

Governor's Column for "Mississippi Medical News"

### **Taking on Mississippi's Health Care Challenge**

At the Neshoba County Fair on July 26, I unveiled a proposal for addressing Mississippi's health care needs and financing our way to a healthier state. There are so many issues for us to deal with, so many "worst firsts" for us to turn around and turn into positives for the state.

The "worst firsts," a term coined by Dr. Ed Thompson of the Department of Health, refer to the areas where Mississippi leads the nation; unfortunately, they aren't areas where we want to be a leader.

Mississippi is first in the nation in prevalence for diabetes, heart disease death rate, lack of breast cancer screenings in women over age 50, population underserved by primary care physicians, and age-adjusted death rate.

We are second in the nation in overweight population, hospitalizations and emergency room visits, and fifth in uninsured population.

We can change these statistics. When Mississippi was reported as having the lowest seatbelt usage in the nation, we addressed the problem. Through a coordinated effort, we have increased seatbelt usage by over 26 percent and dramatically decreased the number of fatalities on Mississippi's roads by more than 40 percent.

When we are faced with a challenge, we have taken on that challenge and overcome it. It's time to do it again.

The health care proposal I have offered is the way to do it. By developing innovative and creative means of addressing health needs, we will make a difference. We have an opportunity to increase the funding for Medicaid by maximizing federal funds, and we cannot let this opportunity go to waste.

We want to ensure people are able to have access to primary care physicians, so our emergency rooms are not overwhelmed and being used for non-emergency visits.

We want to help screen for cancer, diabetes and heart disease, and catch these diseases early so treatment can begin. If we practice preventive medicine, we will save lives. It's that simple.

Earlier this month, I presented my proposal to the members of the State Board of Health. Comprised of physicians and health care providers from around the state, the Board has first-hand experience with the health needs of individuals and the frustration of a health care system in need of change.

Following my presentation, the Board endorsed components of the proposal. In their resolution, they stated that "1) there are major health care needs in the state that are unmet; 2) the Board feels we can use the money wisely for Medicaid waivers; 3) this can save state money in the long term in terms of treating chronic diseases; and 4) these health care expenditures should be prioritized utilizing the state health plan and monitored to ensure the state is getting its money's worth."

The financial basis for this proposal involves diverting a portion of the future payments from the tobacco settlement (payments which will end only when the tobacco companies go out of business), which are already targeted for health care needs in the state. We already have more than \$600 million sitting in the Health Care Trust Fund, earning interest that is used for health care needs. By law, we cannot touch the principal of the fund.

Next year's payment from the tobacco industry will be approximately \$210 million. I want to take \$100 million, use it to bring in more matching federal funds through Medicaid, and have \$400 million to address health care needs for the people of Mississippi.

In the simplest terms, give me a quarter and I'll turn it into a dollar for health care.

The Health Care Trust Fund will continue to grow under this plan, but simply at a slower rate. I want to invest in health care today, not tomorrow. I want to invest \$400 million this year, not just the \$66.5 million allocated through current legislation. I want to invest \$7 billion over the next twenty years for health care, not the less than \$2 billion that would be available just from income on the fund.

So, the question regarding the payments is this: Do we use the money for health care, or put it all in the bank drawing low interest?

Here's what we can do with \$100 million: Pursue demonstration grants for diabetes and heart disease; apply for waivers for school-based services such as school nurses, along with waivers for other health care needs; expand breast and cervical cancer screenings and treatment; pursue disproportionate share formulas for other health care providers.

The bottom line is this: The people of Mississippi are facing serious issues regarding health care and insurance costs. Diabetes, heart disease, cancer – these illnesses affect so many people across the state and we must work to bring them under control. We can do it; it's just a matter of dedication and commitment.

I am confident we can work together to build a healthier Mississippi. It's a matter of setting priorities. It's not unlike education; by investing now in health care, we will make a difference in our future.