AAP Chapters
Crafting A State Advocacy Agenda
TODAY’S PLAN

• Learn how to develop a state advocacy agenda that:
  – Fits your chapter’s needs
  – Engages chapter membership and other stakeholders in state advocacy efforts
  – Supports AAP Priorities
OUR EXPERTS

- Lelach Rave, MD, FAAP
  - State Government Affairs Committee Chairperson
  - AAP Washington Chapter

- Jennifer Groos, MD, FAAP
  - State Government Affairs Committee Chairperson; Immediate Past President
  - AAP Iowa Chapter

- Laurie Lippold, MSW
  - Lobbyist
  - AAP Washington Chapter

- Fran Gallagher, MEd
  - Executive Director
  - AAP New Jersey Chapter
DEVELOPING A STATE ADVOCACY AGENDA ADVANCES YOUR CHAPTER

• Helps you be proactive.
• Enables you to manage volume of issues and bills.
• Increases member engagement.
• Widens the circle, bringing in other stakeholders.
CONNECTING TO AAP PRIORITIES

2017 State Advocacy Outlook

BLUEPRINT FOR CHILDREN
How the next president can build a foundation for a healthy future.
Washington Chapter Legislative Committee

Lelach Rave, Legislative Chair
Laurie Lippold, Legislative Liaison
Weekly committee calls during session

- December: Meet with legislators
- January: Legislative session begins
- February: Advocacy Day
- March: Short session ends
- April: Long session ends
- May: Work on setting next year's agenda
- June: Board Retreat: vote on agenda
- July: Meet with legislators
- August: Meet with legislators
- September: Meet with legislators
- October: Meet with legislators
- November: Meet with legislators

Monthly committee calls outside of session
The WCAAP membership represents nearly 1,000 pediatric health professionals across the state working to make Washington a better place for kids to grow and thrive. These legislative priorities will help advance our vision of laying a foundation for a lifetime of health and well-being for all children in our state.

**Give children access to timely, quality health care:**
- Increase pediatric Medicaid reimbursement to Medicare rates.
- Improve access to appropriate behavioral health care for children.

**Give children a healthy start:**
- Invest in evidence-based early childhood programs, including Reach Out and Read, child care consultation and home visiting.
- Provide paid family medical leave to allow parents to be with their children when they need them most.

**Keep children and youth safe:**
- Raise the legal age to purchase tobacco products to 21.
- Prevent children from accessing firearms.
- Update Washington’s distracted driving laws.
Give children access to timely, quality health care

Increase pediatric Medicaid reimbursement to Medicare rates.
In Washington 1 in every 2 children relies on Medicaid for health coverage, but the low rates paid by Medicaid make it increasingly difficult for providers to care for these patients. As a result, clinics are closing their doors to children on Medicaid. Raising the Medicaid rate will improve access to care for all children in Washington and result in better disease prevention, earlier diagnosis and treatment, and fewer emergency room visits.

Improve access to appropriate behavioral health care for children.
Behavioral health disorders affect up to 1 in 5 children in a given year, with an estimated annual cost of $247 billion. Yet only 1 in 5 of those children affected receive the care they need. Early diagnosis and evidence-based treatment is critical to help ensure healthy development and prevent problems at home, at school and with peers throughout childhood and into adulthood.
Developing State Legislative Priorities

September 21, 2016
Jennifer Groos, MD, FAAP – Chapter State Government Affairs Committee Chairperson; Immediate Past President
The Iowa Chapter

- 340 Members
- Medium-sized
- Legislative committee
  - Core group of pediatricians
  - Work closely with our lobbyist
  - Representative from the committee is a member of the Iowa Medical Society’s Legislative Committee
  - Hold an Annual Legislative breakfast conjunction with the state children’s hospital
Crafting the Legislative Priorities

- Meet via conference call annually in September to craft legislative agenda
- Lobbyist gives an overview of the previous state legislative session and previews the upcoming session
- Various advocacy strategies are outlined for each issue based on the legislative climate in the state
- Various potential priorities are discussed
- 3-5 key priorities are identified
Approval of Legislative Priorities

