

Medicaid Advisory Committee (MAC)

Benefit Package, Eligibility Verification & Recipient Cost-Sharing Subcommittee Meeting Minutes

Date: April 19, 2016 Time: 1:30 – 4:00 p.m. Place: NM State Library, Santa Fe, NM

Chair: Gene Varela, AARP NM

Recorder: Shawna Crist-Ruiz, HSD/MAD

Committee Members: Larry A. Martinez, Presbyterian Medical Services
 Jeff Dye, NM Hospital Association
 Eugene Sun, MD, BCBS NM
 Ginna Hendricks, Santa Fe Dentistry for Kids (proxy for Kris Hendricks)
 Steve McKernan, UNM Hospital
 Darcie Robran-Marquez, MD, Molina Health Care
 Amy Dowd, NM Health Insurance Exchange
 Joie Glenn, NM Association for Home & Hospice Care
 Ruth Hoffman, Lutheran Advocacy Ministry NM
 Mark Kolman, NM Department of Health
 Sandra Winfrey, IHS (Proxy for Debbie Feathers)

Absent Members: Carol Luna-Anderson, LifeLink & BH Planning Council
 Jim Jackson, Disability Rights NM

Staff & Visitors Attending: Nancy Smith-Leslie, HSD/MAD
 Kari Armijo, HSD/MAD
 Angela Medrano, HSD/MAD
 Kim Carter, HSD/MAD
 Tallie Tolen, HSD/MAD
 Kristin Abdill, HSD/OOS
 Wayne Lindstrom, HSD/BHSD
 Karen Meador, HSD/BHSD
 Jenny Felmley, LFC
 Christine Boerner, LFC
 Ruth Williams, Youth Development, Inc.
 Erik Lujan, Pueblo of Ohkay
 John Johnson, Presbyterian Health Plan
 Robb Mclean, UNMH
 Susan Loubet, NM Women's Agenda
 Gerry Fairbrother, Health Action NM
 Abuko Estrada, NM Center on Law and Poverty

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE

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I. Welcome and Introductions	Gene Varela welcomed subcommittee members and introductions were made.	None	Subcommittee	Complete
II. Review Subcommittee charge	<p>Nancy Smith-Leslie reviewed the subcommittee's charge, which includes three components of work and timelines. Recommendations for Components 1 and 2 are due to the Human Services Department (HSD) by June 1.</p> <p>The subcommittee discussed its decision for accepting public comment. All meetings will be open to the public, and comment will be sought from the audience at select meetings. The approved dates for public comment at meetings are: April 28, May 19 and May 26. Public comment will also be tracked through the HSD website and email address.</p> <p>In addition, proxy representatives will be allowed, but Chairman Varela and HSD staff should be notified in advance.</p> <p>Sandra Winfrey recommended that a tribal representative be appointed to the subcommittee. HSD staff will follow up with the All Pueblo Council of Governors.</p>	Appoint tribal representative	HSD/MAD	
III. Discuss guiding principles for recommendations	<p>Gene Varela suggested that the subcommittee begin by discussing its guiding principles as it goes through the development of recommendations. Suggestions for guiding principles included:</p> <ul style="list-style-type: none"> • The consideration of how optional benefits are actually cost-effective; therefore, reductions to optional services could result in greater costs later. • The compounding affects and consequences of benefit reductions on hospitals. It was requested that HSD provide a specific savings target to the subcommittee; however, Nancy Smith-Leslie responded that HSD has not identified a savings goal for the subcommittee yet. • The use of data so that subcommittee members can understand how Medicaid program dollars are being spent currently. • Ensure that the remainder of cost-containment not achieved through provider rate reductions (approximately \$55 million) not be the target savings figure. Must be a reasonable amount. <p>Ruth Hoffman recommended that the subcommittee work towards accomplishing its charge without modifying or reducing eligibility criteria if at all possible.</p>	None	Subcommittee	Complete
IV. Provide overview of benefits and eligibility	<p>Kari Armijo and Angela Medrano reviewed several documents that were provided as handouts:</p> <ul style="list-style-type: none"> • List of mandatory and optional Medicaid benefits, including limitations in the Alternative Benefit Plan (ABP) and a list of Long-Term Services and 	<ul style="list-style-type: none"> • Provide utilization data, especially high-cost and "super-utilizers". • Define acronyms. • Provide amounts 	HSD	Next meeting – April 28, 2016

