

# LOUISIANA HEALTH CARE COMMISSION

Louisiana Department of Insurance  
Commissioner of Insurance James J. Donelon



## Report to the Legislature

January 1, 2017 to December 31, 2017

### **LOUISIANA DEPARTMENT OF INSURANCE**

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# HISTORY OF THE LOUISIANA HEALTH CARE COMMISSION

The Louisiana Health Care Commission was created in 1992 (La. R.S. 22:2161). The Louisiana Health Care Commission is a 47 member multi-disciplined advisory board which undertakes comprehensive review of complex health care issues facing Louisiana. The commission examines certain health policy developed by the Louisiana Department of Insurance as well as other issues addressing reform of the health care and health insurance systems in Louisiana. The commission's intent is to examine the affordability and accessibility of health care in the state of Louisiana.

Through public meetings and forums, the commission receives testimony, reports and informational presentations from regional and national experts about the availability and affordability of health care and health insurance coverage in the state. The commission openly solicits, encourages and receives public comment at all meetings. The commission coordinates its efforts with other study commissions, state agencies and executive initiatives.

# MEMBERSHIP OF THE LOUISIANA HEALTH CARE COMMISSION

The Louisiana Health Care Commission is composed of a great variety of health care experts and stakeholders, including health care payers, providers, employer organizations and community leaders. Members are also nominated from the governing boards of Louisiana's colleges and universities, and the Senate and House Insurance Committees; as well as at-large appointments designated by the commissioner of insurance.

Since its inception in 1992, the Louisiana Health Care Commission has included as many as 50 members.

During the 1995 Regular Session of the Louisiana Legislature, Act 594 revised and re-enacted the authorizing legislation to expand the commission to 39 members and extend its work until June 30, 1999. During the 1997 Regular Session of the Louisiana Legislature, Act 869 increased the membership of the commission to 44 members. During the 1999 Regular Session of the Louisiana Legislature, Act 446 was passed, which further increased the number of commission members and transferred the Louisiana Health Care Commission to the Louisiana Department of Insurance by La. R.S. 36:686(B).

During the 2004 Regular Session of the Louisiana Legislature, Act 495 amended La. R.S. 22:9 removing one dissolved organization and adding six new organizations to the commission, expanding the membership to 50 members. The 2012 Regular Session of the Louisiana Legislature brought Act 271 which amended La. R.S. 22:2161 removing four dissolved organizations, reducing the membership to 46 members.

During the 2014 Regular Legislative Session, Act 90 amended La. R.S. 22:2161, removing one dissolved organization, changing the names of two organizations and adding two others. The current membership of the Louisiana Health Care Commission is 47.

# LOUISIANA HEALTH CARE COMMISSION MEMBER LIST

The following is a list of Louisiana Health Care Commission members, along with the organizations they represent, as of December 31, 2017.

**Ms. Robelynn Abadie**  
NAIFA Louisiana

**Mr. Jeff Albright**  
Independent Insurance Agents & Brokers of  
Louisiana

**Lauren Bailey, JD**  
Louisiana State Medical Society

**Rick Born, CEO**  
Louisiana Association of Health Plans

**Ms. Katie Brittain, PT, DPT**  
Louisiana Physical Therapy Association

**Ms. Diane Davidson**  
Louisiana Business Group on Health

**Rachel Durel, DDS**  
Louisiana Dental Association

**William L. Ferguson, PhD, CLU, CPCU, ARM**  
University of Louisiana at Lafayette  
(A list of nominees submitted by the governing  
boards of state colleges and universities and by a  
dean from the business schools represented by the  
Louisiana Association of Independent Colleges and  
Universities)

**Mr. Beau H. Fourrier**  
Louisiana Association for Justice

**John F. Fraiche, MD**  
At-Large Appointment

**Mr. Arnold M. Goldberg**  
At-Large Appointment

**Faye Grimsley, PhD, CIH**  
(Xavier University of Louisiana  
A list of nominees submitted by the governing  
boards of state colleges and universities and by a  
dean from the business schools represented by the  
Louisiana Association of Independent Colleges and  
Universities)

