

Western Massachusetts

Health Access Network



COMMUNITY PARTNERS, INC.

June 3, 2005

Jones Library – Amherst, MA

Meeting Notes

Attendance:

Magda	Ahmed	Department of Public Health	(413) 586-7525
Stacey Taylor	Auger	Health Care For All	(617) 275-2935
Isaac	Ben Ezra	Massachusetts Senior Action Council	(413) 256-6675
Catherine	Benoit	Partners for a Healthier Community	(413) 794-7741
Noah	Berger	Massachusetts Budget and Policy Center	(617) 426-1228
John	Bergeron	Hilltown Community Health Center	(413) 667-2203
Epi	Bodhi	Amherst Health Department	(413) 256-4077
Sonia	Bouvier	Cooley Dickinson Hospital	(413) 582-2848
Regina	Curtis	Office of Rep. Stephen Kulik	(413) 772-2727
Michael	DeChiara	Community Partners, Inc.	(413) 253-4283
Maribel	DelRio-Figueroa	Chicopee Community Health Center	(413) 420-2152
Jess	Fydenvekevez	Office of Rep. Stephen Kulik	(413) 772-2727
Tracy	Gaudet	Healthy Connections-FCAC	(978) 249-5634
Octavio	Hernandez	Fairview Hospital	(413) 528-5045
Kari	Hewitt	Community Partners, Inc.	(413) 253-4283
Giselle	Lanausse	Stavros - Center for Independent Living, Inc.	(413) 256-0473
Svetlana	Mnatsakanyan	Boston Medical Center	(413) 730-4827
Sharleen	Moffat	Franklin County Home Care	(413) 773-5555
Dan	Moraski	Social Security Administration	(413) 785-0415
Anne	Rosen	Community Partners, Inc.	(413) 253-4283
Daniel	Ross	Office of Rep. Ellen Story	(413) 253-3690
Fern	Selesnick	Community Partners, Inc.	(413) 563-8074
Drita	Silveira	Global Link Interpreting Services	(413) 427-9412
Lauren	Srey	Amherst Health Department	(413) 256-4077
Margaret	Ware	Elder Services of Berkshire County	(413) 499-0524

Welcome and Introductions. *Michael DeChiara*, Community Partners, welcomed everyone. After participants introduced themselves, Michael introduced speakers and reviewed the meeting agenda.

Anne Rosen, Community Partners, briefly reviewed the meeting packet's news articles and announcements. (Highlights are at the end of these notes in *Selected Announcements and Resources*.)

Special Guest: Noah Berger, Executive Director, Massachusetts Budget and Policy Center.
“State Taxes and the Value of Public Services: What Can We Buy for Ten Cents?”

