

Office of Ohio Health Plans
 Medical Care Advisory Committee
 Meeting Minutes, August 23, 2012

Members present: Mary Butler; Craig Carins, M.D.; Philip Darrow; Janet Grant; Jennifer Grow, MD; Greg Hall, M.D.; J. Thomas Hardy, M.D.; Jeff Harwood, MD; Eugene King, Esq.; Maria Matik; Sandy Oxley; Douglas Prince, MD; Randy Runyon; Holly Saelens

State Staff: Patrick Beatty, Christi Pepe, Debbie Moscardino and Mary Gerlach

TOPIC	KEY POINTS/DECISIONS	OUTCOMES/DELIVERABLES And MEMBER COMMENTS
John McCarthy Update –	<p>CMMI State Innovation Grant - 25 grants to be awarded - \$1-3 Million for testing of new payment and service delivery models. Ohio’s applications is inclusive, not just Medicaid. OPERS, BWC, Rehab and Corrections. MCPS are considered Medicaid so unable to be included.</p> <p>This is one part of Medicaid care management initiatives – CPCi, Behavioral Health Homes, Accountable Care Organizations, HUB in SE Ohio, rebasing hospital inpatient, NF- 10% rate quality initiatives.</p> <p>Mental health service SBIRT – will be added to benefits; as well as, health home for people with chronic conditions</p>	<p>Issues or suggestions raised by members:</p> <ul style="list-style-type: none"> Lab reimbursement in office Reward for off hours Issue with mobility limitations Connecting ED users to PCP Telemedicine EHR Address underlying consumer behavior Community based intervention Look for uniformity between public employees, retirement systems.
Moving Children with Special Needs into Managed Care – Debbie Moscardino and Christi Pepe	<p>In July 2013 target for enrolling children. At issue is State Plan benefits of home health and private duty nursing is used by many families for respite. OMA seeking a 1915(i) option to add respite. There are a host of issues: medical necessity. Consistency between fee for service and managed care delivery systems; in autistic children hab vs. rehab. Do we pay a mom to take a child to the grocery store? Other children?</p>	
ACA: Rate increase for certain physicians – Debbie Saxe and Joe Doodan	<p>Medicaid must pay 100% of the Medicare rates in 2013-2014 for primary care services by a physician with a specialty designation of family medicine, general internal medicine or pediatric medicine. 100% federal funding for difference between Medicaid and Medicare.</p> <p>HCPC codes 99201-99499, primary care codes – including those not typically served by Medicare but RVUs are associated with codes.</p> <p>Draft rule was circulated May 11, 2012.</p> <p>MCPs must ensure increase goes to PCPs. CMS wants to review contracts – maybe not include in capitation rates.</p> <p>A State Plan Amendment must be approved 1/1/13.</p>	