



## MISSOURI MUST DECLARE A POLICY WAR ON CORONAVIRUS AND WIN

By Patrick Ishmael and Elias Tsapelas

Missouri is confronted by a threat that it hasn't seen for a century: a pandemic. The coronavirus outbreak that's circled the world has come to the heartland, threatening both Missourians and the system that is to care for them should they get sick. Fortunately, a great deal of effort has already been devoted to educating the public about the best practices for avoiding the virus, including regular handwashing, social distancing, and staying at home. Unfortunately, a great deal remains to be done to orient the state's health care system in a way that maximizes the talent of our health care professionals during this crisis.

This is why we have has pressed hard, and will continue to press hard, for a discrete and specific set of health care reforms that will help Missouri meet the challenge of the current war against the virus and position our state to continue meeting the needs of its citizens long into the future. The focus of these reforms is straightforward: the promotion and maximization of health care supply.

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- Maximizing the supply of health care professionals through interstate license reciprocity: Central to the question of care are the professionals who would deliver it. Yet the state discriminates against doctors, licensed and in good standing in other states, who want to provide care to Missouri patients. That should change immediately. As the coronavirus epidemic sweeps through the state, we want every competent professional in the country to be able to help. Accepting out-of-state licenses is central to making this a reality.
- Maximizing health care access through the promotion and protection of telemedicine: One of the greatest risks of the coronavirus crisis is the possibility that thousands of Missouri patients will get sick all at once, overwhelming the state's available hospital and health care resources. One important safety valve for this is telemedicine, which enables patients to see doctors remotely and from the comfort of their own homes. Telemedicine provides a number of benefits, but keeping people out of hospitals, especially if their health concerns are minor or unrelated to the coronavirus, will be among the biggest during the current crisis. License reciprocity would help to expand the reach of professionals who could see these patients remotely from locations outside of Missouri, but other regulatory changes are needed to ensure telemedicine policy is advanced to its fullest possible extent.
- Maximizing hospital beds and services through certificate of need repeal: The risk of thousands of patients rushing to hospitals all at once is a problem not just because we may not have enough professionals on site to see them, but also because we may not have enough facilities to meet their needs. Unfortunately, the state's certificate of need process erects barriers to entry for all manner of health care services, including a restriction of the nature and depth of services that a facility can offer. Those restrictions should be abolished, and hospitals should be allowed to build the facilities they believe their communities need—not the facilities that the state says the community needs.

- Maximizing the availability of health care services through an appropriate expansion of professionals' scope of medical practice: To help prevent Missouri hospitals from being overrun, health care professionals who are competent to do so should be allowed to practice to the full extent of their training. In the context of this crisis, that includes allowing pharmacists to diagnose, treat and prescribe medication to patients to address common illnesses that may, especially during normal times, otherwise fill up the state's urgent care centers and emergency rooms. It also means making studied but swift decisions about allowing medical and nursing students to assist in this crisis, consistent with their training, should the demand for health care services accelerate.
- Maximizing health insurance availability through the deregulation and expansion of health insurance plans: Especially under circumstances where Missourians find themselves in the middle of economic turmoil, having ready access to a spectrum of insurance options with a spectrum of prices is enormously important. Policymakers need to reassess regulations on more traditional plans and extend the duration of short-term medical plans to ensure that Missourians can access plans that meet their needs and mitigate their financial risk.

Many of these items have already been debated and voted on in the Missouri Legislature this year. But while we expect the state's legislative session to continue, when that work will continue—and what the legislature will have time to consider—remains uncertain. It is likely, then, that most if not all of these items will first have to be facilitated through executive action. Certainly, executive action has already been taken a number of times in addressing this crisis, and the governor's March 18th order, EO 20-04, opens the door to direct executive action on the reforms outlined.

## EO 20-04:

 Allows the state's Departments of Health and Senior Services, Public Safety, Social Services, Commerce and Insurance (which contains the Division of Profession Registration and its boards), and Labor and Industrial Relations, as well as the Office of Administration, to temporarily waive or suspend any statutory or administrative rule under the director/commissioner's purview.

- Suspends some of the requirements for establishing a physician–patient relationship prior to treatment through telemedicine. Prior to its suspension, doctors were required to perform a physical examination of the patient prior to treating or prescribing any drug to a patient through telemedicine. Also, they were required to maintain a contemporaneous medical record that would be readily available to the patient at the time of the meeting.
- Allows for any executive agency, board, commission, or department that is not specifically mentioned to petition the governor to waive any statutory requirements or administrative rule in order to best service public health and safety during the state of emergency and recovery period.

Future executive orders and administrative actions should build on EO 20-04. Among them:

- Any health care professional licensed by and in good standing with a party to the Emergency Management Compact should be allowed to practice in Missouri. Every state in the country is a party to the EMC; by declaring full reciprocity with EMC members, the state will be fully leveraging the health care professionals of the country.
- Out-of-state health care professionals should also be allowed to deliver telemedicine services to Missouri patients.
- The state should waive its certificate of need restrictions to ensure that the state has a flexible supply of health care services.
- Provision should be made for pharmacists and health students to expand the pool of services before the crisis hits Missouri hard, so that all professionals being recruited into this effort have sufficient notice and time to prepare for what the state will ask of them.

Ultimately, the legislature will need to act to make these reforms permanent. But for the health of Missourians, we hope that swift executive action is taken to ensure that state residents can maximize the services we already have, and can access services that we currently don't.

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