

Community-Based Providers Shared Savings Subgroup
October 4, 2018
9:00 a.m. - 10:00 a.m. (Central time)
Governor's Large Conference Room,
Pierre

Members Present: Kim Malsam-Rysdon, Gloria Pearson, Lynne Valenti, Andrew Riggan, Tim Rave, Marty Davis, Clint Graybill, Darryl Millner, Yvette Thomas, Brenda Tidball-Zeltinger, Bill Snyder, Gail Thomas, Sarah Aker

Via Phone: Melony Bertram, Virgena Wieseler, Kathaleen Bad Moccasin, Anthony Erickson, Dan Cross, Mark Deak, Mark Limberg, TJ Stanfield, Amy Witt, Corey Brown, Deb Fischer Clemens, Denice Houlette

Kim Malsam-Rysdon welcomed everyone to the meeting and shared that Kelsey Smith delivered her baby last week. Sarah Aker will be handling coalition and workgroup communications during Kelsey's leave. Kim provided a review of the August 29, 2018 meeting minutes. There were no questions or updates to the minutes.

Medicaid Provider Portal Demonstration

Bill Snyder introduced Gail Thomas, Assistant Director of Medical Services, to present information on the DSS online portal. Gail stated DSS continues to add more information to the portal, but will provide an overview of information currently available.

In the eligibility section, individuals with access can search up to five recipients at one time. The easiest way is with the individual's Medicaid ID number, but a person can also search via last name, Date of Birth (DOB) or Social Security Number (SSN). Retroactive eligibility can be found through the portal as well as Indian Health Services (IHS) data. Functionality allows a person to look up recipients individually, or as a group of individuals. The Department of Social Services has staff available through the Telephone Service Unit (TSU), Monday through Friday from 8am-5pm, to assist callers with the website. The portal is available to check eligibility after regular business hours.

There are over 6,000 individuals signed up to access the portal with different levels of access; i.e. administrator, staff member. The Department continues to educate people about the availability of the website and then benefits of accessing the portal. Kathy Bad Moccasin asked if the portal indicates participation or eligibility for IHS services, and if so, how it is indicated yes. Gail responded that the portal will indicate IHS participation; 1) when a recipient applies they indicate whether they have utilized IHS services and 2) the system maintains a record of service from IHS through claims. Kathy mentioned that non-Indian pregnant females may have Temporary Eligibility for IHS services; these individuals may need to change back to "No" after completing the pregnancy.

Gail reviewed recent enhancements, including the communications portal which allows providers to submit appeals for reviews and requests through the portal. Gail reviewed the process to become a member of the portal, including that, within the next year, they hope to have the ability to submit claims through the portal for providers that don't currently have the ability to submit electronic claims. Gail indicated that anyone could contact her if they have additional questions and can email dsonlineportal@state.sd.us if they are interested in gaining access to the portal.

Many workgroup members indicated they are interested in gaining access and mentioned how helpful this will be for providers to get started in determining eligibility for the individuals they provide services to. Identifying which service unit the individuals has been associated with would be very helpful; having an additional step beyond Yes/No would be helpful. Gail responded that the view screen will list the primary care provider which may be a helpful starting point.

Deb Fischer Clemens mentioned that it is difficult to get the information they need if the last encounter was 5 or more years past. Kim asked Kathy Bad Moccasin if she had any thoughts on how to learn this information. Kathy responded that some patients access multiple locations; she will think on this and confer with Bernie and others to see if they have a way to look within the IHS system. DSS has claims history which might help in trying to think of possibilities to build into placement or Level of Care prospectively.

The group talked through the barriers with making referrals so far; it would be ideal to have a centralized resource. Logging into 13 different databases is time consuming; a suggestion was made to submit list one time daily or even weekly in order to limit the time. Deb Fischer Clemens mentioned that have been working individually with a case manager and it has been going well; Kathy Bad Moccasin shared that not every site has a designated case manager.

Updates on Progress and Developments since Last Meeting

- Deb Fischer Clemens gave an update on the referral process Avera; they can generate the referral but still need to work out the communication process. The success of this hinges on how the communication process will work in identifying IHS recipients. For a resident affiliated with Ft. Thompson Avera was able to provide the Continuity of Care Document (CCD), IHS received the document and generated a referral. This electronic process seems to work but they are still fine tuning the terminology on the CCD. They also met with Bernie Long and showed how the CCD is generated and everyone was in agreement that the information contained in the CCD is all that is needed to complete the referral. Deb indicated that after they generate the CCD, it is sent to the case manager. Kim identified we need to know the service unit and the point of contact for the service unit. Deb mentioned it would be difficult without knowing the case manager as well.
- Corey Brown with Sanford gave an update on their progress, stating their experience was very similar to what Deb described. Sherry Lulf has been working with the Chamberlain facility and was able to make one referral for a Ft. Thompson resident).

Corey indicated that having someone at the service unit who understands the process is key to this being successful.

Tim Rave added that it also became apparent they would simply not get some residents to consent because of a variety of reasons; they are unable to respond or are non-verbal. Lynne Valenti asked who is providing consent for treatment for these individuals and added that if they have a Power of Attorney (POA), that person could consent to the referral instead of the resident themselves. Corey said he would have to check with Erica to answer that question. It was asked how it works if the person doesn't have any family, who would be the POA potentially? Kim responded that these residents will have to be reviewed individually. Yvette Thomas mentioned that it may be worth checking with the tribe for these individuals as they do keep track of tribal members and may be able to help, in addition to wanting to know what is happening with the individual. She indicated they would likely be very happy to get the call from the healthcare agencies.

- Yvette gave an update on the nursing home referral process for other facilities. Yvette reported she would be meeting with Andrew today to review the list he has. She is also reaching out to Dr. Frei with Sioux San, Rapid City and hopes to meet with them later in the month. She also has set up a time with Black Hills Receiver to discuss referrals.
- An update on Psychiatric Residential Treatment Facilities (PRTF) was provided. Virgena Wieseler reported she had a call with Dr. Lawrence and staff from Medical Services. Dr. Lawrence will consult with Captain Williams to provide them with a designee at IHS to potentially sit on the State Review Team. They are going to start with a focus on new referrals. Bill Snyder commented that he thought it was a very promising discussion and thinks they can get it going pretty quickly. Brenda Tidball-Zeltinger thought this would be helpful in streamlining the process.
- Darryl Millner gave an update on the work being done by the Community Support Providers (CSP) group. Darryl and Gloria Pearson met with all CSPs across the state and reiterated the importance of this initiative; Darryl reported this has already started paying off. The CSP provider in Lemmon has already received a referral from IHS. Darryl has a meeting scheduled with Rosebud/Dr. Hill on October 10th to discuss CSP services and how to create a formal referral process. The Care Coordination Agreement (CCA) template was sent to all CSPs. Watertown has completed the CCA and sent it to Sarah Aker. Gloria asked if there is a single point of contact for Community Support Providers within IHS, indicating this would make a lot of sense. Kathy Bad Moccasin mentioned that Bernie Long would be speaking with Dr. Lawrence about this topic since Dr. Lawrence has been more actively involved recently.

Next Steps

- Creating an IHS point of contact for the referral process for each provider type.
- Develop financial forecasting.

- Governor Daugaard has a meeting scheduling with James Driving Hawk, Acting Director of the Great Plains Area Agency on Oct. 17 to review the progress on this initiative so far and to discuss ways to partner to move the initiative forward.
- Kim reminded workgroup members to watch for meeting minutes and the next meeting invitation from Sarah Aker.

Next Meeting Date

October 31st, 2018

10:00 a.m. - 11:00a.m. (Central time)