

Medicaid Matters

U.S. Surgeon General Benjamin promotes wellness, health prevention

In order to truly reform health care, the country must move from a system of treating illness to one that emphasizes wellness and prevention, U.S. Surgeon General Regina M. Benjamin told Alabama state legislators.



Chief of Staff Henry Davis, left, and Commissioner Bob Mullins, Jr., MD, with U.S. Surgeon General Regina Benjamin following her speech to the Alabama Legislature.

“If we really want to reform health care in our country, we need to prevent people from getting sick in the first place,” Benjamin said.

The Alabama native was in Montgomery April 14 to speak to a joint session of the Alabama legislature on the importance of health prevention and the opportunities available through the Affordable Care Act. Benjamin, a family practice physician in Bayou La Batre before her appointment as U.S. Surgeon General in 2009, emphasized that poverty and education influence health as much as smoking or obesity.

“I really want to change the way we think about health in this country,” Benjamin said. “We really want to get to a place where everyone understands where almost everything we do, even though it’s not labeled health prevention, really does affect the quality and length of life of all Americans.”

New transition waiver helps LTC recipients return to community

A new waiver approved by the federal government is now available in Alabama to help elderly and disabled Medicaid recipients move from institutions to community-based care.

The Alabama Community Transition (ACT) Waiver, one of several programs endorsed in 2010 by the state’s [Long Term Care \(LTC\) Rebalancing Advisory Committee](#), was approved in April by the Centers for Medicare and Medicaid Services. The approval is for five years.

Marilyn Chappelle, director of Alabama Medicaid’s Long Term Care Division, noted that the committee supported the state’s application for an ACT waiver because it promotes consumer-directed options and gives individuals the opportunity to have greater control and choice in identifying, accessing and managing their long-term care services and supports. [Read more >>](#)



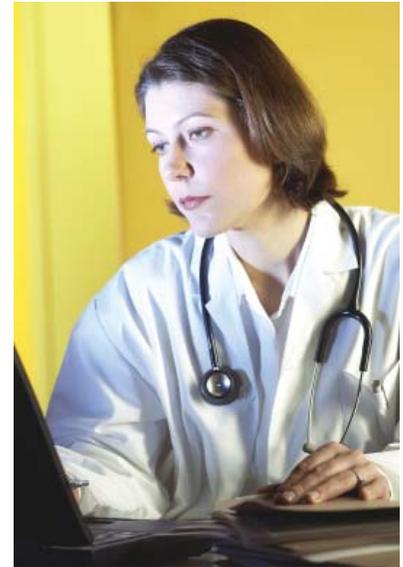
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Eligible providers to receive incentive payments as early as May

Eligible health care providers will begin receiving payments as early as May through the new State Level Registration (SLR) and Attestation System for Alabama's Electronic Health Records (EHR) Incentive Program. Launched in April, the goal of the program is to help eligible professionals and hospitals in Alabama build a foundation for improved patient care by acquiring and using electronic health records.

The [EHR Incentive Program](#) provides incentive payments to eligible providers, hospitals and federally qualified rural health clinics based initially on the adoption, implementation or upgrade of an electronic health record system, and eventually, the demonstration of "meaningful use" as defined by the federal government. Under program rules, state Medicaid programs are responsible for setting up a system to register and monitor providers and make incentive payments to those who qualify.



"Alabama is among the first states to implement this federally-funded Meaningful Use initiative, administered by Alabama Medicaid Agency," said State Health Information Technology Coordinator Kim Davis-Allen. [Read more >>](#)

Providers recognized for compliance with Agency's Preferred Drug List

Physicians who help the state of Alabama save money by using Medicaid's [Preferred Drug List](#) (PDL) are now being recognized by a new program that exempts them from many of the Agency's prior authorization (PA) requirements.



The *Gold Standard* program was launched April 1 to recognize prescribers whose compliance rate with the Agency's PDL is in the top 3 percent or higher, according to Pharmacy Services Director Kelli Littlejohn, Pharm.D. To qualify as a *Gold Standard* prescriber, physicians must have had three or fewer non-preferred drug claims and more than 220 prescriptions for preferred or over-the-counter drugs written during the previous quarter. Based on fourth quarter 2010 data, 345 prescribers were designated as "gold standard" providers for the April-June 2011 quarter.

Gold Standard providers are exempt from certain prior authorization requirements for a specified time. During that time period, most non-preferred prescriptions written by the provider will be approved at the pharmacy and will not require that a PA request form be submitted and approved before the prescription can be filled. Certain drugs are excluded from the exemption and still require a PA, including monoclonal antibodies, PDE inhibitors, weight loss agents, growth hormones and biological injectibles. [Read more >>](#)

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