

South Dakota Department of Social Services
Medicaid Tribal Consultation Meeting
Thursday, April 10, 2014
10:00 a.m.—3:00 p.m. (CDT)
AmericInn
Ft. Pierre, SD

I. Welcome and Introductions

Kirby Stone, Director, Division of Medical Services, welcomed those in attendance. Kirby expressed her appreciation to everyone for coming.

II. Prayer

Webster Two Hawk led the group in prayer.

III. Review Minutes and Updates from January 9, 2014 Meeting

Minutes from the January meeting were distributed to the group via email and have been posted on the DSS Medicaid Tribal Consultation website. Kirby asked if there were any questions about the minutes and there were none.

Kirby announced that former DSS Cabinet Secretary Kim Malsam-Rysdon was invited to serve in Governor Daugaard's office and left DSS in March. Lynne Valenti, formerly the DSS Deputy Secretary, was appointed as the DSS Cabinet Secretary and Brenda Tidball-Zeltinger, formerly the DSS Chief Financial Officer has moved into the role of Deputy Secretary.

IV. Eligibility/MAGI update

Carrie Johnson, Director, Division of Economic Assistance, stated that the open enrollment period for the Federally Facilitated Marketplace ended March 31, 2014. The information transfer process between the federal marketplace and state of South Dakota has been completed and Economic Assistance has been working to process the more than 3,000 applications that were submitted to the marketplace since October and may potentially be Medicaid eligible.

Medicaid does not have an open enrollment period, so potentially eligible individuals can apply at any time.

Concern was expressed by some in attendance about the individuals who are not eligible for a tax subsidy through the federal marketplace but are also not eligible for Medicaid.

Individuals must file an application to request the exemption for shared responsibility needed for filing of taxes.

In response to a request for an update on the kiosk project, as of April 10, 2014 two applications have been submitted from the Lower Brule kiosk and two have been submitted from the Eagle Butte kiosk since the kiosks were placed in January.

The kiosks at Sioux San and Wagner are both scheduled to be in place by the end of April.

V. Medicaid State Plan Amendment Update

Ann Schwartz, Assistant Director, Division of Medical Services, provided an update of current State Plan Amendments (SPAs) (handout). There are four proposed SPAs in process. Three have been submitted to CMS and are in varying levels of review. The fourth has been distributed for Tribal Consultation and is posted on the DSS State Plan website.

VI. Legislative Update

Lynne Valenti, DSS Cabinet Secretary provided a summary of the legislative session that concluded in March.

Governor Dugaard submitted a letter to the U.S. Department of Health and Human Services (DHHS) Secretary Sebelius requesting that South Dakota be allowed to partially expand Medicaid to the group of people who are below 100% poverty but do not qualify for Medicaid. The Governor requested that this be done at the enhanced federal match rate available under Medicaid expansion. DHHS declined the first request. Governor Dugaard sent a second request in fall 2013 which included a work requirement, and DHHS again denied the request.

Governor Dugaard has indicated that the decision not to fully expand Medicaid is continually being evaluated.

DSS proposed minimal legislation this session. The two bills DSS proposed were clean up bills aimed at removing outdated language dating back to the 1930s.

One bill DSS opposed was a bill requiring drug testing for TANF recipients. There is no evidence that people receiving TANF benefits have a higher utilization of illegal substances than other populations. It would also be extremely costly for DSS to administer the drug tests with little anticipated return. The bill did not pass, but DSS expects a bill to the same effect will be introduced again during session 2015.

There was a bill limiting the right to purchase a firearm for those with a mental illness who have been involuntarily committed and assessed to pose harm to themselves or others. There is a process for people to petition to have their names removed from the list.

In his budget, Governor Daugaard recommended a 3% reimbursement increase for providers. This recommendation passed with some providers also appropriated an additional 0.3%. The rate increases will be effective July 1, 2014.

VII. ICD-10 Update

Lori Thompson, Assistant Director, Division of Medical Services, provided an update on ICD-10. In early April, the “doc-fix” bill was passed in Congress and signed by the President. Among other things, this legislation postponed the implementation of ICD-10 from October 1, 2014 to no earlier than October 1, 2015. DSS is awaiting further guidance from CMS regarding what this delay means.

VIII. Out-of-State Prior Authorization Update

Ann Schwartz provided an update on the out-of-state prior authorization requirement that was implemented for out-of-state inpatient hospitalizations in January 2014 (handout). DSS is currently testing the claims processing system to implement a similar requirement for out-of-state outpatient services.

IX. Health Home Update

Ann Schwartz provided an update on the Health Home initiative (handout). The Health Home Initiative was implemented July 1, 2013. DSS is currently in the process of reviewing the outcomes measure data submitted by Health Homes for the first six months of service provision.

There was a question about the collection of Outcomes Measures and if other Health Home providers experienced difficulty similar to the challenges I.H.S. faced due to the very manual process. DSS is in the

process of reviewing the data and will bring the outcome measures workgroup together to review and analyze the process.

Donne Keeler of Urban Indian Health expressed concern that Health Home continuity of care cannot be maintained as they cannot provide and be reimbursed for behavioral health services when they are provided the same day as another medical service. DSS committed to having internal discussion on the topic and providing feedback directly to Donna.

X. Non-Emergency Medical Transportation

Shanna Peterson from the office of Title XIX Non-Emergency Medical Transportation (NEMT) presented information about NEMT reimbursement, people who are eligible for reimbursement, what is reimbursable, and how the reimbursement process works (PowerPoint slides).

XI. Money Follows the Person

Ann Schwartz presented a new DSS initiative, Money Follows the Person. Money Follows the Person is a federal demonstration grant aimed at helping those living in institutional settings such as nursing facilities transition back to the community (PowerPoint slides).

XII. Quarterly report of tribal Medicaid expenditures

The reports were distributed (handouts). No discussion.

XIII. Tribal Reports (from members present)

Jenny Jeffries asked how social workers, behavioral health workers, nurses and other types of providers who transport patients to appointments can be reimbursed for transportation expenses.

Each situation is different and we encourage providers to consult with the NEMT office as situations arise. There are a variety of factors to consider, including is the staff member using their private vehicle or are they using a vehicle provided/owned by the clinic? If the staff member is taking their private vehicle did the facility pay or reimburse for the fuel? When an organization assists with travel we prefer to reimburse the facility directly opposed to submitting payment to the recipient to ensure the facility is properly reimbursed. NEMT can be reached at 1-866-403-1433.

- XIV. Next meeting – July 10, 2014 at the AmericInn, Ft. Pierre at 10:00 a.m.
- XV. Adjournment.