

# MEDICAID ADVISORY COMMITTEE MEETING

May 16, 2012

IGCS Room C – 9:30am

Committee Members: P – Present, A – Absent, Proxy Present

Michael Baker	A	Maureen Griffin	A	Ed Popcheff	P
Matthew Brooks	P	Ernest C. Klein	P	Evan Reinhardt	A
Pat Casanova	P	Senator Jim Merritt	A	Mike Rinebold	P
Zachary Cattell	P	Dr. Gregory Larkin <i>Dr. Joan Duwve (Proxy)</i>	P	Mark Scherer	P
Jill Christopher	P	Barb McNutt	P	Todd Stallings	A
Rep. William Crawford	A	Donald Mulligan, Sr.	A	Erin Wernert	P
Kevin Moore	P	Michael Phelps	P	Kim Williams	P
Rep. Jeffrey K. Espich	A				

## Opening Comments

*Chairperson Zachary Cattell* opened the May 16, 2012 meeting of the Medicaid Advisory Committee (MAC).

## Approval of Minutes from the February 21, 2012 MAC Meeting

The February 21, 2012 draft minutes of the MAC meeting were approved after a correction of the spelling of a last name.

## Notice of Intent – Bobbi Nardi

*Bobbi Nardi*, Attorney with Family and Social Services Administration (FSSA), Office of General Counsel, presented three Notices of Intent. These were: (1) Medical Supplies, Durable Medical Equipment and Hearing Aids, (2) Amending of Medicaid reimbursement policy associates with specified health care acquired conditions (HCAC) and specified other provider-preventable conditions (OPPC), and (3) Adult Mental Health Habilitation Services.

## Traumatic Brain Injury Renewal (TBI) – Susan Waschevski, Division of Aging

*Ms. Susan Waschevski* said the Division of Aging plans to submit the TBI waiver renewal. This renewal will be for the next five years. *Ms. Waschevski* distributed a handout which includes the highlights of the major changes for the waiver. This will be posted to the Division of Aging website today for the next 30 days, and an e-mail will be posted to submit public comments.

## Provider Entrollment

*Darrell Davidson* of HP provided an overview presentation of the Affordable Care Act that has caused changes in the provider enrollment process. These changes were implemented at HP on 1/1/12.

## Duals Project

*Natalie Angel*, Office of Medicaid Policy and Planning (OMPP) distributed a handout regarding the dual eligible project. These are members who are eligible for Medicare and Medicaid. In the United States, one-half of the duals are low income seniors and one-third are individuals who are disabled and under 65. There are 125,000 fully dual eligible members in Indiana. Currently, HHW and Care Select programs do not have duals.

## Change of Ownership (CHOW) Process

*Joy Heim*, Long Term Care Reimbursement for Medicaid, along with *Jennifer Jenvey*, discussed the non-state government owned CHOW process. *Kris Kanerr* and *Deb Spall* of Myers & Stauffer (M&S) receive and review the non-state government owned CHOW. Once reviewed by M&S, it is passed along to *Ms. Jenvey* and *Ms. Heim* for final Medicaid approval. Those who still leave the hospital, then the nursing home that is then owned by the hospital, is available to receive the Upper Limit Payments. *Mr. Kanerr* provided additional information.

## MCE's Presentation on Claim Denials/Paid

*Chris Kern* of MDwise distributed a copy of the Select Joint Commission on Medicaid Oversight Presentation to the MAC members. This presentation shows slides of claims paid and claims denied.

*Jackie Scherer* of MHS presented information of their paid and denied claims.

## FSSA Updates from Pat Casanova

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*Ms. Casanova* provided updates in Medicaid. The new Pharmacy Benefit Manager is SXC. The new OMPP Pharmacy Director is *Chris Johnson*, who will be working with SXC. Data Warehouse award letter was sent out. MMIS procurement for the claims payment system has been out and the proposals are due on May 31, 2012.

**The next Medicaid Advisory Committee Meeting is scheduled to be held on September 25, 2012 from 1:00pm – 3:00pm in the Indiana Government Center South Building, Conference Center Room 22.**