

**Medicaid Advisory Board
Meeting Minutes
February 23, 2012**

Page 1

PRESENT

Board: Christina Colombe (Member), Kay Van Woert (VFN), Betty Morse (VFN-Alternate), Danielle Hibbard (BSPCA-Alternate), Wendy Davis (VDH), Corey Armstrong (DHMC), Elizabeth Cote (VSDS), Trinka Kerr (HCO), Madeleine Mongan (VMS), Larry Goetschius (VAHHA), Hilde Hyde (Member), Lisa Maynes (Member), Sheila Reed (VVC), Michael Sirotkin (COVE), Jackie Majoros (SLTC) and Dale Hackett (Member).

Other Interested Parties: Sonia Tagliento (MAXIMUS), Cherie Bergeron (HP), Christine Stone (HP), Cheri L'Esperance (Wm Shouldice & Assoc. LLC), Peter Sterling (CHCS) and Ashley Romeo (KSE Partners).

Staff: Lori Collins (DVHA), Lindsey Tucker (DVHA), Lorraine Siciliano (DVHA), Stacey Baker (DVHA) and Clark Eaton (DVHA).

HANDOUTS

- Agenda
- January 26, 2012 Meeting Minutes
- DAIL Condensed SFY '13 Budget Briefing (Revised 2/22/12)
- DVHA Budget Considerations (DVHA SFY '13 Budget Document pgs. 21-61)

CONVENE

Kay Van Woert chaired the meeting.

Approval of Meeting Minutes

The January 26, 2012 meeting minutes were submitted for approval and were approved unanimously.

DAIL SFY '13 Budget Update – Camille George

Camille George, Deputy Commissioner, Department of Disabilities, Aging, and Independent Living (DAIL) provided a condensed handout of DAIL's SFY '13 budget testimony and briefly outlined the role of each of the four divisions within DAIL: 1) the Division for the Blind and Visually impaired (DBVI), 2) the Division of Vocational Rehabilitation (DVR), 3) the Division of Licensing and Protection (DLP) and 4) the Division of Disability and Aging Services (DDAS). The latter division, DDAS, is where the bulk of the proposed budget changes reside.

Camille went on to review a summary of changes from the SFY '12 DAIL budget to the SFY '13 proposed DAIL budget. Within the proposed DDAS budget, the Support and Services at Home (SASH) program, supporting aging in place, has been increased by \$447,369, and the Independent Activities of Daily Living has an additional \$165,162 proposed. The Adult Day Program would be reduced by \$100,000 (General Funds), but this would be "net neutral", because the amount would move to better support the Choices for Care Moderate Needs group within DDAS. Adjustments were also covered

**Medicaid Advisory Board
Meeting Minutes
February 23, 2012**

Page 2

for the Developmental Services Program and the Traumatic Brain Injury Program. There were no significant budget changes within the DBVI and DVR divisions.

Budget ups and downs for programs managed by DAIL, but appropriated to DVHA were discussed as part of the Choices for Care (CFC) 1115 Demonstration Waiver. Jackie Majoros expressed concern that proposed case management reimbursement rate savings were not thought through on a person-centered basis. Though aware of economic pressures, Michael Sirotkin also felt that, over the long term, CFC support reductions sent the wrong message to programs that were originally promised to be enhanced if they were successful. Camille noted that since the implementation of CFC, there have been a number of enhancements to the program, such as the implementation of Flexible Choices and the Program for All Inclusive Care for the Elderly (PACE). There was board consensus that Long Term Care needs to be part of a larger discussion as the state moves forward with Health Care Reform.

Commissioner's Report – Mark Larson

The Department of Vermont Health Access (DVHA) Commissioner, Mark Larson, began with an overview of DVHA's SFY '13 Budget proposal. Mark testified to the Legislature (House Appropriations) on February 7, 2012 concerning the Department's SFY 2013 budget proposal. Broadly, the SFY '13 budget is up by about \$63 million over the prior year. However, this includes: 1) an approximate \$30 million increase in the budget to support Graduate Medical Education through UVM and Fletcher Allen (no state dollars) and 2) an approximate \$30 million increase in new federal grants to cover the Health Benefit Exchange and the Electronic Health Record (EHR) incentive program. With the remaining relatively small increase, along with significant steps to better manage care, DVHA will be able to cover the rest of its budget needs, while: 1) continuing to serve everyone we expect to enroll, 2) not changing any benefits or covered services, and 3) not reducing provider rates.

