

John Hickenlooper

Mark Masselli: This is Conversations on Healthcare, I am Mark Masselli.

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Well Margaret, we're starting off the new year with an evolving public health issue; flu season is in full swing; as many as 46 states are reporting widespread cases of flu and we're only just getting into the season.

Margaret Flinter: Aha that is rough and California has been hit especially hard accordingly an analysis and Kaiser Health News, they're seeing a record high number of hospitalizations with the flu, they're having a hard time keeping up with the number of cases that actually require hospital care. But we're seeing that story played out all across the country and state health officials are on notice and letting the public know.

Mark Masselli: And you know Margaret this year's flu strain is a particularly virulent one and according to public health officials the vaccine for the flu proved to be only about 10% effective in preventing flu.

Margaret Flinter: But people are still far better off getting the flu shot, even if it doesn't fully protect you from contracting the flu, the vaccine can diminish the severity of the case of flu and that is so important moment to look at flu mortality data it's the public health axiom that bears repeating the more people who are vaccinated the less likely it is to spread through the population.

Mark Masselli: And speaking of public health our guest today is a state leader who is quite committed to health and well-being of his constituents Gov. John Hickenlooper of Colorado is joining us today talking about the state's commitment to improving public health really looking forward to having him on our show today.

Margaret Flinter: He will also be talking about what they've learned from their grand experiment as the first state in the nation that legalized recreational marijuana and what they think other states can learn from their experience.

Mark Masselli: We will also have Lori Robertson stop by, she is the Managing Editor of FactCheck.org. But no matter what the topic, you can hear all of our shows by going to [chcradio.com](http://chcradio.com).

Margaret Flinter: And as always if you have comments, please email us at [chcradio@chc1.com](mailto:chcradio@chc1.com) or find us on Facebook or Twitter; we love hearing from you. We will get to our interview with Gov. John Hickenlooper of Colorado in just a moment.

Mark Masselli: But first here's our producer Marianne O'Hare with this week's headline news.

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Marianne O'Hare: I am Marianne O'Hare with these healthcare headlines. Congress is moving ahead with approval of the President's pick to run the Department of Health and Human Services replacing former HHS Sec. Tom Price who resigned last year former insurance industry executive Alex Azar came before the Senate Finance Committee to respond with number of questions about the healthcare industry including the high cost of drug prices. He said he would be willing to look at ways to bring prices under control but that a new formulary would have to be required to do this effectively across the board. He also noted it might be worth to look to see if Medicaid could be shifted from a so-called entitlement program to a block grant system offering states more flexibility.

New Hampshire is moving closer to legalizing recreational marijuana, the State House passed a measure that would allow people over 21 to grow up to three pot plants on their own for personal use. It follows on the heels of neighboring Vermont who just passed a similar measure in that state with Republican Gov. Rick Scott expected to sign it.

Meanwhile states are bracing for what might come next in the wake of the announcement from the Justice Department that the feds would now begin cracking down on states who defy federal marijuana laws from pot to nukes the CDC is holding talks later this month on how public health officials and individuals should prepare for nuclear war. The CDC is saying that while the chance for a nuclear explosion is in certain preparation and planning can "lessen deaths and illness" in the wake of such an event others are expressing deep concern. Former VP Joe Biden stating he thinks the US has never been closer to the threat of nuclear war. I am Marianne O'Hare with these healthcare headlines.

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Mark Masselli: We are speaking today with Gov. John Hickenlooper the 42nd governor of the state of Colorado serving since 2011, a geologist, entrepreneur, long time advocate for Community Health Center Movement. Gov. John Hickenlooper previously served as mayor of Denver and was chosen by Time Magazine as one of the top five big city mayors in the country. Gov. John Hickenlooper chaired the National Governor's Association and had since led the bipartisan coalition of governors committed to preserving the Affordable Care Act. He was named as one of the Esquire magazines Americans of the Year. Gov. John Hickenlooper earned his BA in literature his MS in geology from Wesleyan University. Gov. John Hickenlooper, welcome to Conversations on Healthcare.

