# South Dakota Department of Social Services Medicaid Tribal Consultation Thursday, October 25, 2012 10:00 a.m.—3:00 p.m. (CDT) AmericInn Ft. Pierre, SD

#### I. Welcome and Introductions

Kim Malsam-Rysdon, Cabinet Secretary of the Department of Social Services, opened the meeting with a welcome and expression of gratitude for all in attendance. Everyone present provided an introduction.

## II. Prayer

Beverly Tuttle offered a prayer.

## III. Review and Updates from July 12, 2012 Meeting

Brenda Tidball-Zeltinger, Chief Financial Officer of the Department of Social Services, provided a summary of the July 12, 2012 meeting and updates on items either still in progress or that have since been resolved. Brenda opened the floor for questions and discussion. Beverly Tuttle expressed concern for people who need Medicaid and have little to no income, but do not meet Medicaid eligibility criteria.

## IV. Update on Medicaid State Plan Amendments

Mark Zickrick, Department of Social Services, provided an update on Medicaid State Plan Amendments (SPAs). Since the July Medicaid Tribal Consultation meeting, seven SPAs have been approved and one is awaiting CMS decision. The SPA summary is attached.

# V. Public Health Nurse Update

Bonnie Bjork, Department of Social Services, commented on the status of the pilot project for public health nursing. Training was done for the pilot site at Wagner followed by testing of electronic submission of claims. Any issues found were addressed and corrected and Medical Services is ready to process electronic claims from this program.

# VI. Health Care Reform Update

Secretary Malsam-Rysdon provided an update on the status of the two primary components of the Affordable Care Act:

- Health Insurance Exchange: Governor Daugaard announced in September that the state will not develop an individual health insurance exchange, but will work in partnership with the federal government to establish the exchange. The exchange will serve as a one-stop shop for those who don't have health insurance to identify options for coverage. Medicaid will be one of the insurance options on the exchange and people will be able to complete the Medicaid application through the exchange.
- Medicaid Expansion: A determination has not yet been made as to whether South Dakota will expand Medicaid eligibility under the Affordable Care Act. The Department is working closely with the Governor's office to quantify the impact such an expansion would have in South Dakota.

# VII. Native American/Alaskan Native co-payment exemption

Brenda Tidball-Zeltinger provided the group with an update on the implementation of the required exemption from co-payments for Native Americans/Alaska Natives who have received services from Indian Health Service (IHS), Urban Indian Health (UIH), or other tribal health facilities. The exemption was originally created in the Deficit Reduction Act of 2008 and clarified in the Affordable Care Act of 2010. The Centers for Medicare and Medicaid Services approved South Dakota's State Plan Amendment incorporating this statutory requirement on July 18, 2012.

Brenda reported that the co-pay exemption has been implemented. Recipients who have been identified as exempt received a letter telling them about the exemption and encouraging them to take the letter with them to their provider visits. Primary Care Providers also received a letter with a list of people they serve who are exempt. Provider education was done through the Division of Medical Services' listserv and provider newsletter. The Division of Economic Assistance is working to incorporate an indicator on the Medicaid Recipient Identification card to help alert providers of the exemption.

Kathaleen Gordon commented on the importance that both of the prerequisites be in place for the exemption from co-payments to be applied. It was also clarified that the initial components of this exemption were applied in 2009, but the ACA expanded the guidance, which has now been implemented.

Several in attendance indicated the need to educate the tribes and tribal members about this exemption. They suggested correspondence to tribal leaders, public service announcements, and a press release.

Follow-up: The Division of Medical Services has distributed correspondence to Tribal leaders regarding the co-pay exemption.

All participants of Medicaid Tribal Consultation have been added to the Division of Medical Services listserv and will receive future notices and provider newsletters.

Other providers and tribal members can sign up for the listserv by visiting the following website and clicking on the link to join the Medical Services Listserv:

http://dss.sd.gov/sdmedx/includes/providers/archive/listservinfo.aspx

#### VIII. Status of IHS Revenue From Medicaid

Bonnie Bjork provided detail on Medicaid payments to IHS facilities (handout attached). Participants asked if future reports could further break out the payments by provider. It was also suggested that an annual report of the tribal non-emergency transportation payments be provided. Brenda indicated that the meeting minutes would include this information for state fiscal year 2012 (attached).

#### IX. Health Home Initiative

Kathi Mueller, Department of Social Services, presented an overview of the Health Home Initiative (PowerPoint handout attached). The Medicaid Solutions Workgroup recommended that South Dakota Medicaid explore Health Homes as a method to control costs as well as provide more coordinated service delivery to recipients with chronic conditions or severe mental illnesses. A Health Home Workgroup was formed and began its work in April 2012. That Workgroup reviewed the initiative and determined that two types of Health Homes will be created in South Dakota – one focused on primary care and the other focused on behavioral health.

