

### **The Honorable Representative Pitts – Answers from Gov. Haley Barbour**

1. For the first day of an extraordinary session in the Mississippi legislature, the cost for the Senate would be \$20,753. For the House, the cost would be \$44,783. That is a total of \$65,535 for the full legislature, just for the first day. Each additional day of the special session in Mississippi would carry a total approximate cost of \$44,000. I suspect a special session in Florida would be more expensive per day.
2. The Committee's hearing testimony from Matt Salo and the state Medicaid Directors is a good first step. The most important thing the Committee can do is to talk with Governors and state legislative leaders about what flexibility they need to best administer programs in their states. If Medicaid is truly going to be a state run program, states need more authority to tailor the program to their needs. Unfortunately, in recent years federal policy has been moving in the opposite direction. The federal CMS is no longer acting as a partner, but is pushing rigid dictates on the states without understanding the consequences of their unilateral requirements. Also, the Committee must clearly delineate the financial peril facing the Medicaid program at both the state and federal level. The current fiscal trajectory is simply unsustainable. Meaningful changes to Medicaid will not be realized until there is universal recognition of the actual fiscal challenges facing the program. People who care about the future viability of the program must accept that a continuation of the status quo will lead to the program's breaking down and jeopardizing care for the truly vulnerable.

### **The Honorable Representative Blackburn – Answer from Gov. Haley Barbour**

1. Simply put, states should not be forced to pay for lottery winners to receive Medicaid benefits. However, this is just one more example of how excessive controls from the federal government are preventing states from instituting commonsense reforms. I believe that in general, there is too much reliance on 1115 waivers and the waiver process. The waiver process, especially as currently administered, provides too much control - and not enough transparency - to the federal CMS. There should be more state flexibility, without the subjective review of 1115 waivers by the CMS.