

IMPROVING ACCESS WORK GROUP

MINUTES

September 22, 2015

Next meeting

November 17, 2015, 2:00-3:30, at DVHA

In attendance

MEAB members: on the phone: Dale Hackett, Madeleine Mongan, Kay Van Woert, Michelle Fay; in person: Paul Bakeman, Joan Lavoie, Trinka Kerr

DVHA staff: Aaron French, Clark Eaton; Commissioner Costantino was unable to attend.

Other SOV staff: Dani Delong (AHS Medicaid Policy), Betty Morse (Children with Special Health Needs, VDH)

Minutes by Trinka Kerr

AGENDA

1. Introductions (done)
2. Discussion with Commissioner Costantino (unable to attend)
3. Streamlining processes getting services for beneficiaries with long term conditions: looking for access to care trends
4. Prior Authorizations

Streamlining processes for getting services/access to care trends

The WG wants to figure out a way to get data about appeals and complaints to determine if there are trends that would show access to care areas that need improvement. Aaron and Dani said DVHA also looks for such trends and tries to address them. The WG expressed a desire to see some data, so we talked about possible ways to do that.

Dani reported that she has been handling all DVHA appeals and grievances for about five years. She said she has never received a complaint about a form or the prior authorization (PA) process per se. She said that in the past quarter there were only a few durable medical equipment appeals, and three or four physical therapy, occupational therapy or speech therapy appeals. We asked to see more data, and Aaron suggested the Global Commitment to Health quarterly reports. [I looked up the most recent report after the meeting, and here is the link: <http://dvha.vermont.gov/global-commitment-to-health/qe0615-gc-report-final.pdf> Consumer issues are mentioned on pages 26-27. See also Attachments 3, 4 and 5]. Aaron said there is also a more detailed description of PA denials somewhere else and he would get us that information. He said that the PA denial rate was 26% in 2012, and has decreased to 14% in 2014.

Several WG members wanted to know what happened to the issue tracking system that Bill Clark used to keep years ago. Aaron and Dani said that this is no longer done because DVHA's technology and systems have improved since then.

We then had a spirited discussion about DVHA's reliance on clinical criteria, and whether in deciding PAs it also considers whether the service would help maintain the beneficiary's independence. Sharon passionately pushed DVHA to pay more attention to the 1999 U.S. Supreme Court decision, *Olmstead v. L.C. and E.W.*, <https://www.law.cornell.edu/supct/html/98-536.ZS.html>. Sharon was especially concerned about individuals who are unable to get needed assistive devices when they are in nursing homes and that denials of such devices means that some people with disabilities are not able to live in the least restrictive setting. We discussed inviting Jackie Majoros, the Long Term Care Ombudsman, and someone from DAIL to a meeting to talk more about this. [This will be part of the priorities discussion at the next meeting, see below.]

Prior Authorizations

Betty described how individuals can get access to what the criteria are for many Medicaid services: The webpage is: <http://dvha.vermont.gov/for-providers>

- Click on the Clinical Resources button (Please note that Prior Authorizations is clearly marked here). This will bring you to the Clinical Resources page.
- Click on Prior Authorizations, Tools & Coverage Guidelines.
- This brings you to the Prior Authorizations, Tools, and Clinical Coverage Guidelines page. Everything is categorized for selection.

Madeleine led the discussion about PAs, and whether there might be ways to improve this process. Drug PAs are submitted by fax. We asked when this might be able to be done electronically. Aaron said not until 2017, when the new MMIS system is supposed to be ready. Madeleine and Dale asked whether the Accountable Care Organizations manage PAs. Answer: no.

Madeleine then reviewed two state laws regarding PAs:

Act 79 of 2013 (that year's omnibus health care bill)

<http://legislature.vermont.gov/assets/Documents/2014/Docs/ACTS/ACT079/ACT079%20As%20Enacted.pdf> Several sections of Act 79 address PAs.

Section 5a (18 VSA §9418(g)(4) sets the turnaround time for PAs for commercial plans to 48 hour for urgent requests and two business days of receipt for non-urgent requests. The plans must also provide a receipt for the request and any need for missing information within 24 hours of receipt. If the plan does not comply with this turnaround time, the PA is deemed to be granted. Aaron will look to see what DVHA's turnaround times are for PAs.

Section 5b requires that DVHA ensure that contracts include full transparency of PA guidelines and other utilization provisions, among other things by 1/1/17. Aaron says they are meeting this requirement now, except that some of the PA criteria are proprietary and are not posted on the DVHA website. They are available to providers through the website. Consumers and advocates can get the proprietary criteria for individual cases. This is a requirement of the companies that develop the criteria after research. Many of the work group members objected to this limitation on the availability of criteria for services to consumers.

Act 156 of 2011 (Appropriations or Big Bill)

<http://legislature.vermont.gov/assets/Documents/2010/Docs/ACTS/ACT156/ACT156%20As%20Enacted.pdf>

Pages 98-100 of this bill lay out the requirements for DVHA's high-tech imaging PA process. There are nine requirements, including a report on the numbers of requests. Aaron will check into what's going on with these reports now.

At this point, we ran out of time, so we will continue the discussion of PAs at the next meeting.

TASKS

- **Clark** will schedule the November meeting. We will plan to discuss priorities during the first half hour, without DVHA staff present, then have DVHA staff attend the last hour.
- **Madeleine** will gather information about what Maryland and Colorado do to improve their PA process.
- **Aaron/Dani** will provide further information about:
 - Turnaround time for Medicaid PAs
 - Data re Medicaid PA denials
 - High-tech radiology reports
 - Detail about appeals

AGENDA ITEMS FOR NEXT MEETING

- WG priorities
- Prior Authorization ideas
- Discussion with Commissioner Costantino