November 20, 2014 MAC Binder Section 2 – Letters to CMS
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CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES

Steven L. Beshear
Governor

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Audrey Tayse Haynes
Secretary

Lawrence Kissner
Commissioner

October 3, 2014

DHHS/CMS
Atlanta Regional Office
Attn: Jackie Glaze, Associate Regional Administrator
Division of Medicaid & Children's Health Operations
61 Forsyth Street SW, Suite 4T20

Atlanta, GA 30303 8909

RE: Kentucky's ICD-10 Implementation Strategy – Implementation Advanced Planning Document Update #4 – Review Request

The Kentucky Cabinet for Health and Family Services (CHFS) is requesting review and approval of the attached Implementation Advanced Planning Document Update (IAPDU) #4 for transitioning the Commonwealth's Medicaid Information Management System (MMIS) from ICD-9 International Classifications of Diseases-9 (ICD-9) to ICD-10.

The total combined cost of this IAPDU is $1,404,170 (Federal share equaling $1,207,972 and the Commonwealth share equaling $196,198). CHFS is requesting Title XIX funding as follows:

- $1,264,718 at 90% Federal match rate ($1,138,246 Federal share and $126,472 Commonwealth share);
- $139,452 at 50% Federal match rate ($69,726 Federal share and $69,726 Commonwealth share).

This IAPDU will fund the testing phase through close-out preceding the launch of ICD-10 in 2015.

Please contact Jennifer Harp at (502) 564-5183, ext. 2076, if you have any questions.

Sincerely,

Lawrence Kissner
Commissioner

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November 19, 2014

Karen Llanos
Acting Staff Director
Innovation Accelerator Program
Center for Medicaid and CHIP Services
7500 Security Blvd.
Baltimore, MD 21244

Dear Ms. Llanos,

We are writing in application to the Substance Use Disorder High-Intensity Learning Collaborative through the Medicaid Innovation Accelerator Program. This opportunity is timely for Kentucky given our recent addition of substance use services as a covered benefit through Medicaid and our strong partnership with Kentucky's Department for Behavioral Health, Developmental and Intellectual Disabilities. We look forward to collaborating on the development of a robust substance use benefit and adequate provider network to meet the needs of Kentucky's 1.1 million Medicaid members.

Sincerely,

Lawrence Kissner
Commissioner
Kentucky Department for Medicaid Services

John Langefeld MD

Dr. John Langefeld
Chief Medical Officer
Kentucky Department for Medicaid Services

IAP Medicaid Innovation Accelerator Program

Substance Use Disorder High-Intensity Learning Collaborative

Expression of Interest

State/Territory: Kentucky
In May 2013, Governor Steve Beshear signed an executive order to implement Medicaid expansion as authorized by the Affordable Care Act. At that point, Kentucky had already been building its state-based marketplace, kynect, making it the first state in the south to both expand Medicaid and have a state-based marketplace. As a result, an additional 360,000 Kentuckians were eligible for health coverage through Medicaid, bringing the total number of members to nearly 1.1 million. This number represents about one fourth of Kentucky's entire population. Prior to the implementation of Medicaid expansion, treatment for substance use disorder (SUD) was not a covered service under Medicaid. Kentucky residents with SUD had the option of receiving services through programs overseen by the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID). Kentucky Department for Medicaid Services (DMS) has added a comprehensive, evidence based continuum of substance abuse services to its Medicaid State Plan. It is now critical that the Department for Medicaid Services (DMS) and BHDID work collaboratively to implement this new benefit. Kentucky's provider community is in the early stages of building an adequate network and will benefit from support and technical assistance in implementing quality services across the continuum. Quality and data metrics will be crucial to monitor access, quality of services and outcomes. Substance abuse is a major concern across the country, but it is particularly pervasive in Kentucky. There were 13,533 Medicaid members diagnosed with a SUD in June 2010, 8,140 of which were diagnosed with drug dependence and 4,969 with drug abuse. In Kentucky, 23.6 per 100,000 people died from a drug overdose in 2010, giving Kentucky the third highest drug overdose mortality rate in the country, according to a report by the Trust for America's Health. The report Kentucky possesses nine of out ten possible indicators of strategies that may help control prescription drug abuse, including lock-in programs, rescue drug laws and SUD treatment through expanded Medicaid. In Kentucky Medicaid, we have established a data analytics team within our Division of Program Quality and Outcomes to integrate data from disparate systems that exist outside of our Medicaid Management Information Systems (MMIS) and create linkages. Within the Cabinet for Health and Family Services (CHFS), one of our partner agencies is the Kentucky Health Information Exchange (KHIE), which provides the technical infrastructure to support the statewide exchange of health information among healthcare providers and organizations across the commonwealth. We have also partnered with external entities such as the University of Kentucky, which is building an all-payer claims database.

We hope to work with CMS through the Substance Use Disorder High-Intensity Learning Collaborative to develop a robust substance use benefit which utilizes data analysis and builds upon evidence-based practices to construct an adequate network for our Medicaid members diagnosed with SUD. We realize that participating in this Learning Collaborative will require the time and resources of state agency personnel. We have identified key staff from Kentucky DMS, DBHDID and other stakeholders and are committed to participating fully in the Learning Collaborative to provide the resources necessary to ensure the success of this partnership with CMS.

This timing of tis Collaborative could not be better for Kentucky as we have the opportunity to build services and a provider community from the ground up using data and outcomes to guide the process.

Team Members	Name and Contact Information
Medicaid lead*	Erin Hoben, Chief Policy Advisor, Department for Medicaid Services Erin.Hoben@ky.gov 502.564.4321x2555
Data lead	Dr. John Langefeld, Chief Medical Officer, Department for Medicaid Services John.Langefeld@ky.gov 502.564.4321x2038
SSA for Substance Use Disorder lead	Natalie Kelly, LCSW, Director, Division of Behavioral Health Department for Behavioral Health, Developmental and Intellectual Disabilities Natalie.Kelly@ky.gov 502.564.4456
Other potential stakeholders for team (e.g., health plans, provider groups)	Additional Cabinet Departments: *Office of Inspector General, Office of Health Policy, Department for Public Health* Managed Care Organizations: *Anthem, Coventry, Humana, Passport and WellCare* Provider Groups: *Medicaid Advisory Council, Kentucky Psychological Association, Kentucky Medical Association* Licensing Boards Clinicians, Pharmacists, Facilities Judges, Probation and Parole Officers

*Please identify a single point-of-contact

Please email this form to MedicaidIAP@cms.hhs.gov with "SUD LC" in the subject line no later than *November 21, 2014*. Please provide the name and contact information for the representative from the Medicaid agency that will be the primary point of contact for the Learning Collaborative.