- The Role of Government: Government provides services that touch everyone’s life. These range from education, recreational facilities, and a clean environment, to safe bridges, roads, fire and police protection, and prisons. Government funding for health and human services provides a safety net for everyone. Even people not using that net recognize its importance, particularly in times of crisis.
- Today’s Fiscal Crisis:
 - State and local government spending levels are the lowest in several decades. In 1979, approximately 13.6% percent of Mass residents’ total personal income was taxed. However, in the 1990’s, the state initiated one of the most aggressive tax cutting campaigns in the nation. In addition, between 2002 and 2004 close to \$3 billion in budget cuts occurred. Today’s state and local taxes amount to approximately 9.6 % of our total income. Massachusetts has led the nation in cutting funds for K-12 education. Higher education was cut by 24%. MassHealth enrollment fell by 80,000; public health funding decreased 27%; anti-smoking efforts were virtually eliminated and environmental affairs was down 29%.
 - The myth of Massachusetts spending: Supporters of reduced spending often say Massachusetts is a high spending state compared to the rest of the nation. In fact, we are 45th in the country in the amount of personal income used for general government expenditures. Evaluating Massachusetts’ spending as a percentage of personal income provides a valid perspective for understanding the extent of our spending levels.
 - Women are particularly hurt by these cuts. Higher education, healthcare and other public services are particularly important to women: Sixty-eight percent of students graduating from our state colleges are women; 70% of non-disabled adults on Medicaid are women; public health cuts impact teen pregnancy prevention, newborn visiting, domestic violence prevention and anti-smoking campaigns. Over 90% of families receiving TAFDC are headed by women. Seventy-two percent of families living below the federal poverty line in Massachusetts are headed by single mothers; housing subsidies, child care and other supports provided to low-income families disproportionately help women. Nursing homes are also disproportionately populated by women and have suffered cuts as well.
- How Did We Get Here? Our economy grows at approximately 3% a year. Had tax revenue over the past fifteen years grown at the same rate, our revenues would have matched expenses. Instead, tax revenues dropped by \$3 billion dollars in 2002 and have been growing very slowly since then. The problem was compounded by the 2002 recession.
- Today’s Tax Cuts: Governor Romney continues to propose tax cuts. An argument used in favor of this is “cutting taxes will grow the economy; although programs will be cut, we’ll eventually have more money to do more things.” This argument has proved faulty. Studies show that those states cutting the most taxes in the ‘90’s LOST three times as many jobs as the rest of the country. Their unemployment rates rose more than other states. Personal income climbed less quickly than in the rest of the nation. Massachusetts was in the top six of these states with the worst losses in the nation.
- Options for Restoring Tax Revenue: Massachusetts cannot change federal tax laws, but we can reform state tax laws. We have the resources to rebuild economic security:
 - Raise taxes for top-income residents benefiting from federal tax cuts. Federal tax cuts of the last four years are returning approximately \$5 billion dollars annually to Massachusetts tax payers. About 40% of that goes to the wealthiest 1% of taxpayers, people with incomes of \$1.3 million yearly. They receive an average tax cut of \$70,000 each annually. Raising their taxes could virtually eliminate the state deficit.

- Raise the personal income tax to the level of the 1990's. This would yield about \$1 billion. Personal exemptions could also be raised, which would benefit low-income tax payers the most and take the “sting” out of their tax increase. The top 1% would pay the majority of the tax.
- Reform corporate tax laws: Solutions include limiting income-shifting by corporations; closing corporate tax loopholes; imposing new fines for selling “abusive tax shelters” and enforcing taxes on out-of-state sellers of real estate. Governor Romney originally proposed \$170 million of loophole-closing strategies. He has backed off from approximately half, and the figure is now reduced to \$85 million. The legislature can still act on these.

Noah concluded by emphasizing that Massachusetts does have the resources to rebuild our economic security.

A number of participants noted that people often don't trust the government to spend our tax money the way they way they are going to, and that this interferes with making the argument to restore taxes. They cited a number of examples, including the Big Dig and funds for anti-tobacco programs.

Noah responded by acknowledging the danger of becoming cynical; but he reminded everyone that the State has done good things in the past because people didn't stop trying, and that it can in the future. It's also very important to remember, in arguing for good programs, to include a plan for how to pay for it, so funds don't have to be taken out of some other governmental program.

Michael thanked *Noah* for providing such an excellent overview of the relationship between state taxes and public services.

Community Updates *Michael* asked that when people introduce themselves, they please state their names and organizations for accurate identification in our follow-up notes.

Sharleen Moffat, Franklin County Home Care (FCHC), Women's Health Network (WHN).

- In conjunction with St. George's Episcopal Church and Advocacy for Access at Fairview Hospital, FCHC is sponsoring *Do It for Dad*, a men's health screening event, on June 28 in Lee.
- The Women's Health Network has completed a year-long project to preserve its RFP, which it will pursue again this fall. WHN just finished a major study in conjunction with UMass Medical School and Harvard analyzing past home health care practices and providing future recommendations. *Sharleen* and several Western Massachusetts providers participated in the Boston meetings.
- For more information about any of these items, contact *Sharleen* at (413) 773-5555, smoffatt@fchcc.org.

Margie Ware, SHINE Director, Berkshire County and Regional Family Care Giver Coordinator, Berkshire, Franklin, Hampshire counties. SHINE is working with *Daniel Moraski*, Social Security Administration, to locate low- to moderate-income Medicare beneficiaries who may be eligible to save \$2,000 to \$4,000 in annual prescription drug costs. *Margie* noted that the public is deluged with complex and confusing paperwork and looks to providers for help. *Margie* encouraged providers to continue learning about Medicare Part D so they can respond to applicants' needs. Individualized application assistance is available to simplify the process as much as possible. For more information, contact *Margie* at (413) 499-0524, mware@esbci.org or *Lorraine York-Edberg*, at (413) 773-5555, Ext.279, lyork@fchcc.org.

