

GOVERNOR'S COUNCIL ON DISABILITIES
AND SPECIAL EDUCATION

Medicaid Ad Hoc Committee Meeting

LOCATION

Governor's Council Conference Room
3601 C Street
Anchorage, Alaska
Teleconference

Meeting Date

February 28, 2012
2:30 p.m.

Attendees:

Ric Nelson, Chair
Emily Ennis
Heidi Haas

Guests:

Dayna McGuire

Staff:

Carrie Predeger

Prepared by:

Jeannette Rice, Peninsula Reporting

Call to Order – 2:30 p.m.
Roll Call

READING OF THE COUNCIL MISSION

Dayna McGuire recited the Council's mission statement: Creating change that improves the lives of people with disabilities.

APPROVAL OF THE AGENDA

Heidi Haas **MOVED** to approve the agenda. The motion **PASSED**.

APPROVAL OF PREVIOUS MEETING MINUTES

Approval of the minutes from the November 28, 2011 meeting was tabled until the next meeting.

CORRESPONDENCE

None to report.

INTRODUCTIONS, ANNOUNCEMENTS, OR GOOD NEWS

None to report.

OLD BUSINESS

Report back from the communities

At the first meeting, members of this committee were asked to go out into their communities and try to identify problems people are having with Medicaid and areas of waste. The committee conducted a lengthy discussion of issues that had come up and some suggestions of possible solutions.

Supplies

- Prescriptions are required for supplies such as diapers, though doctors don't question how much people say they need and many consumers take as much as they can get.

- Consumers and care coordinators spend hours on the phone with vendors to change an order, and vendors have to get authorization for the change from the Medicaid provider's office.
- Prices through Medicaid vendors are much higher than if people purchased items themselves at local retailers.

Equipment and Home Modifications

- Medicaid vendors charge more for equipment than other suppliers (example: grab bar).
- The process of ordering specialized equipment like a wheelchair or walker is expensive and time-consuming.
- There is no system for recycling equipment that someone has outgrown or no longer needs.
- A consumer may be required to order a whole new wheelchair instead of just new cushions or other replaceable parts.
- There is a new requirement that requires users to rent equipment for a year before actually purchasing it.

Travel Cost

- Medicaid requires care coordinators to order tickets within the same month as the medical appointment, which often results in higher prices.
- Medicaid patients from remote communities may make two trips to Anchorage in two weeks for different doctor visits; a coordinated travel system to combine appointments into one trip could save a lot of money.
- Medicaid sometimes will not pay for travel for an escort to accompany a patient.
- Some people use both private insurance and Medicaid, but Medicaid won't accept referrals to specialists from non-Medicaid providers. Then a Medicaid care coordinator has to mediate, and travel isn't covered in the same way; for example, vouchers are not provided for cab fare from the airport to the doctor's office, effectively penalizing people for trying to save Medicaid money.

Doctor Visits

- Different doctors charge different prices, but sometimes the Medicaid rate is actually higher than doctors would normally charge.
- Medicaid patients often make unnecessary visits to the emergency

room at very high cost instead of seeing their regular doctor or a clinic; maybe some kind of co-pay would help to discourage that.

Audits

- Multiple audits take up a lot of resources and increase Medicaid providers' overall costs.
- Non-profits have trouble affording the administrative costs, and there have been no rate adjustments to meet additional demands of audits.

Assessments

- Medicaid consumers are reassessed for eligibility every year or every three years, a costly process; maybe the period could be extended to five years in some cases.

NEW BUSINESS

Develop Work Plan

Ric Nelson stated that the overarching goal of the Medicaid Ad Hoc Committee is to make a thorough recommendation to Commissioner Streur as to how the State of Alaska as a whole could save money within the Medicaid system. The committee agreed that one of the first steps will be to examine federal and state regulations, policies, and guidelines, to make sense of them and see which ones it might be possible to change. Also, for each problem the committee identifies in Alaska's regulations, the committee should suggest a solution or a revision to the regulation. Federal regulations that result in waste may also be identified, but attempting to change federal regulations is beyond the scope of this committee.

In discussing the problems and areas of waste identified, the committee concluded that the many person-hours spent on paperwork is a common thread in many of the issues contributing to the high cost of Medicaid services. There are currently no self-directed waivers, but the committee would like to look at how many people in Alaska could do self-directed waivers (are their own guardian and have the necessary business sense).

The committee made a list of the problems identified and suggestions made in this discussion. Ric Nelson and Carrie Predeger will work together to prioritize the list and start to figure out how to approach each issue. Ric

noted that the committee will need to give a report to the full Council at the May meeting.

TIME AND DATE OF NEXT MEETING

After some progress is made on the list, Carrie Predeger will send out a Doodle to plan a meeting in April.

ADJOURN

The meeting was adjourned at 3:40 p.m.