

Medical Care Advisory Committee
Meeting Minutes of January 11, 2018, 1:00pm
Woolfolk Building – Room 145
501 N. West Street, Jackson, MS 39201

I. Call to Order

- Dr. Steve Demetropoulos called January 11, 2018 meeting to order, welcomed members and guests to the Medical Care Advisory Committee meeting.

II. Roll Call

- Wil Ervin called role of the voting committee members and identified the quorum was met for voting purposes, as well as made special announcements concerning contact information, travel voucher and W-9 form completions.
- **Voting members in attendance were:** Dr. Steve Demetropoulos (Pascagoula), Dr. Allen Gersh (Jackson), Dr. Edward Hill (Tupelo), Brad Mayo (Oxford), Dave Estorage (Gulfport), Dr. James Rish (Tupelo), Dr. William Grantham (Clinton), Dr. Vicki Pilkington (Jackson), Dr. Mary Currier
- **Voting members not in attendance were:** Chris Anderson (Jackson), Dr. Jerry Martin (Oxford), Dr. Shannon Orr (Jackson)
- **Non-voting members in attendance were:** Senate Medicaid Chairperson Senator Brice Wiggins, Senate Medicaid Vice-Chairperson Senator Hob Bryan
- **Non-voting members not in attendance were:** Medicaid Chairperson Representative Chris Brown, Public Health and Human Services Chairperson Representative Sam Mims, Appropriations Chairperson Representative John Read, Public Health and Welfare Chairperson Senator Dean Kirby, Appropriations Chairperson Senator Buck Clarke

III. Approval of meeting minutes from September 21, 2017

- *Motion: Dr. Steve Demetropoulos*
- *Second: Dr. Edward Hill*
- *Meeting minutes were approved unanimously*

IV. Old Business – Presentations

1. Dr. Dorthy Young – Division of Medicaid

- State Plan and Waiver updates
 - Home Health SPA is updated on rules in compliance with CMS final rule
 - Tribal notification policy includes administrative paperwork related to the notification of the MS Band of Choctaw Indians
 - General medical equipment and medical supply reimbursement addresses concerns of beneficiaries and providers related to recent CMS reductions in the medical equipment reimbursements that negatively impact the state – asking CMS for flexibility so that DOM can address the issues it has caused
 - LTC updates are under review in the Governor’s Office related to submit administrative final rule requirements
 - Physician UPL is under Governor review to be updated every 3 years (last updated 2014)
 - Medicaid Administration SPA has been renamed (formerly organizational chart) and has to be updated on a regular basis with CMS
 - CHIP SPA is related to adding vision coverage for the CHIP benefit
 - Healthier MS Waiver is up for 3 year renewal period
 - Family Planning Waiver was just approved by CMS for 10 year period; first 10 year extension granted by CMS
- Comparison of physician fee schedules with surrounding states within the southeast regions – based on 90% of Medicare fee schedule and updated July 1st each year

- Low-birth rate infants
 - Cost of 17P for 20 weeks - \$12,800
 - Reimbursement for single injection - \$640
 - Cost of general medical care for pre-term mothers - \$6,157
 - Cost of preterm birth complications for 1 year – average \$115,886.48
 - Average cost with 17P = \$10,200

- 2. Dr. Becky Waterer – Magnolia Health Plan
 - Prior Authorization Program has not been submitted to the Division of Medicaid but expected implementation October 2018 or sooner if approved.
 - Gold Card Program
 - Removal of all prior-authorization requirements
 - All services must be Medicaid provided services
 - Provider must agree to remain in audit for medical necessities retroactively and if the services do not meet medical necessities criteria, funds will be recouped
 - Silver Card Program
 - Removal of selected prior-authorization requirements
 - All services must be Medicaid provided services
 - Provider must agree to remain in audit for medical necessities retroactively and if the services do not meet medical necessities criteria funds will be recouped

 - Provider participation requirements:
 - Must be participating providers in the network
 - Agree to the program terms of enrollment
 - Be involved
 - Monitor utilization (10% or more increase – requests retro review)
 - Must have exhibited 95% or higher approval rate for services in the past year

- 3. Dr. Phillips – UnitedHealthcare
 - Prior Authorization Program
 - Does not have a program for gold pass
 - Establishing a fast check system to approve/disapprove the same day
 - Retro review of prior-authorizations and success rates

V. New Business – Presentations

1. Jason McNeil – Singing River Health Systems
 - Non-Emergency Transportation (NET) – examples given of system failures
 - Conducted surveys and found an overall displeasure with NET providers
 - Suggesting DOM get with stakeholders concerning NET
 - Requesting DOM to consider fee-for-service contracts

2. Ryan Kasper – MTM
 - Non-Emergency Transportation (NET)
 - Overview of NET program and its functions
 - Gas mileage reimbursements
 - Customer service center in Jackson, MS
 - Addressed Singing River Hospital issues
 - Subcontractor quality measures
 - Compliance process by credentialing and documentation
 - Field oversight – to ensure timeliness and appropriate dress
 - Vehicle inspections every 6 months
 - Monthly transportation advisory council meeting for feedback or concerns
 - Reservation requests
 - Scheduled return time – specifies a pickup time when the patient will be ready
 - Will-call pickup – when the beneficiary or facility representative contacts MTM directly and request a return route (in some cases the transportation provider is contacted directly causing a delay in pickup)
 - Request calls are recorded to validate pickup timeframes

- Tobacco Use Prevention
 - Health benefits for infants, toddlers, and children – outlining statistical associated costs
 - Committee suggested an increase in the tobacco tax could be used to contribute to the Medicaid program to help recover expenses from tobacco related health issues

VI. Next Meeting – Friday, April 20, 2018

VII. Approval of Travel and expenses for January 11, 2018 Meeting

- *Motion: Dr. Steve Demetropoulos*
- *Second: Dr. Allen Gersh*
- *Travel was approved unanimously*

VIII. Adjournment

Dr. Steve Demetropoulos adjourned the meeting

IX. Final Comments/ Action Items

1. What is MS doing that other states are not to explain why MS is paying much higher reimbursements?
2. What is Division of Medicaid doing in terms of preventive health?
3. What is Division of Medicaid, Magnolia Health, United Healthcare best practices for preventive care?
4. What are national best practices for preventive care?
5. Invite for presentation of data for weight loss surgery and long term cost benefit ratio.
6. Rehabilitation services availability for possible June meeting