**Mr. Korey Harvey**  
Louisiana Department of Insurance  
Ex-Officio; Designee of the Commissioner of  
Insurance

**Ms. Linda P. Hawkins**  
League of Women Voters of Louisiana

**Marlon D. Henderson, DDS**  
National Dental Association

**The Honorable Mike Huval**  
Louisiana House Insurance Committee

**Mr. Randal Johnson**  
Louisiana Independent Pharmacies Association

**Ms. Jennifer Katzman**  
Louisiana Department of Health & Hospitals

**Jesse Lambert, PsyD**  
Louisiana Psychological Association

**Eva Lamendola, OD**  
Optometry Association of Louisiana

## MEMBER LIST

**Mr. Darrell Langlois**

Blue Cross Blue Shield of Louisiana  
(A domestic mutual, non profit health service and indemnity company)

**Mr. Jesse McCormick**

America's Health Insurance Plans

**Ms. Jennifer McMahan**

Louisiana Hospital Association

**Ms. Barbara Morvant**

AARP, the nominee of which shall be a volunteer representative

**Mr. Andrew Muhl**

AARP Louisiana

**B. Ronnell Nolan, HIA, CHRS**

Health Agents for America, Inc.

**Mr. John Overton**

National Federation of Independent Businesses

**Mr. Ed Parker**

Louisiana AFL-CIO

**Ms. Stephanie Philips**

Association of Health Underwriters

**Mr. Clay Pinson**

Louisiana Association of Business and Industry

**Dr. Anthony Recasner**

Agenda for Children

**Patrick Reed, RN, DNP, MSN, MBA, MSHCM**

Louisiana State Nurses Association

**Ms. Debra Rushing**

eQHealth Solutions  
(Louisiana's Medicare Peer Review Organization as designated by the Health Care Financing Administration)

**James C. "Butch" Sonnier, BS, DC**

Chiropractic Association of Louisiana

**Ms. Elizabeth Sumrall**

Louisiana State University  
(A list of nominees submitted by the governing boards of state colleges and universities and by a dean from the business schools represented by the Louisiana Association of Independent Colleges and Universities)

**Mr. Bryan Wagner**

At-Large Appointment

**The Honorable Rick Ward, III**

Louisiana State Senate, Senate Committee on Insurance

**Ms. LaCosta Wix**

UnitedHealthcare  
(A domestic commercial health insurance issuer)

**STAFF:**

**Ms. Crystal Marchand Stutes**, Executive Director

**Ms. Julie M. Freeman**, Assistant Director



# BYLAWS OF THE LOUISIANA HEALTH CARE COMMISSION

## ARTICLE ONE

### NAME

The name of this commission shall be the Louisiana Health Care Commission, created under the provisions of R.S. 22:2161, as created by Act 1068, Section 1 of the 1992 Legislative Session, and as subsequently amended from time to time. The commission shall be domiciled in Baton Rouge.

## ARTICLE TWO

### PURPOSE

A. The purpose of this commission is to:

- 1) Study the availability and affordability of health care in the state;
- 2) Examine the rising costs of health care in the state, including but not limited to the cost of administrative duplication, the costs associated with excess capacity and duplication of medical services, the cost of medical malpractice and liability;
- 3) Examine the adequacy of consumer protections, as well as the formation and implementation of insurance pools that better assure citizens the ability to obtain health insurance at affordable costs and encourage employers to obtain health care benefits for their employees by increased bargaining power and economies of scale for better coverage and benefit options at reduced costs;
- 4) Examine the implementation issues related to national health care reform initiatives;
- 5) Conduct public hearings to receive testimony about the availability and affordability of health care in the state;
- 6) Receive further information and testimony from regional and national experts, when necessary, on health care access issues;
- 7) Serve as an advisory body to the commissioner and shall submit to the commissioner its recommendations on all matters which it is charged to examine;
- 8) Submit a yearly report on health care and health insurance, which takes into consideration the recommendations, actions and studies of the commission, to the legislature prior to each annual regular session.

