

### **RHAT continues to monitor Telehealth rules and regulations**

RHAT is pleased with the progress being made in the area of Telehealth. Telehealth will be an important tool for, and is vital for, access to rural health. RHAT will continue to monitor rulemaking and how it affects rural Tennessee.

### **RHAT continues to monitor legislation for tobacco and vapor products**

RHAT has consistently been on record against use of tobacco.

Tennessee exceeds the average national smoking rate. Smoking leads to so many chronic health problems.

While there is not yet enough scientific evidence as to the negative or positive benefits of Vapors, RHAT has concerns about its use, as Vapors contain nicotine, an extremely addictive and harmful ingredient.

Source: <https://news.tn.gov/node/13328>

### **RHAT supports Coordinated School Health (CSH)**

RHAT thanks our legislators for their continued support of Coordinated School Health across Tennessee.

### **Other statements of support:**

**RHAT supports strong community health centers, rural health clinics and other safety net providers**

**RHAT supports strong workforce development programs for rural areas**

**RHAT supports ongoing legislation that improves access to behavioral health care services**

### **Values:**

- Promote equitable access to appropriate and comprehensive health services for rural Tennesseans.
- Maintain a diverse membership that represents all Tennesseans.
- Empower members to assist the community in identifying and resolving their own unique health care needs through grass-roots efforts.
- Recognize the benefits of collaborating with other agencies and organizations in order to positively impact health outcomes.

### **Contact:**

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## **2016 Legislative Principles and Priorities**

**RHAT believes Insure Tennessee is good for Tennessee. We understand the importance of this legislation for meeting the needs of our rural Tennesseans and for the fiscal impact it can have on our rural hospitals. If our rural hospitals close it will impact our rural citizens and our economic development in the counties where the closings occur.**

**RHAT will continue to support efforts for passing Insure Tennessee.**

### **RHAT supports SB1466/HB1731—requiring certificate of need (CON) for pain clinics**

With the growing problem of opioid addiction in Tennessee, this bill will add a threshold of justification for the expansion of these clinics.

**Mission:** To improve the health of rural Tennesseans through advocacy, communication, education, and legislation.

### **RHAT supports SB1956/HB2025—creation of a comprehensive oral health plan**

Tennessee has one of the worst public oral health problems in the nation. This plan will provide a roadmap on ways to improve this important health initiative.

### **RHAT opposes any weakening of motorcycle helmet laws (SB925/HB700)**

Eight percent of motorcycle riders involved in crashes are either injured or killed (NCSL Transportation Review, 2012)

A national study researched six years of information in the National Trauma Data Bank on motorcycle crashes. The authors concluded that un-helmeted motorcycle crash patients suffer more severe brain injuries, consume more resources, and have the worst insurance payor mix. Society bears a large financial burden for these uninsured un-helmeted patients. There is a survival advantage for helmeted patients. (Annals of Surgery, 2009)

Studies indicate that the risk of brain injury in hospitalized motorcyclists is nearly twice that for un-helmeted motorcyclists and that un-helmeted drivers had acute care costs three times (\$30,365) that of helmeted drivers.

### **RHAT supports hospital assessment**

RHAT appreciates the past support of legislators of the Hospital Assessment Act and asks your continued support in 2016—2017

Tennessee's hospitals have helped the state and TennCare avoid more than \$1 billion in service cuts and reimbursement reductions over the past four years.

The assessment is vital to the continuation of comprehensive care to TennCare enrollees and in preserving payments to providers for many services.

Hospitals provide \$450 million to fund TennCare through the hospital assessment and another almost \$200 million in certified public expenditures.

Source: [www.tha.com](http://www.tha.com)

### **RHAT supports SB2373/HB2331 covered Telehealth services for insurance purpose**

Eliminates the requirement that a healthcare services provider be at a hospital or other qualified site for the service to be considered telehealth services for insurance purposes; requires health insurance entities to reimburse healthcare service providers at the same rate for telehealth services as for in-person encounters.

### **RHAT opposes any TennCare cuts to providers and hospitals**

A reduction could place a greater financial burden on hospitals and providers that would be unsustainable. Hospitals are prepared to avoid these reductions by using one-time monies from hospital assessment trust fund reserves.

Tennessee's hospitals employ over 97,000 people and cannot afford to take further cuts to TennCare reimbursement.

### **RHAT is also monitoring the following healthcare legislation:**

- **SB2443 Health Care Empowerment Act**
- **SB1973/HB1978 tobacco and vapor products from 18—21 years of age**
- **SB0521/HB0861 Tennessee Healthcare Improvement Act of 2015, physician-led patient care teams**
- **SB1133/HB1333 compensation when killed in line of duty for ems personnel and 911 operators**
- **SB1629/HB1660 deletes termination of the legislation that permits prosecution of a woman should her newborn baby be addicted to narcotic drugs**
- **SB2510/HB1908 dental hygienists teledentistry**