

Nixon visits clinic, speaks on health care



Margaret Hooper/Index

Addressing a small crowd, Gov. Jay Nixon toured the soon to be completed Northeast Missouri Health Council clinic. Nixon spoke on the future of healthcare and healthcare funding.

Changes to healthcare eligibility according to the agreement:

Family size	Current eligibility	New agreement
single parent, two children	\$3,700/anum (20 % of the federal poverty level)	\$9,155/anum (50 %)
two parents, two children	\$4,410/anum (20 %)	\$11,025/anum (50 %)

Design by Antionette Bedessie/Index

BY MARGARET HOOPER
Staff Reporter

Governor Jay Nixon stopped in Kirksville Monday afternoon to address health care funding, tour the nearly complete Northeast Missouri Health Council clinic and place a few bets.

"We're betting on you," Nixon said, speaking to a small group of doctors, nurses and administrators. "We're betting on this community and this organization and this facility and the people here to deliver the quality health care for us in the future, and I have confidence that you can do it."

The governor highlighted an agreement with the Missouri Hospital Association designed to provide health care to 34,800 uninsured parents. The Missouri Hospital Association will contribute an additional \$52.5 million per year to provide health care to Missouri parents, which will allow the state to receive an additional \$93 million through matching funds from the federal government, according to a March 16 press release.

Nixon said the Missouri General Assembly would need to increase the Medicaid eligibility threshold for parents from 20 percent of the federal poverty level to 50 percent of the federal poverty level in the fiscal year 2010 budget to make the plan viable. No other action on the part of the legislature is necessary because the plan does not require any additional general revenue funds.

"I look forward to working with the legislature to take advantage of this historic opportunity to increase access to health care without raising taxes on Missourians," Nixon said. "By putting Missouri families first, we can extend health care to more than 34,000 parents in Missouri and drive down the cost of coverage for all Missourians, without spending a single extra dollar from the state's general revenue. This is an opportunity we can't afford to miss."

Jim Ragland, Fellow of the American College of Healthcare Executives and Northeast

Missouri Health Council executive director, said Nixon's plan restores some of the adult Medicaid coverage that was cut three years ago by former Governor Blunt and would provide currently uninsured individuals with an incentive to seek health care before their condition worsens and requires an emergency room visit.

Ragland said Northeast Missouri Health Council clinics charge patients based on a sliding rule that evaluates a person's ability to pay.

"The more you make, the more you have to pay for a visit," he said. "If you meet a certain financial standpoint, then you don't have to pay."

The Council receives some compensation from the state for providing care to the uninsured, but Ragland said the increase in funds has not kept pace with the increased demand for services at reduced or no cost.

"Over the past three or four years, we've gotten a 3 percent increase in the money that we receive from the government to subsidize those who can't afford to pay for their care," Ragland said. "The number of people that we see who qualify has risen more than 10 percent."

More than 720,000 Missourians currently are uninsured, according to a 2008 report from the Missouri Foundation for Health, and the cost of caring for the uninsured is passed along to those with coverage through higher premiums and copays. Marc Smith, president of the Missouri Hospital Association, said Nixon's health care initiative would have a positive effect on the Missouri economy.

"Too many Missourians don't have access to health care they need, and those who do have coverage are paying too much for it," Smith said. "By using the funds our hospitals receive for uncompensated care to provide coverage for more parents, we'll help more Missourians access primary care physicians, decrease wait times in our emergency rooms and move our economy in the right direction."

Legislature considers drug bill

BY JOHN MOENSTER
Assistant News Editor

When it comes to college students and marijuana, legalization is a hot topic.

Sophomore Ben Winter, president of Students for Sensible Drug Policy, said that in the general legislative session earlier this year, State Representative Kate Meiners (D-46) introduced House Bill 277, which would legalize marijuana for medicinal purposes.

"Right now it's still in the very preliminary stages of the process of becoming a law because it hasn't even gone through the committees yet," Winter said. "The bill will need to be introduced on the floor in the House of Representatives and the State Senate, passed by both bodies, then signed by the governor before it is truly law."

Winter said this is the third year in a row similar legislation has been brought up in the House. If HB 277 were to be made law, marijuana would be prescribed by certified physicians and could only be distributed at licensed pharmacies and apothecaries. Winter said it would be similar to a bill that has already been passed in California.

Winter said SSDP ran several letter campaigns in an effort to generate support for HB 277. Letters were sent to elected officials including Speaker of the House Ron Richard (D-129), local Representative Rebecca McClanahan (D-2) and state Senator Wes Shoemyer (D-18).

Winter said Sen. Shoemyer agreed with points SSDP made but was still unsure about the legislation because he wanted to see strict regulations associated with the bill. Winter said SSDP sent 26 letters to Rep. McClanahan but has not received

a response. McClanahan could not be reached for comment.

David Middlemas, associate professor of pharmacology at A.T. Still University, said despite unresolved issues pertaining to the medicinal use of smoking cannabis, several states have legalized medical marijuana. Middlemas said studies suggest short-term adverse effects are relatively minor but little is known about long-term use of medical marijuana.

