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**CURB  
Meeting Minutes  
September 21, 2011**

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**PRESENT**

**Board:** Michel Benoit, MD, Paul Penar, MD, Richard Wasserman, MD, John Mathew, MD, Norman Ward, MD, David Butsch, MD

**DVHA Staff:** Michael Farber, MD (Medical Director, DVHA; moderator), Bill Clark (DVHA), Daljit Clark (DVHA), Jennifer Herwood (DVHA)

**Absent:** Delores Burroughs-Biron, MD, Adam Kunin, MD, Patricia Berry, William Minsinger, MD

**HANDOUTS**

- Agenda
- Draft minutes from 7/20/11

**CONVENE: Dr. Farber convened the meeting at 6:30 pm.**

**1.0 Announcements – Dr. Michael Farber**

There were two major issues addressed this year:

- Physical Therapy, Occupational Therapy and Speech Therapy - earlier oversight for children after 8 therapy visits per discipline.
- PA requirement for out of state outpatient non-emergency services.

We are currently in the process of implementing both of these proposals. We will let you know once we have an official start date.

**2.0 Review of Minutes-Dr. Michael Farber**

The July 20, 2011 minutes were reviewed and accepted by the CURB members.

**3.0 Transportation – Bill Clark**

Bill Clark presented the following:

- Total Annual Expenditures in the Transportation Program
- Overview of the Transportation Program

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- Trips to Nowhere – paying to transport recipient when there is no doctor’s appt scheduled
- Brokers are reimbursed for program an annual amount which was determined many years ago.
- CMS mandates that the number of rides provided to a recipient can not be capped by DVHA.
- Review of beneficiaries with high utilization of transportation services.
- Possible cost saving ideas
  - Create incentives for the Brokers to save money
  - Capitated PMPM for the Broker
  - Focus on the Trips to Nowhere
  - Implement a form that the provider would sign acknowledging recipient had a medical visit.
  - Tighten up the waste and abuse

Dr Butsch suggested the DVHA require a signature from the provider at the time of the office visit confirming that beneficiary had seen a medical provider. Dr Benoit added that he has to sign off on a transport form for his New York patients. California Medicaid has a similar requirement per Dr Farber. The group agreed that this is something the DVHA should consider. Bill Clark agreed to research and develop a form.

#### **4.0 General Pediatric and Specialist Referrals – Dr. Wasserman**

Dr. Wasserman presented data on visits to pediatric gastroenterologists for recipients ages 5-18 with a diagnosis of 564 (functional digestive disorders) or 789 (other symptoms involving abdomen and pelvis). He posed the following questions:

- Are these recipients in need of seeing a specialist?
- Should the patient be worked up before referral to a specialist?
- Should the patient be seen a number of times by their PCP before the referral?

Dr Benoit asked if there should be a protocol for the PCP to go through before referring to a specialist. Could provider education be provided for PCPs regarding specialist referrals? DVHA will consider all suggestions and will continue to monitor for overutilization.

#### **5.0 Future Topics**

Dr. Farber encouraged the group to develop topics for discussion. Dr. Wasserman received data from Jennifer Herwood, Data Analyst, and other board members should feel free to request any data they are interested in exploring. Jennifer can be reached via email at [Jennifer.herwood@ahs.state.vt.us](mailto:Jennifer.herwood@ahs.state.vt.us). The group asked for data on:

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- Referrals to hand specialist for carpal tunnel diagnosis
- Ambulance trips to ER – what is diagnosis?

Dr. Mathew expressed some questions and concerns regarding the 340b program.

**Adjournment – CURB meeting adjourned at 8:20 PM**

**Next Meeting**

**November 16, 2011**

**Time: 6:30 PM – 8:00 PM**

**Location: Department of Vermont Health Access, Williston, VT**