



# CLMHD News

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NYS Conference of Local Mental Hygiene Directors - *An Affiliate of the NYS Association of Counties*  
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## Legislative Update

*By Jeremy Darman*

The halls of the Capitol and Legislative Office Building have been quiet the past few weeks since the Legislature completed the bulk of the state budget and returned to their districts across the state. Nevertheless, there is still some legislative business being finished up, with packages of bills being periodically sent to the Governor for his action. Also, the Legislature must return within the next few weeks to pass a legislative spending plan for the recently released FMAP enhancement and education dollars from the Federal Government. Below are updates on a few bills with recent actions that may be of interest to members:

- ❖ **S.6263-C/A.9243-B Chapter 398: *Ian's Law***- The Governor signed legislation this week that will limit an insurer's ability to eliminate coverage of classes of health insurance coverage; a technique that was used by one insurer in New York State as a way to remove from coverage the bill's namesake, Ian Pearl, whose medical costs had become a financial burden to the insurer. The legislation would require insurers to follow a protocol when proposing to eliminate entire classes of insurance, in part to protect seriously ill patients in such classes of coverage from being dropped from coverage without any other prospective insurance options. The bill also requires insurers to certify that any proposed elimination of a class of insurance is not being done to drop a high cost individual from the company's coverage. This bill will go into effect on January 1, 2011. For more information, the press release for this legislation is available here: [http://www.state.ny.us/governor/press/081910PatersonSigns\\_IansLaw.html](http://www.state.ny.us/governor/press/081910PatersonSigns_IansLaw.html)
- ❖ **A.520/S.5926 Veto #6739: *County registry of all people with disabilities***- The Governor vetoed this bill that would have required all counties to maintain a list of all people with disabilities living within the county in order to assist in emergency evacuations. The bill would have required LGUs to provide information on all patients served within the local mental hygiene system, with their permission.

## Legislative Update (continued)

- ❖ **S.7845/A.11116 Chapter 303:** The Governor recently signed this bill that will prohibit insurers from denying payment for emergency services provided to persons injured as the result of their driving while intoxicated or ability impaired. OASAS Commissioner Karen M. Carpenter-Palumbo recently sent a letter to the field explaining some of the benefits of this legislation for persons with addictive disorders. The text of this letter, which describes the provisions of the bill, is below.

August 17, 2010

Dear Colleagues:

I want to inform you of an important new change in state insurance law that will increase screenings for drug and alcohol problems during emergency medical treatments and ultimately give more New Yorkers the opportunity of recovery.

Governor David A. Paterson signed legislation (Chapter 303 of the Laws of 2010. S.7845/A.11116) that now prohibits an insurer from denying benefits to certain emergency services rendered as a result of the insured being injured while driving intoxicated or drug impaired. This new law is a critical step forward in ensuring those with an underlying alcohol or drug problem receive the necessary medical screenings and have their problem identified in time to receive appropriate treatment.

Under the Public Health Law and the federal Emergency Medical Treatment and Active Labor Act, health service providers are required to provide emergency medical services to persons in need of such care. However, previous to the new law, no-fault insurers were permitted to deny coverage to individuals injured while driving drunk or drug impaired. As a result, health service providers sometimes were not compensated for services, leading these providers to avoid screening for intoxication fearing denial of compensation.

This new legislation eliminates a prohibitive law based on the belief that punishing the alcoholic or drug addicted would force him or her to change their behavior. We now know that addiction is a chronic disease that benefits from treatment. We also know that taking advantage of every opportunity to screen individuals for alcohol addiction and drug abuse is beneficial to that individual and to society as a whole.

The new law also compliments the Screening, Brief Intervention, Referral and Treatment (SBIRT) programs that are funded through the Federal Substance Abuse and Mental Health Services Administration (SAMHSA). SBIRT has been proven highly effective in motivating those whose substance use is unhealthy to alter their use. I applaud the Governor for protecting the 2.5 million New Yorkers suffering from addiction and leading them on a path to long-term recovery.

Sincerely,  
Karen M. Carpenter-Palumbo  
Commissioner



**Please Note:** If you have not already done so, please return your registration forms for the Fall Full Membership Meeting by fax to Vicky Quinn at 518-465-2695 by Aug. 25<sup>th</sup>.

## How Will Reform Affect Health Care Costs?

### [Series of Briefs Outlines Cost Controls in Health Reform Law](#)

By almost any measure America has the world's costliest health care system—and it is getting even more expensive by the year. Many argue that exploding health care costs present a serious threat to our economy and federal and state budgets, and that health reform needs to focus primarily on controlling these costs.

A series of brief reports funded by the Robert Wood Johnson Foundation explores the effects that the Patient Protection and Affordable Care Act (PPACA) will likely have on consumers, state governments, the economy and health care costs. In the reports released today, Urban Institute researchers examine how cost controls in the legislation, new rules for allowing purchase of health insurance across state lines, and malpractice reform could affect the amount of money Americans spend on health care and insurance.

The papers released today make the following conclusions:

Author Stephen Zuckerman said PPACA's modest cost-containment provisions could nevertheless help slow rising costs while simultaneously sparking improvements in quality.

#### [Read the brief about cost controls in the law.](#)

Author Linda Blumberg said interstate insurance sales will be permitted only under agreements by participating states, providing greater consumer protections than past proposals.