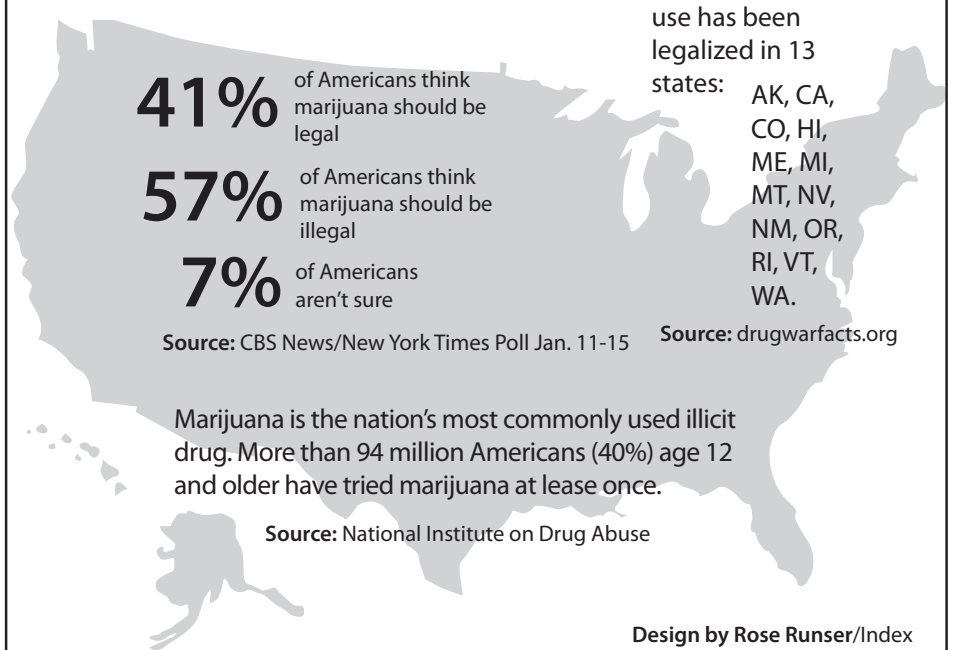
"There is some support that medical marijuana also is useful as an anti-emetic drug for cancer patients receiving chemotherapy, although there are other approved anti-emetic drugs," Middlemas said. "It has also gained use as an appetite stimulant for HIV and cancer patients."

Middlemas said medical marijuana is used also in some cases of glaucoma, but again there are other approved drugs available. He said there is a definite need for more clinical research before a rational evidence-based decision can be made to support or deny the medicinal use of marijuana. Middlemas also said the legal issues surrounding medical marijuana are as complex as the medical issues. Marijuana is a Schedule 1 drug, which means it is classified as an addictive drug without an approved medicinal use, he said.

"Although some states have legalized medical marijuana, it remains against federal law," Middlemas said. "These laws can be enforced."

Middlemas said medical professionals, especially physicians and pharmacists, and patients will need to understand the complex local, state and federal legal issues surrounding the prescription of medical marijuana.

Legalize ?



Middlemas said it is important to note that the "personalized view" of the proponents of medical marijuana use is persuasive. Philosophically, proponents argue for legalization of a substance that may provide substantial relief to patients with serious, debilitating and likely terminal illnesses, such as cancer and AIDS, for very understandable human

reasons, he said. "There is a need for more research to establish evidence-based criteria for approval of medicinal marijuana use," Middlemas said. "On the other hand, [there is] a need to offer support and comfort to those with distressing and painful terminal illness."

Administration reduces tuition rates for summer courses

AMANDA GOESER
Staff Reporter

Undergraduate students with less pocket change than normal can find relief in the discount Truman is continuing to offer for summer courses.

For summer 2009, Truman is offering more than 100 courses, including both undergraduate and graduate, as well as online courses. Undergraduate students can expect summer tuition rates to be 15 percent lower than Spring 2009

rates. Although, the discount does not apply to summer study abroad or graduate courses.

Budget director Dave Rector said summer tuition has been reduced by 15 percent the past few years, and since the cost reduction was first implemented, the number of students enrolled in at least one summer course has increased.

"We were hoping to boost enrollment, fill some sections and provide a chance for people to, I call it, catch up," Rector said.

The tuition reduction also will help students whose scholarships typically apply to the academic year and exclude summer courses, Rector said.

While there may be about one-third as many students on campus during the summer, most of the buildings are open and have electricity and air conditioning running, Rector said. He hopes that by lowering tuition rates for summer courses, more students will enroll and cover operating and faculty costs.

"What would be nice is if we have

more students in the summer," Rector said. "Then you have more tuition, even at the discounted rate."

Students opting to live on campus during the summer can live in Campbell Apartments, which are air-conditioned and have a full kitchen. Students can apply for housing for five, eight or 10 weeks, with rates varying based on the duration of their stay and whether or not the student chooses a meal plan.

"If you already have an apartment or something here that is not that ex-

pensive, I could see people taking summer classes," freshman Sarah Spradling said. "But because I live on campus, I really don't feel like paying to live here."

Ralph Cupelli, assistant to the provost and vice president of academic affairs, said of these courses, 39 are online courses that can be taken anywhere with internet access.

Registration for summer classes begins Monday, March 23 and ends Wednesday, March 25.

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