The Division of Medical Services is currently working to draft two State Plan Amendments (SPAs). The SPA process for Health Homes is different from that of typical SPAs. It includes consultation meetings with the Centers for Medicare and Medicaid Services (CMS) and the Substance Abuse and Mental Health Services Administration (SAMHSA) prior to submission. The tribal consultation component of

the SPA process is the same and tribes will have 30 days to review and provide comment before the SPAs are submitted.

The Department aims to submit the SPAs by January 1, 2013 with plans to implement Health homes on April 1, 2013.

Data analysis showed that there are approximately 35,000 recipients eligible for Health Homes across the state. Shannon and Todd counties each have a high concentration of eligible recipients. The Department would like to work with IHS or other tribal health providers to develop Health Homes in those areas.

Kathi Mueller and Ann Schwartz offered to meet with tribal leaders, IHS, Urban Indian Health or any other interested groups to more fully explain the Health Home Initiative and how tribal entities can participate. Kathi and Ann can be reached at 605-773-3495.

Dayle Knutson explained that IHS has developed Improving Patient Care (IPC) teams within IHS to help improve care coordination. They are physician-led and incorporate other providers and people who can assist in care coordination.

## X. Money Follows the Person Demonstration Project

Ann Schwartz, Department of Social Services, provided an overview of the Money Follows the Person (MFP) Demonstration project (PowerPoint handout attached). MFP is aimed at helping individuals who have been living in an institution for 90 or more days the opportunity to transition back to their home or community.

The department submitted an application to CMS in August and was awarded the grant in October.

## XI. Tribal Reports (From Members Present)

Oglala Sioux Tribe: Beverly Tuttle and Sonia Weston each conveyed their appreciation for this consultation process and expressed their hope that members of their tribe would continue to participate going forward. Both women are transitioning into different roles within their tribe, so will no longer attend these meetings.

Sonia Weston announced that the tribe is planning to start a home health agency and their first recipient of care was the late Russell Means. They are applying for a planning grant.

Rosebud Sioux Tribe: Announced that their CHIPRA-funded program is in its final year.

Crow Creek Sioux Tribe: Asked whether the Department can tell if payments to recipients under the provisions of the Salazar Indian Trust Settlement will impact recipients' eligibility for Medicaid. It was stated that similar previous settlements have not impacted eligibility. Julie Miller, Department of Social Services, responded the Department would research the issue and provide an update in the minutes.

### Follow up:

We have been made aware of settlement funds that have been or will be awarded South Dakota Tribes. Based on federal guidance South Dakota will treat the settlement funds discussed below as follows:

<u>Cobell Vs. Salazar:</u> These payments are excluded as income in the month received and are excluded as a resource in the one year period beginning on the date of receipt for any Federal or Federally assisted program (this includes TANF, Medical Assistance and SNAP).

Nez Perce Vs Salazar: In this settlement, the funds are being paid to Tribes and Tribes have the discretion as to how to spend the money. One time payments to individuals are excluded as income for SNAP and TANF, and countable as a resource. If payment is dispersed in ongoing, recurring payments it will be counted as unearned income. For Medical Assistance, the payments are not counted as income or resources.

<u>Keepseagle Settlement Payments:</u> These payments are excluded as income for SNAP and TANF, and countable as a resource. For Medical Assistance, the payment is considered income in the month received and a countable resource the month following the month of receipt.

Penny Kelley, Department of Social Services, announced that the online application is currently in testing. Once the online application is implemented, people will be able to apply for Medicaid, CHIP and SNAP and follow their application process. Current recipients will be able to update their information online. Penny also indicated that the Department is looking for two additional locations for the kiosks where those people without internet access could apply. She invited location suggestions.

# XII. Next meeting.

The next meeting will be held on January 3, 2013 in Pierre. The group outlined several agenda items including updates regarding the Public Health Nursing billing, Health Homes, Healthcare Reform, and Money Follows the Person. Brenda Tidball- Zeltinger encouraged those in attendance to contact DSS if there are specific programmatic questions as DSS is happy to address those directly outside of the consultation process.

The full meeting schedule for 2013 is:

January 3<sup>rd</sup>, 2013 April 11<sup>th</sup>, 2013 July 11<sup>th</sup>, 2013 October 10<sup>th</sup>, 2013

# XIII. Adjournment.