



# Access Monitoring Review Plan

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Federal requirement for CMS to review Medicaid rates to ensure access to care for the Medicaid population.

- New Final Rule released in Fall 2015
- Every state required to complete an Access Monitoring Review Plan by October 2016
  - Plans must be published for Public Comment before submission to CMS.
  - Plans must be updated every 3 years.

# Access Monitoring Review Plan

- Access Monitoring Review Plans must:
  - Address the availability of care/providers and how health care needs are met;
  - Review access to Primary Care, Physician Specialists, Behavior Health, Pre/Post-Natal Care, and Home Health services;
  - Document changes in utilization; and
  - Compare between Medicaid rates and other health care payers; and
  - Be developed with recipient, provider, and stakeholder feedback.

# Access Monitoring Review Plan

What information will SD's access plan contain?

- Description of South Dakota
  - Rural/Frontier Nature
  - Statewide Health Care Access Issues
- Beneficiary Characteristics/Access
  - Recipient Feedback Regarding Access
  - CAHPS Survey Data
  - Health Care Solutions Coalition Work & Recommendations
- Provider Participation
- Medicaid Reimbursement
  - Provider Work Groups
  - Summary of Rates

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Next Steps:

- **July 2016:** Draft Access Monitoring Review Plan
- **August/September 2016:** Formal Public Comment Period