Medicaid Advisory Committee  
**Meeting Minutes**  
August 25, 2016

**Members Present**  
Chairperson Matthew Brooks, Medicaid Director Joe Moser, Dr. Leila Alter, Herb Hunter, Blayne Miley, Ted Danielson, Jon Thompson, Michael Colby, Evan Reinhardt, Senator Ron Bacon, Dr. Nancy Swigonski, Rodney King, Terry Cole, Jason Kolkmeier, Zach Cattell

I. Opening Comments  
Chairperson Matt Brooks opened the meeting of the Medicaid Advisory Committee (MAC). He welcomed the members and guests.

II. MAC Updates  
Chairperson Brooks welcomed the new MAC members, Mr. Jason Kolkmeier and Dr. Nancy Swigonski, to the committee:

Jason Kolkmeier graduated from Butler University in 2004. He has been with Major Hospital in Shelbyville since 2005 working in family practice and some emergency medicine. He is currently the president of the Indiana Academy of Physician Assistants and sits on the legislative team for IAPA. He and his wife Mary reside in Shelbyville and have 2 children with one expected next month.

Dr. Swigonski is a pediatrician and Professor in the School of Public Health and School of Medicine at Indiana University with over 25 years of experience in health care. In addition to providing clinical care and treatment for underserved populations, she is a health services researcher with expertise in quality of care and health care policy. She is the immediate past president of the Indiana Chapter of the American Academy of Pediatrics and now serves as the chair of their Payor Council. She also sits on the Governing Council and is co-chair of the Quality Improvement Committee for ISDH’s Indiana Perinatal Quality Improvement Collaborative (IPQIC). She currently leads the Quality Innovation Core for the Riley Maternity and Newborn Health initiative.

III. Rules  
Resource Utilization Group (RUG) IV (LSA #16-327)  
Office of General Counsel Attorney Amber Swartzell stated that this rule adds amendments to amend 405 IAC 1-14.6-2 to update definitions to reflect the change from
the Resource Utilization Group, version III (RUG-III), to RUG-IV, to update the Minimum Data Set resident assessment (MDS), version 2.0 to MDS version 3.0, to clarify and add several definitions, 405 IAC 1-14.6-1 policy language regarding payment for services rendered to members by nursing facilities. As of yet, there is no public hearing date set for this rule.

IV. Presentation: Indiana Medicaid Infant Mortality Efforts
Gary Parker, CHIP and Hoosier Healthwise Director, presented on Indiana Medicaid Infant Mortality 2014 Claims Data Review. During this presentation Mr. Parker stated that Medicaid pays for 50% of all births in Indiana, and because of this Indiana Medicaid has an impact statewide in having healthier babies and families. Mr. Parker also stated that in 2014, Medicaid covered 45,612 children the first month they were born and 363 infants died before their first birthdays. Some of the policy changes mentioned in the presentation were; that there is earlier enrollment for women because they no longer have to verify pregnancy with a doctor’s note; HIP 2.0 allowing more women to be covered prior to pregnancy; and, there is no longer a 14-day mandatory fee-for-service period before being assigned to a managed care plan. Additionally, Medicaid no longer pays for early elective delivery prior to 39 weeks. There have been incentives put in place for MCEs such as capitation withhold based on HEDIS measures for frequency of ongoing prenatal care, and bonuses for referrals to the smoking Quitline in Hoosier Healthwise.

V. Presentation: Infant Mortality Rate and Prevention Efforts
Dr. Jen Walthall, the Deputy State Health Commissioner, presented on Indiana’s Infant Mortality Rate and Prevention Efforts. Dr. Walthall started the presentation defining infant mortality and stated that it is death of a baby before the first birthday. Dr. Walthall noted that the Healthy People 2020 goal for Infant Mortality is 6/1000 deaths as Indiana currently is at 7.1/1000 and the U.S. is 5.8/1000. Dr. Walthall explained the new Neonatal Centers of Excellence program and stated that the Level III and IV OB and Neonatal Perinatal Centers hold responsibilities such as Education, Quality Improvement, Support Services, Back Transport, and Developmental follow-up for high risk infants. She also spoke of the Baby and Me Tobacco Free program that is an evidenced-based smoking cessation program for pregnant women, through the child’s first birthday. With the Tobacco program from October 2013 to March 2016 there have been 1,532 program enrollees and 396 infants born nicotine-free and 1620 vouchers distributed as they get a diaper voucher per each visit they attend. She also spoke of another program called Cribs for Kids which is where Indiana provides safe-sleep education by distributing a Graco pack and play portable crib, pacifier, and safe-sleep information to families who cannot otherwise afford a safe place for their babies to sleep. A Moms Helpline was launched March 1, 2016 to provide information, referrals and resources relating to maternal and child health care services along with connecting mothers and pregnant women with a network of prenatal and child health care services within local communities, state agencies, and health care organizations around the state. There were several programs to help decrease the number of infant mortalities in the state of Indiana that Dr. Walthall listed in her presentation.
VI. **FSSA Updates**

Director Moser stated that Indiana Medicaid announced the awards of the winning vendors on June 10, 2016 for the Hoosier Healthwise and Healthy Indiana Plan managed care procurement. Director Moser stated that there were four companies that Indiana Medicaid will contract with starting in 2017 for a four year contract and with an option of two, 1-year extensions. The four companies are Anthem, MDwise, MHS, and CareSource. Anthem, MDwise, and MHS are the incumbents. CareSource will become an option for members to select beginning January 1, 2017. It was stated that all four plans must meet the readiness review, which also includes having an adequate network of hospitals and physicians. Hoosier Healthwise will have open enrollment in November 2016 and HIP members can make a plan selection during their redetermination period. Beginning in January 2017, auto assignment logic will be adjusted to place most members with CareSource if they do not make a plan selection on their application to help build CareSource’s membership for a short period of time. Members may make changes to their plan selection within 90 days as long as they have not made their first HIP POWER Account payment. The modified auto assignment logic will continue until CareSource has reached 100,000 members. Once CareSource has hit their goal of 100,000 members then the auto assignment will be adjusted to give each plan equal distribution in a rotating manner.

Director Moser stated that OMPP is has assembled a workgroup of healthcare providers to review Medicaid audit policies and procedures as required in Senate Enrolled Act 364-2016 passed during the last legislative session. All MAC members were invited to serve as members on the workgroup. The workgroup has met several times and has been looking at several ways to collect public input, including public forums that were conducted in Indianapolis, Evansville and Mishawaka. The written comments and public testimonies from the public forums are listed on the Medicaid Advisory Committee webpage. The group will submit recommendations for changes, if any, to the Medicaid Director and a report of this work will be transmitted to the legislature as required in SEA 364.

VII. **Public Comments**

There were no public comments.

VIII. **Next MAC Meeting**

Thursday, November 17, 2016 1:00pm -3:00pm IGCS; Conference Room A