

COUNCIL ON HUMAN SERVICES

MINUTES

August 9, 2017

COUNCIL

Mark Anderson
Phyllis Hansell (via phone*)
Alexa Heffernan
Kimberly Kudej
Kim Spading (absent)
Sam Wallace

EX-OFFICIO LEGISLATIVE MEMBERS

Representative Joel Fry (present)
Representative Lisa Heddens (absent)
Senator Mark Segebart (absent)
Senator Amanda Ragan (absent)

STAFF

Jerry Foxhoven	Amy McCoy
Sandy Knudsen	Mikki Stier
Nancy Freudenberg	Vern Armstrong
Merea Bentrott	

GUESTS

Tony Leys, Des Moines Register
Natalie Koerber, Amerigroup Iowa
Kim Murphy, Iowa Hospital Association
Ashley McGuire, UnitedHealthcare
Sandi Hurtado-Peters, Iowa Department of Management
Kris Bell, Senate Democratic Caucus
Emily Hockins, Advocacy Strategies
Patty Funaro, Legislative Services Agency
Nancy Augustine, Iowa Family Preservation
Don Burgmaier, VOCAL

CALL TO ORDER

Mark Anderson, Chair, called the Council meeting to order at 10:01 a.m.

*Hansell joined the Council via phone at 1:00 p.m. for the "Director's Update."

ROLL CALL

All Council members were present with the exception of Spading. All Ex-officio legislative members were absent with the exception of Representative Fry.

RULES

Nancy Freudenberg, Bureau of Policy Coordination, presented the following rules to Council:

R-1. Amendments to Chapter 79, Medicaid. Implements cost containment strategy to eliminate Primary Care Physician rate increases.

Motion was made by Wallace to approve and seconded by Heffernan. MOTION CARRIED UNANIMOUSLY.

R-2. Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the inpatient diagnostic related group (DRG) cost outlier threshold formula to be the greater of two times the statewide average DRG payment for that case, or the hospital's individual DRG payment for that case plus \$75,000. The current formula is the greater of two times the statewide average DRG payment for the case, or the hospital's individual DRG payment for the case plus \$16,000.

Motion was made by Wallace to approve and seconded by Heffernan. MOTION CARRIED UNANIMOUSLY.

R-3. Amendments to Chapter 79, Medicaid. Re-implements the cost containment strategy to adjust Medicaid reimbursement rates for physician services rendered in facility settings (e.g., hospitals), by applying a "site of service" differential to reflect the difference between the cost of physician services when provided in a health facility setting and the cost of physician services when provided in a physician's office. Note that the strategy in this amendment was originally legislatively mandated in 2011 as a directed/mandated cost-containment strategy at that time. However, the Legislature "nullified" the original mandate in 2012, based on provider complaints about reduced payments in facility settings.

Motion was made by Heffernan to approve and seconded by Wallace. MOTION CARRIED UNANIMOUSLY.

R-4. Amendments to Chapter 79, Medicaid. Implements the cost containment strategy to adjust the Iowa Medicaid anesthesia conversion factor to be equal to the calendar year 2017 Medicare anesthesia conversion factor, as adjusted for the state, and converted to a per minute amount. Each January 1, thereafter, the Department shall apply the applicable Medicare anesthesia conversion factor adjusted for the state, and converted to a per-minute amount.

Motion was made by Wallace to approve and seconded by Heffernan. MOTION CARRIED UNANIMOUSLY.

R-5. Amendments to Chapters 79 and 80, Medicaid. Implements the cost containment strategy to ensure that total reimbursement for Medicare Part A and B crossover claims is limited to the Medicaid reimbursement rate.

Motion was made by Wallace to approve and seconded by Heffernan. MOTION CARRIED UNANIMOUSLY.

APPROVAL OF MINUTES

A motion was made by Heffernan and seconded by Kudej to approve the minutes of July 12, 2017. MOTION CARRIED UNANIMOUSLY.

OVERVIEW OF DHS CHILD ABUSE/NEGLECT INTAKE PROCESS

Vern Armstrong, Administrator, Division of Field Operations, provided the following information:

“Intake” is a process of receiving reports from the public and determining how the Department will respond.

The Intake Worker may accept a child abuse assessment, accept the report for investigation, accept the report for a family assessment for Child in Need of Assistance (CINA) or offer the caller information and referral and reject the call.

Currently, the Department has a ‘centralized intake unit’ that operates during normal business hours. Afterhours, holidays and weekends, the intake calls are transferred to the Eldora State Training School where staff take the basic information and forward the calls to Social Worker 3’s and Supervisors across the state.

Armstrong explained the process the intake workers use in answering the calls, as well as the consultation and quality assurance from supervisory staff. The unit takes over 50,000 calls a year.

Once a report is accepted as a child abuse assessment, family assessment or a CINA assessment, the case will be assigned to a specific worker and a response timeframe will be assigned based on a number of criteria. There are regular oversight meetings which include county attorneys.

Armstrong reviewed the factors that constitute child abuse as well as the types of abuse, as listed in the Code.

The Department is exploring moving to a 24/7 centralized intake which would enhance the consistency of documentation and would allow recording of all calls.