Daniel Moraski, Social Security Administration (SSA). SSA's Springfield site is moving to 70 Bond Street. The office will close for two weeks in mid-June and reopen after July 1.

Medicare, Part D

- **Mailing Initiative:** Last week, SSA mailed its first 20,000 applications to Medicare Part D recipients potentially eligible for the low-income subsidy. Approximately 20 million applications will go to seniors, the disabled, and other potential beneficiaries before August. Mailing sequence is determined by social security number.
- **Training and Assistance:** SSA can provide provider training sessions and are also holding application completion events at sites where seniors congregate. Contact Dan for more information at daniel.moraski@ssa.gov, (413) 785-0415 Ext. 3064
- **Website Services:** SSA's website, <http://www.soc.sec.gov>, has a link for Medicare outreach information, fliers, posters and a useful screening tool to determine potential eligibility. If the tool suggests an applicant is not qualified, it's still a good idea to apply. As of July 1, the application itself will be available on line.
- **Applications:** Applications are easy to complete and user friendly. Anyone can complete an application on behalf of a beneficiary. Because applications will be optically read, paper applications should be completed with black ink or a #2 pencil. Photocopies cannot be read – only originals. When an application is received by mail or electronically, SSA will mail its decision to the applicant.

Drita Silveira, Global Link Translations and Interpreting Services (GLTIS). *Drita* formerly worked with Holyoke Health Center. GLTIS is a state-approved vendor providing translating and interpreting services in numerous languages. They offer in-person interpretation and written document translation. Clients include Bay State Medical Center, Mercy Hospital, Health South in Ludlow, and Springfield DSS. Additional Information: (413) 427-9412, dritap@comcast.net. Community Partners will also have more information at the next HAN meeting.

Maribel DelRio-Figueroa, Holyoke and Chicopee Community Health Centers.

- The Centers will begin Virtual Gateway training June 8. They are looking forward to going on line the following week.
- Recipients of recently mailed Medicare Part D notifications are asking for help with their applications. Staff is available to assist the large number of requests.

Octavio Hernandez, Fairview Hospital Advocacy for Access (AFA). As part of *Do It for Dad*, a national campaign to increase awareness of men's health issues. AFA is participating in the June 28 event in Lee mentioned by Sharleen Moffatt. In addition to health screenings for men, there will be screenings to determine eligibility for local and state programs. AFA will use the RealBenefits online screening tool to its full potential in this "one-stop shopping" service.

- Fairview Hospital has received grant funding for language translation services for immigrants under the age of 65. The program's goal is to pool provider and patient efforts to close the communication gap about health care. Patients will be trained to request services and receive encouragement for increased community participation once they have learned English. Staff will be trained to effectively respond to non-English speaking patients.

Magda Ahmed, Department of Public Health, Refugee and Immigrant Health Program (DPH/RIHP), Amherst Human Rights Commission and the Save Darfur Coalition.

- **DPH/RIHP:** This quarter, refugees from different areas of Sudan will arrive. Their languages vary depending on where they lived. Russian-Turkish refugees will also arrive. Usually, additional, unexpected refugees also arrive. All refugees will either have full health coverage or will receive immediate assistance with Mass Health applications.
- **The Save Darfur Coalition** will sponsor two "Darfur Action Days" on June 4 and June 11. Some of the refugees arriving from the Sudan mountains will be speakers. The programs are sponsored by several organizations, including the Western Massachusetts Darfur Coalition, American Friends Service

Committee and Amnesty International. Contact Magda at (413) 586-7525 or the Pan-African Historical Museum: (413) 733-1823.

Tracey Gaudet, Franklin Community Action Corporation, Healthy Connections (FCAC/HC). Healthy Connections has relocated to Aubuchon Plaza, 119 New Athol Road in Orange and plans an afternoon open house June 10. All are welcome. The program has been extremely busy.

Regina Curtis, Aide to Representative Steven Kulik. The House is presently in Session and Rep. Kulik's office has been busy in their efforts to move non-budget bills through. HAN participants call frequently to support measures to help their clients. *Regina* expressed appreciation for this advocacy.

