

LRHA UPDATE

MARCH 2008, VOLUME XV ISSUE III

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LRHA MISSION STATEMENT:

To serve as a unified voice for the promotion of rural healthcare through advocacy, education, and leadership.



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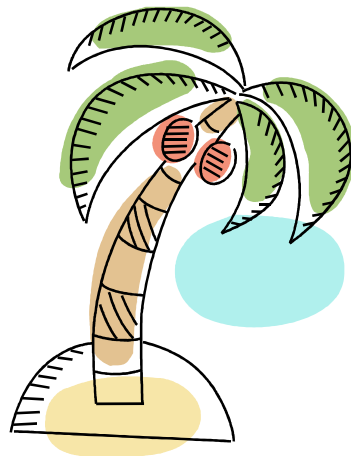
Vernon Stevens

Save the Date

Southern Regional Rural Healthcare Conference

June 16-17, 2008

Beau Rivage Resort, Biloxi, MS



*Registration and Agenda
coming soon!!*

*Check the LRHA website
for updates.*

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A view from the field...

*Dear Members, Colleagues, and
Healthcare Leaders,*



I hope this note finds you doing well. I'm pleased to report that the 2008 Spring Education Event was a great success. This educational opportunity brought nearly 90 rural health professionals and advocates together on March 3-4 at the Sheraton Baton Rouge Convention Center Hotel. I would like to thank the LRHA staff members for all of their hard work in preparing for the conference and contributing to its' overall success. LRHA has an excellent team working together to serve our members!

The 2008 Spring Conference provided an opportunity for attendees to hear from officials with the Governor's Administration and to receive up-to-date information on policy issues facing the future of rural health care in Louisiana and across the nation. Attendees also had the chance to let their voices be heard during the Legislative Rural Caucus Panel.

Thanks to everyone who was able to attend the Spring Event and we hope that you found the information valuable to improving the health status of rural Louisiana. Please click on the link below to download the presentations delivered at the conference.

http://www.lrha.org/past_events.htm

Don't forget to mark your calendar for the 2008 Southern Regional Rural Health Care Conference, which will be held on June 16-17 at the Beau Rivage Resort in Biloxi, MS.

The Alabama, Louisiana, and Mississippi Rural Health Associations' are in the process of finalizing the agenda and pertinent information should be heading your way soon.

As always, please do not hesitate to contact me at (985) 369-3813 - ext. 05 should you have any questions, concerns or recommendations.

We look forward to seeing you in June!

Sincerely,

A handwritten signature in black ink that reads "Stacy Fontenot".

*Stacy Fontenot
Executive Director*

From the Diamond Corner...

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Submit to the LRHA Update

arboneaux@lrha.org

We would love
to hear from
you!!



*A Message from the
American Heart
Association®*



Learn and LiveSM

Nutrition Labeling Background



On November 8, 1990, the president signed into law The Nutrition Labeling and Education Act. This major reform act has these provisions:

- Requires food manufacturers to disclose the fat (saturated and unsaturated), cholesterol, sodium, sugar, fiber, protein and carbohydrate content in their products.
- Requires labeling for the top-20-selling fruits, vegetables, fish and shellfish. Retailers may provide this information in a single location in their stores.
- Exempts from labeling such foods as meat, poultry and egg products, food sold in restaurants and at prepared food counters in grocery stores, infant formula, foods sold in bulk, foods with insignificant amounts of nutrients and foods sold by retailers with total sales of less than \$500,000.
- Requires the Food and Drug Administration to establish standards and definitions for food descriptors such as "low," "lean," "lite," "reduced," etc.
- Sets standards for allowing health claims on foods if the claims are based on sound scientific evidence and are truthful, accurate and not misleading and for allowing third-party references or endorsements.

On Jan. 6, 1993, the FDA and the USDA issued parallel regulations that designate the format and content of nutrition labels on most foods, including processed meat and poultry products. The new food label on all products allows consumers to make informed decisions about the foods they eat.

On May 27, 2000, the USDA and the U.S. Department of Health and Human Services (HHS) released the updated year 2000 dietary guidelines for Americans. As part of that announcement, the USDA will require nutrition labeling for meat and poultry products including all ground or chopped meat. The new dietary guidelines also emphasize physical activity as important for healthy living.

The National Nutrition Monitoring and Related Research Act of 1990 requires the USDA and HHS to publish dietary guidelines for Americans at least every five years.

As of Jan. 1, 2006, the Nutrition Facts Labels on packaged food products are required by the U.S. Food and Drug Administration (FDA) to list how many grams of [trans fatty acid \(trans fat\)](#) are contained within one serving of the product.

