
Medicaid & Exchange Advisory Board
Meeting Minutes
June 9, 2014

Page 1

Board Members Present: Bram Kleppner, Nathaniel Waite, Trinka Kerr, Peter Espenshade (phone), Christina Colombe (phone), Tim Ford, Donna Sutton Fay, Kay Van Woert, Larry Goetschius, Ellen Gershun, Paul Bakeman, Sheila Reed, Shannon Wilson (phone), Gladys Mooney, Madeleine Mongan, Joan Lavoie, Julie Lineberger (phone), Julie Tessler, Lisa Maynes, Sharon Henault and Dale Hackett.

Board Members Absent: Vaughn Collins, Clifton Long, Randy Cook, Catherine Hamilton, Cathy Davis, Sharon Winn and Laura Pelosi.

Other Interested Parties Present: Rebecca Heintz, Betty Morse, Cherie Bergeron, Kelly Barnier, Susan Gretkowski, Lucy Guerin, Kirsten Murphy, Gretchen Benoche and Kristen Bigelow-Talbot.

Staff Present: DVHA: Selina Hickman, Devon Ayers, Carrie Germaine and Clark Eaton.

HANDOUTS

- Agenda
- Medicaid & Exchange Advisory Board (MEAB) May 12 Meeting Minutes
- Improving Access Work Group Report (6/9/14)
- Hub & Spoke/Opiate Addiction Program Update (6/9/14)
- Listing of DVHA- Required Legislative Reports (6/9/14)
- Co-chair Position Description (6/5/14)
- DVHA Rulemaking – Telemonitoring/Prescription Monitoring (6/9/14)
- Vermont Health Connect Update (6/9/14)
- Disability and Long Term Services & Support Work Group Update (6/9/14)

*all are posted to the VHC website

CONVENE

Kay Van Woert and Bram Kleppner chaired the meeting.

Welcome and Introductions

Board Business

Following introductions, the meeting minutes for May 12, 2014 were reviewed and adopted. The board voted to approve the March minutes, with 19 yeas, 0 nays and 0 abstentions. Bram Kleppner introduced Devon Ayers from Vermont Health Connect (VHC) who will be a liaison to the board on issues relating to VHC.

MEAB Work Group Updates – Work Group Chairs

Small Employer Work Group – Work Group Chair Julie Lineberger indicated that the group has forwarded a candidate to be considered as a new small business representative to serve on the board and fill a vacant board position.

Improving Access Work Group – Work Group Chair, Trinka Kerr reported that the group met on June 2 at DVHA in Williston. In the spring, the group made five recommendations to DVHA, to which DVHA responded in writing. The group discussed DVHA's recommendations and responses and there was consensus that the group was not completely satisfied with DVHA's

Medicaid & Exchange Advisory Board
Meeting Minutes
June 9, 2014

Page 2

responses. The Work Group prepared a report for the MEAB to discuss at the current (6/9/14) meeting, outlining further recommendations for DVHA on each of the initial five recommendations. Trinka reviewed each of the five areas of concern, and desired further action, and possibly a higher level look within DVHA. Mark Larson expressed his appreciation for all of the effort that has gone into the recommendations and wants to continue engaging respectfully around all of the issues. He cited examples of DVHA's rationale in making its responses, but there certainly can be more group discussion. Kay Van Woert suggested that there be continued dialogue within the Work Group on at least three of the items; it will be important to include DVHA's Policy Unit and have the right people in attendance at the meeting. The next Improving Access Work Group Meeting is scheduled for August 4, 2014 in Williston.

EPSDT Work Group – Work Group Chair, Nathaniel Waite, reported that the Early, Periodic, Screening, Diagnosis & Treatment (EPSDT) Work Group met on May 19 at VSAC in Winooski. The group has updated its current issues matrix and will be prioritizing topics at its next meeting that will be scheduled in July.

New VHC Work Group Proposal – Donna Sutton Fay reiterated the importance of having a stakeholder Work Group to deal with issues that come up relating to the implementation and operation of VHC. Mark supported the idea and suggested that this group be focused on individuals and families and work in parallel with the Small Employer Work Group, also linked to VHC. This suggestion was supported and the new group will be called the Individuals and Families Work Group. Donna Sutton Fay will chair the Work Group beginning in September; Trinka Kerr will convene the group over the summer and start the process of identifying issues and outlining the scope of work.

A Work Group will also be convened to look at the issue of caregiver reimbursement in the state. Clark will connect with interested participants and convene an initial meeting over the summer.