Jess Fydenvekez, an intern with Representative Kulik's office, and *Dave Ross*, intern with Ellen Story's office, were here to observe the meeting and learn more about everyone's work.

Svetlana Mnatsakanyan, Boston Medical Center HealthNet Plan (BMC). HealthNet offers coordination of MassHealth services and special programs for asthma, diabetes, high blood pressure, or pregnancy. Health related benefits may include free infant and toddler car seats, free children's' bike helmets and free manual breast pumps for nursing mothers. For more information, call 1-800-792-4355.

Sonia Bouvier, Cooley Dickinson Hospital, Hampshire HealthConnect (HHC). Hampshire Community Action Commission (HCAC) has closed, and their Hampshire Health Access Program (HHA) has ended. All of HHA, including their Physician's Network program, has been transferred to HHC/Cooley Dickinson Hospital. The Physician's Network offers sliding scale fees to local residents ineligible for MassHealth. HHC has been administering the Network in collaboration with HCAC since last fall and is very familiar with the work. The transfer has not interrupted patient services and HHC is committed to maintaining and expanding the Physician's Network. Press releases on the change will only be issued after HHC receives state funds and the funding transfer has been passed by the Legislature. HHC is also working to maintain former HHC program staff but cannot make a formal commitment until funding is received.

Magda noted that the Physicians Network is an excellent resource for immigrants. The physicians provide excellent services and are very respectful of patients' needs and finances.

John Bergeron, Hilltown Community Health Center (HCHC). John was also an employee of Hampshire Community Action Commission (HCAC) until the agency closed. Most HCAC programs have been spun off to other agencies, and there were no gaps in service with the exception of the Hilltowns. Hilltown programs were abruptly closed and their phones shut off. John is still providing assistance to former clients.

Isaac Ben Ezra, Massachusetts Senior Action Council (MSAC) noted that he has become a caregiver for his wife, who is very ill. He would appreciate information on support groups to discuss end of life issues.

- *Isaac* offered to support programs participating in HAN through his work with ACTV. He is interested in helping providers produce their own television shows to increase public knowledge and access to available resources. Public television is a major information source for large numbers of individuals, particularly the housebound, people lacking Internet Access, and those not involved with programs that "hook people up". For information on this opportunity, contact Isaac at (413) 256-6675.
- Isaac was recently honored with the Quinn Award from Western New England College for his valuable contributions to social work.

State Budget and Program Updates: *Stacey Taylor-Auger, Health Care for All (HCFA)*

FY06 Budget Update. The House Ways and Means Committee released its proposed budget in April. Debate has concluded. There have been some successes, but strong advocacy efforts are still critical. Stacey emphasized the need to call and email legislators to thank them for their part in victories and to urge them to call members of the Conference Committee in support of access to health care. HAN members with the time are requested to call both legislators and conferees.

➤ Program Caps

Overview: Mass Health Essential was still accepting applications on June 1, although it had almost reached its 60,000 enrollment cap and was due to close. There have been program caps on the HIV and CommonHealth programs. HCFA wants to see these repealed at the state level. The House made no provisions for this. However, the Senate budget does include language repealing the statutory authorization for enrollment caps.

Update from Community Partners: *On Friday, June 3rd, Medicaid reported it had officially imposed its enrollment cap on MassHealth Essential. Qualified long-term unemployed applicants are now being processed for Free Care eligibility and placed on a wait-list for MassHealth. The federal government has, however, granted higher enrollment caps to the MassHealth CommonHealth and HIV waiver programs, protecting them from enrollment freezes for the time being.)*

➤ Immigrant Coverage

- Both the House and Senate funded coverage for 3500 senior and disabled legal immigrants and prohibited MassHealth from evaluating sponsors' income when determining eligibility. This was a huge victory, and legislators deserve thanks for their positive actions. However, HCFA anticipates a veto from the Governor, who supports "sponsor deeming" and eliminating immigrant coverage. His policies would disqualify about two-thirds of eligible senior and disabled immigrants.

