
**Medicaid Advisory Board
Meeting Minutes
May 22, 2008**

Page 1

PRESENT

Board: Peter Taylor (VSDS), Christina Colombe (Member), Sarah Littlefeather (Member), Michele Blanchard (DHMC), Kay Van Woert (Parent to Parent), Julie Tessler (VCCMHS), Edna Fairbanks-Williams (Member), Larry Goetschius (VAHHA), Sheila Reed (VVC), Trinkia Kerr (HCO), Michael Sirotkin (COVE), Hunt Blair (BSPCA), Denis Barton (VDH), Jackie Majoros (VLA), Paul Harrington (VMS) and Sharon Henault (Member).

Other Interested Parties: Anita Hoy (COVE), Cherie Bergeron (EDS), Brendan Hogan (DAIL), Jen Fredette (MAXIMUS) and Eric Rappaport (Eli Lilly and Co.).

Staff: Joshua Slen (OVHA), Clark Eaton (OVHA), Stacey Baker (OVHA), Greg Needle (OVHA) and Robert Larkin (OVHA).

HANDOUTS

- Agenda
- April 24, 2008 Meeting Minutes
- Proposed Earned Income Disregard for CHAP & ESIA
- Pharmacy Dispensing and Quantity Limits (VT PBM Program Manual, pg. 18)
- Move Project Update
- APS Healthcare Chronic Care Management Program briefing slides
- Medicaid Advisory Board (MAB) draft meeting dates through June 30, 2009

CONVENE

Kay Van Woert chaired the meeting.

Approval of Meeting Minutes

The April 24, 2008 meeting minutes were submitted for approval. A content correction was suggested by Christina Colombe concerning a pharmacy issue. The minutes will be amended and will be resubmitted for approval in June.

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

Joshua Slen, Director of the Office of Vermont Health Access (OVHA), discussed the potential for a new non emergency Medicaid transportation contract that is currently still being negotiated. Because there is no signed contract, he was not able to provide specific comments. However, he did assure the board that continued strong communication between the OVHA, providers, and beneficiaries will ensure that currently scheduled rides will not be affected and that the rider network will be maintained at the local level in a safe and reliable manner. A copy of the Request for Proposal (RFP) will be provided to the MAB. The board expressed interest in becoming more involved in the RFP process; more information regarding this matter will be provided at the June '08 meeting.

There was concern expressed on possible regulation changes that could make acquisition of mobility devices (wheel chairs) more difficult. The Director pointed out that the

Medicaid Advisory Board
Meeting Minutes
May 22, 2008

Page 2

regulation was being staffed for wording and alignment, but dispelled the notion that the OVHA would do anything as part of this effort that would negatively impact access to mobility devices. There is no timeline for this staff action and the MAB will have ample time and opportunity to weigh in on this matter.

The Director provided a summary of the State Fiscal Year (SFY) '09 Medicaid budget. The Governor's recommend for increases to providers was reduced from \$1.4 million to \$1.2 million. The majority of those dollars will go to ambulance providers because they have gone the longest without an increase. The General Budget is very tight; there is a \$14 million Medicaid waterfall expenditure marked to go toward the SFY '09 State budget. Approximately \$8 million of the waterfall will be targeted to cover hospitals.

Rules Renumbering, Renaming and Reorganizing – Marybeth McCaffrey

Marybeth McCaffrey, Economic Services Division, spoke briefly about updates regarding rules to be put in place for renumbering, renaming and reorganizing the current eligibility system. The rule proposal won't affect content but will provide new numbers and shorter names for rates. Additionally, the sequencing of rates will be put in more logical order and will provide users greater ease when navigating the system.

There will be a public hearing regarding this matter on June 16, 2008 and public comment will be accepted in writing until June 23, 2008. The formal plan was to have the rules up and running by July 1, 2008, but it is looking more like the end of summer or early fall at this point.

Board members expressed concern over the issue of reformatting and expressed their desire to be involved in this type of project from the earliest stage of development in the future.

MOVE Project Update – Joe Liscinsky

Joe Liscinsky, the MOVE (Modernization of Vermont's Enterprise) Project Manager at the OVHA, explained the different phases of this project in detail and how it will create a much improved, agency-wide Health Care System. MOVE is required because the current Access system is thirty years old and is in need of modernization. Phase 1 functionality requirements regarding eligibility have been completed.

Board members raised questions regarding the user friendliness of the system. At this point, functionality is the top priority. Once an outside contactor becomes involved in the technical layout of the system, advice and input from beneficiaries and frequent users can be addressed in greater detail.

Chronic Care Management Program Update – Theresa Wood

Theresa Wood, Executive Director of APS Healthcare, provided a Chronic Care Management Program update. The program supports approximately 25,000 participants.

Medicaid Advisory Board
Meeting Minutes
May 22, 2008

Page 3

Generally, individuals aged 65 years and above are excluded from the program because they are covered by Medicare. In addition, individuals covered by a commercial insurer are not covered under the program. Participants in the program are selected, through a contract, by the Center on Health Policy Research at the University of Massachusetts Medical School. The program focuses on eleven chronic diseases and the average age of all participants is 34. Currently, program staffing calls for health coaches located in five different parts of the State. An e-tool called CareConnection enables providers and health coaches a virtual dashboard of information that includes a list of medications, doctors that the client has seen and other information relevant to the care of the individual. The key goal of the program is to improve recipients' health by encouraging them to be more in control of their own health issues.

New Business and Summer Work Items – MAB Members

Kay Van Woert noted that MAB members have identified (so far) 5 topic areas for possible summer work:

1. Better connecting Medicaid policy making to consumer expertise, from the beginning, and improving consumer access generally.
2. Review of Medicaid regulations on mobility devices.
3. Improving the interface of benefits between the Medicaid and Medicare programs for dual eligibles.
4. Improving process/connecting MAB to process for developing future budget recommendations specifically on provider reimbursement levels.
5. Working to identify ways to make the Medicaid budget process more transparent, more comprehensive and big-picture oriented, and to better engage the MAB in identifying areas for both savings and investment in earlier stages of the budget process.

Deborah Lisi-Baker commented that the OVHA's ability and willingness to provide staff support and/or the OVHA's presence for MAB small group project work was key in deciding which projects to pursue. It was agreed that Kay Van Woert and Joshua Slen would talk by phone and that Kay Van Woert would update membership by email. At the June meeting members will select projects and decide on a summer meeting schedule.

Kay Van Woert asked members to review the draft schedule of the SFY '09 MAB meeting dates for possible conflicts.

MAB Request Topics

- Provider Reimbursement update - allocation process for the \$1.2 million in the SFY09 Budget

**Medicaid Advisory Board
Meeting Minutes
May 22, 2008**

Page 4

- Update on Government Accountability Office (GAO) review of the Global Commitment Waiver

Next Meeting

June 26, 2008

Time: 10:00 AM – 12:00PM

Location: OVHA, Williston, VT