

**MEDICAL CARE ADVISORY COMMITTEE
Summary
March 2-3, 2007 1st quarter meeting, CY 2007**

Goldbelt Hotel, Tongass Room
Juneau, Alaska

**Meeting called to order, Friday – 3/2/07,
9:10 a.m.**

Marie Darlin~Member-At-Large

Welcome and Introductions, Members

MCAC quorum was established.

MCAC members present: Tracy Smith, Sam Bush, Todd Wortham, Marie Darlin, Meghan LaCrosse, John Bringham and Jerry Fuller

Teleconference attendance (Friday): Debbi Kiley

Teleconference attendance (Saturday): David Alexander (Chair), Merijeane Moore and Debbi Kiley

MCAC members absent: Gary Givens, Ursula Lockwood and Karen Sidell

DHSS staff present: Kathy Craft

Guests:

1. Commissioner Karleen Jackson, Ph.D.
2. Alex D. Malter, MD, MPH – DHSS Medicaid Medical Director (465-1617)
Alex_Malter@health.state.ak.us
3. Carol Greenough, Advisory Board on Alcoholism and Drug Abuse & Alaska Mental Health Board (ABADA/AMHB)
4. Angela Salerno, ABADA/AMHB Advocacy Coordinator
5. Denise Daniello and Mary Ann VandeCastle, Alaska Commission on Aging
6. Michelle Lyons-Brown, DHSS Medicaid State Plan
7. Dave Campana, DHSS Medicaid Pharmacy (teleconference)
8. Ed Bako, DHSS Medicaid Pharmacy (teleconference)

Ethics Disclosures

None given.

Approve March 2-3, 2007 Agenda – Moved and approved unanimously

The decision was made not to go to the Juneau Youth Services Montana Creek residential treatment facility due to weather and poor road conditions.

Approve October 27-28, 2006 Summary – no further changes or corrections. Moved and approved unanimously with the corrections inserted by Sidell

Approve August 4-5, 2006 summary – no further changes or corrections. Moved and approved unanimously with the corrections inserted by Sidell

Announcements – Craft gave an update on members absent and those trying to fly in.

Advisory Board on Alcoholism & Drug Abuse (ABADA) and the Alaska Mental Health Board (AMHB)
Carol Greenough, Ph.D.

Assertive Community Treatment (ACT). Evidenced based practice for long-term services for the chronically mentally ill. See PACT AMHB position paper and FY06 Annual Report in the packet. Greenough reviewed the work of ABADA and AMHB and the upcoming completion of the Board's State Plan, ***Behavioral Health Services in Alaska, Making It Work***. Craft provided an overview of the Boards' relationship to the Trust, the department and the other beneficiary boards.

Alaska Commission on Aging (ACoA)
VandeCastle

Denise Daniello and Mary Ann

Daniello provided an overview of the responsibilities and scope of the ACoA. See packet for further information. VandeCastle reviewed the ACoA state plan with MCAC members. The plan can be reviewed at www.alaskaaging.org and public comment will be taken until April 12, 2007.

DHSS Travel & First Health

Michelle Lyons-Brown, DHSS Medicaid State Plan Coordinator

State plan coordinator, drafts and addresses policies and negotiates with CMS.

Still working on issues regarding travel within 24 hours; consumers and state staff escorts experience the same difficulties.

The healthcare providers are responsible for making the medical decisions and travel recommendations and now First Health is not requiring an additional review of the doctors paperwork and approval. Lyons-Brown had hoped to bring the actual paperwork from a recent meeting but due to administration changes was unable.

Next meeting for the travel work group is in early May 2007. A report will be given to the CHAP healthcare group. Communication among the various partners and stakeholders needs to be enhanced and standardized language will be discussed.

MCAC members brought up the concern that often times families and consumers have to wait until the last minute to make their travel arrangements and “hope” that all will work out so they can make the appointments that they have had to make out of community or state.

DHSS Commissioner’s Office
Commissioner Karleen Jackson, Ph.D.

New administration. 80.3 million budget cuts to DHSS; 3 hour discussion with the Governor, Chief of Staff and OMB Director to discuss the various scenarios of 80 million, 50 million and 30 million in cuts. FMAP discussions were kept separately.

Health Care Strategies Council (Administrative Order 232) will have 15 members and make recommendations to the Commissioner and Governor. January 2008 action plan will be due to the Governor. The make-up of this Council will be businesses, tribal partners, healthcare agencies, consumers and regional representation. Creative and out of the box thinkers...these individuals will be named this month.

Commonwealth North and the DHSS Transition Team proposed the Health Strategies Council to the Governor. They will review the following:

- What do we have?
- What are the current recommendations
- Of what is developed, what are the performance measures?
- How will the state know when they have reached the goals?

This new council will not impact the scope and work of the MCAC. The MCAC recommendations will still go to the Commissioner. The FY08 proposed budget has the MCAC going to one face to face meeting a year the department will save \$11.0. All other meetings will take place via video-conference or teleconference. Members discussed the various options of net-meeting and desktop video meetings. Ask Ted Isrealson to look into this prior to the next meeting.

