
**Medicaid Advisory Board
Meeting Minutes
May 24, 2012**

Page 1

PRESENT

Board: Christina Colombe (Member), Kay Van Woert (VFN), Michele Blanchard (DHMC), Jackie Majoros (LTC Ombudsman), Danielle Hibbard (BSPCA), Wendy Davis (VDH), Mark Kaufman (VCIL/VCDR), Larry Goetschius (VAHHA), Hilde Hyde (Member), Elizabeth Cote (VSDS), Michael Sirotkin (COVE), Sharon Henault (Member), Trinkia Kerr (HCO), Julie Tessler (VCDMH), Lisa Maynes (Member) and Dale Hackett (Member).

Other Interested Parties: Camille George (DAIL), Betty Morse (VFN), Sonia Tagliento (MAXIMUS), Alexis Perkins (MAXIMUS), Cherie Bergeron (HP), Barbara Beaty (HP), Theo Kennedy (O&K, LLC), Victoria Okelaji (ACPHS), Devon Green (AOA), Jill Guerin (KSE Partners, LLC) and Heather Caldwell, Xerox State Healthcare.

Staff: Mark Larson (DVHA), Lori Collins (DVHA), Lindsey Tucker (DVHA), Stacey Baker (DVHA) and Rob Larkin (DVHA).

HANDOUTS

- Agenda
- April 26, 2012 Meeting Minutes
- Draft Proposal Document: Merging the EAB and the MAB (May, 2012)
- EPSDT Workgroup Summary (May, 2012)
- Executive Summary: Final Report, Developmental and Autism Screening in Primary Care – The Vermont Child Health Improvement Program
- Schedule for Preventive Pediatric Health Care

CONVENE

Kay Van Woert chaired the meeting.

Approval of Meeting Minutes

The April 26, 2012 meeting minutes were submitted for approval and were approved unanimously. The minutes included Dual Eligible project comments that were also forwarded through to the state during the public comment period for the upcoming project proposal.

DVHA Commissioner's Update – Mark Larson

DVHA Commissioner Mark Larson indicated that the DVHA SFY '13 budget passed and that there were only a few noteworthy specific items remaining for action: 1) the adult annual \$495 dental cap was lifted for pregnant and post-partum women, 2) co-pay changes will be implemented pending CMS sign-off, and 3) approval is still pending on DVHA's Graduate Medical Education payment for FAHC.

DVHA has hired a new Medicaid Payment Reform Director, Kara Suter, who is scheduled to start on July 23, 2012. She will also be responsible for DVHA's overall Medicaid Reimbursement Unit.

**Medicaid Advisory Board
Meeting Minutes
May 24, 2012**

Page 2

Mark also encouraged MAB members to participate in the ongoing Green Mountain Care Listening Sessions that are being held across the state. The next session is from 3:30-7:00 PM on May 31st in Williston. The overall schedule has been e-mailed to board members. If anyone has written comments to contribute, they can be forwarded to Robin Lunge.

DVHA's final Dual Eligibles Project proposal was submitted to CMS on May 10, 2012. The MAB submitted written comments during the in-state public comment period that ended on April 30, 2012. There is also a federal comment period - with CMS - that will be open until the end of June.

Members continued to weigh in and provide valuable input to the proposed Dual Eligibles Project. Julie Tessler expressed her appreciation for the efforts that were made to ensure that individuals would be able to choose who their single point of contact would be within their health/mental home. Under Choices for Care, where there are capitated rates, Jackie Majoros asked if these caps would be placed on individuals or on programs. Mark Larson noted that there are certainly many details that need to be worked out, but under an integrated care provider system, the care provider would be responsible for meeting medically necessary care needs. Rate adjustments could be addressed year to year. In all cases, if dual eligible individuals were to have a problem, they would simply call one Medicaid phone number to sort out anything relevant to either Medicaid or Medicare issues.

Pending approval by CMS, Mark Larson noted that the Dual Eligibles Project will have defined performance measures and evaluations. Board members also expressed concern that in some cases there would be the need for higher cost service packages (to meet public safety needs). In others cases, spending on additional respite hours could actually reduce ER visits and generate overall savings. Mark indicated that several smart strategies will have to be implemented that make sense and remain most economical. Under Integrated Care Provider Plus, the focus will be on packaged service for individuals; quality will be foremost, along with positive outcomes.

Medicaid and Exchange Advisory Committee (MEAC) – Lindsey Tucker

Lindsey Tucker, Deputy Commissioner, Health Benefit Exchange, Department of Vermont Health Access (DVHA), handed out a draft proposal document for merging the Exchange Advisory Board and the Medicaid Advisory Board, which will occur on July 1, 2012. Lindsey provided an overview and talked through the subsections of the proposal to get immediate feedback. Subtopics of the document include: 1) Overview, 2) Purpose, 3) Name, 4) Meetings, 5) Membership, 6) Voting, 7) Organization, and 8) Per Diem Reimbursement.

Lindsey asked members to provide any final feedback within three to four days, so that a final draft document can be prepared for review in June. The draft proposal document

**Medicaid Advisory Board
Meeting Minutes
May 24, 2012**

Page 3

will be e-mailed out to MAB members so that everyone has a chance for review and feedback. Any inputs or suggestions can be e-mailed back directly to Lindsey.

Process Improvements – Bill Clark

Bill Clark, DVHA's Director of Provider and Member Relations, provided updates on upcoming member activities. A newsletter will be going out shortly to all Medicaid beneficiaries explaining changes in benefits (specifically co-payment changes) and other important announcements. Also, there will be a new contract payment structure implemented for DVHA's Medicaid Transportation Providers that will be centered on quality assurance for beneficiaries. Transportation Providers/Brokers also will have better, more specific performance measures provided in their future contracts.

Board members shared transportation experiences and were encouraged that steps were being taken to improve standards of performance at the Transportation Provider/Broker level. Policies are routinely reviewed to ensure Vermont is providing the best service possible. DVHA will consider a future mailing to beneficiaries that covers the general Transportation Program benefits, including performance measures and the latest updates.

Bill also discussed the procedure for using out-of-state (OOS) Emergency Department services. DVHA thought that a simplified provider enrollment process could be implemented. This process is not working; we will now simply ask these OOS provider to send the bill directly to Medicaid and DVHA will pay the bill.

EPSDT Update – Wendy Davis

Wendy Davis, Early, Periodic, Screening, Diagnosis and Treatment (EPSDT) Director, Department of Health, provided three handouts for the board: 1) A Summary of EPSDT Workgroup Issues, 2) a periodicity schedule for Preventive Pediatric Health Care, and 3) the Executive Summary of the Final Report: Developmental and Autism Screening in Primary Care, The Vermont Child Health Improvement Program (Jan. 2012).

The EPSDT Summary rolls up the collective thinking of the workgroup over the past year and provides good transition information as we go forward with the new merged board in July. Wendy covered the highlights of each of the three handout documents and will e-mail the documents to board members who are not attending the meeting in person.

There was board consensus that EPSDT access and efforts be continued as a workgroup focus in the future. Other topics that deserve future attention should include (but not be limited to) Long Term Care and Integrated Family Services. There is already a standing Dual Eligibles Stakeholder Group.

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)

Medicaid Advisory Board
Meeting Minutes
May 24, 2012

Page 4

- 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
- Long Term Care (e.g. home access, case management, reinvestment of nursing home savings in community based services)

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
- DCF updates throughout the year on federal changes that impact state programs, as they occur or are anticipated

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
- The number/percentage of children in custody with a diagnosed disability

Next Meeting

June 28, 2012
Time: 10:00 – 12:00PM
Site: DVHA, Williston, VT