The Department has taken steps to improve the intake system over the last few months by:

- enhanced training
- accepting reports as new reports instead of addendums to current cases
- special attention given to reports from mandatory reporters
- improvement of IT systems

Council suggested that a visit to the Intake Call Center be scheduled in the future.

MANAGED CARE UPDATE

Mikki Stier and Lisa Cook, Iowa Medicaid Enterprise (IME), reviewed the latest quarterly “Managed Care Organization (MCO)” report, published May 31, 2017 covering January through March, 2017.

Cook reported:

- Overall measures are beginning to stabilize
- Population reports (pages 9 through 37) in general indicate better care coordination
- Report indicates 242,000 members have completed the health risk assessment
- All MCOs are meeting the benchmarks for processing grievances (page 39) - the numbers are higher for Amerigroup and IME account managers are following up on that trend. Transportation is a top reason for grievances.
- On Level of Care (page 45) all MCOs are seeing improvement
- The Department continues to conduct secret shopper calls to measure adequacy, consistency and soft skills associated with MCO helplines.
- On Medical Claim denials (page 46) the Department continues to monitor reimbursement accuracy and follows up when the Department is made aware of provider reimbursement concerns - Amerigroup is close to meeting the benchmarks and have a corrective action plan in place.
- Page 57 outlines value added services, those are services that MCOs offer that were not available in the fee-for-service program. 97,000 members utilized these services last year.
- On Page 62 it's noted that all the MCOs are 98% or higher regarding Expedited Services requirements

Stier reported:

- DHS received approval from the Centers for Medicaid Services (CMS) to move the dental wellness program into a managed care environment.

- DHS has been working on the initiative to complete the year-end provider re-enrollment. Staff have been working with the MCO's to track and continue to do outreach with providers that have not re-enrolled.
- Another initiative DHS is working on is provider training - to assist providers in honing their skills with billing and other issues. A schedule will be posted on the DHS website.
- In regard to the "Managed Care Ombudsman Program Quarterly Report (1st Quarter, Year 2 - Apr/May/Jun 2017), Stier noted that DHS continues to reach out to the Ombudsman's Office to obtain any specifics they have in regard to global statements of reductions in service so that DHS staff can "drill down" to solve issues. DHS continues to have monthly calls with both the State and Managed Care Ombudsman's Office as well as monthly meetings with the Director of the Department on Aging.

Anderson noted that Spading was unable to attend the meeting and will be emailing Stier with her questions regarding the quarterly report.

COUNCIL UPDATE

Heffernan reported that she read the Governor's Office Press Release regarding the JD Power Global Market Research Company's findings that Iowa was ranked the second highest in the nation for satisfaction from Iowa Medicaid patients. The report also indicated that Iowa was one of four states in the nation where Medicaid patients have the easiest access to doctors and hospitals.

Kudej reported that she attended a Department of Corrections (DOC) meeting at the Clarinda facility last week. Jerry Barthoff, DOC Director, mentioned an upcoming workgroup that will include DHS, DOC, mental health providers, law enforcement and other mental health associations to address the aging population in prison and housing for sex offenders. Kudej was pleased to see the coordination of resources.

Anderson reported that he met with Director Foxhoven, Amy McCoy and Merea Bentrutt in Waverly at the Bremwood Residential Treatment Center, which is a treatment facility for juveniles run by Lutheran Services of Iowa.

Anderson shared that he has talked with Director Foxhoven and is proposing sending a letter to DHS Division Administrators and Superintendents regarding their thoughts on the upcoming budget recommendations. Specifically, the letter requests their input on how additional allocations could be invested or how additional reductions could be shouldered. The suggestions are to be emailed to Jean Slaybaugh who will compile the list and present it to the Council so that the Council can prioritize those items at the September meeting. The Council approved that the letter be sent.

Council discussed whether to have a one-day or two-day meeting in September to review the budget. It was decided to hold a one-day meeting, but begin the meeting at 9:00 a.m. (instead of 10:00 a.m.) and finish later in the day if necessary.

DIRECTOR REPORT

Jerry Foxhoven, Director, provided the following report:

The Disability Rights Iowa (DRI) recent report regarding the State Training School in Eldora raised issues around the use of seclusion and mental health treatment. He noted that Eldora should not be compared to other DHS facilities as many of the residents are accused of significant crimes and have had several previous placements that have not worked well. He noted that Eldora has been very successful in terms of providing job skill training and providing other supports that offer potential for success. Foxhoven has visited the facility and stated that he is proud of the facility and the staff that work there, especially Superintendent Mark Day.

Foxhoven has visited several DHS facilities and offices and will continue to do so as often as his schedule allows.

As Foxhoven continues to familiarize himself with the Department, he will be looking to identify things that may not fit with the mission of DHS and may recommend some things come “off the Department’s plate.”

Hansell requested a complete listing of the Department’s programs.

ADJOURNMENT

Meeting adjourned at 1:30 p.m.

The next meeting of the Council on Human Services will be Wednesday, September 13, 2017 beginning at 9:00 a.m.

*Submitted by Sandy Knudsen,
Recording Secretary*