Using the narrative portion of the SFY '13 budget document as a handout/guide, Mark first went on to discuss the administrative elements of the budget, including new positions at DVHA (some previously introduced as part of the SFY '12 Budget Adjustment) that are needed to bolster core requirements as well as positions that will produce significant savings and support new initiatives. The Commissioner also reviewed the programmatic elements of the proposed budget, including the dollar impacts of projected caseload and utilization trends and the funding requirements for the key Medicaid programs offered under the Green Mountain Care umbrella.

Jackie Majoros asked for clarification on the indicated/projected reduced caseload within the Choices for Care program. It looks like fewer people are being served and that may not be the case. Camille George (DAIL) will look into this and get back to Jackie.

**Medicaid Advisory Board
Meeting Minutes
February 23, 2012**

Page 3

Kay Van Woert summarized the general concern that access to care and fundamental benefits is becoming more difficult. Two examples are Long Term Care and transportation. The MAB may need to schedule a larger discussion in the future on access to care in general (e.g. onerous gate-keeping, provider access issues related to low Medicaid rates, lack of effective case management, challenges in coordination of benefits). The board's topic list needs to be re-inventoried and updated.

Mark Larson finished up the review of program budget items, including: 1) implementation of the Family Planning Eligibility option for July, 2) provider rate increases, and 3) a series of savings initiatives that are based on better managing care. In addition to including provisions for a \$1.5 million reduction in co-pays, there is a proposal for co-pay restructuring which would reduce the number of beneficiaries who end up paying more than 5% of their income for health coverage. DVHA will provide more information on this proposal in the next week to the board, based on comments and questions that arose.

MAB Discussion – MAB Members

The March agenda was discussed and time will need to be prioritized for the remaining Department budget discussions (VDH, DMH and DCF), the Dual Eligibles Project and benefit packages for Health Care Reform. Broader discussions on topics such as lack of access and long term care as it relates to health care reform will be scheduled for this spring.

Sheila Reed followed up on a potential initiative to be introduced in the legislature. She is requesting MAB support for implementing comprehensive dental benefits for pregnant women. Board members felt that this was important, but that there were other concerns (expressed to the legislature from the MAB last year) that were equally important. The MAB could resubmit an updated letter to the legislature, outlining its continued concerns. As a separate initiative, Sheila Reed will draft a separate letter to the legislature for the Board's review that would specifically address comprehensive dental benefits for pregnant women.

Priority Areas of Interest for MAB Near-Term Discussion and Work

- Vermont Health Care Reform/Exchange Board/MAB role (and how to connect disability perspective)
- Issues with current public programs:
 - o EPSDT (MAB workgroup)
 - o Dual Eligibles
 - o DUR/Rx
 - o Transportation
 - o Supplies/DME
 - o Limitations on adult OT PT

Medicaid Advisory Board
Meeting Minutes
February 23, 2012

Page 4

Ongoing Areas of Interest --Updates from DVHA as Timing is Appropriate

- Federal Health Care Reform Updates
- Chronic Care Initiative/Blueprint
- Update on Provider Tax Strategy and RFP
- Workgroup on Process Improvements (date for follow-on?)
- Loss of PCP/PCP continuity following break in benefit-DVHA to report back
- Dual Eligible Initiative
- Voc Rehab
- Integrated Family Services
- Bridge Program
- Autism Insurance
- Medicaid Home Health Initiative
- MMIS
- Long Term Care (e.g. home access, case management, reinvestment of nursing home savings in community based services)

MAB Requested Data/Information

- ADA Compliance process for AHS
- Evaluation of cost of 12 month continuous eligibility for children
- Per member per month program cost data net of premiums for the program

Next Meetings

March 22, 2012

Time: 9:30AM – 12:00PM

Site: Capitol Plaza, Montpelier, VT

April 26, 2012

Time: 9:30 – 12:00PM

Site: Capitol Plaza, Montpelier, VT