## BYLAWS

### ARTICLE THREE

#### MEMBERS

A. Membership of the commission shall be comprised as follows:

- 1) Three members appointed from a list of nominees submitted by the governing boards of state colleges and universities and by a dean from the business schools represented by the Louisiana Association of Independent Colleges and Universities;
- 2) One member of the Senate Committee on Insurance appointed by the President of the Senate as an ex officio, nonvoting member;
- 3) One member of the House Committee on Insurance appointed by the Speaker of the House of Representatives as an ex officio, nonvoting member;
- 4) One member appointed by the secretary of the Department of Health and Hospitals;
- 5) Five at-large members appointed by the commissioner of insurance;
- 6) The commissioner of insurance or his designee, shall serve as ex officio;
- 7) The remaining members shall be appointed by the commissioner of insurance from a list of nominees, one nominee to be submitted by each of the following:
  - (1) The Louisiana Insurers' Conference.
  - (2) Louisiana Association of Health Plans.
  - (3) America's Health Insurance Plans.
  - (4) A domestic mutual, nonprofit health service and indemnity company.
  - (5) Louisiana State Medical Society.
  - (6) Louisiana Association for Justice.
  - (7) Health Agents for America.
  - (8) Agenda for Children.
  - (9) Independent Insurance Agents & Brokers of Louisiana.
  - (10) AARP Louisiana.
  - (11) The National Federation of Independent Businesses.
  - (12) Repealed by Acts 2012, No. 271, §2.
  - (13) Louisiana Independent Pharmacies Association.
  - (14) AARP, the nominee of which shall be a volunteer representative.
  - (15) Louisiana Association of Business and Industry.
  - (16) Louisiana Health Plan.
  - (17) NAIFA Louisiana.

## BYLAWS

- (18) League of Women Voters.
- (19) Louisiana Hospital Association.
- (20) Louisiana Primary Care Association.
- (21) Repealed by Acts 2014, No. 90, §2.
- (22) A domestic commercial health insurance issuer.
- (23) Chiropractic Association of Louisiana.
- (24) Louisiana AFL-CIO.
- (25) Louisiana Physical Therapy Association.
- (26) Louisiana State Nurses Association.
- (27) Louisiana Dental Association.
- (28) Louisiana Nursing Home Association.
- (29) Louisiana's Medicare Peer Review Organization as designated by the Health Care Financing Administration.
- (30) Louisiana Business Group on Health.
- (31) Louisiana Association of Health Underwriters.
- (32) Louisiana Psychological Association.
- (33) Optometry Association of Louisiana.
- (34) Repealed by Acts 2012, No. 271, §2.
- (35) National Medical Association.
- (36) National Association for the Advancement of Colored People.
- (37) Repealed by Acts 2012, No. 271, §2.
- (38) Louisiana Council on Human Relations.
- (39) National Dental Association.

B. All members shall be confirmed by the Senate.

C. The members of the commission shall serve without compensation.

D. The members shall serve for a term of two years.

E. Vacancies

- 1) Vacancies in the offices of the members shall be filled in the same manner as the original appointments for the unexpired portion of the term of the office vacated.
- 2) Any member who misses four (4) meetings in any given year or three (3) consecutive meetings shall be considered vacating that seat.
- 3) Vacancy may be declared upon the resignation, death, incapacity, or non-qualification of a member.

## **BYLAWS**

### **ARTICLE FOUR**

#### **OFFICERS**

- A. The commissioner of insurance shall appoint a chairman and vice-chairman.
- B. Term of office for chairman and vice-chairman is two years.

### **ARTICLE FIVE**

#### **EXECUTIVE COMMITTEE**

- A. The function of the Executive Committee is to exercise the powers of the commission which arise between regularly scheduled commission meetings or when it is not practical or feasible for the commission to meet.
- B. The committee will consist of the commission chair, the vice-chair and three commissioners representing the following groups: provider, insurer and consumer. Except for the chair and vice-chair, members will serve two year staggered terms. Members will be selected by the chair.
- C. The committee shall meet as necessary. A majority of the members shall constitute a quorum.
- D. Key Responsibilities
  - 1) Setting the agenda for commission meetings.
  - 2) Strategic Planning.
  - 3) Performance Measures.
  - 4) Proposing subcommittee assignments (including proposed Chairs) to the commission and coordination of the work of the subcommittees.
  - 5) Any emergency planning or implementation between regularly scheduled meetings.

## **BYLAWS**

### **ARTICLE SIX**

#### **MEETINGS**

A. A quorum for the transaction of business by the commission shall be 40 percent of the filled seats, excluding the ex-officio members.

B. All official actions of the commission shall require the affirmative vote of a majority of the quorum.

C. The commission shall meet twice in any one calendar year and may meet on the call of the chairman or upon the request of any three members.