Governor Bobby Jindal Proclaims March as National Nutrition Month in Louisiana



National Nutrition Month® is a nutrition education and information campaign sponsored annually by the American Dietetic Association (ADA). Governor Bobby Jindal signed the proclamation on March 1, 2008 certifying March as the National Nutrition Month for the State of Louisiana. This campaign is designed to focus attention on the importance of making informed food choices and developing sound eating and physical activity habits. National Nutrition Month also promotes ADA and its members to the public and the media as the most valuable and credible source of timely, scientifically based food and nutrition information.

Helpful Resources:

[\(Click to access\)](#)

- 🔗 [Top 10 Nutrition Facts from American Dietetic Association](#)
- 🔗 [Nutrition Fact Sheets from the American Dietetic Association](#)
- 🔗 [“Tips for Eating Out” from the American Heart Association.](#)

**For more information on
Louisiana Medicaid's
Friends & Family Transportation
Program**

CLICK HERE

Implementing a New USDA Rural Development Program Targeting Small Rural Hospitals and Their Communities

The RUPRI Health Panel recently published a new brief on Implementing a New USDA Rural Development Program Targeting Small Rural Hospitals and Their Communities. The panel offers recommendations for implementing a new USDA Rural Development program, included in the Senate Farm Bill proposal, should it be enacted into law. The panel's recommendations can also be used to inform other programs already managed by USDA, such as the Community Facilities Program.



[Click here to download this document](#)

Attention!
Get screened for Cancer

A free health fair for the whole family.

Sponsored by:
The Cancer program of Our lady of the Lake and Mary Bird Perkins



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Loss of Low Income Subsidy (LIS) Due to the Medicare Beneficiary Not Responding to a Re-determination Request by SSA



In early September 2007, SSA mailed re-determination notices to about 500,000 beneficiaries who were currently receiving the low-income subsidy. Beneficiaries were required and instructed to complete the enclosed form within 30 days and submit it (postage paid) for processing. The original letter stated that if a beneficiary did not complete and return the form, eligibility for Extra Help would be terminated.

At the beginning of March 2008, Social Security Administration (SSA) began mailing "SSA Medicare Prescription Drug Assistance Notice of Termination" letters to some beneficiaries who are currently receiving the low-income subsidy. A small group of beneficiaries received this mailing the first week of March. Beneficiaries will no longer receive the Extra Help effective April 1 because they did not provide information about their continuing eligibility.

It is important for beneficiaries to know three key things:

- Their current drug plan will contact them to let them know how much their coverage will cost.
- They have a 3-month special enrollment period (beginning in March) to enroll in a less expensive drug plan if they so choose.
- They can file an appeal or reapply for Extra Help:

Beneficiaries should contact SSA right away to file an appeal if they disagree with this decision. Appeals can be made within 60 days of receiving the dated letter from SSA. Only those who file an appeal within the first 10 days will continue to receive the Extra Help while their appeal is waiting decision. Beneficiaries should also re-apply for Extra Help if their situation changes at any time in the future.

Beneficiaries should contact SSA at 1-800-SSA-1213 (1-800-772-1213) to file the appeal.

Health Care Costs Projected to Grow Beyond \$4 Trillion by 2017



Feb 26, 2008

The Centers for Medicare and Medicaid Services (CMS) has projected that health care costs will increase to more than \$4 trillion per year by 2017, "accounting for one of every \$5 the nation spends," mostly due to higher prices, a higher demand for care and an aging population, the Associated Press reports.

Health care spending will increase by 6.7 percent a year, which is about three times the rate of inflation, according to CMS. "Overall, federal and state governments accounted for about 46 percent of health expenditures in 2006. That percentage will increase to 49 percent over the next decade," reports AP.

"Health is projected to consume an expanding share of the economy, which means that policy-makers, insurers and the public will face increasingly difficult decisions about the way health care is delivered and paid for," said economists at CMS.

The Bush administration has proposed curbing Medicare costs by freezing reimbursement rates to health care providers and requiring higher-income Medicare beneficiaries to pay more in prescription drug premiums, but these recommendations "have little chance of passage in Congress," according to the article. Democrats have proposed "trimming payments to private insurers who oversee health coverage for nearly 9 million Medicare beneficiaries." According to health experts, Medicare ends up paying more when people choose a private plan over the traditional program.

FOUR IN 10 AMERICANS SAY THEY HAVE TROUBLE PAYING FOR DRUGS OR SKIP PRESCRIPTIONS OR CUT PILLS DUE TO COST



A new poll, the third in a series conducted jointly by USA Today and public opinion researchers at the Kaiser Family Foundation and the Harvard School of Public Health, finds Americans greatly value prescription drugs' potential benefits for their families, but most believe they cost too much money and many struggle to pay for needed medicines.

