

**Children's Health Technical Advisory Committee Meeting
James F. Thompson Room
275 East Main Street
Frankfort, Kentucky
January 13, 2016 – 2:00 p.m. EST**

TAC members in attendance: Stephen Lin (proxy for Tara Grieghop-Goodwin); Mary Burch; Kelli Whitt, MD; Charlotte Haney, DMD; Vicki Merrill.

Managed Care Organization (MCO) representatives in attendance: Lucy Howard, Passport Health Plan; Colleen Hagan, WellCare; Mary Maupin, Anthem Blue Cross-Blue Shield; Dr. Jeb Teichman and Kelly Fellonneau, CoventryCares; Martha Campbell Humana-CareSource .

Medicaid staff in attendance: Stephanie Bates and Carolyn Kerr. Others in attendance: Dr. Jerry Caudill and Nicole Allen (telephonically), Avesis; Mahak Klara, Kentucky Youth Advocates; Julia Richerson, M.D., APP-Ky; Karen Mercer, Commission for Children with Special Health Care Needs.

The meeting was called to order by Mr. Stephen Lin. Introductions were made by those in attendance. A motion was made by Ms. Burch and seconded by Dr. Whitt to approve the minutes of the November 9, 2015 meeting. Motion passed unanimously.

DMS UPDATES:

Ms. Stephanie Bates noted that many of the MCO representatives who regularly attend the meetings were not in attendance due to in-person EQRO audits being conducted. She stated that Lisa Lee resigned and that Veronica Cecil is Acting Medicaid Commissioner and Adria Johnson is the new DCBS Commissioner.

Ms. Bates is the Medicaid lead on a National Governors Association (NGA) Learning Collaborative that is focused on improving quality and access to care in maternal and child health. Initiatives have been identified and she will continue to report on this as future meetings occur.

Ms. Bates presented at the CMS Quality Conference in December of 2015 on a Medically-Fragile Focus Study that was done by IPRO. This study can be found on the DMS website.

Ms. Bates attended the National Association of Medicaid Directors' Behavioral Health Integration Workshop in December and she noted that same-day billing, integrating behavioral health into medical services and other topics of interest were discussed and that data continues to be gathered from this workshop.

At the next EPSDT Coordinators' meeting, school health issues will be added to topics of discussion.

Ms. Bates furnished the TAC with the mismatch disenrollment data for December, 2015.

Dr. Richerson reported that two asthma education codes dealing with inhalation instruction and self-management have been approved for once-a-year coverage and billing and she will disseminate this information to providers through the Kentucky Asthma Partnership.

Kentucky was selected to participate in a CMS Oral Health Collaborative dealing with developing Performance Improvement Plans (PIPs), and DMS, along with other groups, is participating in the National Association of School Boards of Education (NASBE) interviews dealing with oral health.

Ms. Bates noted that she did not have the information that Dr. Elliott had requested at a prior meeting, and Dr. Haney asked if she could furnish that to the TAC before the next meeting.

MCO UPDATES:

ANTHEM: Mary Maupin reported that for the last quarter, there were 42 children between the ages of zero and 20 that were disenrolled because of mismatch addresses. Currently, there are 90,000 members enrolled and about 25,000 of those are children.

Increasing annual dental visits is a PIP the MCO is working on. A billing code for reimbursement has been added for broken and missed appointments, and the MCO will track this and do outreach to members about the importance of keeping appointments. Data analysis is being done on availability of services, and it was noted that Regions 5 and 8 have the biggest gaps in care and the MCO will target these areas first. DentaQuest is working to increase the provider network. The behavioral health PIP is focused on ensuring that children have been included in the case management program and looking at trends concerning prescription medications and lab monitoring.

Toolkits are being revised in the EPSDT Program to include updated frequently-asked questions, ICD-10 codes, updating immunization information and other items. New brochures will be going out to members and the MCO continues with their provider education materials.

COVENTRYCARES: Dr. Teichman reported that since September 1, 2015, about 2,060 children under the age of 21 have been disenrolled but the MCO is unsure how many of those have re-enrolled. There are 275,000 total members enrolled and 50 to 60% of those members are under the age of 21.

Ms. Fellonneau reported that ADHD medications, antipsychotic medication management and emergency room utilization are PIP's that are currently being worked on. A focus study is looking at decreasing non-emergent and appropriate ER usage as a possible future PIP, and the MCO is working with case management to look at adverse events and quality-of-care cases. The MCO has partnered with the University of Louisville School of Dentistry to do several outreach programs at elementary schools as well as health fairs. Dr. Teichman stated that there is an initiative in place that manages pregnant women who have substance use disorders and babies with Neonatal Abstinence Syndrome.

CoventryCares will transition to Aetna in several weeks.

HUMANA: Ms. Campbell reported that 629 children under the age of 21 have been disenrolled, but she noted that the billing analysts found some inconsistencies and they will compile a list of scenarios that will be shared with Medicaid. Providers will also be sent a network notification to enlist their assistance in ensuring that members have updated and correct addresses.

Ms. Campbell stated that beginning this month, Avesis will become the dental provider. She noted that she could only speak to EPSDT issues. The MCO participates in the oral health initiative, sends out dental postcards and birthday reminders, does outreach calls, and Ms. Campbell works with the Babies First Program.

PASSPORT: Ms. Howard reported that 109 children ages zero to 18 years old were disenrolled for address mismatch since August, 2015. Total enrollment for this age group is 113,665.

Concerning PIP's, the MCO has implemented an asthma action plan for children five years and older and continues to work on the antipsychotic medication monitoring for children and adolescents. Another PIP is Promoting Healthy Smiles, and Ms. Howard noted that this program was directly related to children with developmental disabilities but it may be tweaked to include a broader group.

WELLCARE: Ms. Hagan had a handout for the TAC concerning the PIP's. The MCO met its target for two of the age groups for the inappropriate emergency department use PIP, and it met both of its goals for the behavioral health medication use in children PIP. The MCO is revising its goals for the antipsychotic medication use in children PIP because it is going so well. Based on the interest of the TAC, a new PIP has been developed on improving pediatric oral health and is in the development phase.

Ms. Hagan reported that, based on children ages zero to 20, 50% of members placed in warning status are children and 62% of the members who are ultimately disenrolled are children and the MCO is very concerned about this.

Ms. Bates noted that she had formally asked about excluding children from disenrollment and she was told that this could not be done because the systems link the children to the parents but she is hopeful that with the implementation of R5, it will make it easier to do this and she will keep the TAC updated.

GENERAL DISCUSSION:

Dr. Teichman asked if the TAC wanted a quarterly update on disenrollment information and Mr. Lin stated that would not be necessary. Mr. Lin also noted that it is not necessary for MCOs to give PIP updates at each meeting. The TAC wants to focus on how best to impact children's health and the direction in which the TAC wants to proceed with this.

Ms. Burch asked Ms. Bates to again send out MCO contact information of people who can provide information on the process for address changes and foster care questions.

Dr. Richerson asked if acute telemedicine services could be added to the agenda at a future meeting.

DISCUSS RECOMMENDATIONS TO MAC:

The recommendations that were made at the last MAC meeting will be resubmitted since the MAC did not have a quorum.

A motion was made by Ms. Burch and seconded by Dr. Haney to adjourn the meeting.

(Minutes were taped and transcribed by Terri Pelosi, Court Reporter, this 18th day of January, 2016.)