### **ARTICLE SEVEN**

#### **COMMITTEES**

The commission may establish committees, in such areas as may be directed by its membership. The chairman shall appoint the members of such committees and shall designate the chairman of each such committee. The duties and responsibilities of the committee will be determined by the commission membership. Each appointed committee shall make reports as the committee may deem appropriate.

### **ARTICLE EIGHT**

#### **PARLIAMENTARY AUTHORITY**

A reasonably current version of Robert's Rules of Order, Newly Revised shall be the parliamentary authority for this commission.

### **ARTICLE NINE**

#### **AMENDMENT**

These bylaws may be amended at any meeting of the membership. Amendments shall be made by a quorum of the membership at such meeting, PROVIDED proper notice is given to the members, together with a copy of the proposed changes, prior to the meeting. These bylaws may be further amended at any time in which the provisions of R.S. 22:2161 are amended.

### **ARTICLE TEN**

#### **NOTICE**

All notices relative to this commission are posted pursuant to the Open Meetings Law.

# MEETINGS OF THE LOUISIANA HEALTH CARE COMMISSION

The Louisiana Health Care Commission conducted four meetings during the calendar year, January 1 – December 31, 2017. Throughout the year, the commission heard from various experts on health care issues that are of importance to the state of Louisiana. The commission also closely monitored federal health care reform legislation and its impact on Louisiana residents.

The Executive Committee for the Health Care Commission consists of the chair, vice-chair and three commission members representing health care providers, insurers and consumers. The mission of the LHCC Executive Committee is to plan the agenda for Louisiana Health Care Commission meetings, schedule any emergency meetings necessary between regular meetings and to propose subcommittee assignments. The LHCC Executive Committee held three meetings via conference call during the calendar year, January 1– December 31, 2017.

## **February 3, 2017**

The Louisiana Health Care Commission held its first meeting of the year on February 3, 2017. Following the introduction of new commission members, the Health Care Economist and Exchange Coordinator for Blue Cross and Blue Shield of Louisiana (Blue Cross) presented an overview of the individual health insurance market. Between 2014-2015, Blue Cross lost \$200 million dollars on individual products and yielded \$200 million dollars less in premiums than paid out in claims in the new individual marketplace in 2015. He also reported there to be an 80 percent higher claims cost in 2014 with an ACA population:

- Twice as likely to be obese
- Twice as likely to suffer from substance abuse
- Two-and-a-half times more likely to visit an emergency room
- Two-and-a-half times more likely to suffer from Hepatitis C
- Three-and-a-half times more likely to suffer from HIV
- 67% more likely to be diabetic
- 50% more likely to suffer from depression
- 50% more likely to visit and urgent care center
- 21% more likely to by hypertensive

He also discussed health care reform. He opined that repealing Obamacare, in whole, would be disruptive; guaranteed issued coverage should be maintained; elimination of the individual mandate would drive up costs; and elimination of the employer mandate would result in additional people seeking individual coverage or Medicaid.

Next, the senior legislative aide to U.S. Senator Bill Cassidy presented A State Alternative to Obamacare providing three basic core tenets moving forward into 2017:

## MEETINGS

1. Provide health care coverage to the uninsured;
2. If you like what coverage you have you can keep it; and
3. Respect states' rights giving states the option to choose from and include states in the repeal and replacement process.

Speaker and Louisiana Health Care Commission member of The League of Women Voters of the United States informed commission members that the league's health care policy position for both the United States and Louisiana are not based on the ability of the patient to pay for services but for a basic level of quality care at an affordable cost. She stated the league opposes a strictly private market-based financing model solely administered by the private sector and supports a combination of private and public or federal, state and health care resources, based on the urgency of the patient's medical condition, life expectancy, expected outcome of treatment, cost of procedure, duration of care, quality of life and wishes of the patient/family. She further stated the league supports the improvement of the Affordable Care Act and not repeal.

### May 5, 2017

At the next meeting, the commission members heard from the policy director for the Partnership to Fight Chronic (PFCD), who reported:

- Approximately 3 million people have at least one chronic condition;
- Between now and 2030, there is an estimated 12 billion in hidden medical costs that will syphon away income from families in terms of wages, employers and the economy at-large.
- Without change, it will cost \$8,600 per person in the state of Louisiana.

