



LEAGUE OF
WOMEN VOTERS®

The Voter / November 2014



Important Dates

Election Day Nov 4

League Board Mtg Nov 12

Annual Holiday Party December 7

Save the Date

The League Legislative Breakfast
January 10, 2015. Details to
follow.



Greetings,

Tomorrow, November 4, Tennesseans will go to the polls and vote, not only to choose their elected officials, but to mark their ballots on four constitutional amendments which have great significance for our state.

Leading up to this election the League of Women Voters of Knoxville/Knox County has been hard at work registering and educating voters. Our Voter Services Committee, led by Ann Strange, has worked tirelessly on these efforts and deserves our special thanks. However, our work is not done and I want to encourage every league member to take some time over the next few hours to forward [the League position on the constitutional amendments](#) to family and friends.

These are complex and important issues. We each need to do our part to get this information in front of as many voters as possible before tomorrow.

Thank you in advance for your assistance. I know the work of the League matters to you and I appreciate your support and commitment.

In League,

Committees

Citizens Academy

Communications

[Maggie Carini](#)

Development

Lisa Carroll

Education

Ginna Mashburn

Land Use and Environment

Mary English

Membership

Faith Yandell

Naturalization

Lisa Mixon

Special Events

Debbie Sharp

Voter Services

Contact [Ann Strange](#)

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Kim

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President

The Voter Services Committee thanks everyone for their support and hard work for National Voter Registration Day 2014! Nationally, 9050 volunteers participated and 143,831 new voters registered. **Now we must do all we can to get everyone to vote!**

- Make sure that everyone you know realizes that this mid-term election includes choices for Governor, Senate, House of Representatives, four Constitutional Amendments, wine in grocery stores, and five City Charter Amendments.
- Message your personal contact list that YOU have voted and encourage your friends and neighbors to vote on Election Day.
- Review the sample ballot, the League position on the Constitutional Amendments, and general voting information at www.lwvknoxville.org.
- Additional resources include: Pew's Voting Information Project GetToThePolls.com--helps voters find their polling place, hours of operation, and full ballot summary based on residential address; the Election Protection Hotline 866-OUR-VOTE or 888-VE-Y-VOTA--assists with any issues surrounding voting; and Asian Americans Advancing Justice--a hotline available in multiple languages at 888-API-VOTE.

Membership Committee Needs Volunteers

by Faith Yandell, Membership Chair

The membership committee has lost our orientation chairman with Elizabeth Brister Franks' move to Virginia. We would love for a long time member, hopefully one who has served on the state or national board, to take over this position. The Power Point is already created and the handouts were updated this year. All this person would need to do is lead the presentation twice a year and

Quick Links

[LWVKKC Public Policy Positions](#)
[LWV TN](#)
[LWV US](#)
[TN Economic Council on Women](#)

Contact the League

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Email: league@lwvknoxville.org

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Voter

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answer questions. As Membership Chairman, I will send out the invitations, secure the meeting room and refreshments, and prepare the handouts. Please contact me at 865/859-9236 if you are interested.

Our committee is always looking for nice items to add to our new member package that don't cost a fortune to mail. I gave our last League cookbook to our most recent new member. If you have any ideas for additions, please contact Kim or me. Members who joined in the last year may have some ideas about what would be helpful to them as they get used to the League's unique way of operating.

NOTE: We have just discovered that the National League does not have records of when people joined if it was fairly long ago or the member has belonged to more than one LWV. Please make your own record of your joining date so you will know when you reach the 50 year mark and therefore are entitled to all benefits of membership without paying dues. Let the local treasurer know one year before you will no longer have to pay dues because it does affect her budget planning.

Celebrate the Season at the Annual Holiday Party

Special Events Chair Debbie Sharp has scheduled the League party on Sunday, December 7, 2-4 p.m. at the home of her parents, John and Diane Sharpe, 4819 Tazewell Pike, Knoxville, 37918. The League will provide all refreshments. We look forward to seeing long-time members and getting better acquainted with newer members as well. Please RSVP to Debbie at 951-8804 or dspuravida@yahoo.com.

