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Female: Welcome to Conversations on Health Care with Mark Masselli and Margaret Flinter, a show where we speak to the top thought leaders in health innovation, health policy, care delivery and the great minds who are shaping the healthcare of the future

This week Mark and Margaret speak with Democratic Kentucky Governor Andy Beshear on the raging surge of COVID-19 fueled by the Delta variant. He talks about deploying the National Guard to assist hospitals at the breaking point. The increased number of young people getting sick and efforts by the GOP run legislature to block his executive order powers, reversing his call for a mass mandate for kids in school.

Lori Robertson also checks in, the Managing Editor of FactCheck.org looks at misstatements spoken about health policy in the public domain separating the fake from the facts. And we end with a bright idea that's improving health and well-being in everyday lives.

If you have comments, please email us at CHCRadio@chc1.com or find us on Facebook, Twitter, Spotify or wherever you listen to podcasts. You can also hear us by asking Alexa to play the program. Now stay tuned for our interview with Kentucky Governor Andy Beshear here on Conversations on Health Care.

Mark Masselli: We're speaking today with Kentucky Governor Andy Beshear, a Democrat and 63rd Governor of the Commonwealth. He previously served as Kentucky's Attorney General.

Margaret Flinter: Governor Beshear has fought for the protection of the Affordable Care Act and for Medicaid expansion. He's been issuing broad public health directives to stem the spread of COVID-19 in his State, and that's led to some legal challenges. Governor Beshear welcome to Conversations on Health care today.

Andy Beshear: Thank you for having me.

Mark Masselli: Yeah, Governor, you know, the resurgence of COVID-19 is really causing havoc all across the country, but particularly in the South, where many of the Governors have aggressively sought to limit public health measures, like mask wearing, for instance. But in fact, in your State, the State Supreme Court just upheld a challenge by the Kentucky legislature, which sought to limit your executive powers in response to the pandemic. And it is hard to believe that the judge used the word 'tyranny' to describe your mask mandate for K-12 school children.

How's the court's decision impacting your overriding objective to keep the population of Kentucky safe?

Alexis McGill Johnson

Andy Beshear: Well, it seems these days that name calling is not confined to just sum and tyranny now means I disagree with you. Listen from the very start of this I was committed to doing the right thing, to following the science because at the end of the day, I care about the lives of my people, a lot more than I care about my own personal popularity. And so along the way, I've had to make difficult decisions.

Now it's everything from when we had to be healthy at home, to when we previously had a mask mandate in Kentucky, to my decision to require it in universal masking in public and private schools, here as we went back in the Commonwealth. And I did those knowing that there would be backlash, but having the courage to just do the right thing. And knowing what it is.

And in these instances, it's not just right versus wrong, and life versus death. It's what works and what doesn't. If you have universal masking when a class goes back, you can stay in-person, if you do not wear masks, you end up with everybody in quarantine.

So I was willing to do the right thing and to push forward even with the criticism out there. Now Supreme Court recently came out and said, I'm not going to be able to carry the ball anymore, that these tough decisions instead of being made by one individual that has a little more latitude to do the unpopular thing, if it's the right thing, that they are going to be made by you know, legislature consisting of over a 100 people, and maybe harder.

And that legislature has suggested before that they don't agree with mask mandates, but I'm certainly going to push and do my best to provide the education to show them that that is the only way right now. Because as we're talking, I just got news that we have the third highest number of cases in Kentucky than we have had at any time in the pandemic. And that's with over 60% of adults in Kentucky having at least one shot of vaccine. And today, we announced 65 deaths. We were down to three a day I was looking forward to zeros, numerous days in a row which I hadn't yet had the opportunity to see. So our State and the South, will be the entire United States is on fire with the Delta variant. Now more than ever, we've got to make the right decisions guided by public health to save lives.

And I'll also say and we can talk about it. Our hospitals are bursting at the seams. We have one that has a disaster plan in effect the disaster plan people are being treated in their cars outside of them. So we're calling in the National Guard to help where we're trying to take over testing for some of them to free up staff. And we've asked FEMA for help. So this is a time when we need strong leadership and I hope the legislature will step up and make the right decisions.

Margaret Flinter: Well, Governor Beshear, we are sorry to hear this. It's of course,

exactly what we're reading. The numbers don't lie. And while we can talk about the fact that much of this was preventable, if we could have gotten out there sooner getting people to be fully vaccinated, the reality is you have to deal with what you have on the ground right now.