When considering heart disease and stroke to be the top chronic diseases, the World Health Organization estimates that 80 percent of premature heart disease and Type 2 Diabetes could be prevented by focusing on five risk factors:

1. Tobacco Use
2. Excessive Alcohol Consumption
3. Unhealthy Eating
4. Obesity
5. Physical Inactivity

In looking towards solutions, when PFCD partnered with the economic modeling firm, IHS, the state could save approximately 350,000 lives and 92 billion dollars in the next 13 years by modifying the above listed behaviors.

Finally, the CEO of Louisiana Association of Health Plans provided an overview of proposed House bills for the 2017 Regular Session.

## MEETINGS

### November 17, 2017

The third meeting of the calendar year was held on November 17, 2017. The chairperson welcomed the Director of Client Services & Telehealth Project Coordinator with the TexLa Telehealth Resource Center, who presented an overview of Telehealth services in Louisiana. He reported that the Task Force on Telehealth was created in the 2014 Regular Legislative session to function as an advisory body to the legislature and the Louisiana Department of Health and the U.S. Department of Health and Human Services on policies and practices that expand Telehealth services. He reported great progress was being made state-wide in telehealth services, with several grants being awarded in 2016. Large systems are no longer “siloed” as before and the cost of technology has come down, while many programs are thriving statewide; and with the expansion of access to telemedicine services, there is access to remote prescribing of medicine commonly used for substance abuse or mental health treatment.

Next, the Assistant Secretary/Medical Director of the Office of Behavioral Health (OBH) at the Louisiana Department of Health presented an overview of services, processes and continuum of care. He stated the OBH was charged with the oversight and management of behavioral health services for adults and children with severe mental illness, serious emotional/behavioral disorders, acute mental illness and substance use and addictive disorders. Services are provided for Medicaid, non-Medicaid eligible, private pay and self-pay populations

Additionally, he reported the LDH submitted a request for a Section 1115 Medicaid Demonstration Waiver on August 15, 2017, and resubmitted it on November 7, 2017, in order to maintain the status quo with both inpatient psychiatric services and SUD residential treatment in Institutions for Medical Disease (IMD). This waiver allows CMS to waive certain standard requirements in order to approve experimental, pilot or demonstration projects that promote the objectives of Medicaid programs, including the Children’s Health Insurance Program, that address substance use disorder services.

Finally, the Exchange Coordinator and Healthcare Economist for Blue Cross presented the latest developments on healthcare reform. He informed members the PPACA’s “new” Medicaid population consists of only one category, is income-based and comprised of the following population:

- Able-bodied eligible
- With a household income of 138 percent of the federal poverty line or less
- With over 440,000 enrolled in Louisiana July 1, 2016
- 18 million nationwide

More information on Healthcare Reform in the Trump Era: The Fate of the Patient Protection & Affordable Care Act can be found at: <http://www.lhi.la.gov/docs/default-source/documents/health/lhcc/lhcc-bertaut.pdf>



# SUBCOMMITTEE OF THE LOUISIANA HEALTH CARE COMMISSION

## **The Health Care and Pharmaceutical Costs Work Group**

The Health Care and Pharmaceutical Costs Work Group, which was created to examining the rising costs of health care in general, including, but not limited to, pharmaceutical and prescription drugs met in early 2017 to identify and discuss the largest sources of cost in health care.

Initially, the work group members identified a list of specific topics that they would like to see studied in further depth. The following list is a comprehensive list of all topics that were discussed with subcategories identifying possible solutions or warranting further study.

As indicated at the onset of the work group, the inclusion of any one topic does not require that it necessarily be pursued further, nor does the exclusion of any topic remove it from future consideration.

It was determined that cost factors would be divided into three general categories:

- Cost Effect - Medical Treatment/Factors
- Cost Effect – Business/Administrative Factors
- Cost Effect – Programs In Place

Under each category, subcategories were created for more organized study organization.