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Gov. John Hickenlooper: Well it's so exciting to be on.

Mark Masselli: Well certainly Colorado is known as one of the healthiest states in the nation and your work as governor played in an essential role in establishing policies that promote health and well-being. You've served both as governor and the mayor Colorado's largest city focusing on a full scope of determinants of health from enrollment and health coverage to access to care environmental quality and you took on the task of homelessness at the City of Denver, and I am wondering if you could share with our listeners of what you think are the most important health issues that a state leader needs to be focused in on right now?

Gov. John Hickenlooper: Well I think the integration of how we make sure that everybody has a medical home, and that medical home by its nature should include mental health so people can -- really kind of one-stop shop where they know they're get care. And if they need specialty works they could get recommended one place or another, that's probably to me the highest priorities and basically that's way of expanding coverage without letting your cost run wild and without compromising in any way your quality. I mean expanded coverage at the same costs or minimal increase cost maintaining and improving quality that's got to be the North star [PH] for everybody.

Margaret Flinter: Well Gov. John Hickenlooper we've all seen over long years in healthcare that without coverage access to really good healthcare can be very problematic for people. And it's been really remarkable under Affordable Care Act over these recently years to see coverage expand to more than 20 million Americans who were uninsured before, and I know that you have seen significant coverage gains in your state as well. What does those gains and coverage meant to the people of your state?

Gov. John Hickenlooper: Well, we've always been the fittest state, I mean Colorado with a highest state – I am not talking about medical marijuana or recreation of marijuana. But we have the most elevation so that lot of people are attracted here for hiking and mountain biking, and skiing you know outdoor recreation, but we haven't always been the healthiest state. I think a lot of that is we had never test ourselves to say, how do we expand coverage, because that's a big part of that. I think that through the Affordable Care Act we ended up expanding coverage to about 600,000 people in the state with five half-million residents. We really went for about 50% of people that were not covered down to less than 5% that's when you can really begin talking of becoming one of the healthiest states.

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Mark Masselli: Governor as you were talking about how you'd expanded coverage, I was thinking about the funding of health programs like CHIP in Medicaid the major challenges for state executives and funding for programs like Community Health Centers in the National Health Service Corps all vital to the delivery system that you have in Colorado, and in Washington there's this ongoing battle over how to fund these programs that impact state budgets very significantly. So how are you and other governors dealing with this uncertainty?

Gov. John Hickenlooper: You know there's a bunch of us; Republicans and Democrats have been working on everything from trying to protect the Affordable Care Act to CHIP is the more recent political bargaining CHIP, again CHIP should never – it's always been bipartisan and it should have nothing to do with politics. I think that having clinic where everyone is received and you have some sort of sliding scale that is the, only future that I can see foreseeable that is going to allow us to really ultimately get eventually 100% coverage and yet still make sure that we're not taking away too much of our public resources from higher Ed, K-12 education all the other pressing needs.

Margaret Flinter: Well you know Gov. John Hickenlooper among the many provisions of the Affordable Care Act one of the important chapters was on innovation and how to foster innovation at the state level. And that's something that you and your team in Colorado seem to have really excelled at, you have got your Colorado's State Innovation Model or SIM as it's known with a number of pilots to improve care, improve outcomes, really transform healthcare. You talked about integrating behavior health into primary care which is so critical but also making payment reforms based on the outcomes that patient experience, we would love for you to share with us what's some of the SIM innovations are that you have developed. Share with us some of those lessons.

