

South Dakota Department of Social Services
Tribal Consultation Meeting
Thursday, April 12, 2012
10:00 a.m.—3:00 p.m. (CDT)
Holiday Inn Express
Ft. Pierre, SD

I. Welcome and Introductions

Secretary Kim Malsam-Rysdon welcomed the attendees and thanked all for their participation. She called for those in attendance around the table to introduce themselves to the group.

II. Prayer

Jim Meeks, Oglala Sioux Tribe, led the group in a prayer.

III. Review and Updates from January 5, 2012 Meeting

Department of Social Services Secretary Kim Malsam-Rysdon reviewed the minutes from the previous meeting and provided updates on some of the discussion topics. She reminded the group of the consensus to hold all meetings in Pierre. One of the issues discussed at the last meeting was the topic of a proposed \$1,000 limit on non-emergency, adult dental services. A request was made for information on the number of dental services recipients in State Fiscal Year 2011. (An exhibit is attached to these minutes.) Kim also commented on the complexities of the issue regarding the Affordable Care Act's prohibition of co-payments for Native Americans. Staff has reached out to CMS several times for guidance, and researched what other states have done in assuring that the statute is implemented correctly. Indian Health Services has been exempted from co-payments for several months. We will plan to conduct a presentation on the extended implementation to other service providers regarding Native American co-payments at the July meeting.

In response to a question from Beverly Tuttle concerning possible State responses to ramifications or fall-out from the Affordable Care Act lawsuit, Secretary Malsam-Rysdon stated the State is watching the case closely, but as of yet no plans are being made to implement alternative actions. The case is very complex and the ACA so broad, it's just too early to make such plans yet.

IV. Update on Medicaid State Plan Amendments

Mark Zickrick gave information on status of a number of State Plan Amendments. (A summary document is attached to these minutes.)

Tribes were reminded that they have a 30-day comment period after notification. The State would like to receive suggestions on how to encourage more tribes to comment and if there are better ways to notice Tribes on the State Plan amendments.

V. Status of IHS Increased Revenue from Medicaid

Dayle Knudson provided information on the results of increased Medicaid revenue for IHS. She stated that the pharmacy in Pine Ridge has been able to expand its hours of operation already, and that plans are being made for increasing hours of service in Rapid City, Sisseton, Wagner, Rosebud, and Eagle Butte. The expanded coverage is to have clinic and pharmacy open until 8 p.m. in the evening with a dedicated emergency room pharmacist.

It was noted that that IHS and Medical Services holds month telephone conferences to discuss billing issues. There was a request to have an update of the report on the amount of funds that Indian Health Services is receiving from Medicaid at the next meeting. This report should also compare the information to the previous report.

VI. Update on Behavioral Health Workgroup

Deputy Secretary Amy Iversen-Pollreisz provided an update on the Behavioral Health Workgroup, its guiding principles and goal areas, and the changes made by the 2012 Legislature. A goal of the workgroup is to seek better access to mental health services and reduce obstacles to the Tribes' becoming their own providers. The Department's and workgroup's strategic plan focus is on more self-sufficiency among the Tribes with regard to services for members. IHS is now participating in discussions with the workgroup. The Tribes will bring a proposal back to the July meeting on identifying tribal needs, possible solutions to consider, how the court system should work with the process, and what the limitations are.

Deputy Secretary Lynne Valenti gave an update on Senate Bills 14 and 15 enacted by the 2012 Legislature that made significant reforms in mental health services and access.

VII. Medicaid Solutions Workgroup Recommendations Update

Secretary Malsam-Rysdon provided updates on the Medicaid Solutions Workgroup's Recommendations, beginning with activities in the area of managing care for people with expensive conditions. New Medical Services staff member Kathi Mueller will be working in this area and with Managed Care. The next meeting of the Health Homes Workgroup will be June 11 in Pierre. The Department also published a Request for Information to

investigate the feasibility of switching to a different managed care arrangement. Sonia Weston, Cecilia Fire Thunder, and Deleen Kougl volunteered to be included in future meetings of the Home Health Workgroup. Urban Indian Health is applying for funding for a patient-centered health home.