Following Up Health Committee White Paper

The Health Committee, chaired by Kristen Slusher, is planning to convene the membership for discussion of their [white paper](#) early in 2015. Members are asked to read the paper which is posted on the League website, www.lwvknoxville.org. From the home page, scroll to Health Committee on the left column. Kristen can be

reached for comments or questions at
kmslusher@etch.com .

*(Reprinted from **The League of Women Voters of
Nashville Voter**)*

Ongoing Implementation of the Patient Protection and Affordable Care Act (June 2014)

by Health Care Director Rashonda Lewis

ACA Enrollment

Affordable Care Act (ACA) open enrollment wrapped up on March 31 and will start again on November 15 of this year. According to the enrollment report ending March 31, over **151,352** Tennesseans enrolled in marketplace plans and over **83,000** were deemed or assessed eligible for Medicaid. People who missed the March 31 deadline may qualify for a special enrollment period. The marketplace website, www.Healthcare.gov, has more information about who qualifies for a special enrollment period.

Medicaid Expansion

Medicaid expansion is now firmly in the hands of the Tennessee General Assembly. In April, the Legislature passed Senate Bill 2131/House Bill 2248, which requires the Governor to seek and achieve legislative approval of any plan to expand Medicaid. This bill, later signed into law by the Governor Haslam, locked in place legislative oversight for (a) whether an expansion actually happens, and (b) what that expansion looks like. Since the ball lies squarely in the Legislature's court now, we urge League members to reach out to your legislators and make the economic, public health, or personal case for Medicaid expansion in Tennessee. Governor **Bill Haslam** recently stated that he still considers future Medicaid expansion realistic, but a hard sell. Perhaps that sell will be easier after mid-term elections.

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The Affordable Care Act, TennCare, and Medicaid Expansion in Tennessee (July 2014)

by Health Care Director Rashonda Lewis

Medicaid Expansion Talks Resume . . . Sort Of

Governor **Bill Haslam** met for the first time, with newly appointed U.S. Department of Health and Human Services (HHS) Secretary **Sylvia Mathews Burwell** during the National Governors' Association Summer Meeting held in Nashville this week. During their meeting, they discussed the Governor's effort to gain federal approval for a "Tennessee Plan,"—his Medicaid expansion plan—that would leverage federal funding to purchase health insurance for 160,000 low-income Tennesseans. Secretary Burwell pointed out, as former Secretary **Kathleen Sebelius** had previously, that parts of the Tennessee Plan are simply not allowable under current federal law but other parts might be possible. Although the details of the Tennessee Plan have not been made public, parts that seem to be giving HHS pause are details about what services will be covered, how to incentivize healthy behavior, and patient co-payments.

Tennessee Called On the Carpet

Tennessee is one of six states to be called out recently by Centers for Medicare and Medicaid Services (CMS) Director **Cindy Mann** for not meeting one or more Medicaid/CHIP eligibility and enrollment obligations. In a letter dated June 27, Mann cited the state for failing to meet six out of seven "critical success factors" and gave Tennessee ten days to submit a corrective action plan. That plan is due July 14. CMS appeared most concerned about TEDS (Tennessee Eligibility Determination System), a \$35 million computer system that is intended to streamline Medicaid eligibility determinations and enrollment. TEDS was supposed to be finished last fall, in time for the first open enrollment period under the Affordable Care Act but remains unfinished and inoperable. In the meantime, people seeking to enroll in Medicaid are being directed to www.Healthcare.gov. Although CMS and advocacy groups contend that the state ended in-person Medicaid enrollment assistance on January 1 of this year, the state disputes it. An article by **Tom Wilemon** in the July 14, 2014 *Tennessean* reported Tennessee TennCare Director **Darin Gordon** disputing

claims that DHS offices throughout the state stopped in-person assistance: “He contends that the state does provide direct application assistance in every county by having self-service computer kiosks and people who meet the federal criteria [volunteers?] to counsel people on enrolling at healthcare.gov.”

