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

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Well Margaret, a milestone has been reached for the first time since numbers have been taken the numbers of uninsured Americans has dropped below 10%, wow.

Margaret Flinter: And according to the National Center For Health Statistics, the percentage of uninsured Americans has dropped to 9.2% in the first quarter of 2015 that's down from 14.3% during the same time in 2013. And the first time the national uninsured rate has fallen this low.

Mark Masselli: And that tells of the uninsured rate at the time, the passage of the Affordable Care Act in 2010 Margaret that was around 18% that's a dramatic improvement in a very short number of years.

Margaret Flinter: Remember that the measures in the ACA provided tax subsidies for Americans who qualify to offset the purchase of insurance and that has helped millions of Americans afford coverage.

Mark Masselli: And you know we are still not done, the nation's Hispanic population has seen the highest rates of uninsured in their population. Their rates dropped from over 40% uninsured in 2013 to 26% but still a long way to go. African Americans population uninsured rate drop from 26% to around 15% and those rates were noticeably lower in states that expand at medicaid.

Margaret Flinter: And of course we also have to remember the elimination of being able to deny coverage for prior conditions also went out. They went with the ACA and that has made a big difference. And of course excess insurance coverage in healthcare services is just one piece of the nation's healthcare puzzle. We still face one of the big threats to American health and that's nation's obesity problem. A third of adults and the nation's children are grappling with overweight or obesity costing the nation an estimated trillion dollars in healthcare cost.

Mark Masselli: Something our guest today is working to combat Margaret Dr. John Lumpkin is Senior Vice President of Robert Wood Johnson Foundation. Over seeing the foundation's effort to combat childhood obesity Dr. Lumpkin will discuss the progress that's been made across the country to confront some of the contributors to the problem.

Margaret Flinter: And Dr. Lumpkin has some promising news about how the First Lady's Let's Move! Campaign and the administration's support for overhauling

school lunch across the nation are truly starting to have an impact. Food for thought as the nation's children had back to school.

Mark Masselli: And Lori Roberston will stop by the managing editor of FactCheck.org is always on the hunt for misstatements spoken about health policy in the public domain.

Margaret Flinter: And no matter what the topic you can hear all of our shows by going to chcradio.com.

Mark Masselli: And if you have comments please email us at Chcradio@chc1.com or find us on Facebook or Twitter, we love hearing from you.

Margaret Flinter: We will get to our interview with Dr. John Lumpkin of Robert Wood Johnson Foundation in just a moment.

Mark Masselli: But first, here is our producer Marianne O'Hare with this week's Headlines News.

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Marianne O'Hare: I am Marianne O'Hare with these Healthcare Headlines. In an effort to come after rising tide of heroin overdoses in this country the White House has announced a plan to target the epidemic. According to the Centers for Disease Control roughly a 150,000 Americans have died from an Opioid prescription drug or heroin overdose. In the past 10 years due to the highly addictive nature of the pain killers and the relative cheap price of the street heroin. The White House program has shift the agenda from prosecuting addicts to getting to them a treatment would set aside two and half million dollars for additional drug enforcement agents to combat the stream of Heroin coming into the nation's streets at their source. Heroin overdoses had quadrupled between 2002 and 2013 leading the CDC to urge physicians to think twice before prescribing prescription OPS to patient which for some become instantly addicting. Meanwhile the US Food and Drug Administration has approved the use of Opioid pain killers oxycodone in patient aged 11 to 16 who haven't benefited enough from alternatives. A long acting drug already treats adults suffering from round the clock pain and has been reformulated over the years to combat that rising prescription drug abuse in the US unlike adult's doctors are to prescribe the medicine only for children who can already tolerate a minimum dose of 20 milligrams of Oxycodone the active drug ingredient in Oxycontin. Falls are leading cause of injury in older adults and researches say for those with the common lung ailments the risk increases significantly. A study looked at fall rates among seniors suffering from chronic obstructive pulmonary disorder and found that those of COPD are more likely to suffer from falls if they also have other medical problems. 40% of the patient had at least one fall and most people

who fell did so more than once. Researchers focused on 41 people over 70 years old with COPD past researches link COPD to increased risk of balance difficulties, muscle weakness and thinning bones blackouts and falls. A study lands more weight to those findings. And trying to get pregnant you might want to skip the overtime with that heavy lifting gig for a while. Study shows that women who work in heavy lifting scenarios have work longer than 40 hours a week have a harder time getting pregnant. And study of 1700 nurses seeking to get pregnant so those who routinely engaged in heavy lifting or long work hours 16% of them still weren't pregnant after 12 months. And 5% weren't pregnant after 2 years, those women who work less than 40 hours and didn't engage in frequent heavy lifting got pregnant 20% faster than their counterparts. I'm Marianne O'Hare with these healthcare headlines.