Look at the past 3 years of MCAC recommendations and decide which ones should be forwarded to the Health Care Strategies Council.

MCAC members discussed the positive effects of being appointed by the Commissioner and having direct contact.

Having directors review their mission and everything we are responsible, looking at mission creep. Commissioner Jackson does not see the department conducting more changes or another reorganization. Some pieces may change such as, the Office of Program Review which is located in the Commissioner's Office.

Palin's Cabinet (Commissioners) understands the interconnectedness between the departments and how each relies on the other.

Legislature seems to be listening to the need for Alaskans to be able to access prevention and services around it and early intervention.

Workforce Development – needs for Alaskans to enter this field; show clear career ladder. The Trust, the department and the University are working together on the recruitment, training and retention of health care workers.

DHSS Licensing section – have them speak with MCAC members about certification and licensing for different levels of service and discuss various criteria.

Community Tours/Visits – Members stated that this is their critical outreach to communities and providers

DHSS Medicaid Pharmacy
David Campana, R.Ph. Medicaid Pharmacy Program Manager
Ed Bako, R.Ph. Medicaid Pharmacist

Campana reviewed information on NPI – New Provider Identification and the changes within the DRA 2005 (Deficit Reduction Act) which will take effect 7/1/07; such as dispensing fees; medication management therapy. For more information please see power point handout in packet.

Juneau Youth Services

The community tour to Juneau Youth Services – Montana Creek Facility was cancelled due to bad weather and poor road conditions.

Medicaid Report

Jerry Fuller, Medicaid Director

Senate Finance Medicaid Report completed by Pacific Health Group was released in mid-January 2007. The Executive Summary and slide show of this report is included in MCAC packet.

Recommendations:

1. Tribal Health Care system into a tribal managed care system in 18 months – Fuller stated that this is not going to happen in this timeframe. This type of project would take 10 years if not more.
2. LEWIN Report – Long Term Care Study – DHSS needs to work on this (many long term care plans have been done over the last 10 years and only sat on shelves). Bringhurst asked about personal care attendants (PCA), chore services...and what the recommendations might be. Fuller stated that they have recommended more control and a better developed system. Possibly move it under the waivers. Reimbursement methods are less than desired.
3. Behavioral Health System – needs additional work
4. Disease Care management – needs additional work
5. ESI – employment sponsored insurance The State could choose to subsidize health insurance for other businesses. Making some investment would assist with overall savings. Contractors would need to develop this more fully in the next step of the contract.
6. Health Savings Accounts has a little traction with some legislators. Contractors would need to develop this more fully in the next step of the contract.
7. Need to use technology better throughout the state for nursing home array of services.

Contractors stated that the Tribal Health Care services are more enhanced and coordinated than what is available in the lower 48, which is more fragmented.

Lyman Hoffman is charged with next steps for the legislature and will probably bring these contractors back to design our next steps. Senate Finance has contracted with Jay Lively (former DHSS Commissioner) to offer direction and guide to the legislature on further contracting with Pacific Health Group.

Health Care Strategies Council and this ongoing Medicaid project implementation will be in alignment with each other.

Kiley stated that it is hard to get care for the elderly. Overall healthcare workforce shortage is critical. Right now ANPs see most of the Medicaid patients. We can only do so much with a PCA and advance care givers are needed. PCAs are in unsupervised situations unlike nursing homes and pioneer homes.

DHSS phone list – who should be called for concerns or questions has not been completed. This list should go to all families, providers, PCAs.... Fuller will follow up on this.

Charles-Smith stated concern over the difference between how IHS funds are spent in Fairbanks.

State of Alaska and DHSS budget is available on the Governor's website. Fuller warned that members make sure they are looking at the new Palin proposed FY08 budget and not an old document.

Moore asked about the new MPI number that is required. CMS guidance on MPIs is not clear. The state is trying to get the old MMIS configured to accept the MPI numbers. The state will require any agency that is enrolled with Medicaid to get a MPI number. We have asked for a 6 month extension past the May 23, 2007 deadline.

President Bush's budget cut all healthcare services but this budget will not pass through Congress.

Congress is reviewing reauthorization of the SCHIP (Denali KidCare) across the Nation. Under the current formula Alaska will be at a disadvantage for funding. There is a great deal of support to maintain at the very least our current eligibility; 150% of the poverty level. Two bills are currently being reviewed to raise eligibility to 350% and another to 175/200%.

MMIS contract – past attempts have failed and ended in protests. Currently, there is a RFP out for a new contractor. The department continues to band-aid the old system to keep it working until these details are worked out.

PERM – FFY08 the contractor will review a small sample of files from FFY07. The department will be responsible for the pay back for small provider.

Medicaid Integrity Program, **MIP** – [PERM is nothing compared to this.] This is coming out of Congress – “in an effort to stop theft, fraud and simple mistakes....” CMS has funding for this at 75 million of year. They will hire independent auditors/separate contractors (no involvement by the States) to review providers; phased in over 5 years. Alaska is drafting its policies (as clear and succinct as possible) to assist providers with this. Website for continued review:

<http://www.hss.state.ak.us/publicnotice/regulations.cfm>

****DEPARTMENT STAFFING FOR THIS IS DIFFICULT BECAUSE WE DO NOT KNOW PAST FFY08 WHAT WILL BE REVIEWED OR NEEDED IN THE FUTURE.**
Fuller stated that it didn't make sense to recruit, hire and train staff for only a year.