Tell us more about the impact of this Delta surge on your State. How is it affecting life in your State? Share with us a little more about the hospital situation, you've got hospitals and health centers, clinics all over the State, how is it affecting the whole healthcare system in your State?

Andy Beshear:

It's dire. And when they say this thing is aggressive, that's not a good enough word for it. It's like an inferno. How quickly it escalates, cases going from in April or early June in the hundreds to like, we have 4800 new cases today, more kids than ever before. It used to be about 11% of our cases were kids, it's now 20% plus. Remember, little kids don't get tested that often. It's making people sicker from the very beginning and we're losing younger people in their 30s and 40s, without preexisting conditions.

We're seeing more breakthrough cases primarily with those that'll be helped by the booster that the immunocompromised can already get. But its impact on hospitals, especially hospitals in areas with lower vaccination rates can't be understated. Most of these hospitals aren't used to helping higher acuity, sicker patients. Most of them don't have that many ICU beds. And almost none of these hospitals have pediatric ICU beds. And so we see the ICUs filled up, we see operating rooms being turned into additional COVID wings. And we see our healthcare heroes so tired.

St. Clair and Morehead is in their disaster mode where they can't take any more emergencies and the ambulances are pretty much running people to other hospitals. Pikeville Medical Centre as a triage tent outside of the ER to push some to other places who might not need an emergency care. Ephraim McDowell, which is a hospital where people don't die because they're transferred to you know, higher level trauma. Hospitals had seven pass away over the weekend. Their morgue only fits two. So we saw refrigerator trucks.

And I've declared this week Healthcare Heroes Appreciation Week because they are so tired and they've gone through so much trauma. And we've got to keep our healthcare staffing up at a time when so many are saying I've already fought for too long. So this Delta variant which you're right was entirely preventable if people would have gotten vaccinated to protect their families. It's having a major toll on Kentucky and it's going to have a major toll on the entire country. Because what we're learning is you can have a lot of your population vaccinated. But with this Delta variant, you got to get close to all of

them vaccinate.

Mark Masselli: Governor there, kids are going back to school now, without vaccinations, without masks so virtually no protection against the virus, leading to massive quarantines. And I believe you'd like in this scenario to throw in a giant chicken pox party only with a third deadliest illness in the country.

I wonder if you could talk a little more about the dangers you see for the State's childrens the teachers but also some of the strategies that you're doing having to work around the General Assembly because I know your administration is trying to educate and reach into all the neighborhoods of Kentucky.

Andy Beshear: Well, this one is real personal to me. I'm a dad of two middle school children. One is 12, Will is fully vaccinated. I broke down in tears when he could get his first and his second shot. But my daughter, his sister, is a year younger, is 11 and she can't get vaccinated yet. Thankfully, they go to a school that chose universal masking. And then I stepped up and required it because we had one school district Warren County Public Schools that went back mask optional, they were one of the first and in three days had over 700 Kids in quarantine, that rose to 1500 kids in quarantine. When I put in universal masking and they've been there since that has been cut in half and is going down.

So listen, one works universal masking that newest study that came out cutting transmission by 80% with unvaccinated kids in poorly ventilated classrooms for hours at a time you're right, is like a giant chicken pox party with third leading cause of death in America. I mean, come on, we can't be allowing that to happen to our kids. And keeping our kids safe isn't some issue of personal liberty come on. Our kids aren't our property, they are not an opportunity for us to have our political arguments, they are a solemn obligation.

And right now we require what we mandate 12+ vaccines by the time you're in sixth grade, 30 plus shots that are out there. And all we're asking them to do is wear a piece of cloth over their face that helps prevent the spray and the spread. It was every education group that supported the mandate I put into schools.

The leader of the Kentucky superintendent Association, it was our Kentucky Chamber of Commerce, which hadn't always been with me, and the steps I've had to take because they are certain. And it's a fact that if a ton of kids are quarantined, which they will be mask optional, a ton of parents can't go to work. That's lesser productivity and has a direct hit on the economy.

So right now, we still have, at least in public schools, the mandate in place because our Board of Education courageously and unanimously,

passed an emergency regulation as well. But private schools, and maybe in the future public schools won't have that mandate, in effect. So what I'm doing is I'm trying to talk to every Superintendent, anybody that will listen to me. Again, you might have a couple parents that are upset with you now. But when their kids are quarantined, or tested positive, they're going to be a whole lot more angry.

