

**Medicaid Advisory Committee (MAC)
Long Term Leveraging Medicaid Subcommittee**

MEETING MINUTES

June 29, 2016 Time: 1:30pm – 3:45p.m. Place: DOT District 3 Auditorium, ABQ

Chair: Carol Luna-Anderson, The Life Link
Recorder: Robyn Nardone, HSD/NMICSS

Committee Members: Anita Schwing, (proxy for Amy Dowd, NMHIX)
Jeff Dye, NM Hospital Association
Nick Estes, Health Action NM
Sandra Winfrey (proxy for Debbie Feathers, ABQ Area Indian Health Services)
Jordan Erp (proxy for Donna Garcia, Presbyterian Delivery System)
Joie Glenn, NM Association for Home & Hospice Care)
Jim Jackson, Disability Rights NM
Steve Kopleman, NM Association of Counties
Christina Rein (proxy for Chuck Milligan, United Healthcare)
Randy Marshall, NM Medical Society
Steve McKernan UNM Hospital
Carolyn Montoya, UNM School of Nursing
David Roddy, NM Primary Care Association
Linda Sechovec, NM Health Care Association
Doug Smith, Presbyterian Medical Services
Dale Tinker, NM Pharmacists Association
Gene Varela, AARP NM

Presenters: Susan Dezavelle, Molina Health Care
Quinn Glenzinski, BCBS NM

Absent Members: Johnny Abeyta, Ohkay Owingeh Pueblo
Myles Copeland, NM Aging and Long-Term Services

Staff & Visitors Attending: Karen Meador, HDS/BHSD
Angela Medrano, HSD/MAD
Robyn Nardone, HSD/NMICSS
Nancy Smith-Leslie, HSD/MAD
Christine Boerner, Legislative Finance Committee
Abuko Estrada, NM Center on Law & Poverty
Doris Husted, The Arc of NM
Nandini K
Ellen Pinnes
Martin Rosenblatt, InnovAge Greater New Mexico PACE

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DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
I. Welcome and Introductions	Carol Luna-Anderson (Chair) called the meeting to order at 1:33pm and welcomed committee members. Introductions were made.			
II. Review Subcommittee Charge	The Committee Chair reviewed the subcommittee charge. No comments were offered.			
III. Discuss Guiding Principles for Recommendations	<p>Carol Luna-Anderson began discussions with whether the meetings should be open. Dale Tinker suggested the meetings should be open to the public and to also allow for written comments to be submitted to the committee. The entire committee agreed.</p> <p>The second topic was whether public comment should be added to the meetings. Carolyn Montoya suggested public comment should be available at each meeting. The group agreed but expressed concerns about time. Linda Sechovec suggested a time limit. Jim Jackson agreed and suggested a block of time be added to the meeting agendas.</p> <p>Nancy Smith-Leslie reminded the group that a process is in place to accept written comments on HSD's website and those relevant comments are then provided in each committee member's binder.</p> <p>The Chair presented a motion to offer a sign-in sheet for comments at each meeting and limit it to two to three minutes per person. Gene Varela moved the motion and Carolyn Montoya second. All members voted in favor.</p> <p>The Chair addressed how proxies should work for the meeting suggesting members inform HSD staff in advance of the meeting if they will have a proxy attend and prepare their representative for the meeting. Preparation would include providing materials presented at previous meetings to the proxy to avoid revisiting topics. There were no comments offered and the group was in agreement.</p> <p>The Chair asked HSD/MAD Director Nancy Smith-Leslie to explain what the expectations are for the committee. Ms. Smith-Leslie provided a recap of the work of two prior MAC subcommittees regarding Medicaid cost containment and that this was the third committee developed to address long term strategies and leveraging for Medicaid. Ms. Smith-Leslie encouraged open discussion and asked the members to bring ideas to the meetings referencing value based purchasing as an example. The committee was asked to make its final recommendations by the end of August.</p> <p>Jeff Dye asked if there was more information available regarding the status of the Benefits Package, Eligibility Verification & Recipient Cost-Sharing Subcommittee's recommendation to add co-pays. Ms. Smith-Leslie indicated no action has been taken as of yet and that HSD is in the process of reviewing several options.</p>			

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	<p>Joie Glenn suggested bringing in consultants and reports from the various participating committee members' associations. Linda Sechovec offered to contact her national office for useful information. Ms. Luna-Anderson encouraged the group to bring any reports or useful information and did not want to over burden HSD staff with having to do all of the research for the subcommittee.</p> <p>Jim Jackson suggested the group look at the LFC report on Medicaid Leveraging for direction. Ms. Smith-Leslie suggested that committee members identify recommendations from the LFC report for the committee to add to the agenda for discussion.</p>			
IV. Presentations on Value Based Purchasing	<p>Nancy Smith-Leslie presented background information on current payment reform initiatives in Centennial Care. Each MCO is required to initiate payment reform projects ranging from accountable care-like models, bundled payments for episodes of care to shared saving arrangements and some risk arrangements. Ms. Smith-Leslie explained next steps that included monitoring and assessment of the MCO pilots, provider feedback and stakeholder engagement to assist in developing recommendations for the 1115 waiver renewal.</p> <p>Sandra Winfrey asked for clarification in the presentation regarding fee for service payments being identified as low value in terms of the value based purchasing continuum. Ms. Smith-Leslie offered to add a clarification as the slide refers only to efforts in Centennial Care. .</p> <p>Each Centennial Care MCO provided slide presentations about their Value Based projects. Quinn Glenzinski from BCBSNM provided overviews of the Care Link NM Health Home pilot and the Community Paramedicine project. Jim Jackson asked how participants were chosen for the paramedicine project. Ms. Smith-Leslie explained the focus of that project is on high-need, high-cost population.</p> <p>Susan Dezavelle presented Molina Healthcare's Payment Reform Programs and its approach to creating a path to Risk Models by using a tier structure involving different levels of risk based on provider readiness.</p> <p>Jordan Erp presented Presbyterian's payment reform initiatives that include patient centered medical home bonus payments, multi-specialty sub-capitation and OB gain sharing for primary C-Section reduction. David Roddy asked if value based purchasing will result in an initial increase to the Medicaid budget. Ms. Smith-Leslie said there is not an expectation that value based purchasing will increase the Medicaid budget but rather, over time, result in savings.</p> <p>Christina Rein discussed United Healthcare's provider payment reform efforts that include shared savings with providers, closing gaps in care and other initiatives with ECHO Care. Jeff Dye asked what the threshold number was for provider participation and Ms. Rein explained there must be a 1,000 member minimum threshold per provider.</p>			

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V. Open Discussion	<p>Angela Medrano asked members of the committee to offer presentations to assist the work of the committee. Jim Jackson offered to look at the LFC report and possibly present with LFC staff. Jeff Dye offered to present to the committee and recommended focusing on long term leveraging. Jim Jackson encouraged all members of the committee to review the LFC report. Nick Estes offered to work with Jason Sanchez from HSD/MAD to put together a presentation about provider fees for the committee.</p> <p>Jim Jackson expressed concern about meeting scheduling conflicts and Ms. Medrano indicated HSD staff would look at the LHHS agenda to determine if there will be a conflict with the subcommittee meeting.</p>			
VI. Closing Remarks Adjournment	The Committee Chair thanked the committee for their participation and confirmed the next meeting would be held on July 13 in Santa Fe.			

Respectfully submitted:

Robyn Nardone

7/11/16

Recorder

Date

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