

Commission on Expanding Medicaid Managed Care

Meeting Minutes of September 25, 10:00am

New Capitol Building – Room 113

501 N. West Street, Jackson, MS 39201

I. Call to Order

Meeting was called to order by Drew Snyder, Division of Medicaid (DOM) Executive Director

II. Roll Call

Present: Drew Snyder, Executive Director, Division of Medicaid (DOM); Charmain Kanosky, Executive Director, MS State Medical Association (MSMA); Bob Williams proxy for Mike Chaney, Commissioner of Department of Insurance; Judith (Judy) Clark, pharmacist; Dave Van, licensed mental health professional; Aaron Sisk, Magnolia; Bridget Galatas, Molina; Jeff Wedin, United Healthcare; Kevin Cook, University of MS Medical Center; Representative Joel Bomgar; Senator Brice Wiggins

Absent: Representative Chris Brown, Chair House Medicaid Committee; Eugene “Buck” Clarke, Chair Senate Appropriations Committee; John Read, Chair House Appropriations Committee

III. Approval of meeting minutes

n/a

IV. Old Business – Presentations

n/a

V. New Business – Presentations and Discussions

- Drew Snyder began the meeting with a brief introduction and overview.
- Drew Snyder made the motion that Roberts Rules of Order be used for commission meetings.
 - Second: Senator Brice Wiggins
 - The motion was approved unanimously.
- Drew Snyder made the motion that Brice Wiggins be elected chairman.
 - Second: Charmain Kanosky
 - The motion was approved unanimously.
- Senator Brice Wiggins reviewed the purpose and requirements of the commission as written in Senate Bill 2836 and noted that a report to the legislature is due no later than December 1, 2018. It is anticipated that meetings of this commission will be approximately every two weeks.
- Senator Brice Wiggins requested that all commission members introduce themselves and the organizations and/ or medical field represented. Additionally, it was requested that committee members state what they would like the outcome from the commission to be.
- Senator Brice Wiggins clarified that the job of the commission is to set the course going forward with Managed Care as well as and assist Medicaid with alternative payment model regarding medically complex children.
- Commission members were asked to discuss wants and needs from Commission meetings.
 - **The Division of Medicaid, Drew Snyder, Executive Director:** Figure out what is best for the taxpayers and beneficiaries; Determine what managed care offers that is different from fee for service; Determine what the primary population is that they are serving; Conduct an analysis of CCO payment model; Understand the numbers and administrative impact on the agency
 - **Department of Insurance, Bob Williams, proxy for Commissioner Chaney:** Emphasized the importance on focusing on the taxpayers and beneficiaries
 - **Pharmacy, Judith Clark:** Ensure that reimbursement for pharmaceuticals is fair, payments are prompt, pharmacy provider access is open to all pharmacies, and pharmacy rules are concise and fair. Clarity is needed for specialty pharmaceuticals, i.e. open to local specialty providers and payment structure-as pharmacy or medical claims. Prior authorization should be promptly addressed and responses are quick as are Medicaid’s. Be mindful that Medicaid’s preferred drug list (PDL)) does not include all covered drugs. Non-PDL drugs should be handled consistently with managed care as with Medicaid.

- Encouraged managed care entities to continue to work collaboratively with DOM Pharmacy to stream line processes and programs.
- **House Representative, Joel Bomgar:** Stressed the importance of a cost benefit analysis
 - **Mental Health, Dave Vann:** Beneficiaries are our primary responsibility. Our goal is to assist beneficiaries in order to avoid mental health crisis and keep beneficiaries out of institutionalization. Hopes that the commission can assist in the approval and denial process and ensuring it takes place in a timely manner to ensure services are provided to beneficiaries.
 - **Molina, Bridget Galatas:** We are the new partner at the table. We are more than willing to be a good resource during the duration of the commission.
 - **Magnolia, Aaron Sisk:** Magnolia is for Medicaid Managed Care expansion. Managed care is a financial benefit to the State because it provides Medicaid budget predictability. We provide better level of care and services and a more expansive reach than fee for service.
 - **Unitedhealthcare, Jeff Wedin:** Interested in expanding services into the long term care population. We have been looking into preterm birth rates, C-sections obesity, diabetes, and family planning.
 - **Hospitals, Kevin Cook:** Stated that many, if not most, hospitals in this state are in an economic and are crisis are under a lot of economic pressure. Access to care in the state is problematic. At Batson Children's hospital, about 80% of inpatients are on Medicaid. Hospitals are interested in a value based program to partner with CCOs to help carry the financial burden to ensure beneficiaries are getting the care they need. He proposed a look into an economic alignment and hopes the rates for the managed care companies can be adjusted. He would like to see the hospitals get a chance to provide a managed care program.
 - **MSMA, Charmain Kanosky:** Expressed the importance of putting the patients first and producing better outcomes. She appreciates the CCOs working with physicians and providing a positive experience and good results. She hopes that some burdens can be released in relation to prior authorization paper work and the time it takes to complete them. There is a need for extra funding for residency spots at UMMC to train more physicians for MS.
 - Commission members and legislators were allowed to make closing remarks or ask additional questions.
 - **Pharmacy question, Judith Clark:** What numbers of beneficiaries are using the CCOs use nurse coordinators? What disease states, outcomes and etc. are you seeing from this program?
 - **CCO response:** Will provide those numbers in next meeting
 - **Senator Bryan remarks:** Wants to figure out how to structure things so that people can get the best services for the best price. He agreed with Wiggins that the meetings should only focus on managed care. He wants to ensure that there are protections for providers in reference to reimbursement. He referred to Cooks mention on the hospitals getting a chance to provide the managed care programs internally and said it was something to be considered.

VI. Final Comments/ Action Items

- Charmain Kanosky made the motion that Judith Clark be elected secretary of the Commission.
 - Second: Drew Snyder
 - The motion was approved unanimously.
- Requirements in the Senate Bill were assigned to the most appropriate areas/organizations. Commission members are requested to provide a five minute presentation on their assigned topic and written materials in advance of the next Commission meeting:
 - Review the program's financial metrics: DOM
 - Review the program's product offerings: DOM
 - Review the program's impact on insurance premiums for individuals and small businesses: Department of Insurance

- Make recommendations for future managed care program modifications: tabled for now
- Determine whether the expansion of the Medicaid managed care program may endanger the access to care by vulnerable patients: Nursing Homes representative
- Review the financial feasibility and health outcomes of populations health management as specifically provided in paragraph (2) above: MSMA
- Make recommendations regarding the pilot program to evaluate an alternative managed care payment model for medically complex children: Hospital representative

VII. Next Meeting – October 9, 2018

IX. Adjournment