

ALABAMA MEDICAID AGENCY
Medical Care Advisory Committee
Minutes
September 20, 2012

Attendees

Terrie Reid, Jim Carnes, Mary Finch, Lawrence Gardella, Rosemary Blackmon, Louise Jones, Jackie Ayers, Marsha Raulerson, M.D., Jason Isbell, Mary Sell, Tim Byler

Medicaid Attendees

Dr. Don Williamson, Acting Commissioner Stephanie Azar, Dr. Robert Moon, Kathy Hall, Henry Davis, Kandy Hudson, Audrey Hopkins, Dr. Dan Roach, Dr. Melinda Rowe, Derik DuBard, Kelli Littlejohn, Ozenia Patterson, Theresa Richburg, Robin Rawls, Gretel Felton

Call to Order

Acting Commissioner Stephanie Azar called to order the meeting of Medical Care Advisory Committee at 1:30 p. m. in the Executive Boardroom. She stated that she is very pleased that the Constitutional Amendment passed on September 18th, but there are still many challenges ahead of Medicaid.

Legislative Update

Dr. Don Williamson stated that the most important thing for everyone to understand is how Medicaid is funded. The foundation of the funding structure of Medicaid is the Hospital program. No state money goes into the Hospital program, but if the hospital program has problems it affects the entire Medicaid program. Medicaid is funded through the general fund dollars, provider taxes, intergovernmental transfers, tobacco settlement dollars, and drug rebates. Everything else is derived from Federal dollars.

Regarding Medicaid expansion, Dr. Williamson reported that there is no deadline. If Medicaid chooses to expand, the years 2014 through 2016 would be covered with Federal funding. Medicaid can drop out of the expansion at anytime. The expansion could generate 350,000 to 450,000 additional enrollees. It would reduce the number of those who are uninsured by 53 to 73 percent.

Dr. Williamson stated that Pharmacy has been the single largest increase in the budget for several years. In the 2013 budget, it has been the single largest increase both, percentage wise and dollar wise. This issue must be addressed.

Medicaid has built in CPE's (Certified Public Expenditures) as the foundation of the Medicaid Program as a way to reduce demand on the general fund budget. Dr. Williamson was pleased to announce that Medicaid will end 2012 with a balanced budget.

Health Systems Update

Dr. Robert Moon reported that there are three Patient Care Networks which have existed within the state for just a little over a year now. A fourth network started a few months ago in Mobile and Washington counties. This network is in the process of becoming a fully functional entity. Currently, Medicaid does not plan to expand any further than where we are today pending on what will happen in this next Legislative session.

Medicaid is looking to move forward in the area of perinatal outcomes in the state of Alabama. In January and February of this year, a meeting was held for delivery providers from certain regions in Alabama to see how we can work together to develop a common agreement on protocols to standardize some maternity care. APEC has developed two protocols so far, one is about routine perinatal care and the other is to decrease elective deliveries before thirty-nine weeks. They are working on more protocols that are yet to come.

PACE is another managing program that Medicaid has implemented. PACE is an all inclusive care program for the elderly. There is one functioning PACE program in the state of Alabama. The goal for this program is to address the needs of the patients at the nursing home level of care and to keep them within their community.

Eligibility Update

In May of this year, Alabama became the first state to implement ELE (Express Lane Eligibility). This program allows Medicaid and CHIP agencies to determine Medicaid eligibility by using certain information from other public need based programs. The Agency is also working with DHR to begin automatically renewing cases through a monthly ELE match with DHR. This hopes to be implemented by October 2012. Also, a new Web Portal was launched in February 2012 by HP called *My Medicaid* which has been very beneficial to Medicaid applicants and recipients.

Quality Improvements and Standards

Medicaid has applied for a CMS grant called the Adult Health Quality Measures Grant. This is a \$2 million grant distributed \$1 million per year. This grant project is aimed toward three areas. First, it will be used in testing and evaluating methods for collection and reporting of CMS Initial Core Set of Adult Health Measures in varying delivery care settings. Second, it will be aimed toward developing staff capacity to report data, analyze, and use data for monitoring and improving access and quality of care in Medicaid. Third, it will be used toward conducting two Medicaid Quality Improvement projects related to CMS Initial Core Set of Adult Quality Measures and align with other federal quality improvement activities. One of these projects is the COIN (Collaborative Improvement and Innovation Network). This is a project with 5 strategies designed to help reduce infant mortality.

Long Term Care Update

There is a new waiver in Long Term Care called the ACT (Alabama Community Transition) waiver. This waiver helps recipients with disabilities or long term illnesses to move from an institution to the community. To qualify, the recipient must have been living in an

institution for at least 90 days and be able to live safely in the community. Six Alabama Medicaid recipients are now living at home due to this waiver.

Effective January 16, 2012, the Alabama Medicaid Agency will pay nursing facilities a supplemental fee-for-service payment in addition to the daily nursing facility rate for care provided to ventilator-dependent residents and/or qualified tracheostomy residents who are eligible for Medicaid benefits. There are currently eleven approved NH Vent/Trach recipients.

Alabama Medicaid has submitted an application for the Money Follows the Person (MFTP) grant. This grant offers a higher federal match rate for activities related to transitioning individuals out of institutions and into the community. Notification of award should occur soon.

Health Information Exchange

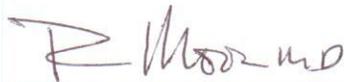
Health Information Exchange (HIE) is known as One Health Record. There are currently four adopters to the HIE system which include Jackson Hospital, East Alabama Medical Center, UAB in Birmingham, and Baptist in Montgomery. One Health Record has begun technical discussions to connect Huntsville Hospital system and UAB Medical campus site in Huntsville with a plan to go live as of December 31, 2012. Medicaid has expanded the number of registered users of the HIE web accounts and Direct secure-messaging to over 450 accounts. Medicaid has completed a pilot project with Florida in which each state has successfully conducted interstate exchange of mental health PHI with targeted providers. One Health Record has completed and passed the Nationwide Health Information Network testing requirements. This will allow One Health Record to move forward with becoming an approved, certified node of the Federal network.

Pharmacy Update

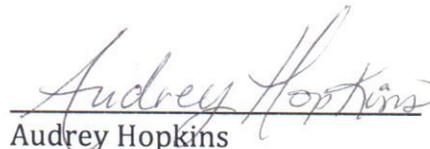
Medicaid is already accepting prior authorization for the normal process for recipients to receive the Synagis drug. This will go into affect October 1, 2012. There was an alert that went out in May to the Providers regarding the ordering and prescribing of this drug. If prescribers are not enrolled with Medicaid, the prescriptions will not be processed. Because Federal regulations are about to be changed, Medicaid and HP are working on re-enrollment packets to begin October 1, 2012.

ADJOURNMENT

Dr. Moon thanked everyone for attending the Medical Care Advisory Committee Meeting. The meeting was adjourned at 3:30 p.m.



Robert Moon, M.D.
Deputy Commissioner



Audrey Hopkins
Administrative Assistant