Four in 10 Americans (and half of those regularly taking at least one medication) report experiencing at least one of three cost-related concerns in their family: 16 percent say it is a "serious" problem to pay for prescription drugs; 29 percent say they have not filled a prescription in the past two years because of the cost; and 23 percent say they have cut pills in half or skipped doses in order to make a medication last longer. People are most likely to report one of these three issues if they lack drug coverage (52 percent), if they have low incomes (54 percent) or if they take four or more drugs regularly (59 percent).

The survey finds that while the public values the products drug companies produce, they do not like what they charge and are suspicious of their motivation. Nearly eight in 10 Americans say that the cost of prescription drugs is unreasonable, and seven in 10 say pharmaceutical companies are too concerned about making profits and not concerned enough about helping people. Nearly two-thirds (64 percent) of the public say that there is not enough government regulation to limit the price of drugs.

(Article continued on page 6.....)

(Continued from page 5.....)



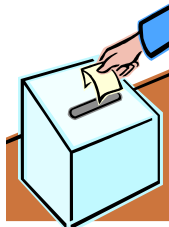
Nearly six in 10 say insurers should only pay for new drugs if they are proven to be not just safe but also more effective than existing ones.

At the same time, the public overwhelmingly believes that recent advances in prescription drugs provide benefits. Nearly three-quarters (73 percent) say that prescription drugs developed over the past 20 years have made the lives of people in the U.S. better, and nearly two-thirds (63 percent) say the same about their own and their family members' lives. In addition, six in 10 (59 percent) say prescription drugs reduce the need for expensive medical procedures and hospitalizations.

Overall, the public has mixed opinions of pharmaceutical companies, with 47 percent viewing the industry favorably and 44 percent unfavorably. Drug companies are viewed slightly more favorably than health insurers (40 percent favorable), but significantly less than doctors (81 percent favorable).

Despite recent controversies, more than half the public (55 percent) thinks pharmaceutical companies do enough to test and monitor the safety of their drugs, and the same share (55 percent) trust pharmaceutical companies at least somewhat to quickly notify the public about safety concerns. Majorities also think that pharmaceutical companies act in an ethical way when testing their products on people (62 percent) and on animals (56 percent).

[Click here to see the results of the poll.](#)



LRHA Spring Conference 2008



2008 LRHA Corporate Sponsors Honored at Spring Conference

The Louisiana Rural Health Association honored their 2008 Corporate Sponsors on March 3, 2008 for their gracious and continued support of the Association. LRHA truly values the support that we receive from our Corporate Sponsors as they assist us in our continued growth and success. Their support allows us to offer our members valuable information allowing them to provide the highest quality of care to the people that they serve. We are privileged to honor the following Sponsors for their efforts and with sincere appreciation; we thank you for sponsoring LRHA in 2008.

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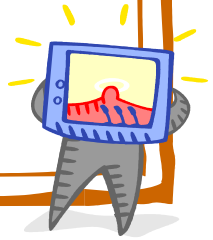
Senator Vitter Holds Town Hall Meeting in Napoleonville



In fulfillment of a powerful campaign promise, Senator David Vitter (R-LA) recently held his second series of town hall meetings across the State of Louisiana - one of which took place in LRHA's backyard at the Napoleonville Community Center. With Executive Director, Stacey Fontenot and Project Director, Michael Calabro participating in the event, the Senator covered many areas of state concern. In doing so, Vitter provided information and fielded questions from the community relating to: the war in Iraq, immigration, crime, prescription drugs and most importantly – rural health care. As a follow-up to our visit with Senator Vitter in Washington, D.C. during NRHA's policy institute in January, LRHA reiterated the importance for continued funding and support in training and retention of rural practitioners. Senator Vitter was well versed in this area and pledged to keep this matter, and the overall needs of rural Louisianans, in his thoughts and actions.



ACS Colorectal Cancer Screening Program



On March 12, 2008, the Louisiana Rural Health Association was on hand as the American Cancer Society unveiled its' Colorectal Cancer Testing Pilot Program to be offered as a solution to Louisiana's cancer crisis. As we are well aware, Louisiana leads the nation in the number of colon cancer deaths annually and this press conference was used to announce a legislative initiative to create a much needed colorectal cancer screening program. On the steps of the Louisiana State Capitol in Baton Rouge, Sen. Willie Mount, Chairperson of Health and Welfare Committee & Rep. Karen Carter Peterson, Speaker Pro Tempore, joined with numerous healthcare professionals from across the state in pledging support for this vital endeavor. Louisiana Rural Health will be an ongoing partner with the American Cancer Society in advocating for laws that provide the underserved in our state with access to critical and life-saving cancer screening programs. For further background information, please contact Andrew Muhl of ACS at (225) 767.4565.



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