Gov. John Hickenlooper: When we first applied for a federal grant the focus was how do we really integrate mental health into people's existing medical homes, and that SIM program has been remarkably successful. I was just down in a clinic in Southern Colorado and it has changed the way they approach delivering healthcare of not just mental health but everything. So they will have a team approach and in one group meeting they'll have you know four or five or six different professionals who will go down the list of all these different patients who are -- each one is unique and yet they can find the generalities and the opportunities to catch undetected threats and make sure that they're addressed very early on. When I talked to every single professional in this clinic, everyone, they couldn't stop rating [PH] about it and most of the person they said they were working longer hours but loving it more, they were totally enthusiastic. And I think we've really worked hard to try and give people taking care of their own health and for

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all our state employees we have a incentive program so that if someone smoking we make sure that there's dollars and cents involved in their quitting because we know that ultimately that going to make them better employee, better investment but it's also going to save the healthcare system cost.

Mark Masselli: We are speaking today with Colorado Gov. John Hickenlooper he has served as chairman of the National Governor's Association and before that was mayor of Denver. Gov. John Hickenlooper, I think it's almost axiomatic when we hear your name to think of sort of a bipartisan approach including in the area of health policy and you and Republican Gov. John Kasich had notably launched several bipartisan efforts on a variety of topics urging lawmakers in Washington to improve the Affordable Care Act rather than repeal it. And you have also both recently demanded the reauthorization as you just mentioned of the CHIP funding that Congress has held up for months and what have you learned from the collaboration with the Gov. Kasich and also other governors around the country from your shared experience of fostering bipartisanship?

Gov. John Hickenlooper: We didn't know each other well until just about a year ago and I was getting very worried about what -- the Trump Administration was just coming into office then there were a lot of threats about the Affordable Care Act being dismantled. And I thought it would be meaningful to have a Republican governor and a Democratic governor both stand side-by-side say, hey wait a second, we agree that you got to control costs, we agree that things should change, it can be improved, but we don't want to roll back coverage and we don't want to roll back the partnership with federal government. And Kasich is a remarkable person in his own right, we don't agree on number of things, but finding those core values where we can find the appropriate compromises has been a real I think a powerful motivator for a lot of people in states all around the country you know states are the laboratories of democracy. So we're the ones who is got to be doing experiments and coming up with the innovations and then finding out whether they work or not. And one of the real byproducts of -- for CHIP letter that we just sent out before Christmas, we had 12 bipartisan governors, governors from Louisiana and Alaska, Massachusetts and Montana and all of us unanimously agreed the CHIP should continue and be extended as is. In this day and age you get conservative Republicans like John Kasich and liberal Democrats, all recognizing that these are core values that we need to embrace, that's a valuable message. Of all the things I have worked on, I can't think of anything I have got more feedback from in a positive way, Republicans and Democrats then the work with Kasich.

Margaret Flinter: You know governor sometimes it's adversity that pulls us together or huge threats, and I think threat to the nation the opioid crisis is really unlike anything

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that we had seen in our lifetimes it's overwhelming challenge in states and in cities areas rural and urban. We are really curious how you are grappling with the opioid crisis in Colorado within the National Governor's Association. Is there a sense of a best practice emerging at the state level to address this crisis?

Gov. John Hickenlooper: I had chaired along with Gov. Bentley who is from Alabama and was an MD, we chaired committee within the National Governor's Association around opioid abuse. Since then we set up a Prescription Drug Monitoring Program in Colorado, I think that's now in about 12 states to make sure that somebody doesn't take a prescription and go from pharmacy to pharmacy to pharmacy. And we are seeing in New England that now neighboring states are providing that interoperability so that pharmacies can collaborate across state lines and make sure that people aren't -- they caught hiding prescriptions, getting people go through their medicine cabinets. You know every time I go to a dentist to get a crown I am of that age and they had finished procedure and then he'd say, alright here's a prescription, call me if you still have pain after three days and then he would give me a prescription for 30 days, that's crazy. And so we started big effort promoted heavily, places where people could safely get rid of their excess opioids.

