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**Medicaid Advisory Board**  
**Meeting Minutes**  
April 24, 2008

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**PRESENT**

**Board:** Peter Taylor (VSDS), Christina Colombe (Member), Sarah Littlefeather (Member), Kristi Kistler (DHMC), Dale Hackett (Member), Kay Van Woert (Parent to Parent), Julie Tessler (VCCMHS), Anita Hoy (COVE), Edna Fairbanks-Williams (Member), Larry Goetschius (VAHHA) and Sheila Reed (VVC).

**Other Interested Parties:** Cherie Bergeron (EDS), Brendan Hogan (DAIL), Jen Fredette (MAXIMUS), Sandra Driscoll (CMS) and Karen Schwartz (VDDC).

**Staff:** Joshua Slen (OVHA), Nancy Clermont (OVHA), Esther Perelman (OVHA), Clark Eaton (OVHA), Stacey Baker (OVHA) and Robert Larkin (OVHA).

**HANDOUTS**

- Agenda
- February 28, 2008 Meeting Minutes (Corrected)
- March 27, 2008 Meeting Minutes
- Chiropractor Policy, Procedures & Development Plans
- Overview of MEDICAID and SCHIP Regulatory and Administrative Actions
- Provider Rate History-OVHA (4-24-08)
- Pharmacy Co-pay Analysis based on Beneficiary Projected Expenditure

**CONVENE**

Kay Van Woert chaired the meeting.

**Approval of Meeting Minutes**

The corrected February 28, 2008 meeting minutes were resubmitted for approval and were approved. The March 27, 2008 meeting minutes were submitted for approval and were approved.

**Office of Vermont Health Access (OVHA) Director's Update/Budget Discussion – Joshua Slen/Nancy Clermont**

Nancy Clermont, Deputy Director of the Office of Vermont Health Access (OVHA), provided data reflecting pharmacy co-pay analysis based on beneficiary projected expenditures. This data was provided to answer a March meeting question concerning the average prescription cost for the program. Following discussion, the OVHA will also go back and count only prescriptions having a days' supply of 30 or greater in determining ongoing prescription copayment burdens for people with chronic conditions. It will also report out an average monthly prescription count for those with SSI-related Medicaid or VScript/Vscript Expanded that is separate from all other populations (e.g., TANF).

Data on provider reimbursement history was also distributed that indicated both percentage increases and the amounts of these increases. The OVHA is still working on the distribution of provider reimbursement increases for the coming year. A more finalized list indicating the proposed SFY '09 distribution should be available by the May Medicaid Advisory Board (MAB) meeting.

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Kay Van Woert briefly summarized a hand-out she provided to the board that recapped recent Medicaid and the State Children's Health Insurance Program (SCHIP) Regulatory and Administrative Actions, including the current status of each action.

Joshua Slen, Director of the OVHA, reported that the state budget process is currently in conference committee and that Medicaid budget options haven't changed substantially since the board last met in March. The Senate version of the big bill should be available very soon. As soon as the OVHA receives a copy from the Joint Fiscal Office, the document will be forwarded to the MAB.

**Chiropractic Interpretive Memos – Esther Perelman**

Esther Perelman, Policy Director for the OVHA, discussed draft Interpretive Memos for chiropractic coverage that were provided as handouts. Act 65 of last year's legislation required the OVHA to reinstate chiropractic coverage for adults in both Medicaid and VHAP consistent with Section 4088A of Title 8. At this point, it is still uncertain whether the updated chiropractic coverage will be included in the budget or not. However, the memos provided will allow the state to be prepared if chiropractic coverage is included in the budget starting July 1, 2008. The scope of coverage would include all chiropractic services that are part of the program's benefit package. Expansion of services would cover children, as well as adults. Prior authorization requirements for children under 12 remain the same.

Adults would require a referral from their Primary Care Physician (PCP) for chiropractic service. This policy is consistent with the standard practice of establishing a PCP as a "medical home" and requiring referrals to see specialists.

The OVHA will be attending the Vermont Chiropractor's Association meeting on May 3, 2008 and will gather input there. The comment period for the draft memos will extend through May 7, 2008; the draft memos presented at this meeting will be forwarded again to all MAB members for review, noting the review deadline.

**New Business**

Kay Van Woert asked board members to start thinking about topics for Summer Work Groups. She noted two current areas that probably needed further exploration: 1) provider reimbursement methodology and 2) issues surrounding dual eligibles. Members also discussed concerns about Medicaid program sustainability and the need to plan and budget for Medicaid holistically, based on broad priorities, rather than incrementally off a sometimes already inadequate "base." Members are concerned about erosion of components of the Medicaid Program to possibly ineffective levels, or unintended limitations on access to services. Possible topics will be discussed again in May.

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**MAB Request Topics**

- Meeting site handicapped parking
- Clarification of any Medicaid transportation policy changes
- Individual total requirements (annually) for Pharmacy Co-pays
- Limits (# of days) on drug prescription refills
- Chronic Care Program update
- Provider Reimbursement update - allocation process for the \$1.4 million in the SFY09 Budget
- EPSDT information – allocation of the \$2 million in SFY09 Budget
- Update on Government Accountability Office (GAO) review of the Global Commitment Waiver

**Next Meeting**

**May 22, 2008**

**Time: 10:00 AM – 12:00PM**

**Location: OVHA, Williston, VT**