The “Can’t Afford It” Argument—Not So Fast

Despite the many reports published by health economists and advisors from near and far that speak to the economic advantages of an expansion, opponents cling fiercely to the “we can’t afford it” argument. In response to a recent local turned national news story about a Maryville couple that separated to keep their health insurance, Senate Speaker **Ron Ramsey** commented that the couple’s situation was “tragic” but Tennessee taxpayers cannot afford a Medicaid expansion. A July 2014 report released by the White House Council of Economic Advisers suggests otherwise (see July 2014 White House report: “Missed Opportunities: The Consequences of State Decisions Not To Expand Medicaid” available [HERE](#)). According to the report, a Medicaid expansion in Tennessee will result in **234,000 additional people with insurance coverage** between 2014 and 2016, **a net increase in federal spending in Tennessee of \$5.1 billion** between 2014 and 2016, an **increase in employment for 21,700 workers** between 2014 and 2017, and an **increase in gross domestic product of \$3.8 billion** for the years 2014 through 2017.

A 2012 economic impact study conducted by researchers at the University of Memphis estimated the total cost of expansion to be about \$1.08 billion for 2014 through 2019 (see David M. Mirvis, MD and Cyril Chang, PhD. “Tennessee’s Option to Expand Medicaid Coverage: What Are the Issues?”

Does Lower Bottom Line for Tennessee Budget Drive Policy on Medicaid?

Medicaid budget meetings over the last eight months have reportedly focused on keeping new Medicaid enrollment numbers as low as possible **in an effort to maintain a balanced state budget. Yet the decision to**

not expand Medicaid deprives the state of at least \$2.3 million each and every day—increasing budget shortfalls. Could it be that Tennessee Medicaid administrators haven't implemented hospital signups, dropped in-person Medicaid enrollment assistance, and let the new website implementation slide in order to limit the number of new Tennessee Medicaid recipients? In the meantime, Tennessee hospitals in both large urban and smaller rural community economies are squeezed by uncompensated care and individuals and families suffer. If our state government is serious about improving the health and productivity of Tennesseans, we will begin to see decisions, policies, and actions that align with the goal of a healthy Tennessee instead of politically driven pushback. If other states can make population health a priority and do so in a fiscally sound way, so can Tennessee.



TennCare, Medicaid Expansion, and CHIP (August 2014)

by Health Care Director Rashonda Lewis

Lawsuit Seeks to Help Citizens Eligible for Medicaid

On July 23, 2014, the **Southern Poverty Law Center**, **Tennessee Justice Center**, and the **National Health Law Program** filed a civil action lawsuit (Melissa Wilson, et. al. v. Darin Gordon) against Tennessee. **Darin Gordon** is the director of TennCare—Tennessee's Medicaid program. According to the lawsuit, TennCare officials have adopted policies and engaged in practices that deprive thousands of eligible Tennesseans from Medicaid coverage. The lawsuit alleges that these policies and practices have resulted in some citizens—from newborn babies to seniors with serious medical conditions—going long periods without needed health care. The lawsuit specifically alleges that TennCare decisions to discontinue in-person assistance for Medicaid applicants and arbitrarily terminate coverage for newborns after hospital discharge violates federal law. Tennessee is the first state to be sued over Medicaid enrollment policies since passage of the Affordable Care Act. The August 14, 2014 *Tennessean* article "TennCare call center has no answers" details what has been happening.

U.S. House Forms State Medicaid Expansion Caucus

Over 25 members of the U.S. House of Representatives, including Rep. **Steve Cohen** (D-Tennessee), have formed the State Medicaid Expansion Caucus. According to caucus co-chairs Rep. **G. K. Butterfield** (D-North Carolina) and Rep. **Hank Johnson** (D-Georgia), the caucus “will highlight the need for recalcitrant states to expand Medicaid through floor speeches, op-eds, social media posts, and discussions with their colleagues and constituents.” This caucus will provide an additional and powerful layer of advocacy to current state efforts to push for Medicaid expansion.

Dollars for CHIP

Federal funding for **CoverKids**, Tennessee’s version of the federal Children’s Health Insurance Program (CHIP), is set to expire this October. The program covers around 68,000 children in Tennessee and is available to children in low to moderate income families. **CHIP** was first enacted in 1997 and has been renewed over time. In 2009, President Obama renewed and expanded the program for five years and now it is once again up for funding renewal. This time around, however, the congressional committees that authorize and oversee CHIP’s funding renewal have taken an unprecedented extra step and asked state governors to provide feedback on “whether and how the program should be extended.” Since all things health care seem to be political at this moment, we should not be surprised if CHIP becomes the next political battle ground. CoverKids makes health care affordable for working parents of thousands of Tennessee children. We want to urge Governor **Bill Haslam** to support expansion of this incredibly important program. League members should be prepared to write letters—lots of letters!