And now in terms of our Medicaid patients unless they had got continuing chronic pain we're limiting the opioid prescriptions to seven days, you know I am pushing very hard for five days because somebody showed me a study that just five days of continuous opioid use for certain people that will -- they will become addicted in that short a time. There's a study that came out in the American Journal of Public Health, they did a study on -- and we legalized recreational marijuana -- we saw a benefit in terms of the opioid abuse. We normalized all our efforts around drug monitoring programs and reducing that kind of usage but they still found 6% or 7% reduction in opioid abuse from the legalization recreational marijuana. And the moment my phone came off the hook because all -- lot of people who were very much opposed of recreational marijuana being legal had lots of negative things to say about the study.

Mark Masselli: Gov. John Hickenlooper, I know you've just mentioned the issue of Colorado legalizing marijuana number of years ago you were initially against it California became another state, you've realized some benefits and some negative concerns about the whole issue. And I am wondering if you could just share with the larger American population what you see as the benefits around this grand social experiment that Colorado was front and center on.

Gov. John Hickenlooper: Yeah. I think everyone has to recognize that the old system was badly broken, we sent millions of young people to prison for felonies largely

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Latinos, African-American, children of color for nonviolent crimes. As we legalize it -- I'm not sure we perfected the system yet and we had some initial unintended consequences. We had a lot of toddlers admitted to emergency rooms that the kids had just gotten into the edibles so we changed the law and made it so that whenever you sell edibles it has to be in a tamper proof containers. You know I went out to California and I talked to the General Assembly, I talked to Gov. Brown and they are learning from all the states that have gone ahead of them. I think they're going to learn from our mistakes they're going to create their new innovations and we're going to try and learn from them as well. Certainly we are seeing less drug dealers, people that have like day labor companies that workers would come and work for day, get paid in cash, they describe always having 2 or 3 drug dealers around so when these guys would get off work and have a pocket full of cash they try to selling mostly pot. Now, two specific -- companies specifically said, you know we don't see drug dealers around anymore, and we had to actually lower the taxes that we were charging to recreational marijuana to make sure that we really did push the black market so far on the ground that it's not worth the risk to continue operating. So I think we're getting close to getting it right.

Margaret Flinter: Well Gov. John Hickenlooper, you are in office until 2019 and certainly your name is mentioned as a possible contender in the 2020 presidential race, we'd love to have you -- maybe share with us how your hopes and aspirations fit into this shifting political landscape.

Gov. John Hickenlooper: Sure. What's going on right now across the country, the divides we are seeing between rural and urban America issues around access to healthcare is some of the basics that this country has always really been a leader in investment infrastructure somehow all that has been turned upside down. And I think I have in my little handheld calendar count down every day and that's true for all my cabinet and our goal is to finish strong. And one of the things we have talked about repeatedly is to make Colorado not just the fittest state but the healthiest state, I hope it as this year goes forward, people begin to tamper some of the I call them crude political approaches to making decisions where people will oppose something that really benefits their constituents but they will oppose it just because it might give political advantage to a candidate in a year and a half. We're trying to figure out how to draw new alliances where people come together not around what party are you in but what are your core beliefs. And healthcare is an excellent example there where pretty much everyone doesn't want to roll back coverage pretty much everyone believes we got to find ways to control costs. I think clean air and clean water are big common values for most Americans and belief in public land so we have been talking to outdoor recreation industry about getting more politically evolved. But in those basic values about cleaner air, cleaner water, access to public lands, I think those kinds of alliances that are outside the political order I hope are going to be the future and as people see more

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examples it would be nice to have some really loud voices that weren't quite so strident about one party or the other.

Mark Masselli: We have been speaking today with Colorado Gov. John Hickenlooper, you can learn more about his work by going to Colorado.gov or you can follow him on Twitter at @GovofCO. Gov. John Hickenlooper, happy new year and thank you so much for joining us on Conversations of Healthcare.

Gov. John Hickenlooper: Happy new year to you guys and keep doing your great work.

