

Community Based Providers Shared Savings Workgroup
Wednesday, March 28, 2018 1:00 – 2:00 p.m.
Governors Large Conference Room

Present: Sarah Aker, Lynne Valenti, Gloria Pearson, Kim Malsam-Rysdon, Kelsey Smith, Brenda Tidball-Zeltinger, Virgena Wieseler, Yvette Thomas, Darryl Millner, Jim Severson

Via Phone: Sheila Weber, Rep. Wayne Steinhauer, Denice Houlette, Bill Snyder, Dan Cross, TJ Stanfield, Tony Erickson, Mark Deak, Melony Bertram, Rep. Jean Hunhoff, Brad Saathoff, Marty Davis, Clint Graybill, Deb Fischer Clemens, Mark Limberg, Sen. Deb Soholt, Delores Pourier, Scott Duke, Corey Brown, Tim Rave

Kim welcomed the group, explained the major part of the agenda is related to Kathy Bad Moccasin and follow up with Indian Health Services (IHS).

Kim reviewed the last meeting minutes as several people were unable to attend the last meeting. High points from the meeting minutes include:

- Care Coordination Agreement:
 - Is signed at the highest system level;
 - IHS is required to refer the individual participant;
 - Medical records sharing is a requirement; it is going well with existing partners;
 - Care Coordination Agreement is firm and not available for edit.
- Shared Savings Agreement:
 - Agreement between the State and providers;
 - First \$3 million in general fund savings will be reserved for implementation of new Medicaid programs;
 - A tiered system has been developed to share savings in excess of \$3 million with providers in a proportionate way;
 - Brenda Tidball-Zeltinger shared that feedback was requested on the Shared Savings Agreement from the Health Care Solutions workgroup and we also welcome feedback from this group. To date no feedback has been received from this group. The agreement should be finalized in a week or two.
- Financial Modeling:
 - Meeting included a review of Medicaid claim data on the last IHS visit for participants, sorted by setting (community support providers CSP, nursing facility NF, and Psychiatric Residential Treatment Facility PRTF);
 - Location of current providers (CSP, NF, PRTF) in relation to IHS facilities;
 - Referral process; how they work today – review was provided by Department of Human Services (DHS) and Department of Social Services (DSS) staff.
- Follow up items from last meeting:
 - DHS and DSS will prepare a table of routinely available documents and information that are currently collected for the level of care/eligibility process;
 - Kathy Bad Moccasin will confer with IHS Medical Director regarding what IHS would consider required elements to create a referral.

Kim asked if there were any questions from the members regarding the last meeting or minutes.

Question: Regarding the Care Coordination Agreement, what does the transfer of information back to IHS at 30 days include? This will look different depending on the service; for example, nursing notes for nursing facility residents, monthly summary notes and reports for CSP and PRTF.

Question: What initial hand-off accompanies the patient? This is the referral for services process, which is the primary focus of this workgroup at this point.

Question: Do we have any data on services which have been referred but not followed up on? There is no data as referrals haven't happened for this group to date.

Kathy Bad Moccasin was planning to attend to provide feedback regarding her discussions with the I.H.S. team but was not able to join the call. Bill Snyder mentioned that he knew Kathy Bad Moccasin and Ed Chasing Hawk met with the IHS Medical Director on Jan 26 and again 6 days ago, but didn't have information on the outcome of those conversations. Kim reviewed the table that was prepared for IHS and asked for feedback from members on additional information that should be included. Hearing none, the group moved to next steps.

Next Steps:

State team will pursue follow up with IHS regarding the outstanding questions:

- Is a file review adequate for their referral process
- Would a telehealth visit meet their requirements
- Is there any other information IHS needs from the State so we can work to develop a referral process that meets the needs of IHS

Next meeting date. A meeting will be scheduled at the end of April with the option for either in-person or call in.