Blueprint Discussion: Hub & Spoke/Network Analysis – Beth Tanzman

Beth Tanzman, Assistant Director, Vermont Blueprint for Health, provided a detailed analysis and discussion of Vermont's "Hub & Spoke" Health Home Program for opioid addiction. She also included handout information on the Blueprint's network of operation throughout the state.

Increasing rates of opioid dependence have become a significant problem across Vermont, especially due to an inadequate capacity to meet the quickly expanding overall need, and the high cost of treating this population. Beth described how the state has created five regional "Hub" centers for methadone treatment adhering to strict federal requirements for opioid treatment programs. A new facility has been opened in the Rutland area this past November. Likewise, the "Spokes" of the program have also been expanded under the health home concept offering office-based opioid treatment with controlled dispensing of buprenorphine. A Medicaid state plan amendment has provided for six core health home services: 1) comprehensive care management, 2) care coordination, 3) health promotion, 4) comprehensive transitions of care, 5) individual and family support services, and 6) referral to community and social support services. Under the hub and spoke concept, people can be seen daily if necessary and treatment is being prioritized. Because addiction cases have almost tripled, there is still a waiting list for treatment, but that list is shrinking. Larry Goetschius asked if there is data yet on successful recoveries. Beth stressed that the focus up to now has been on providing access to treatment; however, this is a chronic

Medicaid & Exchange Advisory Board
Meeting Minutes
June 9, 2014

Page 3

disease model and recoveries are more longer term. Next priorities will be getting this patient population under good control, and then monitoring steps toward full recovery.

DVHA Topics/Discussion – Mark Larson/Kara Suter

Medicaid Shared Savings Program/ACO Update – Kara Suter, Director, Payment Reform and Reimbursement, noted that the implementation of the Medicaid Shared Savings program is in full swing. The next major milestone will be the Accountable Care Organizations (ACOs) sending out beneficiary notifications of their providers' participation in the program. DVHA is working with the ACOs to ensure notifications are readable and understandable. The Health Care Advocate's office also has had input to the notifications. The notices will go out on a rolling, staggered basis starting on July 1, 2014. Larry Goetschius stressed the need to be sure that there are consistencies in the ACOs' clinical protocols and guidelines.

MEAB Operational Review – Board Members

Co-chair Position Description – Bram Kleppner provided the co-chair job description for review; Kay Van Woert's co-chair position is up for a new term election on July 1. The co-chair election process will take place at the July meeting. Kay announced that she will not be seeking re-election as a MEAB co-chair, but will continue participation as a member only. Julie Tessler suggested that the board needs to get a sense of who might be interested in serving in a chair role or even do some recruiting if necessary. Kay asked that if there are members who are interested in serving in a co-chair role, please contact either co-chair sometime within the next week. Bram estimated that co-chair activities can take between 2-5 hours a month on average.

Emergency/Permanent Rule Filings – Selina Hickman

Selina Hickman, DVHA Policy Director, reviewed two rule filings that were mandated out of the recent legislative session regarding Medicaid covered services and administration: 1) telemonitoring, a new cost-neutral covered service, and 2) adding an administrative process for providers to participate in the monitoring of buprenorphine prescriptions via the Vermont Prescription Monitoring System (VPMS). Emergency rule filings have been implemented to meet the 7/1/14 effective dates for these initiatives. The proposed effective date for the permanent rule filings is 10/29/14. There will be a public comment period and public hearings as part of the permanent rule filings. There were questions relating to the VPMS process. The VPMS program is actually run out of the Vermont Department of Health; they will be invited to brief the MEAB on the VPMS program at a future meeting.

Vermont Health Connect Topics/Discussions – Mark Larson

Dashboard/Key Indicators Discussion – On behalf of Vermont Health Connect (VHC), Mark Larson reviewed the most current version of the MEAB dashboard. Suggested improvements have been incorporated, including; 1) a view of the current month and previous month, side-by-side, 2) separating "payment past due" into two categories (APTC and non-APTC), and 3) clarifying language that could be confusing. Board members made further suggestions on how to better present data. More feedback is still encouraged.

Vendor Update – A contract has been signed today with the IT company OPTUM to assist Vermont and VHC in four specific areas: 1) provide an operational assessment of our back-log and ways to improve/streamline operational efficiency, 2) assist in reducing the specific back-log on change-of-circumstance requests, 3) make an assessment of the effectiveness of our IT

Medicaid & Exchange Advisory Board
Meeting Minutes
June 9, 2014

Page 4

programs and systems, and 4) provide additional help around VHC project management and project management support.