And with more kids suffering long term consequences I hope people don't say, "Well, you only have 21 kids in the pediatric ICU" first that's more than we've ever had. And second, we got kids in adult ICU that we don't have in that count, because we only have two pediatric ICU units in the entire State. This ought to be a no brainer. And if I sound a little frustrated about it, I am because my kids are the most important thing in my life, and they ought to be for everybody else.

Margaret Flinter:

Well, Governor, we totally appreciate your frustration. And we'll be talking about this one for a long time, try and understand how something like immunizations went from being a very small minority of people who opposed them to where we are today.

But, you know, along the way, we had to heard an awful lot as we conducted vaccine campaigns. One of the arguments people put out was, well, this wasn't a fully approved or authorized vaccine it was still, you know, emergency use kind of in the experimental phase. But that argument is over now too, right. There's been the full authorization of the vaccines. Do you think this is actually going to make a difference in vaccine uptake in your State? And what other strategies are you and your team deploying to try and increase that vaccination rate? The numbers have been going up around the country, but what else are you doing to try and get people to change their minds and get vaccinated?

Andy Beshear:

Well, full FDA approval should move a lot of people because you hear a lot of people say it. I think in general, we have two groups of people left that are unvaccinated. You have those that have been provided misinformation. But believe it on a couple of topics that if we could get the right information from someone they trust, that they'll get vaccinated. Many are some that are just politically opposed to it, and short of being ventilated themselves, at which time they will beg for the vaccine (inaudible 00:13:21) that they will get it.

So for the groups that misinformation does appear to have created skepticism, but maybe not lock them off. I think this concept that it was rushed ought to now be settled, full FDA approval is a gold standard. It's what the smallpox vaccine and chickenpox vaccine and polio vaccine, all of which we have taken and we are still here. But the other thing that I would say is half the country has taken this vaccine, at least one out of every two people that you come across has taking this vaccine. So if there's a problem with it, we'd know it by now.

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And the other two myths we got to directly debunk that it can make your sterile entirely not true. But we've even had Kentucky leaders that have been telling people that falsely, as well as a concept that if you're pregnant, or you want to become pregnant, you shouldn't take it, the CDC has directly addressed that saying it's much more dangerous to be unvaccinated and pregnant, than vaccinated. And really across the country, I think it's rightful fear of the Delta variant that's truly driving it.

Here in Kentucky, we have a lottery. We've made two millionaires, I get to make another one on Friday. We're giving away full ride scholarships to kids. I can't imagine a better thing for us to do to encourage people to get vaccinated, but just a great thing to do in general. I get to give my next five out so I feel like Willy Wonka. This is the third set of five kids that get their golden ticket.

We've got our MCOs are Managed Care Organizations Medicaid, offering money though we're still not seeing a lot of people come around to that. So we're learning a lot about incentives right now. I think what we're really going to see now that we have full FDA approval is private sector mandates because this is their workforce, and their workforce could be wiped out very quickly. Look at Tyson you know, Tyson Chicken you got their huge operations, and COVID can spread and ravage a facility there. I remember because we had to shut one down for a couple of days. That's a workforce that if you want to protect it and remain productive, that that vaccine is really necessary. I see that as the next big step that's going to boost numbers.

Mark Masselli:

I think you're absolutely right. We're speaking today with Kentucky Governor Andy Beshear. Governor, your father, former Governor Steven Beshear joined us in 2013. And, you know, he spoke eloquently about the reasons for the Affordable Care Act and the Medicaid expansion, a rare position amongst Southern Governors. And your predecessor, though, tried to dismantle much of those gains. And you've really tried to correct that of course.

And I remember your father telling us that the ACA was not only good health policy for Kentucky, but it was good economic policy. And the same logic could really apply to vaccines. And I think you've said that one hospitalization could cost hundreds of 1000s of dollars. And I'm wondering as Governor, you have to think about these things. Help our listeners understand the economics of prevention and public health measures, and why vaccines are truly the best hedge against both health and economic calamity?

Andy Beshear:

Well, first, let me say Steve Beshear is a great man, a great dad and was a phenomenal Governor. And him embracing the Affordable Care Act and expanded Medicaid is one of the reasons that Kentucky a

State that was predicted to have one of the highest per capita death rates in this pandemic has not, because access to health care is the difference between life and death and expanded Medicaid is absolutely necessary to expand access.

And let me say I was honoured to fight for that program. My dad instituted the Affordable Care Act as Governor. And as Attorney General, I was the co-lead with Xavier Becerra in fighting to protect it. The biggest legal victory of my life will be that ultimate Supreme Court decision that in part bears my name in the Commonwealth, that preserve that legacy coverage for pre-existing conditions, expanded Medicaid, you name it. And to be able to protect a little bit not just of how incredible it is, but my father's legacy is something that I will forever be grateful for.