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Mark Masselli: At Conversations on Healthcare, we want our audience to be truly in the know when it comes to the facts about healthcare reform and policy. Lori Robertson is an award-winning journalist and managing editor of FactCheck.org, a nonpartisan, nonprofit consumer advocate for voters that aim to reduce the level of deception in US politics. Lori what have you got for us this week?

Lori Robertson: Our round up of whoppers from 2017 includes several items on healthcare. House Speaker Paul Ryan said, he didn't think anyone would be hurt by an \$800 billion reduction in Medicaid spending over 10 years in the health care bill. But the nonpartisan Congressional Budget Office estimated that 14 million fewer Americans would have Medicaid coverage by 2026.

Democratic Sen. Catherine Cortez Masto, wrongly claimed that "over 1.2 million Nevadans with preexisting conditions would be denied coverage or face exorbitant unaffordable premiums". The bill would not have allowed insurers to deny coverage. Also, the 1.2 million figure is a high-end estimate for all Nevadans with some preexisting condition.

Sen. Rand Paul, a Republican who voted against the health care bill, said subsidies "are actually greater under the Republican Bill than they are under the current Obamacare law." That was wrong. CBO said the average subsidy under the bill would be significantly lower than the average subsidy under the Affordable Care Act and the government would save \$424 billion over 10 years due to mainly to reductions in government subsidies.

And that's my fact check for this week, I am Lori Robertson Managing Editor of FactCheck.org.



Margaret Flinter: FactCheck.org is committed to factual accuracy from the country's major political players and is a project of the Annenberg Public Policy Center at the University of Pennsylvania. If you have a fact, that you would like checked, email us at [www.chcradio.com](http://www.chcradio.com). We will have FactCheck.org's Lori Robertson check it out for you here on Conversations on Healthcare.

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Mark Masselli: Each week Conversations highlights a bright idea about how to make wellness a part of our communities and everyday lives. Tinnitus is vaccine condition that afflicts millions of Americans, a condition for which there is really no viable treatment to date. But a University of Michigan researcher may have found a solution, lead researcher Dr. Susan Shore says tinnitus marked by a constant ringing in the ears is really the results of misfiring brain signals. Her team has developing device aimed at getting to the root cause of tinnitus neurons in the region of the brain stem called the cochlear nucleus. When those cells become hyperactive they create a signal that is transmitted to the part of the brain where sharing perception occurs and the constant ringing can wreak havoc on sufferers' lives.

Dr. Susan Shore: What you are doing is you are tricking the brain into altering its circuitry to go back to normal.

Mark Masselli: The device is called a targeted bimodal auditory somatosensory stimulation and works on two fronts it uses both weak electrical impulses target to the brain stem region responsible for the problem and also sends time sound to interrupt the auditory sensation caused by the tinnitus. Dr. Shore says they found it more successful with tinnitus sufferers where we're able to control the condition already through certain facial movements.

Dr. Susan Shore: We developed this treatment for a particular class of tinnitus in which the person that has the tinnitus is able to modulate either the pitch or the loudness of their tinnitus by pushing on their face or pushing on their forehead or clenching their jaw.

Mark Masselli: The study group has been relatively small so far just a few dozen participants but the results have been quite promising. Dr. Shore says that the severity of the tinnitus was greatly reduced in most of the participants and some got to the point where it no longer interfered with their daily lives. She says they're hoping to enlist more participants to advance their research on preventing tinnitus symptoms from reoccurring.

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Dr. Susan Shore: We need a good solution for tinnitus as it's affecting millions of people.

Mark Masselli: A relatively simple targeted device that could potentially help millions of tinnitus sufferers from the worst effects of their condition, allowing them to diminish or even ignore what is often a debilitating condition for many to live with, now that's a bright idea.

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Margaret Flinter: This is Conversations on Healthcare, I am Margaret Flinter.

Mark Masselli: And I am Mark Masselli, peace and health.

Conversations on Healthcare, broadcast from the campus of WESU at Wesleyan University, streaming live at [www.wesufm.org](http://www.wesufm.org) and brought to you by the Community Health Center.