## **Medicaid Advisory Committee (MAC)**

## Benefit Package, Eligibility Verification & Recipient Cost-Sharing Cost-Containment Subcommittee April 28, 2016 Time: 1:30 – 4:00 p.m. Place: CNM Workforce Training Center

Chair: Gene Varela, AARP NM

Recorder: Kristin Abdill, HSD/OOS

<u>Committee Members</u>: Amy Dowd, NM Health Insurance Exchange

Jeff Dye, NM Hospital Association

Joie Glenn, NM Association for Home & Hospice Care

Jim Jackson, Disability Rights NM Marc Kolman, NM Department of Health Erik Lujan, All Pueblo Council of Governors

Carol Luna-Anderson, Life Link & BH Planning Council

Larry Martinez, Presbyterian Medical Services Dr. Darcie Robran-Marquez, Molina Healthcare Dr. Eugene Sun, Blue Cross Blue Shield NM

Debbie Feathers, Albuquerque Area Indian Health Services Rodney McNease, UNM Hospital (proxy for Steve McKernan) Colin Baillio, Health Action NM (proxy for Ruth Hoffman)

Absent Members: Dr. Kris Hendricks, Santa Fe Dentistry for Kids

Guest Presenters: Dr. Denise Leonardi, United Healthcare

Dr. Norman White, Presbyterian Health Plan

Staff & Visitors Attending: Nancy Smith-Leslie, HSD/MAD

Angela Medrano, HSD/MAD Robyn Nardone,NM ICSS Cindy Keiser, HSD/MAD Megan Pfeffer, HSD/MAD Wayne Lindstrom, HSD/BHSD Karen Meador, HSD/BHSD Christine Boerner, LFC

Abuko D. Estrada, NMCLP Gerry Fairbrother, Health Action NM Mel Marks, Fairbrother Associates Mary Eden, Presbyterian Health Plan

Kim Carter, HSD/MAD Doris Husted, The Arc of NM Birdena Sanchez, Zuni Pueblo Gov. Rick Vigil, Pueblo of Tesuque

Gabriel Parra, Law Office of Gabriel Parra, LLC

Warren Hix, Health Action NM Kim Pohl, Presbyterian Health Plan Jim Roeber, Molina Healthcare Audrey Simplicio, Zuni Pueblo

Susan Loubet, NM Women's Agenda

David Panana, KPHC

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
I. Welcome & Introductions	Gene Varela called the meeting to order at 1:32pm  Gene Varela welcomed subcommittee members and introductions were made.	None	Gene Varela	Complete
II. Review & approve minutes from last meeting	Colin Baillio requested an amendment to reflect that Ruth Hoffman had recommended no changes be made to the eligibility criteria during the guiding principles conversation.  Larry Martinez made a motion to approve the minutes as amended.  Dr. Eugene Sun seconded the motion.  A vote was taken by acclamation and the motion passed without objection	Noted amendment to be made to minutes.  Minutes posted on website.	Kristin Abdill	Complete
III. Present and discuss data on high cost utilization and Medicaid expansion category	<ul> <li>Dr. Norm White presented a report that he identified as a "high level representation" of data reflecting the utilization of New Mexico Medicaid recipients served by Presbyterian Heath Plan.</li> <li>Dr. Denise Leonardi presented a report that she identified as a "high level representation" of data reflecting the utilization of New Mexico Medicaid recipients served by United Healthcare.</li> <li>Dr. Darcie Robran-Marquez presented a report that she identified as a "high level representation" of data reflecting the utilization of New Mexico Medicaid recipients served by Molina Healthcare.</li> <li>Dr. Eugene Sun presented a report that he identified as a "high level representation" of data reflecting the utilization of New Mexico Medicaid recipients served by Blue Cross Blue Shield.</li> <li>The subcommittee briefly discussed the data presented and thanked the MCOs for their work in putting the reports together and doing so in such a short time period.</li> <li>Jeff Dye questioned why some services that are available in New Mexico are being delivered in neighboring states. The MCO representatives stated that there are many variables to this complicated question, and that the answer has to do with negotiated contracts with border area providers and distance for the member to the service provider. Dr. Leonardi state that for some members in the southern area of the state, traveling to El Paso is closer than traveling to Las Cruces. Mr. Dye also thanked the MCOs for the data and asked if it can be analyzed to show trends over time.</li> <li>The subcommittee asked for more details regarding secondary and tertiary diagnoses.</li> </ul>	Additional data related to secondary and tertiary diagnoses	Centennial Care MCOs	5/5/2016
IV. Presentation on HSD's ER "super-utilizer" project	Cindy Kaiser presented a report on HSD's Emergency Department Super Utilizer Care Coordination Reduction Project. Medical Assistance Division (MAD) staff is	None	NA	

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	tracking each MCO's top 10 utilizers of the emergency room and working with the			
	MCOs' care coordination programs to reduce ER utilization for these members.  Using PRISM software, MAD staff monitors their utilization and has documented a reduction in ER for these members over time.			
	Wayne Lindstrom stated that the data shows that a successful intervention takes place when a client is meaningfully engaged where they live.			
	Collin Baillio asked what incentives the MCOs have in place to encourage care co- ordination. There are numerous incentives including reduced expenditures and in- centive payments that are tied to increasing the use of Community Health Workers and Peer Support Programs.			
V. Discuss managed care program expenditures/utilization	Nancy Smith-Leslie presented data showing the Medicaid payments made to hospitals for specific programs during SFY13 & SFY15. She also presented expenditures data for the overall Medicaid program and a breakout of expenditures for the long-term care program by MCO.	None	NA	NA
VI. Opportunity for public comment	Abuko D. Estrada addressed the committee on behalf of the Center on Law and Poverty and asked that the committee not reduce the benefit package or add any patient fees. He distributed a memo to the committee that further detailed his concerns.	None	NA	NA
	Gerry Fairbrother, representing Health Action New Mexico, addressed the committee. She presented information based on studies done in other states and shared her concerns regarding eligibility verification.			
	Warren Hix, representing Health Action New Mexico, addressed the committee. He stated that the committee has an opportunity to think creatively and that it should consider utilization as well as patient outcome and ER alternatives.			
	Governor Rick Vigil addressed the committee on behalf of the Pueblo of Tesuque. He asked the committee to consider what is really being done for the citizens of New Mexico. He encouraged bringing more resources together and creating new partnerships to address the issues being discussed.			
VII. Topics for next discussion	The committee would like the following information/data for the next meeting: <ul> <li>federal guidelines for cost-sharing</li> <li>what happens when patients do not pay their co-pays and how this would affect the implementation of cost-sharing</li> <li>data showing how patients are utilizing the available resources</li> <li>savings target for this committee</li> </ul> <li>Meeting adjourned at 3:45pm</li>	Bulleted items	HSD/MCOs	5/5/2016

Respectfully submitted:		
	Kristin Abdill	5/4/2016
	Recorder	 Date