In the pharmacy benefits area, the Medicaid Solutions Workgroup recommended a slightly higher co-payment for brand name medicines (from \$3 to \$3.30) and \$1 co-payment for generic drugs, which was adopted by the Legislature and incorporated in the SFY2013 appropriation act. The Legislature also adopted an inflationary increase for Medicaid pharmacy providers of one-half percent. Finally, the Department published a Request for Information from preferred drug list providers so will be studying the feasibility of adopting a preferred drug list for Medicaid recipients.

The Medicaid Solutions Workgroup is also discussing an Emergency Room Diversion program to keep people out of the emergency room when other services are available.

Another topic of discussion by the Medicaid Solutions Workgroup was home and community-based services for Medicaid recipients. The Department has obtained funding from the federal Money-Follows-the-Person Grant program to be used by a program at the Human Services Center. The Workgroup is also continuing to evaluate a domiciliary model of care for mental health patients. Sonia Weston requested more information about Home and Community Based Services from ASA.

Lynette Lessicester-Huber asked whether and how fitness centers can participate as Medicaid providers under the Department of Health's program involving prescriptions of exercise. Some research needs to be done to determine whether and which Medicaid providers may be able to participate in this.

VIII. IHS Public Health Nursing Update

Dayle Knudson provided an update on the IHS-public health nursing project. She stated that the policy work has been completed, and that CPT code billing sheets, note templates, and a training program are being developed. Wagner was selected for a pilot project, and there is interest from Cheyenne River Sioux Tribe for a pilot site at Eagle Butte. South Dakota has been working to make the necessary system changes to accommodate PHN billing program. All changes have a target date of implementation of July 1st.

IX. Introduction to Electronic Health Records Incentive Program

Chief Financial Officer Brenda Tidball-Zeltinger provided an update on the Electronic Health Records program. Eligible medical professionals and entities have been enrolling and developing their systems and attesting to meaningful use of electronic health records. The State has sent incentive payments to providers. The program is moving to a phase of outreaching to IHS servicing professionals to enroll in SD Medicaid/

X. SD Medicaid Primary Care Case Management Program—Recipient Handbook

The Tribal Consultation Group began a discussion of the “Recipient’s Manual” and what more or better could be done to provide needed information to recipients. Methods suggested as ways to inform recipients included purchase of half-page ads in newspapers read near the reservations and placement of public service advertisements on reservation radio stations. It was also encouraged to review the reading level on the document. Tribal members need to understand the process for referrals. Secretary Malsam-Rysdon and Kathi Mueller encouraged the group’s members to email suggestions to Kathi Mueller. (Kathi.Mueller@state.sd.us)

XI. Tribal Reports (From Members Present)

- a. Cheyenne River Sioux Tribe—The Tribe has been making progress on identifying more payers for its mental health programs.
- b. Oglala Sioux Tribe—The Tribe has been working on improving its place of sovereignty in the child welfare and placement process. The Tribe’s agency stresses family strengthening through sharing and education in cultural traditions and ceremonies.

XII. Next Meeting—July 12, 2012

Deputy Secretary Lynne Valenti commented on the First Lady’s Infant Mortality Task Force and use of the Centering Pregnancy model of improving birth-related services for mothers. The program is showing success and gaining acceptance among the various providers of birth services.

Topics to be addressed at the next meeting:

- A report by Delta Dental of South Dakota on a grant they recently received to improve dental access;
- Comments by Delta Dental on recent licensure rules changes promulgated by the South Dakota Board of Dentistry;
- Implementation of the prohibition of co-payments for Native Americans;
- An update on electronic health records program payments;
- Materials and strategies for outreaching to recipients

- Long Term Care Placement and Services
- Adult Services and Aging services and access to these services
- Report on IHS Revenue from Medicaid; and
- Tribal Report on Behavior Health Strategies.

Dr. Matt Stricherz complimented the Department on the transition of the Human Services Center to DSS and the quality of treatment there and their efforts to outreach to all the various parts of the state.

Elaine Martinez Allen addressed the group on frustrations she has had in being denied surgical treatment despite referrals from providers. Dayle Knudson commented that there is an appeal process for persons adversely affected by denials.

The following is a link to the Dental Providers in South Dakota that serve Medicaid Recipients. http://www.insurekidsnow.gov/state/southdakota/southdakota_oral.html

XIII. Adjourn—The meeting was adjourned at 3 p.m.