Locked Out—TennCare and Medicaid Expansion (September 2014)

by Health Care Director Rashonda Lewis

Update on Wilson v. Gordon

On July 23, 2014, the National Health Law Program

(NHeLP), Southern Poverty Law Center, and Tennessee Justice Center filed suit in federal court (Melissa Wilson, et. al. v. Darin Gordon) against TennCare Director **Darin Gordon**. This lawsuit was the first challenge to a state Medicaid program since enactment of the Affordable Care Act and alleged that certain TennCare policies and practices violate federal law and the Fourteenth Amendment due process clause. Specifically, the lawsuit alleged that TennCare enrollment practices have resulted in unreasonable delays in application decisions and that TennCare officials have failed to “provide the plaintiff class with an opportunity for a fair hearing on any delayed adjudication.” What this means is that newborns, pregnant women and children, the elderly, and people with disabilities are going months without needed medical care, even though they are eligible for services.

On September 2, 2014, US District Court Judge **Todd J. Campbell** ruled in favor of the plaintiff class, ordered TennCare officials to provide an opportunity for a fair hearing on any delayed application decision, and set out a timeline for hearings. The Court’s ruling stipulates that when an individual applies for TennCare and does not receive a determination/eligibility decision within 45 days (90 days for applications on the basis of disability), that individual is entitled to a fair hearing within 45 days (90 days for applications based on disability) of after the individual requests the hearing. This ruling is a major win for eligible individuals and families that have been eligible for but **LOCKED OUT** of health care services.

Medicaid Expansion

Governor **Bill Haslam** recently said that the state may submit a proposal to DHS this fall with the intention to cover more Tennesseans. Unfortunately, he disclosed no new details about how the plan will work. While we wait, Tennessee is **losing \$2.7 million a day** in federal funding. Rural areas of the state, which often have higher rates of poverty, chronic disease, older citizens, and a heavier reliance on public insurance (Medicaid/Medicare) than urban areas, are being hit particularly hard by the failure to expand Medicaid. And hundreds of thousands of hard working people in Tennessee continue without health

care.

The **ACA Coalition Rural Ambassador Meeting** was held Friday, August 22 and Saturday, August 23. **Sue Bredensteiner** attended both sessions of the program. The goal of the meeting was to develop community-specific strategies to support closing the health care coverage gap in Tennessee. Friday's session included discussions about rural hospital viability, or more accurately lack of viability, without Medicaid expansion, the diversity of pro-expansion support throughout the state (religious, media, business, local government), and the Wilson v. Gordon case. The Saturday session focused on advocacy and emphasized the following points:

- As a constituent and registered voter, your voter registration card represents an important **CURRENCY** that is the “ticket to successful advocacy.
- This year, there will be seven new senators and twelve new faces in the house. These are new opportunities to make the case for a Medicaid expansion
- We need to find more ways to amplify the voices of people who are living in the Gap and use stories as an advocacy tool. Retired nurses across the state are ready to help record 1000 stories in 90 days.
The story line number is 615-900-GAP3.

TennCare Assistance Training

Tennessee Justice Center is holding a TennCare Assistance Training next week. The purpose of the training is to assist advocates in helping people who are stuck in the TennCare application loop. The session will be held Monday, September 22 from 11:30 am to 12:30 pm at Saint Thomas Hospital West, Conference Dining Room B, 4220 Harding Pike, Nashville, Tennessee 37205. If you are unable to attend the training in person, you may view the webinar. To RSVP for the in-person session or the webinar, visit www.tjc-training.eventbrite.com.



