
Health Care Solutions Coalition Update

Medicaid Advisory Committee
November 15, 2017

CMS Policy Change

February 26, 2016: HHS changed national Medicaid funding policy to cover more services for IHS eligibles with 100% federal funds.

- More services now considered provided “through” IHS.
- No longer limited to services provided in IHS facilities only.
- May apply to more than specialty care services, including transportation, pharmacy, hospital and long term care services.
- Maintains IHS responsibility to provide health care to American Indians.

100% Federal Funding Policy Requirements

1. Participation by individuals and providers must be voluntary.
2. Services outside IHS must be provided via written care coordination agreement.
3. IHS must maintain responsibility for the patient's care.
4. Provider must share medical records with IHS.

Implementing New Federal Policy Requires Changes

Providers:

- Sign care coordination agreements with IHS;
- Share medical records with IHS.

IHS:

- Sign care coordination agreements with providers;
- Maintain responsibility for patient care;
- Accept medical records.

State:

- Track care coordination agreement status and ensure appropriate billing.

SDHSC Recommendations / Next Steps

- ❑ Savings leveraged will be used to fund several previous coalition recommendations that would increase access to services including:
 1. Cover substance abuse treatment for adults currently eligible for Medicaid (current coverage limited to adolescents and pregnant women) – Estimated 1,900 people
 2. Develop a Community Health Worker program in Medicaid with capacity to serve up to 1,500 people

SDHSC Recommendations / Next Steps

3. Add Medicaid eligible behavioral health and substance use disorder providers. Estimated impact 465 people
 1. Licensed marriage and family therapists
 2. CSW working toward PIP and LPC working toward MH providers
4. Innovation grants for primary and prenatal care
5. If there are additional savings available after these items are funded: uncompensated care/shared savings with providers, including Indian Health Service.

SDHSC Recommendations / Next Steps

- Alternative Service Delivery Model
 - Sub-groups actively working the past two years on alternative service delivery model.
 - Model would utilize federally qualified health centers (FQHC) to increase primary care capacity to Medicaid recipients.
 - Draft Medicaid waiver developed.
 - Group will meet again in October to identify any needed changes and next steps.