➤ Children's Medical Security Plan (CMSP) Premiums

- In 2003, premiums increased four-fold for many families on Mass Health and CMSP. Premiums often exceed the cost of care, inhibiting enrollment and affecting health. The House made no provisions to address this issue, but the Senate did. HCFA supports the Senate's provision, which would restore the pre-2003 premium schedule by eliminating premiums for those below 200% of the federal poverty level (FPL) and restructuring premiums for those between 200% and 300% of the FPL. The changes would make premiums more affordable, stop premiums from exceeding program costs, and promote enrollment.
- Outreach and Enrollment Grants. As an exciting first step, both the House and Senate proposed \$500,000 for outreach and enrollment grants. Also, as part of his health reform package, Sen. President Travaglini filed a supplemental appropriations bill to allocate \$3 million for outreach and enrollment. HCFA hopes for \$500,000 from the conference committee, with increased amounts next year and beyond. One exciting component is language allowing funds to be specifically directed to the Western Massachusetts Health Access Network and to Covering Kids and Families programs. The Senate language is stronger, assuring support for both programs.

Michael noted that South Hadley's Representative Scibak submitted the amendment to the House side of the Committee. He also recently wrote and submitted a letter of support with signatures from every Western Mass. Representative. *Michael* recommended thanking Rep. Scibak for his impressive efforts.

MassHealth Dental Coverage for Adults

- A total of 550,000 Massachusetts adults have had no dental coverage for the past three years. The House proposed no provisions to restore coverage, but the Senate budget includes \$4 million to restore

dental coverage for pregnant women and new mothers with children under age 3. Smoking cessation benefits are also provided for this group. HCFA recommends adopting Senate language as a first step in restoring all cut benefits and will be working with the legislature's supplemental budget to add monies through two additional bills.

MassHealth Hearings. At present, MassHealth is not required to hold public hearings before reducing benefits or eligibility. Both House and Senate budgets include language requiring the state to hold the hearings, at which consumers can testify. HCFA prefers the Senate provision, which has stronger language that changes the General Laws and makes MassHealth hearings law. This is a huge success. Similar provisions in past budgets were vetoed by the Governor Romney.

Prescription Advantage. The house included \$90.2 million for Prescription Advantage but did not authorize an open enrollment period. The Senate proposed \$92.2 million with an additional \$5 million under the federal program. Senate language also requires a one-month open enrollment period in Spring 2005, but plans for Spring 2006, are not outlined. The higher Senate funding and open enrollment period provide more certain assistance with cost-sharing requirements. It would also help seniors and disabled people facing uncertain benefits with January's advent of the federal Medicare drug program. These are all victories.

Next Steps:

- Hearings. All bills have been assigned numbers and hearings have begun.
 - Health Care Reform Hearing and Advocacy Day. Wednesday, June 8, Gardner Auditorium, the State House, Boston. The Health Care Financing Committee will hear Sen. Moore's bill (supported by HCFA), "The Health Access and Affordability Act," and Senate President's Travaglini's proposals. Stacey asked people to either attend or send written testimony, and to ask their Senators and Representatives to attend.
 - Oral Health Advocacy Task Force Hearing. Wednesday, July 6, State House, Room A-2, 10:00 AM. The Health Care Finance Committee will hear HCFA's Oral Health Care Task Force present two bills to restore dental benefits. Other bills will also be heard that include funding smoking cessation programs, removing enrollment caps, hearing aid coverage and benefit bills. Further details will be available next month or contact Health Care For All: (617) 350-7279, <http://www.hcfama.org>. Also, www.mass.gov/legis has ample information on committee membership, and when individual bills will be heard.

Compromise Budget goes to the Governor: The governor has ten days to review it, sign bills and/or submit vetoes, before returning it to the House for further action. HCFA's website provides additional details: <http://www.hcfama.org> or contact Stacey at (617) 275-2935, auguer@hcfama.org.

Covering Kids and Families Initiative

- Next Quarterly Meeting: Wednesday, June 8, 12:30-3:00 p.m. at HCFA, 30 Winter St., Suite 1010, Boston. Malinda Ellwood, who coordinates the campaign, will be going to law school and June 8 will be her last day at HCFA. All are invited to attend.
- 2005 Back to School Campaign. This national campaign becomes active in summer and early fall and encourages parents to get health insurance for their children. The statewide campaign is coordinated by HCFA's Covering Kids and Families Initiative with funding by The Robert Wood Johnson Foundation. Massachusetts organizations are invited to join and will receive free information, outreach materials and support. More information is available at (617) 275-2937, ellwood@hcfama.org or go to the *Covering Kids and Families* website: <http://www.coveringkids.org/communications/bts>.

