

# MO HEALTHNET OVERSIGHT COMMITTEE

## MEETING MINUTES

August 4, 2015

221 Metro Drive  
Jefferson City, MO 65102

## ATTENDANCE

### Committee Members:

Tim McBride, Chair  
Bridget McCandless  
Celesta Hartgraves for Gail Vasterling  
Gerard Grimaldi  
Ingrid Taylor (by phone)  
Jennifer Tidball for Brian Kinkade  
Joseph Parks  
Joseph Pierle  
Margaret Benz  
Mark Sanford  
Mark Stringer  
Rep. Jeanne Kirkton  
Rep. Keith Frederick  
Sen. Joseph Keaveny  
Sen. Rob Schaaf

### Members Absent:

Carmen Parker-Bradshaw

### DSS Staff:

Chelsea Blair, MHD  
Debbie Meller, MHD  
Glenda Kremer, MHD  
Heather Dolce, DO  
Jay Ludlam, MHD  
Julie Gibson, FSD  
Laura Branstetter, MHD  
Nanci Nikodym, MHD  
Rhonda Driver, MHD  
Samar Muzaffar, MHD  
Stephan Tomlinson, DO

### Guests:

Amanda Schneider, Legal Services  
Brian Dobbins, Aetna  
Chris Moody, Moody & Associates  
Christine Thompson, Office of Administration  
David McCracken, Wellcare  
Diann Bomkamp, MDHA  
Emily Wright, Gibbons Workman  
Jessica Baumli, Mosaic Life Care  
Jessica Petrie, MO Legislature  
Jim Burns, CMS  
Jim Moody, Moody & Associates  
Karen Dent, MO Primary Care Association  
Kevin Godsey, Paraquad  
Meghan Elledge, Mosaic Life Care  
Mike Lorenz, AbbVie  
Misty Snodgrass, MO Coalition  
Pam Victor, Great Circle  
Shaun Furey, Home State Health  
Steve Renne, MO Hospital Association  
Steve Robino, Aetna

## AGENDA

### • *Welcome/Introduction/Minutes*

- Dr. Tim McBride, Chair, called the meeting to order at approximately 12:09 p.m. Minutes of the April 30, 2015, meeting were reviewed and approved.
  - Membership update – Dr. McBride announced that Kecia Leary has taken a position with the University of Iowa and consequently left the Committee. As a result, a new Vice Chair needs to be nominated; however, that will be postponed until a later meeting. With her absence, there is an open dentist slot as well as two non-primary care physician slots. Dr. McBride encouraged members to look for possible candidates and have them fill out an application if they are interested in being on the Committee and send it to him at [tmcbride@wustl.edu](mailto:tmcbride@wustl.edu) or [Debbie.Meller@dss.mo.gov](mailto:Debbie.Meller@dss.mo.gov).

### • *Family Support Division Update*

- Julie Gibson, Director of the Family Support Division (FSD), provided several handouts summarizing the latest data. There have been dramatic improvements in reducing the amount of pending applications. In terms of processing, FSD has made tremendous strides in pushing numbers below historic lows. Additionally, MEDES has had a contract change and they are in a transitional phase. They have brought IBM in as the prime contractor and are currently working on completing the MAGI project. It is expected that everyone will be in MEDES by this fall.
  - Senator Schaaf – expressed concern regarding Managed Care for Kids. Due to the rise in enrollments, how much will it cost vs. what we projected and what do other states look like?

## • **Director's Update**

- Dr. Joe Parks, Director of the MO HealthNet Division (MHD), presented the director's update.
  - ICD-10 will be fully implemented on October 1, 2015. After that date, MHD will not pay for any coding that is not compliant with ICD-10CM – there will be no overlap. Dr. Parks provided a document that contained Q&A on the conversion (see handout).
    - **ACTION:** Senator Schaaf questioned ICD-10 implementation cost and requested it be reported back to the committee.
    - **ACTION:** Dr. Margaret Benz commented on the numbers of inpatient vs. outpatient and Dr. Parks agreed that he will look at the data.
  - For legislative updates, MHD will be proposing several new legislative items. They will be reauthorizing provider taxes, and also proposing to change the rules around 3<sup>rd</sup> party recovery, which if legislatively passed, have the potential to generate revenue.
  - Dr. Parks gave an overview of new items to be implemented in the FY16 Budget.
  - There are new Managed Care regulations out from CMS. One of the regulations receiving a lot of press is the medical loss ratio line on Managed Care of 85%. Missouri has been doing 88% for last 10 years, so that regulation should not affect us.
    - **ACTION:** Rep. Frederick would like the Division to examine the categorization and allocation of costs in regards to the medical loss ratio and report back to the committee.
  - Dr. Parks presented *Managed Care vs. Fee-For-Service* (see handout).
    - **ACTION:** Senator Schaaf made a motion to request that the Oversight Committee recommend the Department of Social Services to not expand Managed Care. The motion was seconded by Rep. Frederick. The motion carried by majority vote. It was noted that the Department is still looking at Accountable Service Organizations (ASO).
  - Senator Schaaf commented that the kind of Managed Care that we have in the I-70 corridor for mothers and children is a risk-bearing coordination of care.

