

Delaware Health and Social Services
 Medical Care Advisory Committee (MCAC)
 September 10, 2014 Meeting Minutes

Date: September 10, 2014 Place: Easter Seals 61 Corporate Circle New Castle, DE 19720 Time: 9:00 AM – 11:00 AM Presiding: Dr. Julia Pillsbury, D.O.		Members Present: Judith Chaconas, Calvin Freedman, Dr. Leonard Nitkowski, M.D., Dr. Julia Pillsbury, D.O., Lynn Robinson, Lisa Schieffert, Yrene Waldron Guests: Dr. Richard Margolis, DSCYF Members Absent: Michelle Amadio, Thomas Barlow, Kris Bennett, Penny Chelucci, Dr. Goleburn, Scott Johnson, James Lafferty, Brandy Niezgodna, Ann Phillips, Olga Ramirez Staff Present: Janet Bailey, Cindy Denemark, Rebecca Gallagher, Steve Groff, Greg Roane, Glyne Williams, Lisa Zimmerman Staff Excused: Dr. Anthony Brazen, D.O., Jose Tieso, Kay Wasno	
TOPIC FOR DISCUSSION	DISCUSSION / ISSUE	ACTIONS	FOLLOW UP RESPONSIBILITY
Call to Order: Dr. Julia Pillsbury, D.O., Chair	<ul style="list-style-type: none"> Chair Dr. Pillsbury welcomed everyone and called the meeting to order at 9:08 AM. 		
Approval of Minutes:	<ul style="list-style-type: none"> Chair Dr. Pillsbury called for any additions, alterations or corrections to the June 11, 2014 minutes. Being none, Dr. Nitkowski moved to accept the minutes as recorded. Ms. Chaconas seconded the motion. Motion carried. 		
Standing Committee Reports Directors Update: <i>Steve Groff, Director</i>	Director Groff reported: <ul style="list-style-type: none"> We are in the middle of the budget request for FY16; to OMB by the middle of October. There will be Public Hearings in November and the Governor will present the Recommended Budget in January. We have new managed care contracts that will come into play January 1, 2015. We are at the end of the negotiation process right now; I can't give details at this point, but can tell you we are actively negotiating with three managed care organizations. A brief discussion ensued regarding managed care. We just finished the requirement validation sessions for our new management information system, DMES (Delaware Medicaid Enterprise System). We are scheduled to go live July 1, 2016. It's a complete revamp of our system to better support the way we do business, better support our providers through a provider portal and consumers through a consumer portal. It was a grueling process and is not yet complete; we are able to 		

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<p>Director's Update (Cont'd): <i>Steve Groff, Director</i></p>	<p>now move on to the next portion of detail design.</p> <ul style="list-style-type: none">• There are three subject areas that are impacting Medicaid nationally. The first is Hep C and Sovaldi. We've addressed that issue in a rational way. It is an expensive drug; \$84,000 for treatment, \$1000.00 per pill for 12 weeks. The concern is that this treatment could break the bank. There is a big push on the public health side to get people into this care. On the other hand, there are a lot of questions regarding who are the appropriate people or when is it appropriate to initiate this care, so it's a balancing act. In the middle, there are now lawsuits cropping up in other states not only around Sovaldi but around other specialty drugs, for example, Kalydico for individual with Cystic Fibrosis. We have to find a way to balance cost against need. The National Association of Medicaid Directors (NAMD) are trying to work together to find ways to address this.• Another area is Home and Community Based Services (HCBS). For years, all the regulation around HCBS has been in the context that HCBS's are not institutions. No one ever defined it; CMS has now come out with regulations that actually constitute HCBS setting. It will require changes in some of the services we currently provide. We will be working with our sister agencies that are impacted with all the transition plans to get the settings that currently are not compliant into compliance. In the interim, any new HCBS services have to be compliant with the new rules. That impacts our Pathways and PROMISE programs; they are both in the hands of CMS right now. We are hoping it will be approved to be effective January 1st.• The last issue is a national issue; CMS released guidance on services that Medicaid must cover for children with Autism Spectrum Disorder (ASD). This has been a very confusing, hugely gray area for state Medicaid programs. We're working with NAMD and other states that have had SPA's approved. We recognize that the EPSDT benefit mandates that we provide medically necessary services for children with ASD. We need to establish in policy exactly how we're going to define those services, who would be eligible service providers, and set up the guidelines for coverage. We recognize the need to do that very quickly.		
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<p>DSHP Update: <i>Glyne Williams</i></p>	<p>Mr. Williams reported:</p> <ul style="list-style-type: none">• Open enrollment is now the month of November and it will include some Saturdays. We are paying close attention to individuals receiving long term services and supports.• HP has added a number of staff to help deal with any of the possible problems we may have during the course of open enrollment.• Diamond State Partners (DSP) is going away the end of December. We will have staff available to work with DSP clients to assist them with their decisions for a new provider.• A lengthy discussion followed concerning open enrollment and the changes being made.• PROMISE – we have submitted an amendment to CMS. One of the elements to that are public hearings. They will be held September 23rd, 24th and 25th, occurring in New Castle County, Kent and Sussex Counties. Additional information can be found at: http://www.dhss.delaware.gov.dsamh/ .		
<p>Pharmacy Update <i>Cindy Denmark</i></p>	<p>Ms. Denmark reported:</p> <ul style="list-style-type: none">• As of July 1st we are covering Suboxone through the Medication Assisted Outpatient Treatment Program (MAOTP). We are working closely with DSAMH to make as many options available as possible. Access is an issue; the more we can make opportunities available and different treatment options the more likely we are to have success in appropriate treatment for an individual.• Drug abuse situation – Benzodiazapine – the DUR board has asked DMMA to evaluate what can be accomplished over the next few months. We are following the overdoses in Delaware especially as it impacts Medicaid clients and these medications are often involved. The PDAC has taken this up as an initiative as well.• A brief discussion ensued concerning the Pharmacy Drug Benefit moving to the MCO package.		