Any State that hasn't expanded Medicaid absolutely needs to. And I will say during this pandemic, we had to take additional steps. You know, before the pandemic, I rescinded the Medicaid waivers that my predecessor had done that would have kicked 100,000 people off their health care. But we were at a point last summer, where African American Kentuckians were dying at twice the rate that they make up of our population, the reason was access to health care. And so we led a specific marketing campaign directly to that in our Hispanic population to get folks signed up. And guess what being intentional works. Sure, a lot of people tried to say free health care for one group or the other, listen it was available for everybody. But now our death rates line up with or are below our population numbers being intentional works.

Now I know, the second part of your question was about the economics of this. And eventually, I think our insurers and others are going to come around and you're going to see some major movement there. To get your shot out, get your vaccine cost you \$0. Federal government is paying for it in general. And typically it costs your insurer, your employer \$0. And what that does is give you a really a 90% plus chance of never being in the hospital and not dying of COVID and even better chance there.

Now, if you are unvaccinated, and you end up in the hospital, your bill is likely going to get close to \$100,000 if not 30, 60, 90; and if you end up intubated, oh my goodness. So your decision to not get vaccinated causes huge costs to everyone's insurance plans, to your employers will ultimately drive everybody's costs up.

Now there's going to be a point where these insurance plans just like if you're a smoker, you currently have different costs are going to say if you refuse to get vaccinated, we can't carry that huge bill. So I think that's going to be another mover that you're going to see. But let's bring it down to a human level, if you're unvaccinated, and you end

up taking up a hospital bed, and our hospitals are bursting at the seams. And we have an accident with a bus of school children, a bus of adults and that's where more of those people die. That's it, more of them die. It shouldn't. Your friend who has a heart attack dies and shouldn't. A cause have a choice to not get vaccinated, lands you in the hospital, when that bed would otherwise be open. There is an economic cost. But there's a huge personal cost too where your decision could take somebody else's life and not just from COVID.

Margaret Flinter: Well, Governor, all compelling stories and observations and this idea of there simply not being enough beds is very real in your State and around the country. But I think what we've also seen is there may be beds, and there may simply not be enough ICU nurses and intensivists to staff those beds. And we've talked about some of the reasons the exhaustion from, you know, a solid, you know, 20 plus months of this.

I wonder, and I really appreciate your designation of the Healthcare Heroes Weekend, I'm sure all the health care workers in your State appreciate it. What other strategies are you looking at in terms of keeping a workforce in place to be able to manage this. It's just, it's not going to go away soon. The people that are there today may not be able to carry this burden indefinitely into the future. Are you looking at training other kinds of workers? Are you bringing in healthcare professionals from around the country? What are your university and academic medical centers and other groups doing to try and help you meet the incredible needs so that where there's a bed, there's also a well prepared ICU nurse or intensivists, to take care of people.

Andy Beshear: Well you are right and it's probably not going away in the immediate term. But I really think it's important that everybody hears that we could defeat this thing tomorrow, simply by going to your drugstore, your grocery store, your local health department and getting vaccinated. And if everybody got vaccinated tomorrow, we could substantially end this whole thing. It's right there in front of us and the ability for us to win.

In Kentucky this has taken more lives than any two are now I think, three wars that we have been through, put together. Think about that. If you were in the midst of a war, and you could win tomorrow, right, just by going to your drugstore, you would do it.

So you're a 1,000% right, in that it's not actual beds, it's our ability to staff it. And so we're trying to do a couple things. Yes, first, we're trying to show our appreciation and give a second win to the Warriors on the frontline. We're also trying to amplify them. We're sending National Guard strike teams to the hardest hit hospitals to try to take over any non-medical function that we can free up more people to staff beds and help people out. We've requested help from FEMA,

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and they're going to bring in more ambulance units because we're running short on our ability to help in emergencies because of the transfer of patients, we've asked for nurse strike teams, we get this is happening in so many other States.

Right now we're working on a way where we can move in and take over the testing that all these hospitals do because that frees up more people to ultimately help out.

I want to make sure the number one we say the number one thing we can do to preserve healthcare capacity is get vaccinated. Number two is to wear a mask.

Mark Masselli: We're speaking today with Kentucky Governor Andy Beshear. You can learn more about his leadership and his efforts to address the pandemic in his State by going to www.covid19.ky.gov. You can also follow him on Twitter @GovAndyBeshear.

