December 5, 2017

Ms. Valerie Nurr'araaluk Davidson, Commissioner
3601 C Street, Suite 902
Anchorage, Alaska 99503

Dear Ms. Davidson:

The Medical Care Advisory Committee met on December 1-2, 2017. During public comment, concern was expressed about the proposed regulation changes pertaining to reimbursement and amount of durable medical supplies to recipients of Medicaid. Below is a summation of the testimonies from concerned community members.

- Inability to get the right type or the right quantity of medical supplies due to decreased reimbursed. Community members explained they would not be able to get the right brand or style of necessary medical supplies, as their provider would not be able to offer specific brands due to decreased reimbursement issues.
- A major concern regarding access to services for recipients requiring oxygen, ventilator and CPAP equipment. Community member are concerned if providers cannot offer these services for the reimbursement rate that is proposed to be adopted, vulnerable children and adults will not be able to be discharged from the hospital.
- A physician testified that he personally will not discharge any child to the home setting if there is concern that the child will not receive the right brand and specific products, supply and equipment medically appropriate for the child.
- Specialty nutrition was a major concern. Providers are communicating they will not be able to provide high cost specialty nutrition due to the reimbursement process and unknown billing requirements.
- Maximum quantity limits are of concern as it relates to nutrition and respiratory equipment and supply needs if the Medicare fee schedule HCPCS coding is adopted.

In consideration of the testimony we heard from 3 physicians, clinical medical professionals, and community members, the Medical Care Advisory Committee respectfully requests that additional consideration and financial analysis be completed for the division to understand the potential negative impact these regulations could have if adopted for our Medicaid recipients.
In addition, our committee would like to have a full presentation from the division to clearly understand the elements of these complicated regulations. Our concern, is they are written in such a complicated manner, they are difficult to understand and as stated by the medical community, potential harm, access to care, and the inability to discharge vulnerable patients from the hospital setting may be the unintentional outcome of these proposed regulations if adopted.

Respectfully,

Keren L. Kelley, MPA, LNHA
Medical Care Advisory Committee Chair

Cc: Jon Sherwood, Deputy Commissioner for Medicaid & Health Care Policy