver for supportive housing
• Austin and Houston only
• Created integrated care teams (social services, primary care, behavioral health) at FQHCs
• Assigned teams to supportive housing locations
• Matched homeless, frequent ED users to housing & services
• State Medicaid + MCOs: supportive housing bundled care package or per diem rate
WHAT DID LOUISIANA DO?

- Medicaid 1915(c) and (i) Waivers to fund support services
- Statewide, must have disability, prioritizes those leaving institutions
- Partnership between state health and housing authorities
- Variety of housing (Section 8, S+C, etc.)
- Variety of health funding (Medicaid, Ryan White, CDBG, VA, SAMHSA, etc.)
- Broad range of support services (pre-tenancy, move-in, ongoing)
PANEL DISCUSSION

1. How do you keep up staff morale in this environment?

2. What grant funds or other resources do you see as possibilities to maximize absent expansion?

3. What advice do you have for health center staff and consumers in other non-expansion states?

4. What’s your prediction of what will happen with expansion in the next few years?
OPEN DISCUSSION:
WHAT CAN YOU DO?
WHAT MORE CAN BE DONE?

• **Barbara DiPietro**, Sr. Director of Policy, National HCH Council

• **Alan Pruhs**, Executive Director, Association for Utah Community Health, Salt Lake City, Utah

• **Laura Michalski**, Chief Executive Officer, Fourth Street Clinic/Wasatch Homeless Health Care, Inc., Salt Lake City, Utah