**SUBCOMMITTEE**

<b>Cost Effect Linked to Medical Treatment/Factors</b>			
<b>Prescription Drugs</b>	<b>Chronic Disease Treatment</b>	<b>Utilization Management</b>	<b>Preventive Health</b>
What effect do compounding pharmacies and their products have on market prices?	What is the cost of treating chronic diseases and inevitable readmission?	What are some strategies to reduce over-utilization of health care goods and services?	Can we find a cost-benefit analysis of wellness programs and identify strategies that have successfully reduced costs by encouraging healthier behavior?
How does the use of unapproved drugs and the unapproved use of approved drugs affect cost?	How are cost savings measured with respect to disease management?	What are the pros and cons of increased cost-sharing to reduce utilization?	What are the long term cost benefits of consulting and working with patients?
How does the issue of brand vs. generic drugs affect cost?	How can preventive care reduce these costs?	Medicaid ACOs	Health Literacy - Where does Louisiana Fall?
How do specialty drugs affect cost?			How can adherence to prescriptions improve quality outcomes and reduce costs?
How can transparency in drug pricing control costs?			
Why do inpatient vs. outpatient drug costs vary so much and what can be done to control costs here?			
How will streamlining drug approval help control costs?			
What role does opioid abuse play in the increase of health care costs?			

**SUBCOMMITTEE**

<b>Cost Effect Linked to Business / Administrative Factors</b>			
<b>Technology</b>	<b>Access to Providers</b>	<b>Fraud</b>	<b>Mergers</b>
Can we obtain a cost/benefit analysis of new technologies in health care? Are there statistics pointing to quality outcomes with new technology?	How does a shortage of health care providers at all levels affect cost?	Insurance and non-insurance related fraud in health care	Effects of both the merger of hospitals and the merger of insurers on pricing / premiums
	What is the cost effect of medical schools and admission requirements on over-all competition and supply?		

<b>Cost Effect Linked to Programs in Place</b>	
<b>Medicaid Expansion</b>	<b>Affordable Care Act</b>
Medicaid expansion in Louisiana - Is there a cost/benefit analysis on the expansion costs vs realized savings from a decrease in uninsured in other states?	Upward price costs for insurance premiums as a direct result of the Affordable Care Act
What is the cost effects as a result of longer life expectancy?	
Medicaid ACOs?	

# LOUISIANA DEPARTMENT OF INSURANCE ANNUAL HEALTH CARE CONFERENCE

The Annual Health Care Conference was held on September 7, 2017 at the Renaissance Baton Rouge Hotel. The event showcased the Louisiana Health Care Commission's 25-year milestone of dedicated service by its commission members. A diverse audience of more than 400 attendees representing health plan executives and staff, health care providers, insurance producers, government officials, employers, health care attorneys, and government relations professionals, including 17 exhibitors, were in attendance from Louisiana and other states. Local and national experts addressed the state of the health care market in Louisiana; the prevalence of opioid abuse and steps being taken to curb this public health crisis; and current issues facing insurance agents.

The conference was opened by its Moderator, Donna Fraiche, Senior Counsel of Baker, Donelson, who provided an insightful overview of the evolution of health care over the last 25 years.

Senator Bill Cassidy also joined the conference via Skype and gave a highly anticipated update on health care reform efforts from Washington. D.C.

Rear Admiral Pamela M. Schweitzer, Pharm.D, BCACP, Chief Pharmacist Officer and Assistant Surgeon General for the U.S. Public Health Service, delivered a keynote speech of public service motivation and acknowledged the ongoing contributions and efforts being made by the U.S. Public Health Service Commissioned Corps and its mission to protect and promote the advance of the health and safety of our Nation. She stressed the significance of personal and professional responsibility with the use of opioids and the importance of collaborative efforts and partnerships being made among the health care continuum with involvement of key stakeholders and communities at-large to curb the opioid abuse epidemic

## LOUISIANA HEALTH CARE CONFERENCE POWERPOINT PRESENTATIONS

The following presentations were given during the 2017 Annual Health Care Conference. Each presentation contains a link to the Louisiana Department of Insurance website where the PowerPoint presentations can be accessed according to each conference session.