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Mark Masselli: We are speaking today with Dr. John Lumpkin Senior Vice President Director of Targeted Teams at the Robert Wood Johnson Foundation. The largest foundation in the nation dedicated to improving health and healthcare. Dr. Lumpkin is responsible for all management aspects of the RWJ foundation's childhood obesity and several other teams. He is an emergency medicine physician. Dr. Lumpkin served as the director of Illinois Department of Public Health for 12 years. He is chairman of the Board of Directors of the Robert Wood Johnson University Hospital. The major teaching hospital of Rutgers University. He earned his medical degree from North Western University and his MPH from Illinois University. Dr. Lumpkin welcome to Conversations on Healthcare.

Dr. Lumpkin: Well thank you it's a pleasure to be here.

Mark Masselli: You know I think most Americans know that we are facing an obesity epidemic but I am not sure that where all of the implications. And it's especially troubling for the nation's children 35% of the nation's children are obese or overweight. And there are also disproportionate rates of obesity facing racial or ethnic minority populations. In fact the epidemic is so alarming that analysts predict this is the first generation that we will have a lower life expectancy than their parents. Tell us more about the scope of this public health crisis and the risk factors for obese children today and the toll it is taking on their healthcare.

Dr. Lumpkin: I started out in medicine many decades ago and when I was taught I learned about two types of diabetes juvenile onset diabetes and adult onset diabetes. And pretty much you saw in kids and you saw the other in adults. Now we talk about type-1 and type-2 diabetes because what used to be adult onset diabetes we are seeing now kids in their early teens. And this is a direct result of this epidemic of childhood obesity. We have seen the rates of obesity over the last 30 years have tripled among adolescents and quadrupled among children 6 to 11 years old. This generation and the one who are the future of our nation are

at risk of being the first generation to live sicker and die younger than their parents.

Margaret Flinter: Well Dr. Lumpkin the Robert Wood Johnson Foundation as I think most of our listeners know is the largest foundation dedicated to improving health and healthcare in United States. And you just announced a sizable commitment to a program that began back in 2007 to tackle childhood obesity, tell us about some of the specific goals that you have established with the childhood obesity program at the foundation and some of the results and the outcomes that you are seeing so far.

Dr. Lumpkin: We started out actually in childhood obesity in 2003 and as we are begun to work in we realized that of critical focus at that time was to do a few things. One, we as a nation believe by enlarge that childhood obesity was a problem of individual choice. And we have been able to identify with research that now the public believes that the childhood obesity is a problem for all of us in our communities. Obesity is purely an imbalance between how much food you bring in and how much you exercise it's that simple. When I was growing up we used to think about you know young people as being thought those who are involved in getting up and going now this generation is sitting downing and watching and eating. You know that means that we have to change the way that our environment is where people live. So how we build our communities? And what we are seeing today is that the rising tide of childhood obesity is slowing down and even stopping. Children are now having access to more health schools, meals and school snacks because of some of the Federal policies. As well as the fact that school are adopting healthier school approaches focusing on exercise, recess activities and healthier lunches.

Mark Masselli: Understand this new commitment of the foundation is going to really focusing on urban neighborhood where poverty is a key factor. So tell us our listeners about the new target approach to ensure that every Americans child who went to kindergarten enters in a healthy way.

Dr. Lumpkin: Our priorities now are to move from where we learned to how to work with school age children to recognize that some of the decisions that are been made even when mothers are pregnant or early childhood. Significantly stacked the deck one way the other so the first goal is to show that all children enter kindergarten in a healthy way that we want to make healthy school environment the norm not the exception across United State. We make physical activity are part of the everyday experience for children in US. And to make healthy food affordable, available and desire choice in all neighborhoods and communities. And so this is a problem for every one of us in this country. Whether it be the individuals or physicians, nurses who are in the care giving professions. But it's also problem for businesses or churches for communities, for social leaders for urban planners. And then our last priority is to eliminate the consumption of sugar, sweet and beverages among children under 5 years of

age. Evidence is clear that children start using sugary beverages at that risk the risk for obesity and overweight goes up dramatically.

