



# CAPE COD TIMES

## **Will Trump's plans for health care undo state reforms?**

*Services, funding unclear with coming presidency*

By Cynthia McCormick

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Local health care advocates and politicians say the future of the Massachusetts experiment with health reform is up in the air after the election of Republican Donald Trump and a Republican Congress.

President-elect Trump has said in recent days he would keep parts of the federal Affordable Care Act, modeled on the Massachusetts health reform act of 2006.

In particular, during an interview with the Wall Street Journal, Trump expressed interest in making sure insurance programs cover people with pre-existing conditions, as well as allow young adults to remain on their parents' plans until age 26.

But his transition team continues to vow that the Trump administration will work with Congress to repeal and replace the ACA and to change the way states administer Medicaid programs for the poorest residents.

"We are not sure what repeal and replacement of the ACA would look like," said Heidi Romans Nelson, CEO of Duffy Health Center in Hyannis.

She said some of the policies put forth by Trump and the GOP platform could reduce federal funding and cut grant programs at nonprofit community health centers by 50 percent or more.

The future of funding for community health centers is a concern, said Dan Driscoll, of Harbor Health Services Inc. in Dorchester, which also operates Harbor Health Center in Hyannis and the Ellen Jones Community Dental Center in Harwich.

"It's not clear yet," Driscoll said in an email that pointed out Massachusetts already has its own version of health care reform on the books.

The uncertainty bothers Harbor Health patient and small business owner Robert Lothrop, of Harwich, who said his Neighborhood Health Plan made health insurance affordable.

"What's going to happen if they get rid of that?" Lothrop said. He said he wasn't alone in his concerns.

Trump, whose published policies include replacing the ACA with programs such as health savings accounts, campaigned on a seven-point plan that would replace federal funding for Medicaid — known in the state as MassHealth — with block grants to states.

Health care advocates say lump sums could mean fewer dollars to what previously has operated as an entitlement program for anybody who qualified financially.

These block grants for poverty programs — lump sums of money delivered to states or regions with few strings attached — tend to be underfunded, according to many policy analysts.

"We might not be able to continue services at the level we have in the past," Nelson said.

"We have had an expanded MassHealth program in Massachusetts since before the ACA, since 2006," Nelson said. "It increased under the Bush administration, and it has continued to increase under the ACA."

Duffy relies heavily on MassHealth, with 60 percent of its insurance reimbursement coming from the subsidized insurance program funded jointly by the state and federal government, Nelson said.

Other nonprofit community health centers on the Cape and Cape Cod Healthcare also rely on reimbursement from MassHealth as well as plans that provide state subsidies to help lower the cost of insurance.

And MassHealth isn't the only funding that could be at stake, Nelson said.

"Health centers across the county could stand to lose 50 to 70 percent of their federal grant funding if these funds are not continued," Nelson wrote in an email.

"Duffy Health Center's federal Health Care for the Homeless grant has grown from \$850,000 per year to \$2.2 million per year since 2010," Nelson said. "Our patient base has grown from around 2,600 per year to 3,300 per year, and our services have expanded, particularly in the areas of mental health and substance abuse treatment."

Since the ACA was signed by President Obama in 2010, millions of dollars in federal funding have flowed to the Cape's four community health centers, allowing them to hire more physicians, add space and expand services such as mental health and dental care.

Outer Cape Health Services receives \$1.8 million — 10 percent of its budget — from the federal government and focuses a lot of attention on getting people signed up for health care coverage, Outer Cape Health Services CEO Patricia Nadle said.

Staff was working "double time" last week to get people enrolled following an explosion of interest after Trump's election, Nadle said. She called the subsidized health plans available to new enrollees who may have experienced employment or other changes "really a lifeline."

“There has been a significant expansion of programs and services since the ACA began, and in order to continue those programs, Congress and the president need to vote to continue the funds,” Nelson said in an email.

But while the Democratic platform contained a policy position that would have doubled the size of the health center budget, the Republican platform "does not contain language regarding funding for health centers," Nelson said.

With Republican control of the presidency and Congress, “the GOP platform becomes relevant,” Nelson said.

She said she also is concerned about the Republican party's stated plans to cut taxes, which may result in cuts to health center grants, and to shift more of the costs of Medicare for individuals age 65 and up to the beneficiary.

Peter J. Martin, a Worcester attorney who represents health care providers, said he believes community health centers will continue to play a robust role in patient care in the future.

“You want to get people into a lower-cost setting,” said Martin, who is on the board of the Family Health Center in Worcester. “That’s going to continue to be a focus of federal funding.”

“Not a lot is going to happen very quickly,” said Martin, an attorney with the firm Bowditch & Dewey.

But newly elected state Sen. Julian Cyr, D-Truro, said he also is concerned about health care funding.

“We can expect to see an erosion of federal resources,” he said. “That’s a given.”

Cyr said he is disappointed that Trump’s team includes so many insiders with “significant” financial interest and social policy interest in the outcome of administration programs.

“Voters sent a clear message about shaking up the status quo,” Cyr said. “That doesn’t seem to be what’s happening here.”

"We really have a president who had very few fleshed-out policy statements," Cyr said. "I'm operating from the assumption that all of it is up in the air."

While thousands of Cape Codders qualify for federal tax credits or state subsidies to help lower the cost of insurance plans, many residents struggle to keep up with rising premiums and deductibles.

Trump’s transition team on [greatagain.gov](http://greatagain.gov) says the president-elect’s administration will work with Congress to increase choices for health care consumers — a market-based remedy that’s been floated by the libertarian Cato Institute in Washington, D.C., for years.

While on the campaign trail, Trump's position plan called for Congress "to step away from the special interests and do what's right for America" by allowing the importation of inexpensive prescription drugs from overseas, but that point has been eliminated from the transition site.

The transition site sides with a major policy directive of the Cato Institute by calling for the reform of the Food and Drug Administration, saying that would "put greater focus on the need of patients for new and innovative medical products."

Post-election language in Trump's health care plan at [greatagain.gov](http://greatagain.gov) also calls for protecting "individual conscience in healthcare" as well as protecting "innocent human life from conception to natural death, including the most defenseless and those Americans with disabilities."

Trump's Massachusetts Campaign Chairman, Vincent DeVito, did not respond to a reporter's voicemail and email request for comment.

Fran Manzelli, of the Barnstable County Republican Club, said he did not want to comment on the direction of Trump's health care policies.