### **Evolution of Health Care Over the Last 25 years: What Has Changed and What Lies Ahead for the Affordable Care Act?**

**Donna D. Fraiche, Esq.**

Senior Counsel, Baker, Donelson, Bearman, Caldwell & Berkowitz  
Conference Moderator

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/health-care-law-2017.pdf>

## CONFERENCE

### Louisiana's Public Health Care System

**Rebekah Gee, M.D.**

Secretary, Louisiana Department of Health

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/gee---ldi-conference-2017.pdf>

### The Opioid Epidemic: How Did We Get Here and How Do We Begin to Fight It?

**Dr. Meredith Warner**

Warner Orthopedics and Wellness

Moderator

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/exchange-panel-slides.pdf>

**William "Beau" Clark, M.D., D-ABMDI**

East Baton Rouge Coroner

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/beau-clark---louisianas-hero-in-epidemic.pdf>

**David J. Holcombe, M.D., MSA**

Regional Administrator/Medical Director

Louisiana Office of Public Health, Region VI (Central Louisiana)

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/david-holcombe---opioids.pdf>

**Bradley C. Martin, Pharm.D., Ph.D.**

Division Head of Pharmaceutical Evaluation and Policy

University of Arkansas for Medical Sciences

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/bradley-martin---uamsopioid-transitions.pdf>

### Confronting the Costs of Chronic Disease Treatment

**Candace DeMatteis**

Policy Director

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/candace-dematteis--chronic-disease.pdf>

**Kate Andrus, MPH RDN LDN**

Diabetes Prevention Manager

Bureau of Chronic Disease Prevention and Health Promotion

Office of Public Health, Louisiana Department of Health

<http://www.lidi.la.gov/docs/default-source/documents/health/lhcc/kate-andrus---public-health-approaches.pdf>

## LOOKING AHEAD

The Louisiana Health Care Commission will continue to study, monitor and make recommendations related to the availability and affordability of health care and health care coverage to the commissioner of insurance.

The Louisiana Health Care Commission will continue to study the issue of the uninsured and underinsured in order to make recommendations to further expand coverage options.

The Louisiana Health Care Commission will continue to monitor all federal and state legislation and make recommendations accordingly.

The Louisiana Health Care Commission will continue to monitor the implementation of federal health care reform as policies develop at both a state and national level.

The Louisiana Health Care Commission will coordinate a conference in the late fall of 2018 together with other divisions of the Louisiana Department of Insurance to be held in New Orleans.

The Louisiana Health Care Commission will hold meetings on March 23, May 18, August 24 and November 30 in 2018.

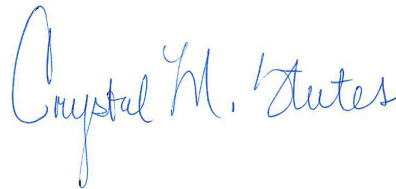
## CONCLUSION

We trust that this report is both informative and enlightening to our state legislators. The Louisiana Health Care Commission remains committed to addressing the many health policy issues that play a part in ensuring that Louisiana citizens have access to affordable, quality health care. The commission will continue to educate and encourage discussion of all stakeholders in the debate of the provision of health care for all Louisiana citizens.

The commission looks forward to playing a role in the search for more effective and efficient solutions for the delivery of health care in Louisiana.



John F. Fraiche, MD  
President and CEO  
St. Elizabeth Hospital Physicians  
Chair, Louisiana Health Care Commission



Crystal Marchand Stutes  
Executive Director  
Louisiana Health Care Commission

For more information about the Louisiana Department of Insurance and the Louisiana Health Care Commission, you may access the department website at [www.lidi.la.gov](http://www.lidi.la.gov). Lists of Louisiana Health Care Commission members and meeting dates are available on the website.

# APPENDIX

The following is a list of Louisiana Health Care Commission members, along with the organizations they represent and contact information, as of December 31, 2017.

**Ms. Robelynn Abadie**

Chief Executive Officer and Founder  
Abadie Financial Services, LLC  
10616 Timberlake Drive  
Baton Rouge, LA 70810  
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robelynn@abadiefinancialservices.com  
(NAIFA Louisiana)

**Mr. Jeff Albright**

Chief Executive Officer  
Independent Insurance Agents & Brokers of Louisiana  
18153 East Petroleum Drive  
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jalbright@iiabl.com  
(Independent Insurance Agents & Brokers of Louisiana)

**Lauren Bailey, JD**

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## APPENDIX

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## APPENDIX

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## APPENDIX

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## APPENDIX

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### **Positions Vacant as of 12-31-17**

- Louisiana Council on Human Relations
- Louisiana Health Plan
- Louisiana Insurers' Conference
- National Association for the Advancement of Colored People
- National Medical Association
- NAIFA Louisiana
- Louisiana Primary Care Association



**Louisiana Health Care Commission  
2017 Report to the Legislature**

***[www.lidi.la.gov](http://www.lidi.la.gov)***