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	<p>Supports (LTSS) benefits.</p> <ul style="list-style-type: none"> • A comparison of the New Mexico Medicaid program's coverage of optional benefits to other states. • List of previous cost-containment initiatives – FY10 and FY11. • List of mandatory and optional eligibility categories. • Document outlining requirements for State Plan Amendments (SPAs), regulatory changes and waiver revisions. <p>Discussion included:</p> <ul style="list-style-type: none"> • Need for innovation. CMS has encouraged states to be creative about their Medicaid programs. Larry Martinez mentioned Rhode Island's Cash-and-Carry program as a model. • Request for dollars saved as part of FY10 and FY11 cost-containment. • Suggestion to focus on third-party liability (TPL) to achieve savings. • Steve McKernan mentioned the statistic that 5% of the Medicaid population accounts for 50% of the spending. The subcommittee requested a more information about the super utilizers and expenditures. It was suggested that each MCO present about its top 5% utilizers at the next meeting. HSD will work with the MCOs to have presentations prepared. • The possibility of changing the criteria for meeting a nursing facility level of care and having access to Community Benefits and other LTSS from 2 Activities of Daily Living (ADLs) to 3 ADLs. • Suggestion from Amy Dowd to quality check the eligibility verification process and ensure that people are correctly referred to the NM Health Insurance Exchange (NMHIX). • Ideas from Ginna Hendricks on dental coding and ensuring that individuals with private insurance don't get billed to Medicaid. Kari Armijo to follow-up for details on the dental coding proposal. • Suggestion to better manage non-emergency transportation benefits to control utilization. 	<p>saved through prior or cost-containment initiatives</p>		
<p>V. Open discussion</p>	<p>Discussion included:</p> <ul style="list-style-type: none"> • Sandra Winfrey asked about the status of the 100% federal enhanced matching funds for services provided to Native Americans, and whether the Department intends to maximize that opportunity. Nancy Smith-Leslie responded that the Department is exploring that option and does intend to work through barriers to maximize federal reimbursement. Sandra Winfrey also noted that cuts should not be made when the funding source is 100% federal and there would be not be general fund savings. • Steve McKernan noted the potential impact of the federal outpatient drug rule on 340B pricing. Nancy Smith-Leslie responded that the Department is analyzing this issue. 	<p>None</p>	<p>Subcommittee</p>	<p>Complete</p>

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	<ul style="list-style-type: none"> Steve McKernan proposed a fourth component of the subcommittee's charge, which would be to recommend a better system of care for recipients. He noted that hospitals are treating people for diseases and conditions that could be better treated in other settings, and that the ER acts as a multidisciplinary clinic in which an individual can get all of the tests and results they need at one time; there is a need for an alternative way for individuals to do this. Ruth Hoffman asked for data on more than just the top 5% of utilizers by cost; she expressed that the top 25% might be more useful information. <p>Larry Martinez made a motion to adopt Steve McKernan's suggestion for a fourth component of the subcommittee's charge. The subcommittee approved the motion. Kristin Abdill noted that this work would need to occur subsequent to the other components already set forth for the subcommittee.</p>			
VI. Closing remarks and adjournment	It was suggested that the subcommittee focus on a discussion of benefits at the next meeting, combined with data presentations. The meeting was adjourned.	None	Subcommittee	Complete

Respectfully submitted:

Shawna Crist-Ruiz
 Recorder

4/26/16
 Date