

ODJFS Office of Ohio Health Plans  
MEDICAL CARE ADVISORY COMMITTEE  
February 29, 2008  
MEETING MINUTES

**Members Present:**

Brian Bachelder, MD  
Kathryn Burns, MD, MPH  
Mary M. Butler  
Craig Cairns, MD, MPH  
Jack Cera  
Philip Derrow  
Kathleen Crampton  
Gary H. Fletcher  
Ravindhra G. Elluru, MD, PhD  
Janet Grant  
Anissia Goodwin  
Gregory L. Hall, MD  
Jennifer L. Grow, MD  
Eugene R. King, JD  
J. Thomas Hardy, DO, MS  
Beverley L. Laubert  
Nicholas C. Lashutka  
Maria A. Matzik, BS  
Carolyn B. Slack, MS, RN  
Randy Runyon  
Mary D. Wachtel, MSW  
J. Craig Strafford, MD, FACOG  
Hubert Wirtz

**Members Absent:**

Michael P. Wascovich, RPh, MBA  
Joseph H. Mudra

**ODJFS Attendees:**

John Corlett, Medicaid Director, ODJFS/OHP  
Mary Haller, External Relations  
Mary Applegate, MD  
Daphne Kacklounis  
Elise Geig  
John Barley  
Mitali Ghatak  
Sandra Solano-McGuire

### **Other Attendees who signed in:**

M Rooney, BMS  
Steve Wolfarth, Eli Lilly  
Charlie Solley, Senate Republican Caucus  
Angie Bergefurd, Ex Officio Member, ODMH  
Doyle , ODA/DAS  
Jason Smith, OAHP  
Judy Patterson, Ex Officio Member, ODA  
Jodie Ross, AZ  
Michelle Fitzgibboi, LMA  
Robin Harris, Governor's Office  
Holly Saelens, AGP  
Chris Whistler, CareSource  
Jon F. Wills, OOA  
Maureen Corcoran, OPRA  
Judith Birth, Hannah News  
Missy Craddock, House  
William Fitzgibbon, Well Care  
Willa Ebersole, Pappas Associates

### **Call to Order, Welcome and Introductions:**

Mary Haller welcomed everyone and introduced John Corlett. John informed the group that Director Jones-Kelley would not be able to attend the meeting as planned. John thanked everyone for their interest in ODJFS and the Ohio Medicaid program and willingness to serve as a member of the Medical Care Advisory Committee. He explained that the members were selected for this role from among 80 applicants representing various interests related to Medicaid and the field of health care and explained the selection process. John then had everyone introduce themselves and who they represent. John introduced and congratulated Gene King on being appointed Chair of the MCAC, stating that he would rely on him and the Executive Committee of this group for leadership and representation of the broader group in between meetings. Gene has a tremendous amount of experience with state government and the policy and program areas related to Medicaid and other social services managed by ODJFS. Gene also has a long history with this committee and so will be very valuable in helping us to learn from our history rather than repeating it. Gene will be asking for a few volunteers from this group to serve in the role as members of the Executive Committee and will be telling you more about what that will entail.

### **Medicaid Update:**

John Corlett & Mary Haller gave a presentation to the committee updating them on the Medicaid program. The presentation provided a broad overview of the Medicaid expansions that were part of Governor Strickland's Turnaround Ohio initiative and authorized in HB 119, the 2008-2009 biennial budget.

The presentation also touched on some other initiatives like rate increases for community providers, restoration of adult dental, implementation of Medicaid managed care, and the Money Follows the Person or "Home Choice" project.

The Health Care Expansions in HB 119 were aimed at improving the lives of Ohioans. Medicaid expansions were authorized for:

- Pregnant women with incomes between 150 – 200% FPL
- Teenagers in foster care or receiving Title IV-E services when they turn 18 and until their 21st birthday
- Children in families with incomes between 200-300% of the federal poverty level
- A buy-in program for children with special needs living in families with incomes > 300% of the federal poverty level. This program will help these families obtain acute and primary care as well as services and supports needed for chronic health conditions.
- A Medicaid "buy-in" program for workers with disabilities
- Elimination of the 24 month eligibility clock for low income adults

John told the group that once implemented, these expansions would extend health care coverage to about 30,000 uninsured Ohioans. More pregnant women will be able to access prenatal care and have healthier babies and more children will have access to health care. These are the first phase of Governor Strickland's health care reform goal to provide health care coverage for every Ohio child and reduce the number of uninsured Ohioans by 500,000 by 2011. OHP is working with ODI and a diverse group of stakeholders in pursuing this goal, which will ultimately lead to a Healthy Ohio.

