

**Summary of Medical Services Fund Advisory Council Meeting
August 27, 2009 - 1:30 p.m.
Bureau for Medical Services**

Members Present:

Ralph D. Adkins, Member, Consumer Representative
Mark B. Ayoubi, MD, Physician Representative
Scott McClanahan, Member, Aging Program Representative
Jesse Samples, Member, Nursing Home Representative
Richard Stevens, Alternate, Dental Representative
Gerry Stover, Alternate, Physician Representative
Nancy Tyler, for Ex-Officio Member Don Perdue
Charles Young, Ex-Officio, Bureau for Children and Families

Bureau for Medical Services or DHHR Staff Present:

Nora Antlake, Legal Counsel, BMS
Shelley Baston, Deputy Commissioner, BMS
James Becker, BMS
Vicki Cunningham, BMS
Stacie Haynes-Legg, BMS
John Law, DHHR
Frances Secoy, Recording Secretary

Unisys / WVMI Staff/ Unicare/The Health Plan:

Christy Thomas, Unisys

Interested Parties:

Perry Bryant, WVAHC
Benita Whitman, Interested Party

I. Welcome and Opening Remarks

Deputy Commissioner Shelley Baston welcomed everyone to the meeting and opened the meeting to public comment.

II. Public Comment Period

Bonita Whitman addressed the group and asked that the agenda and documents to be presented be posted to the website. Ms. Whitman noted that there was no way to obtain copies so that they can be reviewed ahead of the meeting. She also commented that the only way to know if there is a meeting is if you get the email notices, and there is no way to publicly get the information out. Ms. Whitman also noted that she had called the Bureau to get a copy of the state plan and was referred to Nora Antlake, but did not receive a return call. Ms. Whitman asked that future items to be discussed should be posted to the website.

Perry Bryant commented that he appreciated receiving email notices of meetings, but he would also appreciate receiving the documents to be discussed as well. On that same topic, Mr. Bryant has asked that Counsel consider asking the Legislature to open up the process in Medicaid. This has been an issue for the last three years in the Legislature; and he reported that West Virginia is the only state in the country that is not open to comment on state plan amendments before they're submitted to the Federal government. Mr. Bryant asked that in the next meeting, the Counsel consider making recommendation to the Commissioner and the Secretary that they pursue statutory changes that would give notice and right to comment. Mr. Bryant suggested that they would be able to post on where to send E-mails to anybody who registers with the Bureau, that they could send them their plan amendments or whatever they submitted. Mr. Bryant noted that he was in favor of the computerized personal records; but found the opt-out provision to be very difficult for Medicaid recipients to either have to write a letter or have to go onto the Website and find the opt-out proposal.

III. Approval of Previous Meeting Minutes

A motion was made by Richard Stevens and seconded by Jesse Samples to approve the April 10, 2009 minutes as presented.

IV. State Plan Amendment Update

Nora Antlake provided the group with the background on the present state plan amendments ("SPAs").

Ms. Antlake commented to the group that SPAs are posted for public comment thirty (30) days prior to submitting them to CMS. Ms. Antlake explained that The Children's Health Insurance Program Reauthorization Act ("CHIPRA") of 2009 is mandated by Federal law. The first change is on page six of 3.1.c; shows that we changed the age group from 'under 19 years of age and to '21 years of age and under; previously,

because the Federal laws stated that it must be 19 years of age and under, we were not provided discretion to age 21. Under the CHIPRA bill, it also mandates certain sections of the regulations that cannot be restricted, which affected our non-emergency medical transportation; so those limitations were removed for both adults and children and all benefit plans.

In response to a request for clarification from Dr. Ayoubi, Ms. Antlake explained there were limitations under NEMT under the basic plan for children and adults, and that going forward there would be no limitations. Relating to the amendments, Mr. Stevens asked if there are any checks to ensure that youngsters are indeed provided the services required and referrals are being made for EPSDT services. Ms. Baston related that the EPSDT program through Public Health continues to provide education for the providers and the parents to ensure that the parents are given the knowledge that they can have these services. Another monitor is that we are Federally required to report through a 416 report, the details on the number of exams, referrals, dental exams, lead screenings. It gives us a basic percentage of the number of children who are getting EPSDT exams. Using that information, many of our children are getting full exams. Our dental screenings are presently very low. Mr. Stevens further discussed that in a recent informal survey, dentists reported that they were not receiving referrals from pediatricians and primary care physicians of children to their dental offices. In one dentist's office (practicing in a heavily Medicaid populated area) they had received only one referral in the last five to six years. Mr. Stevens' concern was also that some parents will perceive that since services are given at school there will be no reason to take them to a dentist. Mr. Stevens reported that last year, there were 800 dental practitioners; and over 600 submitted claims, that is the highest percentage of any state in the country, with Virginia only reporting twenty-two percent submitted claims). Fifty-two percent (52%) of the children are Medicaid, and another 25,000 CHIP. Dr. Ayoubi asserted that from a pediatric perspective, his office uses the standard from the American Academy of Pediatric Child Health, which consistently notes on the child's form the overall oral health and refers them to oral care, when necessary. Dr. Ayoubi also stressed the importance that the patient is getting access to dental care, and not that a dentist in Kanawha County is not getting referrals from primary care physicians for Medicaid children needing dental care. Mr. Gerry Stover stated that he would provide family physician members a list of dentists that are willing to take Medicaid children and that the WVAFP would be willing to work with the WV Dental Association and the Department to encourage dialogue with parents/children, dentists and primary care physicians to ensure dental care is provided. Ms. Baston suggested that the information could be given to the EPSDT program and added to their educational process. After considerable conversation, a motion was made by Dr. Ayoubi to accept the State Plan Amendment as provided and seconded by Richard Stevens.

V. Clinical Web Portal:

Vicki Cunningham provided a Pharmacy update on the transformation grant e-prescribing web portal. Ms. Cunningham provided a copy of the notice to all Medicaid members to inform them that their prescription history would be available to their physician, nurse practitioner and pharmacist on the web portal. Providers who wish to use the web portal will need to submit a notarized application providing name, address and state license number and be enrolled with WV Medicaid. Those applications will be cross checked with our enrollment files and the provider will be issued a user ID and password (and user's guide) to access the portal for their patients' prescription history. Medical history will also be there at a later time. The medication history will be refreshed every week to ensure that it is current. Ms. Cunningham reported that in early September applications will be sent out to enrolled physicians, nurse practitioners and enrolled pharmacies. Pharmacists that work in enrolled pharmacies can also submit an application. To access the records, the provider will need to enter their patient's name as it appears on their Medicaid card, the birth date, and their Medicaid ID number. If the member does not want their information to be included they can contact the office or by letter stating that they do not wish to participate in the web portal. This information is claims based history and not clinical data. Medical history may be available in the future, if needed. Ms. Cunningham reported that BMS receives calls on medication history daily for current prescription history.

Next Meeting

The next meeting of the Medical Services Fund Advisory Council will be held on Friday, October 9, 2009, at 1:30 p.m., at Kanawha Valley Senior Services.

Meeting adjourned at 2:00 PM.

Minutes submitted by:

Frances Secoy
Bureau for Medical Service