

Summary Minutes: Medical Care Advisory Committee

January 15, 2010, 9:00 – 10:30 AM

By teleconference

Members/Medicaid Program officials present: Deborah Kiley, DNP, Chair; John Bringhurst; Amber Doyle; Jerry Fuller; Catriona Lowe; Mike Moriarty, DDS; Karen Sidell; Tracy Charles-Smith; Renee Stoll, RPh; Bill Streur; Elizabeth Turgeon, MD; Mark Walker. MCAC staff present: Nancy Cornwell.

Approval of Minutes. Draft minutes of November 6 & 7, 2009, meeting were amended and approved.

Next committee meetings. The committee confirmed they would meet in Dillingham on May 7 and 8, 2010. Deb Kiley noted that it will probably be necessary to travel to Dillingham on Thursday night in order to begin the meeting on Friday, May 7.

The committee identified some things they would like to do in Dillingham including: visit a pharmacy, community health center, hospital, Community Health Aide Program (CHAP) and other rural providers, and a nurse mid-wife or birthing center. (Karen Sidell knows the person recently hired to run the CHAP in Dillingham and offered to put him (Marshall) in contact with Nancy Cornwell). There was also interest in driving from Dillingham to a village. Deb encouraged members to let Nancy know of other interests.

John Bringhurst suggested the committee focus on items in work plan including recipients understand the program (Outcome #5) and providers understand the program (Outcome #6).

Follow-up on issues from November 6 & 7, 2009, meeting. The committee reviewed a summary of the following issues: development of a traumatic brain injury (TBI) program including SB 155, net-based collaboration tool, and travel requests for children. In the context of a discussion on travel requests for children, Bill Streur advised the committee that Health Care Services is doing a full review of ACS (the fiscal intermediary) next week. Deb asked for an update on the travel issues at the Dillingham meeting.

Other announcements. The committee still needs an adult consumer member. Deb asked the members to potential members to Deb or Nancy.

Medicaid Program Briefing, Jerry Fuller, HCS Project Director. Jerry provided an update on the status of federal health care reform. A conference committee of House and Senate members is currently meeting in Washington to craft a federal health reform compromise. Through the Governor's office, the departments of Administration, Commerce and Economic Development, and Health and Social Services are beginning to coordinate a response to federal reform. The question has been raised as to whether the State will need outside experts to help with the design and implementation of the reform or if the State has enough internal resources to do so. Jerry eluded to major changes in staffing and infrastructure that will be required. Under the Senate bill, 84 percent of the cost of services for new Medicaid eligibles will be paid by the Federal government and 16 percent by the State as of 2017 (the Federal government pays 100 percent in the first 2 years). Jerry noted that a rough estimate of new eligibles in Alaska is 20,000 and by 2017, approximately \$17 M new State expenditures to cover the new eligibles.

Jerry also commented on several bills for the State legislature including:

- HB 259 on citizenship requirements and an alcohol impairment and drug testing program for applicants and recipients of adult public assistance;
- HB 260 on preventive care and disease management services for medical assistance recipients;
- SB 197 on allowing pharmacists the right to refuse to refer, recommend, or dispense emergency contraceptives; providing immunity to a pharmacy for civil liability for a pharmacist's refusal to refer, recommend, or dispense emergency contraceptives; and prohibiting discrimination in employment against a pharmacist who refuses to refer, recommend, or dispense emergency contraceptives; and,

- SB 199 and HB 265 providing for a two-year funding cycle for medical assistance coverage for dentures.

The Alaska Health Care Commission is expected to submit its final report on January 15. Three bills, HB 25, HB 75, and SB 172, will reestablish an Alaska Health Care Commission.

Medicaid Program Briefing, Bill Streur, Deputy Commissioner for Medicaid and Health Policy. Bill commented on SB 199 and HB 265 that would provide a two-year funding cycle for medical assistance coverage for dentures. With this additional coverage, there is potential for over 800 claims per year which will require additional staff to manually adjudicate the claims. (The existing MMIS cannot process a 2-year benefit.)

Bill reported that he believes new expansions to the Medicaid budget this legislative session will be slim. Under the American Recovery and Reinvestment Act (ARRA), the federal government added a 6.2 percent increase to the base (Medicaid FMAP (federal matching)) rate for each state. In Alaska, that translated into an additional \$220 M in federal support between October 1, 2008 and December 31, 2010. Bill voiced concern noting if the federal government does not pass new legislation to continue the ARRA's 6.2 percent increased federal participation for the remainder of the State FY 2011, an additional \$48 M in State General Funds will be needed. Further, the current rate of growth of the Medicaid program due to increased enrollment and utilization is estimated to require an additional \$55 M for FY 2011.

Federal funds from the ARRA also supported a recent Health Information Exchange Request-For-Proposal that would assist providers interested in the development of electronic health records. However, the award was protested and upheld and is now under review by the Department of Law.

There was a discussion regarding dual beneficiaries and the implications of providers refusing to participate in the Medicare program. A request was made that the committee draft specific questions and submit them to Bill for review.

Bill announced that Kimberli Poppe-Smart is the new director of Health Care Services. She is a nurse and a lawyer and previously worked in Alaska as a nurse reviewer for ProWest and Qualis. Recently, she was the corrective action plan coordinator for Senior and Disabilities Services.

Public Comments

Tess from Andrew Issac Clinic in Fairbanks reported that the Medicaid travel authorizations have improved this week but there have been significant problems recently. Recipients have had to pay for their lodging and meals while travel authorizations for additional services are under review and delayed.

Karen Sidell commented on several cases where travel authorizations have been delayed to the detriment of recipients. Jerry Fuller asked Karen to get written descriptions of these problems to Bill and Jerry.

MCAC Work Plan. The committee generally appreciated how the plan was now organized. They discussed how best to review and use the plan. Elizabeth Turgeon and Mike Moriarty each suggested they would like to focus on Desired Outcomes 5 and 6 (mentioned previously). Deb suggested that each member take a good look at the work plan and decide what they would like to focus on over the next few weeks. Deb suggested that members let Nancy or Deb know and they would make sure the communications were shared across the committee.

John expressed an interest in the medical home model and wondered if there might be an opportunity to consider this while in Dillingham. Hr suggested it be included in the agenda. Jerry asked what members mean by "medical home?" He suggested it would be helpful if members could each write down what they mean by "medical home."

Tracy Charles-Smith said she would include the first 2 desired outcomes in her homework. Karen expressed an interest in Desired Outcome #3 (Medicaid program staff understand recipient and provider issues).

The committee agreed it would be a useful to have another meeting, with a single agenda item, the MCAC plan. Deb asked members to send comments to her and she would send them to other members. Nancy checked with members to see if February 26 would work for the next meeting and all (that remained) agreed.