Margaret Flinter: maybe you could highlight some of the programs that you and the foundation have observed to really work. Share some success stories across the policy activity, nutrition intervention.

Dr. Lumpkin: I think perhaps the biggest one is the involvement of First Lady Michelle Obama with her Let's Move! Campaign and with her influence in changing the rules for school lunches. As of today about 80% of the schools in the country they are now in compliance with those new school rules. They had to remove the fires and put in boiling units but the food that is served is lower in fat because of these changes children are actually selecting more fruits and vegetables and consuming more. But we have also seen some significant progress in New York City and Philadelphia and they are both shining examples of what happens when a whole city decides day one to get involved. You know there is clear evidence now that children who are active at recess who are engaged in physical activity actually do better in academic performance. New York has focusing also on the childcare setting they have worked with child care centers that help them understand how to provide healthier foods, how to provide nutrition education? Because often if you educate the child they bring that home. They looked at ways that childcare centers can increase the amount of physical activity and most importantly limit the amount of screen time. And we have seen the result that the rates of childhood obesity in both New York and Philadelphia has gone down. Now Philadelphia has done something that's really particularly special and we are doing some studies in Philadelphia to see exactly what they have done but they did pay special attention to helping increase the availability of fruits and vegetables in communities that's prior that's had been food desert. We can begin to solve this problem.

Mark Masselli: We are speaking today with Dr. John Lumpkin Senior Vice President and Director of Targeted Teams at the Robert Wood Johnson Foundation including the childhood obesity teams. Dr. Lumpkin there are couple of takeaways one is that the teamwork is the new employee of every healthcare organization. And you mentioned the First Lady in her great campaign on Let's Move! Any worries from you in terms of having a broad enough coalition for the science of what has worked so far so important about the school. Breakfast and lunch programs how they are really transforming the nation realities for millions of children around the country?

Dr. Lumpkin: You know I think many of us in our country and poles demonstrate that people are becoming increasingly be fiddled by what's going on in Washington. Because once you get out into the communities and began to talk to parents and you talk to businesses you talk to schools. They can all understand that what's most important to them are their children and the children of those communities. And when you begin to make the statements in this

country that we are all in this together people begin to see the importance of change. Whether or not it's the First Lady and certainly she has really champion this issue but out in community speaking the programs like Let's Move! And you have organizations that have adopted the Let's Move! Name as part of their name because they are fully committed to the goal. We believe that partnership is a critical component one is one that was started by the First Lady's called the Partnership For A Healthier America and this is been a really interesting organization because they just had a meeting two weeks ago I was there at the meeting and we had businesses from across mini spectrum there were daycare centers, there were food growers, that was just a new campaign on fruits and vegetables that was announced by the products industry to make it cool for children to eat fruits and vegetables. Using movie stars like Jessica Alba and football players and even world wrestling stars to say how important it is to eat fruits and vegetables and broccoli. We have also worked with the alliance for healthier generation which is partnership with the Cleen foundation. And they have worked with our support with over 2600 schools nation wide. And these schools all make commitments to change their policies and change how food is made available and how exercise and plays available for the children. And I have been to so many schools and you just can't imagine how of a change these schools have, I was at one just last month where the principal actually lead the spin class and the principal who had a big office and said I don't need an office this big and she converted half of the office into a kitchen where students can come in and learn how to cook healthy meals. We are partnering with Americans Heart Association and an organization called Voices for Healthy Kids and this is focused at many of the key components reaching out and building partnerships with wise and other organizations. For schools, it seems like it ought to be a no brainer, healthy children learn better. Children who are obese are more likely to be obese adults, to have illnesses, and business work better when their employees come in everyday. So cost of care of individuals is based upon how healthy they are and obesity is one of the major risks for diabetes, for heart disease, for stroke. So if we can began at a younger age that's when we begin to see real change happen.

Margaret Flintner: Well it does seem that we have seen a change in this area over the last decade and you know I just have such a clear memory of so many pointed arguments in the general assembly and so forth. Things like if you take away the vending machines in the schools and you take away the odd program and the football team that seems to have subsided to a large degree, but some of these has really been about the partnership with the food and beverage industry to make a contribution on their part to try and eliminate or reduce some of these calories from the market place. And the foundation had looked at the commitment from the food and beverage industry to remove 1. 5 trillion calories from the market place and found that companies removed 6 trillion calories. Tell us some of these large partnerships with really with the food and beverage industry.

