

# MSAAP POST-LEGISLATIVE REPORT

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The 2018 Mississippi Legislative Session saw a successful effort to reauthorize Medicaid, the Child Death Review Panel, and the ban on texting while driving. We worked hard on getting a Tobacco Tax increase and had some good momentum up to the end of the session when the issue died due to the anti-tax sentiment of the leadership.

MSAAP also worked hard again, in partnership with Mississippi State Medical Association and the Mississippi State Department of Health to kill a anti-vaccination bill HB 1505 strongly backed by the chairman of the House Judicial B Committee Representative Andy Gipson. Chairman Gipson held an unbalanced hearing on the issue, and promised to create an investigative committee for supporters of the anti-vaccine movement. HB 1505, however, died in the House when the Education Chairman Richard Bennett did not bring it up.

Appropriations for Medicaid and the Mississippi Department of Health were better than expected at the start of the session. The General Fund appropriation for the Health Department is \$2.5 million over last year (30,155,652). The Health Care Expendable Fund is \$9,178,783, which is the same as last year, and the Tobacco Control Fund was \$20 million or the same as last year. The special fund authority appropriation was \$5 million over last year or \$309,095,385. Total state support adds up to \$59,334,435 or \$2.5 million over the recommendations from the Legislative Budget Committee before the session began.

The Medicaid Appropriation is \$840.9 million, short of the \$917 million level adopted by the Legislative Budget Committee before the session started.

Medicaid Reauthorization did not pass until Deadline Day, with threats that a compromise between the House and Senate could not be reached and reauthorization would not be passed at all. The new law includes the following provisions:

- The number of physician visits allowed and prescriptions filled are no longer restricted and will be determined by the Department of Medicaid.
- Teens ages 10-18 will be able to get vaccinated at their pharmacy.
- PCPs, OBs, and certain psychiatrist services are reimbursed at 100% of Medicaid.
- Only Medicaid accreditation is required for CAN reimbursement.
- Specific language to encourage accessibility of 17-P for women who need it is in the bill, as well as authorization for opioid treatment services.

The Medicaid Advisory Committee is charged with studying the effect of a 5% reimbursement cut for providers, focusing on dental care. The governor is given more power to determine what to cut in the event of a Medicaid Budget shortfall. DOM gets to decide what emergency transport to pay for.

The specific complex care pilot project at Batson is not in the bill; instead there is a study committee to recommend what to do.

Managed care companies are asked to develop innovative payment models to incentivize improvements in health care quality, outcomes, or value as determined by the division. They will be audited yearly.

Managed care may not be expanded without the approval of the Legislature. The current contract for three managed care providers is not rescinded, as the hospital association wanted, but the bill does have language for allowing for UPL and DSH payments to hospitals.