Notices – Notices of decision will be sent to every household/individual who filled out an application at any point during or after open enrollment and where there is still an active case on file. The scheduled start is yet to be determined, but the plan is to send out approximately 60,000 notices (staggered) over a six week period. Mark noted that this will be confusing to some, particularly those that are already enrolled and covered. However, it is a mandatory requirement, a reminder of people's rights and an important part of due process.

2014 Rate Review for 2015 Plans – The insurance carriers filed their proposed rates with the GMCB for the 2015 coverage year on June 2, 2014. BCBSVT requested a 9.8% average annual rate increase, and MVP Health Care requested a 15.4% average annual increase – both are compared to 2014 rates. Public comment is open until August 18th and public hearings will be held on August 12 and 13 in room 11 at the Statehouse. The MEAB requested that the carriers brief the board on the proposed rates at its July 14 meeting.

Portal Usability Project – VHC is soliciting the MEAB and other stakeholder support to improve the usability of the VHC web portal. Specifically, the new MEAB Individuals/Families Work Group will add key support to this effort. There will be a dedicated work session on 6/10/14 to look at ways to improve individual/family application text language.

Current VHC information and activities can always be viewed at www.vermonthealthconnect.gov

SIM/VHCIP Disability & LTC Services and Support Work Group – Deborah Lisi-Baker

Deborah Lisi-Baker, Co-chair of the SIM/VHCIP Disability & LTC Services and Support (DLTSS) Work Group, provided an overview of the SIM/VHCIP project and the work plan and progress of the Disability & LTC Services and Support Work Group. The broader, large SIM/VHCIP grant provides Vermont \$45 mil over 4 years to determine and develop the best ways to improve care, improve the health of the Vermont population, and reduce unnecessary costs in providing services. The project governance structure consists of a SIM core team, a SIM Steering Committee (both with public and private representation). There are seven Work Groups that conduct the work and report up to the SIM core team.

The DLTSS Work Group is continuing the work of the Dual Eligibles demonstration project that was conducted through DVHA until earlier this year. Deborah described how the DLTSS's Work Group integrated and overlapped with the efforts of the other six work groups to ensure the needs of the disabled/LTC population will be included and addressed. She also discussed work initiated on other products and activities, including an ACO population analysis, input to quality performance measure recommendations, and the development of care model recommendations. The core elements were reviewed as the basis for the most effective design of a proposed DLTSS model of care. Deborah concluded her discussion by highlighting the significant challenges that remain for the DLTSS Work Group. There are broad ACO attribution issues, capacity issues and cost/sustainability concerns that will need to be addressed.

Medicaid & Exchange Advisory Board
Meeting Minutes
June 9, 2014

Page 5

MEAB Discussion – Board Members

Kay Van Woert asked board members to consider and review potential agenda items (listed below) for the July 14 MEAB meeting. For future planning, the October MEAB monthly meeting in Winooski has been rescheduled from October 13th to October 20th.

Public Comment

There was no public comment during the meeting.

Topics for Regular Update:

- Vermont Health Connect Topics/Discussion
- Commissioner Updates (Current Topics Discussion)
- Duals/VHIP/SIM Update/Discussion
- GC Waiver (as Necessary)
- Medicaid Shared Savings Program
- MEAB Work Group Meeting Reports
- Quarterly Advocate Report (Legal Aid)

Draft Topics for July 14 Meeting:

- GMCB Rate Review Process
- Carriers 2015 Rate Proposal Discussion
- Vermont Prescription Monitoring System Discussion
- MEAB Co-Chair Election
- Pharmacy Co-pay Update

Future Meeting Topics:

- August – Budget Advice from MEAB to Departments
- Health Care Reform - single payer models
- Reinvestment in Community Based Services
- Affordability and reinvestment pertaining to provider rates
- Minimizing administrative complexity for businesses that offer insurance

Data Request for July 14 Meeting:

Termination Data from Carriers

Total Medicaid Budget – what portion is entitlement/what is not?

Issue Tracker List:

- Inventory of Perverse Incentives
- Diapers
- Medicaid transportation
- Out-of-State travel
- Specialist or preferred providers
- Mental Health fee schedule changes
- Prior Authorization concerns
- Coordination of Benefits between Medicare and Medicaid

Medicaid & Exchange Advisory Board
Meeting Minutes
June 9, 2014

Page 6

Ongoing Small Group Works

- EPSDT Work Group
- Improving Access Work Group
- Small Employer Work Group
- Individuals and Families Work Group
- Caregiver Reimbursement Work Group

Next Meeting

July 14, 2014

Time: 11:00AM – 3:00PM

Site: VSAC Bldg, Winooski, VT

Please visit the Advisory Board website for up-to-date information:
http://info.healthconnect.vermont.gov/advisory_board/meeting_materials