Medicaid Expansion in Tennessee (October 2014)

Just How Expensive is Politics

In an October 13 *Tennessean* article entitled, “Haslam must walk a fine political line on Medicaid,” **Frank Daniels** describes the political challenges facing the governor as he considers and publicly articulates his thoughts about the possibility of Medicaid expansion. In May of this year, the legislature placed the expansion ball in their own court by requiring legislative approval of any decisions relating to Medicaid expansion. Governor **Bill Haslam** now has to craft and negotiate a plan that will expand access to health coverage for low income Tennesseans and pass legislative muster. Daniels ends his piece mentioning the 800 plus lives that could be saved through Medicaid expansion and states the following: “Politics should not be so expensive.”

There is hope that after November elections, legislators will be less pressed to fight expansion and more inclined to work with the Governor to craft a Tennessee-branded expansion plan. While we wait and hope for anti-expansion heads to cool in the post-election season, let’s review the ongoing costs of the decision to NOT expand Medicaid in Tennessee.

Money

Under the Affordable Care Act (ACA), the federal government funds 100 percent of the cost of Medicaid expansion through 2016. The federal share then gradually declines to 90 percent by 2020. According to the Tennessee Division of Health Care Finance Administration, Tennessee would spend \$200 million in state funds but receive **\$6.5 billion from the federal government.**

Jobs

The Affordable Care Act contains several cost containment provisions including cuts to Medicare reimbursement. The Medicaid expansion, by reducing the amount of uncompensated care hospitals provide, was intended to offset loss of revenues from ACA cost containment provisions. While it appears that ACA cost containment has worked to slow the growth of health

costs—health care price inflation is now at its lowest level in 50 years—hospitals throughout the state are struggling to provide the same level of uncompensated care with reduced revenues. Vanderbilt Medical Center, Baptist Memorial Health System, Erlanger Health System, and many rural hospitals throughout the state have had to address budget deficits through layoffs, hiring freezes, and other cost containment measures. **This amounts to lost jobs, understaffed medical facilities, and injury to local economies.**

Lives

In a Harvard study published in the New England Journal of Medicine in 2012, researchers compared mortality and other variables in three states that expanded Medicaid and states that did not expand Medicaid. In this study, researchers found that Medicaid expansions in three states were associated with a significant reduction in adult mortality, specifically a 6.1 percent reduction in all-cause mortality. The greatest reductions in mortality occurred among older adults, nonwhites, and residents in poorer counties. When researchers at the University of Memphis applied these results to Tennessee, they learned that **TENNESSEE MEDICAID EXPANSION WOULD RESULT IN 853 FEWER DEATHS PER YEAR.**

Lower Rate of Uninsured

According to a recently conducted Gallop-Healthways Well-Being survey, our neighboring states of Arkansas and Kentucky lead the pack with the sharpest reductions in the uninsured rate since the ACA insurance mandate took effect at the beginning of the year. In Arkansas, the uninsured rate dropped 10.1 percentage points between January 2013 and mid-year 2014. In Kentucky, the uninsured rate declined 8.5 percentage points. **Results from this survey show substantial reductions in the uninsured rate for all states that implemented Medicaid expansions and state-run health exchanges compared to states that opted out of both these actions.**

Timely Access to Medical Services for Vulnerable People

New Medicaid enrollees are more likely to be medically vulnerable—individuals who self-report fair or poor health, people who are older and non-white. **A decision by state leadership to opt out of expansion locks out folks who need health care the most.** According to the Harvard study cited above, Medicaid expansion resulted in a 21 percent reduction in delayed care.

Public Trust

According to a December 2013 Vanderbilt poll, a substantial majority of Tennessee voters (63 percent) support Medicaid expansion. Many of Tennessee's physicians, hospitals, nurses, community health centers, and academic medical centers support expansion. Individuals and families with health care needs and the inability to pay market prices for private plan premiums also support the expansion.

The state's inaction on Medicaid expansion can weaken public trust, particularly since the state has had to recently defend a backlog of Medicaid applications and its treatment of eligible, but not yet enrolled people. Finally, as more and more "red" states such as Arizona, Utah, and Pennsylvania implement expansion or expansion look-a-likes, the pressure builds for Tennessee to get onboard. Should Governor **Bill Haslam** move forward with a plan to expand Medicaid, he will find eleven other Republican governors (or maybe more depending on the timeline) **have already taken advantage of an opportunity for their citizens that's too good to pass up.**



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