Governor thank you so much for the example, you're setting, the courage of your convictions, for your efforts to ensure that all of your State residents have health coverage and for taking the time for joining us on Conversations on Health Care.

Andy Beshear: Well, thank you and we always end our updates with a simple phrase, "We will get through this and we will get through this together." And everybody go get vaccinated.

Margaret Flinter: Everybody go get vaccinated.

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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 U.S. politics. Lori, what have you got for us this week?

Lori Robertson: A new study found there was no negative effect on sperm levels in men after receiving the COVID-19 vaccines. But social media posts have made the baseless claim that vaccinated men "are effectively sterile." Experts say there is no evidence that the vaccines cause infertility in men. And there are new data that further rebut the online claims. In a study published June 17th, in the Journal of the American Medical Association, researchers at the University of Miami reported that they found no significant decreases in sperm measurements among a group of healthy men before and after receipt of a COVID-19 vaccine. The team collected samples of 45 men 18 and older before receiving either the Pfizer BioNTech or Moderna vaccine and again more than 70 days after receiving their second

dose. The researchers measured volume concentration and the total amount of moving sperm and found no declines post vaccination. Researchers at a hospital in Israel have reported similar findings in a study that has not yet been peer reviewed.

The Society for Male Reproduction and Urology, and the Society for the Study of Male Reproduction issued a joint Statement in January, saying “COVID-19 vaccines should be offered to men desiring fertility similar to men not desiring fertility when they meet criteria for vaccination.” Experts say a fever could affect a man's fertility for upwards of three months. But that's any fever, not something unique to a fever following vaccination. And that's my fact check for this week. I'm 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'd like checked, email us at CHCRadio.com we'll have FactCheck.org's Lori Robertson, check it out for you here on Conversations on Health Care.

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Each week Conversations highlights a bright idea about how to make wellness a part of our communities and everyday lives. Danielle Tudor had a revelation a few years ago waking up on the cold floor of a jail cell, she could ask for help for her drug and alcohol addiction or she could die. She chose the former. Tudor then launched not only on her own recovery journey, but on a broader quest to develop tools that could help all people grappling with addiction recovery to avoid relapse, which is so common, especially in the early days of sobriety. She realized that there needed to be more readily accessible tools for those in recovery to stay connected to their treatment goals beyond the 12-step meetings and the talk therapy sessions.

Danielle Tudor: I am in long term recovery. And I went through a four week in-patient treatment program, where at the end of that four week program all I received was a piece of paper that listed an enormous amount of things I'm supposed to do on a daily and weekly basis for the rest of my life to stay in recovery. And I knew that building something on our cell phones that are with us 24/7 would be a way to bridge that gap and keep people accountable through an app to those activities.

Margaret Flinter: So she founded WEconnect a relapse prevention mobile application that can be downloaded on a smartphone. The platform is designed to keep people engaged in their recovery plan using daily reminders and a reward system for when you perform the tasks that are essential to recovery.

Alexis McGill Johnson

Danielle Tudor: The individual are able to input those activities into the app and when it comes time for that activity to start, you simply check into it. You see at the top of the app, how you're earning your incentives. And either way this incentive program is proven to show keeps people accountable to checking into those activities on the go.

Margaret Flinter: And the digital platform also allows everyone who's connected to the person's health care ecosystem to see in real-time when one might be at higher risk for relapse.

Danielle Tudor: We have trained peer recovery support specialists. And they get to leverage a tool that we developed called a data dashboard, where they can see in an instance if someone needs additional support or outreach. So it really allows for this connection of support 24/7 and visibility so that when someone needs that added support in real-time.

Margaret Flinter: Since the pandemic hit Tudor says the WEconnect platform has been a lifeline for those in recovery.

Danielle Tudor: Actually, when the pandemic hit, immediately my heart went out for wow, none of us have support meetings to go to any more in-person. So we immediately stood up with a set of partners, these mutual aid meetings that are online that are led by certified peers. And within just a couple months, over 200,000 people joined from all States and several countries.

Margaret Flinter: WEconnect a downloadable app designed by people in recovery for people in recovery to help maintain sobriety with a support system in the palm of their hand, staying connected to a care team and avoiding relapse. Now that's a bright idea.

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Mark Masselli: You've been listening to Conversations on Health Care. I'm Mark Masselli.

Margaret Flinter: And I'm Margaret Flinter.

Mark Masselli: Peace and Health.

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