Changes were made to the implementation dates of the Medicaid eligibility expansions authorized in Ohio's biennial budget due to unanticipated caseload growth, uncertain financial situation, and a lack of system supports will not be available by Jan. 1<sup>st</sup>, however, Governor Strickland is committed to moving forward with all of these expansions with revised implementation timeframes.

Another part of the delay and uncertainty of implementation is due to ongoing negotiations at the Federal level which resulted in our 200-300 FPL expansion being denied and we are engaged in ongoing negotiation with

CMS about our alternatives. Reauthorization of SCHIP is caught up in Federal debate and the implementation timeframe is still unclear.

Since Ohio's Medicaid expansions are priorities of the Strickland Administration, OHP decided to proceed with the December 3rd JCARR rulemaking process for the new expansions. In this way, the initiatives will be ready to implement on the effective dates without having any additional complications of rule making. In some cases we have had to go back and make some changes to the OAC rules originally filed to accommodate changes that have resulted from CMS negotiations.

The Medicaid expansion for pregnant women only changed from Ohio's current program by increasing the income level for pregnant women from 150% to 200% FPL. Implementation has occurred and women are being enrolled, and is going very well.

OHP estimates 800-1200 youth will get health coverage as a result of the Medicaid for Youth 18-21 initiative. OHP is working with colleagues in the foster care system to find these children and to set up protocols to automatically enroll them in Medicaid on their 18th birthday. There is no income or resources test needed for this expansion. Implementation was going slow at first, but the Child Welfare system is thrilled with this opportunity. We are targeting children as they approach their 18th birthday – building in Medicaid application as part of pre-planning work to discharge them from foster care/Title 4-e.

Eligibility requirements are similar for the Medicaid Expansion for Children 201-300% FPL to those of the children covered by Healthy Start whose income is between 150 – 200% FPL. Expanding to 300% under SCHIP will require the child to be uninsured "without creditable coverage". The focus is children who are uninsured and have chronic illnesses that make them uninsurable in the commercial marketplace or for whom commercial insurance is too costly for parents to afford.

OHP has new opportunities because this is a state funded program. Eligibility will be done outside CRIS-E with everything being done electronically and automated. These children will be enrolled in an MCP operating under a grant – Also new for OHP. Premium collection will be performed by the Medicaid consumer hotline vendor, Automated Health Systems.

A proposal has been submitted to CMS for this to be a Medicaid program, but we don't believe they will approve. As a contingency, we are proceeding assuming this will be a state-only funded program. This program is on hold pending outcome of negotiations with CMS about what portion of children can be covered under Medicaid/SCHIP

Medicaid Buy-In for Workers with Disabilities (MBIWD) is a new program for Ohio. It is very exciting to us and the disability advocacy community. OHP has been meeting on ongoing basis with the MBIWD Advisory council to go over the detail of this program. The maximum annual income MBIWD Financial Eligibility is \$20k. 20K/10K is the eligibility requirement to get into the basic group.

The Elimination of 24-month clock initiative eliminates breaks in eligibility for families who earn more than the OWF payment standard but less than 90% of FPL. We have had this time limit for Medicaid Family Parents in ORC for several years, but it has conflicted with federal law. We are making this correction which will have the effect of not only being in compliance with federal regulations, but will also remove the needless discontinuation of Medicaid eligibility for parents who remain Medicaid eligible. Reducing the administrative burden on counties who will no longer have to open and close parent cases.

Community Provider Rate Increases & Adult Dental initiatives, originally scheduled for a January 1 startup, were put on hold in November due to the uncertainty of Medicaid caseload and expenditures. On January 31 when the Governor announced budget cuts, he simultaneously authorized going forward with these initiatives effective July 1, 2008.

Governor Strickland's February 26, 2008 Testimony before the U.S. House of Representatives Committee on Energy and Commerce, Subcommittee on Health was included in each member's packet.

John provided a status report on Managed Care indicating that the expansion is Complete (except Northeast Central region which is now in progress). He also provided current enrollment numbers as of February 2008 (1.1 Million CFC consumers and 105,000 ABD consumers).

Meetings and training occurred in early February for the Ohio Association of Community Health Centers with ODJFS and the Ohio Association of Health Plans (representing MCPs). Focus during these meetings and trainings were: MCP billing procedures, wrap around payment, and coordination of care for consumers in common.