LaCrosse stated concerns over PCAs and the lack of supervision. The oversight and audits make the PCAs nervous and the movement from checklist reviews to narrative reports. These are all contributing factors for individuals leaving these jobs. These are all roadblocks to good care.

Myer and Stauffer audits – 80 audits is still ongoing.

FMAP – Governor's budget has enough in it to cover this if needed. Hold harmless for reduction to 50/50% will end during the fall of 2007. Sen. Murkowski's office is working on a resolution to this.

Alaska was awarded a Federal Medicaid waiver to conduct a research project for children in RPTC with FASD. Culturally competent treatment modalities will be developed through research. Mentoring, modeling and monitoring will be taught - consistent ways to care for their children.

Old/New Business
David Alexander, MCAC Chair

Oversight of Assisted Living Facilities. How are they monitored? What are the licensing regulations? What training and supervision is provided to care givers? Core competencies needed at each level of care being given. Education to family and consumers is needed about levels of care and language of the field.

FY09 Policy Recommendations – MCAC members will begin to discuss and draft the new policy recommendations. Craft will send the past 3 years of policy recommendations to Commissioner Jackson with a crosswalk of focus areas and what has been completed and what is still pending. Request that the MCAC be allowed to meet twice a year.

<http://www.hss.state.ak.us/dhcs/mcac.htm>

Alexander state that the possibility of one face to face meeting a year and how it will make the MCAC efforts less effective even with teleconferencing. Members may resign as they want their time and energy worth their time and effort. They want their work to be effective and valued.

Craft stated that the alternative to not cutting MCAC was to reduce funding for direct services which is less desirable.

Fuller disagreed with Alexander and stated that the MCAC can be as effective as they want to be.

Fuller gave an update on the DHSS Commissioner's appointments for her Leadership Team.

Public Comment

1-800-315-6338 (2017#)

Public comment opened at 11:00 a.m.

Sandra Klevin – Craft read the letter from Ms. Klevin. Members discussed the ability for testing by psychologists to be billed in a step in the right direction. Alexander believes that MCAC support psychologists being permitted to bill for Medicaid and at a later date work toward masters level clinicians being allowed. Craft suggested that Kiley begin a draft letter response to be forwarded to Moore and Alexander and finally to Craft to send to Ms. Klevin. LaCrosse stated that the letter made sense to her and that she didn't necessarily hear "carrying a psychiatrist on their back" as a slam. We definitely need to find a way to care for traumatized children. Forward these letters to the new DBH Director.

Dr. Pete Higgins was to call in as the Chair or Chair-Elect of Alaska Dental Association. He accepts Medicaid for dental reimbursement in Fairbanks. He believes the \$1100 for dental care will not be enough and he has a plan for a different idea. Hopefully he will connect with the MCAC members, Todd Wortham or Tracy Charles-Smith at a later date. The regulations have been drafted but Alaska is waiting on the state plan to be approved; due date for this is 2/19/07.

Public comment closed at 11:55 a.m.

Petersburg Meeting Planning Session

David Alexander, MCAC Chair

Petersburg – May 18-19, 2007 – Little Norway Celebration - Skandi House

Hospital Tour – swing bed use

Behavioral Health services

Infant Learning Program

SEARHC tele-psychiatry – Pat Hefley – how do they meet BH needs

WAMI

FY09 Policy Recommendations

Assisted Living Center – tour (extend criteria and hold on to people too long)

Fashion Show on Friday, 2 hour lunch on Friday, 5/18

Public Comment – 1 hour
Dinner meeting on 5/17
Strategize how to put forward MCAC Policy Recommendations to the Commissioner through the
Flights in to Petersburg – arrive 3:30 p.m.
Flights out of Petersburg – depart 11:30 a.m.

FY07 Calendar & FY08 Tentative Calendar

May 18-19, 2007 Petersburg

FY08 Proposed Budget will require that the MCAC members chose one meeting next year. The decision will be made at the Petersburg meeting.

September 28-29, 2007 – Tok, Tanacross and Dot Lake (Northway or Tetlin)

November 2-3, 2007 – Cordova or Anchorage

February 1-2, 2008 – Anchorage/Wasilla (one day in the Valley – hospital tour)

May 9-10, 2008 – Homer

Dillingham as back up.

Adjourn

12:15 p.m.

Overall Desired Outcomes:

Provider Participation Enhanced

Access to Medicaid Improved

Better recognition of the Medicaid program's value to Alaskans

Proper match between available services and recipients' chronic care needs

Optimal Medicaid Funding Achieved

Alaska Medicaid Program Reflects MCAC Priorities

MCAC's communication with constituencies enhanced

Medicaid trends monitored

Medicaid Availability evaluated statewide by MCAC