Magda Ahmed requested any information available to help a single mother and her son. They are about to be evacuated from their apartment, are looking for a home in Amherst, and cannot afford a security deposit and last month's rent. The mother currently pays \$600 monthly for rent. Please contact *Magda* at (413) 586-7525.

Michael thanked Stacey for her presentation and the group for their contributions and participation. He also reminded people that the July 1 meeting will be *upstairs* at Jones Library, and that confirmation will be provided in advance. The meeting adjourned at 12:00 pm.

Selected Announcements and Resources

Employment Opportunities

- Health Access Field Coordinator. Community Partners, Amherst, MA, seeks a highly motivated, flexible and well organized professional who is very familiar with programs, issues, and stakeholders central to access to health care in Massachusetts. Will assist the Health Access Program Coordinator to implement statewide program activities. Requires at least one year's experience conducting outreach for Massachusetts low and moderate income residents and ability to represent needs of front line workers in meetings. (413) 253-7131, www.compartners.org.
- Counselor-Advocate, Disability Services Program. Safe Passage, Northampton, MA. Primary responsibility to provide crisis intervention and peer support to women with disabilities experiencing or who have experienced domestic violence. (413) 586-1125 or www.safepass.org
- Medical Interpreter Coordinator. Berkshire AHEC, Pittsfield, MA. Provides introductory and advanced medical interpreting training programs in Berkshire AHEC service areas. Bi-lingual in Spanish or Russian required. Cover letter and resume to MITC Search, Berkshire AHEC, 60 Charles St, Pittsfield, MA, 01201 or tdiehl@berkshireahec.org ("MITC SEARCH" in subject line) by July 8, 2005, 4:00 p.m.

Events

Oral Health Advocacy Task Force Hearing. Wednesday, July 6, State House Room A-2, 10:00 AM. The Health Care Finance Committee will hear HCFA's Oral Health Care Task Force's two bills to restore dental benefits. Other bills also heard will include funding smoking cessation programs, removing enrollment caps, hearing aid coverage and benefit bills. Contact Health Care for All: (617) 350-7279, <http://www.hcfama.org>.

Funding

March of Dimes, Massachusetts Chapter, Community Grant Program, 2005 Request for Proposals (RFPs). Proposals will be accepted for projects in the following areas: 1) Strategies: Increasing Access to and Quality of Health Care for Women and Infants 2) Increasing Availability of Prevention Services or 3) Increasing availability of Genetics Services and Folic Acid Education. Awards will range from \$10,000 to \$20,000 each and grants are for one year. Letters of intent are due June 30. Contact Antonia Blinn, State Director of Program Services, March of Dimes: (508) 329-2824.

Resource Materials

- Family Pocket Guide: Raising Healthy Infants, Children, and Adolescents, offered by Bright Futures for Families. Includes information on choosing and working with your health care provider and on child growth and development. For a complimentary copy, contact the Health Resources and Services Administration (HRSA) Information Center: (888)-AKS-HRSA or (888)

275-4772. For bulk orders, email kcawley@fcsn.org . Additional information:

<http://brightfuturesforfamilies.org/materials.shtml>.

- Report: Community Health Workers: Essential to Improving Health in Massachusetts. The Massachusetts Department of Public Health (MDPH) has undertaken an investigation of state CHWs to better develop effective strategies for their support, development, recruitment and retention. To view the report, go to: <http://www.mass.gov/dph/fch/index.htm> (click upper right-*Community Health Worker Report*).
- Free Posters: “Have Limited Income? Social Security Can Help with Prescription Costs”. Important information for low- and moderate-income Medicare recipients. Available through the Centers for Medicare and Medicaid Services’ (CMS) website: <http://www.cms.hhs.gov//medlearn/drugcoverage.asp>
- *Karen Webber* of the Women’s Health Network (WHN) is available for education/outreach sessions about WHN and the importance of preventive health care. WHN links and pays for eligible uninsured and underinsured women to receive free breast and cervical cancer screening and cardiovascular services. To schedule a program, refer patients, or learn more, contact Karen at 888-663-3688, Extension 1340..