#### [Read the brief about selling insurance across state lines.](#)

Author Randall R. Bovbjerg said malpractice reform could significantly cut health care costs, but PPACA does not take major actions to address this issue.

- [Read the brief about effects on medical malpractice.](#)
- [Earlier package: Read the series about effects on health care providers.](#)
- [Earlier package: Read the series about effects on states.](#)
- [Earlier package: Read the series about effects on consumers.](#)
- [Earlier package: Read the series about effects on the economy.](#)

## *Policy Brief - The Implications of Health Reform for U.S. Charity Care Programs: Policy Considerations*

While the Affordable Care Act (ACA) will lead to a historic health insurance coverage expansion beginning in 2014, approximately 20 million individuals will remain uninsured. As policymakers and health systems prepare for ACA implementation, it is important that they consider who will remain uninsured and how that population can access coverage and care.

In *The Implications of Health Reform for U.S. Charity Care Programs: Policy Considerations*, the Center for Health Care Strategies (CHCS) and Academy Health discuss their study of U.S. charity care programs, which provide no- and low-cost coverage to many of the nation's uninsured. Funded by the Kaiser Permanente Institute for Health Policy, this brief describes:

- Current charity care program models;
- What is known and unknown about the remaining uninsured and who among them will seek charity care;
- How Medicaid and health plans might engage charity care programs to serve the newly eligible; and
- Considerations for preserving the viability of charity care programs, which will remain critical to the broader health care safety net in 2014 and beyond.

A corresponding report featuring case studies of the eight charity care programs included in this study is also available. [Read the policy brief and report:](#)

## NYS Health Releases Report on Implementing Federal Health Reform

Federal health reform could expand health care coverage for an estimated 1.2 million people in New York State who are currently uninsured, according to a new NYS Health-funded report. The report, entitled "[Implementing Federal Health Care Reform: A Roadmap for New York State](#)" and prepared by Manatt Health Solutions and the NYS Health Foundation Visiting Fellow, Deborah Bachrach, reviews and analyzes the key provisions of the Federal reform law, known as the Affordable Care Act. It projects the unique implications that each provision of the law holds for New York, and identifies the tasks and hurdles that State government and other stakeholders must confront when implementing reform.

The report finds that health care reform will require an overhaul of the State's existing regulatory and delivery infrastructure. Some of New York's existing regulations will have to be repealed; new health and insurance guidelines will have to be drawn up and issued; and significant new infrastructure and administrative systems will have to be created.

Please [click here](#) to download the full report, [click here](#) to read an *Albany Times Union* op-ed by NYS Health President and CEO James R. Knickman and Senior Vice President David Sandman examining the report's findings.

### News

- OASAS is pleased to announce a new DWI initiative that will significantly improve and standardize the quality and efficiency of clinical services provided to Impaired Drivers across New York State. OASAS approved providers of clinical screening and assessment services for impaired driving offenders are urged to visit the Impaired Driver Services web pages to review new requirements associated with this initiative, including: Standards for Clinical Services Provided to Individuals Arrested for an Impaired Driving Offense, training opportunities for providers, and the Impaired Driver System (IDS), a web-based data collection, tracking and reporting application.  
[New - Impaired Driver Services Section Now Available Online](#)
- CMS has issued a State Medicaid Director letter dated August 6, 2010 informing states of changes to 1915(i) of the Social Security Act made by the Patient Protection and Affordable Care Act. Changes include provisions which allow states to continue their needs-based eligibility criteria but can no longer limit the number of individuals who can enroll in the waiver. In addition, states can no longer limit 1915(i) eligibility to certain geographic areas of the state and cannot waive the statewide requirement.  
<http://www.cms.gov/smdl/downloads/SMD10015.pdf>
- CMS has issued a State Medicaid Director letter dated August 17, 2010 which provides guidance to State Medicaid agencies regarding Federal Funding for Medicaid HIT Activities. Specifically, the guidance applies to section 4201 of the American Recovery and Reinvestment Act of 2009 (the Recovery Act), Pub. L. 111-5, and the CMS published regulations at 42 CFR Part 495, Subpart D. Section 4201, as well as they CMS final regulations, will allow the payment of incentives to eligible professionals (EPs) and eligible hospitals to promote the adoption and meaningful use of certified electronic health record (EHR) technology.  
<http://www.cms.gov/smdl/downloads/SMD10016.pdf>

### NYS Conference of Local Mental Hygiene Directors Staff

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### Meeting Calendar

**Officers & Chairs Conference Call-9/8/10**  
8:00 - 9:00 a.m.

**Mental Hygiene Planning Committee-9/9/10**  
11:30 a.m. - 2:00 p.m., 41 State Street, Suite 505

**Fall Full Membership Meeting-9/20-9/21/10**  
Crowne Plaza Syracuse Hotel, Syracuse, NY

**No Executive Committee Meeting in September**  
**Mental Hygiene Planning Committee-10/7/10**  
11:30 a.m. - 2:00 p.m., 41 State Street, Suite 505

**Developmental Disabilities-10/15/10**  
11:00 a.m. - 2:30 p.m., 41 State St., Suite 505

**Officers & Chairs Conference Call-10/20/10**  
8:00 - 9:00 a.m.

**Chemical Dependency-10/25/10**  
10:00 a.m. - 2:00 p.m., 1450 Western Avenue

**Children and Families Committee-10/26/10**  
8:45 - 10:15 a.m., 41 State St., Suite 505