

Governor's Commission
To Review and Advise on the Implementation of
New Hampshire's Medicaid Care Management Program

MINUTES

May 22, 2013
1:00 – 4:00 PM

Legislative Office Building, Room 301 – 303
33 North State Street, Concord, NH

Welcome and Introductions

The meeting was called to order by Commissioner Vallier-Kaplan, Chair at 1:10pm. Present in addition to Commissioner Vallier-Kaplan were Commissioners Donald Shumway, Vice Chair, Thomas Bunnell, Sue Fox, Wendy Gladstone, Yvonne Goldsberry, Catherine McDowell, Douglas McNutt, Gustavo Moral, Kenneth Norton, Jo Porter, Nicholas Toumpas.

Commissioner Vallier-Kaplan welcomed the Commissioners and introduced Lucy Hodder, Legal Counsel, Office of the Governor who expressed appreciation and encouragement for the Commission and assured the group that Governor Hassan will attend a meeting in the future.

There is now a link on the Governor's web site for Commission documents.

See: www.Governor.nh.gov select Links of Interest and scroll down to Medicaid Care Management Commission. All Commission members received a copy of the evaluation of the first meeting. This feedback has been very useful in planning this meeting. Periodic evaluations will be distributed in the future.

Commissioner Vallier-Kaplan presented the draft minutes of the May 1, 2013 meeting for review. Upon a motion duly made and seconded, it was unanimously:

VOTED: to approve the minutes of the meeting of the Commission of May 1, 2013, with the revision to the time of the May 22, 2013 meeting.

Updates

Medicaid Expansion, DSH (Disproportionate Share Hospitals) payment and implementation of ACA (Affordable Care Act)

Commissioner Bunnell reported that the three arenas are interrelated and impact the implementation of Medicaid Care Management. DSH update: There is some possibility that some of the uncompensated care funds lost during the last budget cycle may be restored by the legislature during this cycle. If this occurs, there is also an increased likelihood that those hospital systems impacted by the previous cuts will join the Medicaid care management

system. Note however, that DSH reimbursement begins to decrease to states as ACA is implemented. Regarding Medicaid expansion, hospitals are now treating many uninsured, uncompensated patients. There will be a reduction in such uncompensated care costs if we choose Medicaid expansion as there will be improved coverage of health services for more low income, working people especially for primary care. Review of Medicaid Expansion ensued. It was determined that the original RFP, MCO proposals, and contracts assumed that Medicaid Expansion would occur and that it would provide an efficiency of scale and diverse recipients that would allow the Medicaid program to work as a functioning system. Expansion was part of the business model of all parties and is necessary for the MCO business plans and the network formation.

Commissioner Bunnell brought forward a recommendation to the Governor for consideration by the Commission to authorize Medicaid expansion as essential to the implementation of Medicaid Care Management. Discussion by the Commissioners noted the expectation of Medicaid expansion as tied into the MCO contracts; achieving adequacy by the MCO's; benefit design and eligibility categories.

Commissioner Norton moved to approve the recommendation to the Governor, Commissioner McNutt seconded. It was unanimously:

VOTED to approve the following recommendation:

“The Governor’s Commission on Medicaid Care Management hereby recommends that Medicaid expansion be authorized in New Hampshire in order to ensure that the Medicaid Care Management initiative is implemented and can succeed in the Granite State.

We recommend the implementation of Medicaid expansion to ensure the successful transition from a Medicaid fee for service system to a more efficient, more effective, and more cost-effective system of Medicaid Care Management in and for our state. A failure to approve and implement Medicaid expansion imperils this pragmatic and compelling opportunity”.

Commissioner Kaplan appointed a subcommittee to complete the recommendation transmittal document and provide background documentation to the commission as soon as possible.

Introduction to SIM Grant – Doug McNutt

Commissioner McNutt invited all to refer to the handout, DHHS State Health Care Innovation Model: Stakeholder Session, May 19, 2013. New Hampshire is one of the few states testing models for long term care. Long term care includes Medicare recipients, the developmentally disabled population, and covers children and adults. This is a significant initiative that brings the opportunity for more rigor and discipline and will be a key piece for step 2 of MCM.

Commissioner Shumway added that this Commission will follow the SIM process and will welcome education from the department on issues and events as they emerge.

Listening Opportunities

Commissioner McDowell, Vallier-Kaplan, and Shumway reported on listening opportunities that they attended in the North Country and a second listening opportunity with stakeholders from the developmental disabilities community in Concord. Commissioner Fox reported that she will attend the next meeting of the DHHS Committee on Long Term Care where they will discuss long term care in step 2 of MCM. All commissioners are encouraged to seek out and respond to similar opportunities to meet with and listen to anyone or any group that would like to meet. Commissioners Vallier-Kaplan and Shumway will participate whenever possible.

Commission Work Plan

Commissioner Shumway led a discussion on the commission work plan. Work will begin in the areas of priority as selected by commission members, in each of the six sections. Next step will be to outline areas of review for each commissioner and coordinate timing with the department. Each area of review will be tested in the following areas: consumer protection; critical safety net providers and stable and efficient quality systems of care.

DHHS Medicaid Care Management Implementation Work Plan

Milestones and Critical Steps to Achieve Implementation

Commissioner Toumpas introduced Lisabritt Solsky, Deputy Director, Office of Medicaid Business and Policy, who presented a report on the MCM Timeline (handout). Ms. Solsky reviewed the Medicaid Care Management Timeline saying that the clock starts when two MCO's meet "substantial network development" for 80% of potential members and allows 150 days to the "go live" date. The review included details on initial outreach; enrollment packet, readiness review; provider communication; call centers; enrollment options; plan selection; provider preparedness; auto assignment; plan switch options and notice of decision. Subsequent discussion with commissioners focused on best ways to manage disruption in service during the transition. In response to questions, Commissioner Toumpas stated that the Medical Care Advisory Committee is reviewing the materials. Commissioners Norton and McNutt are members of the MCAC.

Implementation Issues that DHHS most wants Commission to address

Commissioner Toumpas stated that the department will provide a timeline of milestones coming up in the next year so the commission work can be coordinated with that timeline.

Other Updates

DHHS Plans and Requirements for Grievance and Appeals

Due to the time constraints, Commissioner Vallier-Kaplan assured members that the DHHS Plans and Requirements for Grievance and Appeals will be taken up at a later meeting.

The next meeting of the Governor's Commission on Medicaid Care Management will take place on Thursday, June 6 from 1 – 4pm at the Legislative Office Building, Room 301-303.

Commissioner Vallier-Kaplan adjourned the meeting at 4:10pm.