

**Community-Based Providers Shared Savings  
Workgroup Thursday, July 18, 2019  
10:00 am- 11:00 am (Central Time)  
Kneip Building, Pierre**

**Present:** Melissa Klemann, Shawnie Rechtenbaugh, Brenda Tidball-Zeltinger, Bill Snyder, Yvette Thomas, Sarah Aker, Senator Wayne Steinhauer, Denice Houlette, Jodi Smith, Bernie Long, Tatiana Johnson, Deb Fischer-Clemens, Terry Dosch, Sakura Rohleder

Via Phone: Mark Limberg, Tim Rave, Representative Jean Hunhoff, Brett Hoffman, Clint Graybill, Gil Johnson, Marty Davis, Amy Witt, Darryl Millner, Andi Ferguson, Paul Hubbeling, Anthony Erickson, Natalie Holt

Melissa Klemann welcomed everyone and asked if there were any questions or comments on the minutes from the last meeting held on June 11, 2019. There were none.

**Updates on Progress and Developments Since Last Meeting:**

**Nursing Homes:**

- Yvette Thomas reported that a Care Coordination Agreement (CCA) has been sent to Legacy Healthcare who has taken over the Black Hills Receiver locations.
- Yvette mentioned that the biggest obstacle right now for nursing home payments is not having the physician National Provider Identifier (NPI) number on the nursing home claims in order for the claims to pay with 100% FMAP. A lot of claims are coming in with the facility NPI number instead of the physician NPI. Deb Fischer-Clemens stated that there seemed to be conflicting information on the original letter that was sent to providers as to which NPI to use. Avera was using the IHS facility NPI instead of the IHS physician NPI number on many of their claims. There also needs to be some discussion with IHS because it doesn't matter if the original provider is no longer providing care the nursing home still needs to use the NPI from the referring physician. Bernie Long from IHS stated that IHS would need to discuss this issue because that is not how it is done now. Sarah Aker mentioned that they did have a discussion about that when they visited Rosebud. Sarah also stated that some claims had a nurse NPI on them instead of the physician NPI but nurses are not enrolled in Medicaid. The claim has to have the NPI of a physician, nurse practitioner or physician's assistant. Brenda Tidball-Zeltinger pointed out that as part of the process the State is working on, in the future the IPA nurses will facilitate who the referring physician is from IHS and the IPA nurse will be the central contact for these issues in the future. IHS is looking at getting the IPA nurses access into their system for this purpose.
- Sarah asked if it would be helpful for the IPA nurses to meet with Avera and Sanford to get familiar with their procedures? Deb stated she would like that but would like to have their internal processes fully in place prior to a visit.
- Sarah mentioned that when they met with IHS in Aberdeen on Tuesday that they discussed tele-health opportunities and would like to pilot that at one facility to get an idea of how it could work. Deb stated that the Avera facility in Irene might be a good place to start because it is small but has many IHS patients.

**Psychiatric Residential Treatment Facilities (PRTF):**

- Sarah reported that they had been to Rosebud several times in the last few months. Jodi Smith,

the newest IPA nurse, met with Dr. Kalm in Rosebud and discussed several current clients in addition to one new client. Dr. Kalm is an IHS pediatrician in Rosebud.

- Andi Ferguson stated there were 3 referrals from Ft. Thompson at Black Hills Children's Home and 4 referrals pending from Lower Brule. Rosebud has 2 referrals and a 3<sup>rd</sup> is pending. Bill Snyder pointed out that all of the PRTF referrals were done in late June so claims have not yet been submitted.

#### **Community Support Providers (CSP):**

- Darryl Millner reported that the remaining CSP Care Coordination Agreements have been approved by the IHS legal team and are now pending a clinical review. CCI in Winner has referrals for all 25 of their eligible participants and continues to share medical information with IHS in Rosebud on a monthly basis. New Horizons in Watertown is still struggling to get referrals from Sisseton.
- DHS met with the IPA nurses this week to discuss CSP services. DHS is planning for the IPA nurses to go to CCI in Winner to learn more about the process.
- Sarah mentioned that they had a good meeting with IHS on Tuesday in Aberdeen regarding the pending CCA's with the remaining CSPs. Bernie Long stated there are specific requirements with these agreements and it must be a service that IHS is authorized to do so it will need to be reviewed by the medical providers. Natalie Holt, who works with Dr. Lawrence, will be having a discussion with clinical directors and remote management about the process and answer some questions. Sarah also mentioned the possibility of mid-level providers to assume some of this workload. Sarah stated that draft job descriptions for a physician's assistant and a nurse practitioner, as well as a scope of work were shared with IHS this week.

#### **IPA Update:**

- Sarah reported that DSS is hoping to have the IPA agreements routed to IHS by the end of the month. Andi Ferguson has passed her background clearance and is now able to begin work in Pine Ridge. Jodi Smith is on board as well and is waiting on the background clearance. The position in Eagle Butte is still open but an interview is being conducted tomorrow and they are hopeful to have it filled soon. At this time there is no plan to have an IPA nurse for Ft. Thompson, things have been working well with existing staff at Ft. Thompson.

#### **Savings Report and Shared Savings Update:**

- Bill Snyder provided an overview of the Shared Savings report (see packet). In addition to the breakout by type, a column with the number of unique recipients has been added to the report. The total savings for FY19 is just over \$8.4 million. Brenda added that next month they will include the unique recipient numbers per month and per year. They will also add target numbers to the report for next fiscal year.
- Deb asked about the Swing Bed numbers on the report and how would those numbers would be identified. Brenda stated we haven't worked out exactly how to capture this category but the provider NPI would be crucial for this identification. Sarah and Yvette pointed out that we might be able to use the DHS Level of Care and PASRR process to identify people in swing beds. Bernie pointed out that this would normally come from a hospital stay that would be billed under a facility NPI not a provider/physician NPI, so this would involve developing another process to track.

#### **Innovations Grants:**

- Yvette Thomas gave an update for the Nursing Home Innovation Grants. There were

approximately \$9.8 million in requests. DHS is almost done evaluating the applications and hopes to have award notifications out by mid-August. There were a wide variety of proposals submitted but the common themes were updating nurse call systems/alarms to make them less intrusive and create a more pleasant environment, expanding continuum of care and specialty units, and several requests to expand E-Care/tele-health systems. Several of the requests include a match from their foundation or community.

- Brenda Tidball-Zeltinger gave an update for the Primary Prenatal Care Innovation Grants. Between the 4 proposals submitted, they are asking for more than double the amount of funding that's available. Within the proposals are some opportunities for Medicaid billing today that are maybe being missed. DSS hopes to narrow down the proposals and make final awards by the end of this month.

**Next Steps:**

- Work with providers and IPA nurses to tighten up processes.

**Next Meeting Date:**

- August 22, 2019 from 10:00-11:00 AM Central Time.