OHP provider assistance for Managed Care Issues/Complaints can be submitted online at: <http://jfs.ohio.gov/ohp/bmhc/pro-man-care.stm>, E-mail: [bmhc@odjfs.state.oh.us](mailto:bmhc@odjfs.state.oh.us) or by calling 614-466-4693

John continued the presentation telling the group about Money Follows the Person (MFP) demonstration grant, which the ODJFS applied for and was

awarded which will be known as HOME Choice (**H**elping **O**hioans **M**ove, **E**xpanding **C**hoice).

Ohio's MFP demonstration has two overarching goals.

1. Balancing of Ohio's long-term services and supports system to provide long-term care options of the types of services in the locations that people prefer.
2. To successfully and safely transition 2231 persons currently residing in institutions to community-based care settings.
  - The initiative name more accurately **reflects the intent** behind "balancing the system" by expanding choice.
  - For that reason, the **brand name**, HOME Choice – Helping Ohioans Move, Expanding Choice – was selected.
  - **Planning Groups Unite.** JFS and ODA workgroups are working together to address balance, evaluation and quality, self-direction, budgeting and information technology.
  - **Intake and Care Coordination Unit** – will manage the intake of HOME Choice participants from multiple sources is being developed. The plan proposes a supervisor and two support staff to respond and handle inquiries and referrals from diverse systems and diverse methodologies: phone, web, interest forms.
  - Key to a central referral and tracking unit is **ATLANTES**, which belongs to EDS, the organization that received the contract to overhaul Ohio's current Medicaid Information Tracking System (MITS). The existing ATLANTES may be modified to track enrollment and provide case management. Because it is part of the new Medicaid Information Technology System (MITS), it is hoped that it will ultimately become the "front door" to the long-term care services and support system.

### **Background on MCAC:**

Gene King provided the group with an overview of the federal mandate, the committee's history and relationship with ODJFS, MCAC in other states, etc. Gene indicated that pre-1992, MCAC met infrequently, and that Ohio Care brought MCAC awareness, and that he was glad Ohio has supported the committee. He also explained that the committee had not been reconfigured since the early 1990s, but that the recent reconfiguration continued diversity as a strength. Gene discussed the purpose of the Executive Committee and asked members to notify him of their interest to participate. He also told the committee that the current by-laws needed to be revised and for members to let him know if they would be interested in participating on a sub-committee to develop new ones. Gene discussed many issues that had been

topics of discussion between the department and committee (Managed Care, Rx Pharmacy Costs, Psychiatric payments, growth of program, etc.). Gene recommended that the members express what their interests were and that they include them when completing the survey provided in their packets. Gene expressed his interest in seeing the new committee become more of an advisor than a gatherer of information. A survey will be sent to members for purposes of setting a future meeting schedule.

### **Technical Support:**

Kim Riffel told the committee that she would be sending information to them primarily using email and directed them to the packet for travel reimbursement. She explained her role with the committee (tracking attendance, sending meeting notification, information, etc.) Guidelines and forms for travel reimbursement can also be found on the MCAC website.

Mary Haller wrapped up the meeting by reviewing the policy area survey and requested that the committee complete the survey and leave it prior to leaving if possible. Mary also told the committee that the department is respectful of their time and will be sending out a survey for them to provide preferences for future meeting dates and times. She brought their attention to a brochure and meeting notification from the Ohio Ethics Commission provided in their packet.

Mary indicated that she would be assisting in revising past operating guidelines/by-laws and told the group to let her, Kim or Gene know if they would be interested in participating on a small group to accomplish the revision.

Links of interest for the committee: OHP Information/Data Library:  
<http://jfs.ohio.gov/OHP/infodata/MFPGrant/library/library.stm>

Money Follows the Person (MFP) – HomeChoice:  
<http://jfs.ohio.gov/OHP/infodata/MFPGrant/info.stm>

Ohio Medicaid Performance Audit Report:  
[http://www.auditor.state.oh.us/AuditSearch/Reports/2006/Ohio\\_MedicaidProgram\\_12\\_19.pdf](http://www.auditor.state.oh.us/AuditSearch/Reports/2006/Ohio_MedicaidProgram_12_19.pdf)

Ohio Medicaid Administrative Study Council Report:  
<http://jfs.ohio.gov/OHP/OMASC/HighLevelMedicaidRequirements.pdf>

### **The meeting was adjourned.**

Next Meeting: Friday, May 30, 2008 from 1:00-4:00 p.m. Location to be determined.