- Legislative Committee draft of Legislative Priorities presented to board via Web-meeting
- Board votes to approve/modify priorities
Communicating our Priorities

- Priorities are shared with general membership via email and posted on our website
- Meetings are held with key legislators on certain issues
- Meetings are held with child advocacy groups statewide
Benefits of Annual Legislative Priorities

• Facilitates collaboration with other advocacy groups and professional associations statewide
• Provides a framework to educate legislators
• Enables our membership to easily articulate a more concise focused message
• Allowed us to build a reputation as a consistent and respected child advocacy group that legislators can trust
IA AAP 2015/2016 Legislative Priorities

- Managed Care - Medicaid Modernization
- Children’s Mental Health
- Early Childhood Initiatives
- Providers Ability to Advise on Gun Safety
- Patient Advocacy/Scope of Practice
- Rural Physician Loan Repayment Act Funding

2016 IA AAP Legislative Priorities

Managed Care - Medicaid Modernization:
IAAAP believes it is critical children’s services covered in the past through Medicaid and the Hawk-i program will still be covered by all new MCOs.

Children’s Mental Health:
IA AAP believes the Iowa mental health system should be comprehensive and encompass early identification and prevention mechanisms, while building the ability to provide effective services in-state.

Regarding Access to Mental Health Services: Improve the identification of mental illness through increased screening, addressing inadequate insurance coverage and high out-of-pocket costs that create barriers to access, strengthening the overall quality of mental health care, and expanding the Medicaid reimbursement policy to include mental health and developmental services.

Early Childhood Initiatives:
IA AAP supports the continued funding of public dollars helping to fund Early Head Start, ACES, Immunization Control Center, and Child Health Specialty Clinics.

Providers Ability to Advise on Gun Safety:
Regarding Firearm Safety Background Checks: In addition to the Safe and Sound Initiative, mandating background checks on all firearm purchases, and a ban on high-capacity ammunition magazines.

Patient Advocacy/Scope of Practice:
Regarding Direct Entry Midwives: IA AAP believes a precautionary safety must be maintained during delivery and encourages the use of a more medically acceptable model during labor. Regarding Direct Entry Midwives: IA AAP believes a precautionary safety must be maintained during delivery and encourages the use of a more medically acceptable model during labor.

Regarding Hygienic Practices: IAAPP believes midwives are not a substitute for primary care providers nor should they be licensed under the Board of Medicine.

Rural Physician Loan Repayment Act Funding:
IA AAP supports the State receiving the immediate need for physicians in rural Iowa, and appropriating $2 million in state funds with private foundation matching grants.
IA AAP 2016/2017 Legislative Priorities

- Children’s Mental Health
- Early Childhood Initiatives
- Child Safety
- Immunization Education
- Access to Care issues
Thank You!
AAP Chapters | Crafting A State Advocacy Agenda Webinar

NJ AAP Agenda for Children

Fran Gallagher, MEd
NJ AAP Executive Director
NJAAP Agenda for Children
Creation of Agenda

**Who:** Government Affairs Committee, Executive Council, Editorial Board, PCORE QI Program Advisory Council Members, and Staff

**What:** Pediatrician led creation of NJAAP Agenda for Children

**How:** Chapter Advocate Facilitated, Large & Small Group Discussions, Diversity in Expertise in Group

**When:** Keep it current (2 yr cycle), Legislators receive in January, share with public/private partners & media

**Why?** Proactive rather than Reactive

**Next:** Alan Weller, MD, MPH, FAAP, GA Chair’s vision is to move from *Proactive to Leadership*
Progress & Success

- Identify Key Contacts
- Build relationships & partnerships
- Rapid Response
- Common Ground, Science and MD supported negotiations on behalf of children

- CCHD
- Raw Milk
- Prescribing Narcotics
NJAAP responds to Congressman Pallone for Pediatricians to address Gun Violence Issues – Last Week, < 24 Hours Notice
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Questions?

NJAAP Agenda: www.NJAAP.org

Can you imagine all Chapters promoting an Agenda for Children?
Questions | Discussion

- Click BLUE MESSAGE ICON on lower left of your screen.
- Type in your question.
- We’ll share them with our panel after their presentations.
WE’RE HERE TO HELP

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