## • **Public Comment**

- Dianne Bomkamp, Legislative Co-Chair of the Missouri Dental Hygienist's Association (MDHA) – A letter was sent to MHD from the Missouri Hygienist's Association requesting that certain procedures be authorized. One of the services, called root planning involves probing the patient's teeth to see how much bone loss has occurred; another service involves debridement which includes removing excess debris from the patient's teeth in order to be able to conduct a proper exam. The MDHA feels these services are essential in order to prevent tooth loss and for the patients overall well-being. They also requested that the screening code and the assessment code be authorized for reimbursement. Dentists use these with Head Start children and those on WIC, it helps these populations receive the dental care they need.
  - **ACTION:** MHD will be responding to the letter and reporting back to the committee.
- Karen Dent, Director of the Rural Health Network of Missouri – Ms. Dent followed-up on the comment from the MDHA in regards to scaling and root planning. She emphasized the need for authorization of these services as it essential in the prevention of tooth decay and loss.

- Meghan Elledge, Mosaic Life Care – Ms. Elledge gave an update on the pilot program Mosaic has with FSD. Currently their application turnaround times are exceptional and have been reduced by about 50% from the time the program began. Before the program started, adult Medicaid applications were taking on average 88 days to process, now they are averaging 45 days. Pregnant women applications are averaging 10 days, and call backs from FSD on people who applied for Medicaid outside of their organization are averaging a 24-hour call back time. The reduced application process has been a joint effort with Mosaic staff proactively collecting verification documentation, turning it in to FSD, and FSD processing the application within 24 to 48 hours. Ms. Elledge reported that they are going live with the mental health unit on September 1. One problem they have seen in that unit is the homeless population not being able to get food stamps due to the lack of a phone and mailing address. They have successfully addressed this problem by completing the interview before they are discharged, having the application processed, and delivering it to the person at their post-discharge follow-up appointment
- Billie Orr, Legal Aid of Western Missouri – Ms. Orr works for a program designed to report on trends, differences, and issues within the MO HealthNet and Family Support Divisions. In regards to processing timelines, they are set by statute. For children and families, there is a 45 day time limit, and for the Aged, Blind and Disabled (ABD), 90 days. Although there have been tremendous improvements, Ms. Orr reports that their office receives calls that applications are still not being processed within those statutory timelines. A main trend being reported are untimely premium notices caused by participants transitioning from non-eligibility to eligibility and requests for notices to be in languages other than English which can delay the premium notice from being mailed. Because the notice prompts the participant to pay the premium, if it arrives late, the participant goes without benefits creating gaps in coverage. This is causing medical debt and credit report hardships for participants.

- **Implementation of New Managed Care contracts**

- Rhonda Driver, MHD Deputy Division Director of Clinical Policy and Operations, presented *MO HealthNet Managed Care, Highlights of Contract Revisions for SFY16* (see handout).

- **NEMT Update**

- Glenda Kremer, MHD Director of Program Operations, presented *Non-Emergency Medical Transportation* (see handout). The presentation gave an overview of the program, latest trends, and upcoming technology.
  - Gerard Grimaldi – commented that patients struggle with the five day waiting period for rides.
  - Rep. Frederick – commented that he supports improving access and diminishing costs; however, would want the savings to go back into the State.
    - **ACTION:** The NEMT subcommittee will schedule another meeting to discuss guidelines for the next contract period.
    - **ACTION:** Sen. Schaaf suggested looking at how carving out NEMT could save money.

- **Primary Care Community Health Worker HH Pilot**

- Dr. Samar Muzaffar, MHD, presented *MHD Primary Care Community Health Worker Pilot* (see handout).

## NEXT MEETING

October 13, 2015

MO Coalition of Community Mental Health Centers

221 Metro Drive

Downstairs Large Conference Room

Jefferson City, MO 65109