Dr. Lumpkin: Sure you know I (inaudible 17:47) the campaign against tobacco. This is different we will not be able to be successful in changing the whole outlook for a country about what's healthy without the direct involvement and commitment of the food industry. And we are beginning to see some changes and have foundation we really have not been shy about pressing the industry to do more but we also believe that we shouldn't hesitate to (inaudible 18:16) and practices that we believe are positive and makes a difference. And that's what happens with the Healthy Weight Commitment, they came to us they said we want you to be a part of our Healthy Weight Commitment we said what we will do is, we will fund in an independent evaluation. You say you are going to move 1. 5 trillion calories we are going to follow up and make sure that that happens. And we found not that they reduced 1. 5 trillion reduce, removed 6. 4 trillion and that really was a major support step, it's a first step. But we think it's going to be critical for the food industry to not only realize that it's important for them to change but it also makes good business sense. The industry needs to actually believe that it can make financial sense, there are some studies that are starting to come out that show that companies at market better for you and lower calories products actually do better financially. And you are beginning to see companies like Burger king and McDonald and the Wendy's the big three of hamburgers taking sugary beverages off of their children menu. But the other piece is all of us who buy food need to have been better educated, the problems of high sugar or high salt of low nutritional value. And we need to demand healthier food and when you put those two together and increase demand for healthier food and the food industry realizing that's where they can do better financial then we began to see a dramatic change, required to different working relationship with the industry then we have had on other issues.

Mark Masselli: We have been speaking today with Dr. John Lumpkin is Senior Vice President & Director of Targeted Teams at the Robert Wood Johnson Foundation, you can learn more by following Dr. Lumpkin at Twitter@JR Lumpkin or by going to RWJF. ORG. Dr. Lumpkin thank you so much for joining us today on conversations on healthcare.

Dr. Lumpkin: Thank you so much.

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Mark Masselli: At Conversations on Health Care, 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: For this week Karley Sciortino claimed that emergency room visit are up over 50% under the Affordable Care Act but that claim is unsupported

by the evidence and unlikely based on historical trend. It may be years before we know the full impact of the ACA on ER visit. Available data doesn't include 2014 when the law began requiring individuals to have insurance. Sciortino's presidential campaign didn't respond when we asked her where she got her figure but numbers available from the CDC and the Department of Health and Human Services, healthcare cost and utilization project show there were more than 130 million ER visits in 2011 or 2012. So early visits would have to have increased by more than 65 million for fewer units to be right, that's unlikely. The HHS data showing average annual increase of 2% over 6 years and the Americans Hospital Association's data for community hospitals shows a 44% increase in ER visits over 20 years from 1993 to 2013. There have been media reports of an increase in ER visits since January 2014 many based on an opt in internet survey of members of the American College of Emergency Physicians, 47% of the physicians who choose to respond said they had noticed slight increases in the number of emergency patient, while 28% that there had been significant increases. A Stanford University study meanwhile found some evidence that the ACA is slowing the growth of ER visits among younger adults, who since September 2010 have been able to stay on their parent's insurance policies up to aged 26. And that's my fact check for this week. I'm Lorry 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 Chradio.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. In the emergency room or the ICU clinicians are confronted with a (inaudible 23:06) of unpredictable medical crisis, is that sometimes can be challenging to diagnose. Most of these clinicians are now communicating with colleagues via their smart phones often sending images of the patient unique symptoms or chest x-rays to one another for share diagnosis. ICU physician Dr. Josh Landy was noticing a growing trend of image sharing via smart phones to crowd source second opinions from friends and colleagues across the country but he also was concerned about the potential violation of HIPAA regulations. So he developed an App for that, he created a figure one a sort of Instagram for doctors in which images can be de-identified but shared across a dedicated social media platform that will allow input from clinicians within their network. Doctors are using the App to communicate not only with colleagues within their hospitals settings but around the world where someone might have superior expertise with a certain condition. The App was recently used to share a chest image of one of the patient who presented with a mid eastern virus MERS. Dr. Landy says the App

scale about half a million image views a day with about 80 million total views so far. He sees the potential for this platform only growing as more young digital natives enter the medical workforce. Figure 1 a free downloadable App offering secured HIPAA compliance image sharing among clinicians around the world to reduce the time, takes the zeroing on the diagnose by taping the collective experts instantly, now that is 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.

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Conversations on Healthcare, broadcast from the campus of WESU at Wesleyan University, streaming live at Wesufm.org and brought to you by the Community Health Center.

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