

Washington State  
Health Care Authority

# Medicaid Monthly Meeting

October 28, 2015  
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Office of Tribal Affairs

# Agenda

1. Analytics, Interoperability, and Measurement (AIM)
2. Electronic Health Records Incentive Program
3. Medicaid Transformation Waiver - Update
4. Joint Agency-Tribal Summit on Health Reform - Update
5. Upcoming Roundtables and Consultation
6. Miscellaneous
  - Upcoming HCA Tribal Affairs Meetings
  - Status Updates Since August 26, 2015
  - State Plan Amendments and Waiver Amendments Since August 26, 2015



# Welcome

Last M3 held on August 26

I apologize for having to cancel September's M3 because of jury duty

# Healthier Washington: Analytics, Interoperability, & Measurement (AIM)

# Healthier Washington



Building healthier communities through a collaborative regional approach

Ensuring health care focuses on the whole person

Improving how we pay for services

# AIM and Healthier Washington

Why is data so important for good policy and such an important piece of Healthier Washington?

- With our Healthier Washington initiative, we are working to achieve the triple aim: Better health, better care, lower costs.
- We are implementing value-based purchasing strategies to deliver the triple aim.
- We are implementing population health strategies to improve health.
- We need to know whether and how our strategies are improving health, care and costs.

# AIM Goals

- Washington state agencies will collaborate with public and private sector partners to address long-term needs for integrated health data management solutions, services and tools.
- Ensure purchasing policies are data-driven, focused on clinical quality, population health.
- Develop new data capabilities and technical assistance to support community population health management and local public health needs.
- Create a comprehensive data infrastructure across state agencies that:
  - Brings together multiple streams of data to create new knowledge
  - Provides the opportunity for shared analytics to reduce health disparities through data-driven, population-based initiatives.
  - Enables rapid-cycle measurement of results
- Invest in a flexible, dynamic, unified health data system that will provide business intelligence and shared analytics capabilities for the state over the next 10-15 years.

# AIM Key Elements

- Make targeted investments to standardize clinical information, integrate data across health delivery and social service systems.
- Enhance the State Health Information Exchange (HIE) services that will operate as a shared community asset.
- Build an advanced analytics platform to leverage big data technologies and an open data platform.
- Incorporate business intelligence disciplines, including qualitative and quantitative research methods and other areas of study such as economics and epidemiology.
- Develop mapping and hot spotting tools to support health disparities interventions and community-based health improvement.



# AIM Outcomes

- Engagement of the ACHs, tribal governments, and other public and private sector partners.
- Extensible and adaptable data architecture
- Interoperable data system across state agencies
- Established data governance, privacy, and security structure and processes
- Business intelligence and shared analytics delivery and support capability
- Structure to support evidence-based approach to innovation and improvement

# Next Steps

The State looks forward to working with our Tribal partners on the development of AIM as a Healthier Washington initiative.

Next steps include:

- Planning communications with tribal partners about AIM development updates and milestones.
- Collaborative work between the AIM project team, ACH team and Tribal Affairs office to keep information flowing.
- Soliciting feedback and answering questions on the initiative:
  - Which may be through a Tribal workgroup, such as the data-focused Tribal workgroup being formed.

# Electronic Health Records (EHR) Incentive Program

# Electronic Health Records (EHR) Incentive Program

## System Updates

Our eMIPP attestation application vendor is doing an analysis on system functionality in coordination with the new rule. We will keep you updated on when the system changes have been completed and you are able to come in and attest.

# Electronic Health Records (EHR) Incentive Program

## Public Health Reporting

Question: For 2015, how should a provider report on the public health reporting objective if they had not planned to attest to certain public health measures? Is there an alternate exclusion available to accommodate the changes to how the measures are counted?

[PublicHealthFAQ#12985](#)

# Electronic Health Records (EHR) Incentive Program

## **CMS Final Rule:**

Only AIU and First year providers can come in prior to the comment period end date of Dec 15<sup>th</sup> 2015.

**2015:** Attest to modified criteria for 2015-2017 (Modified Stage 2) with accommodations for Stage 1 providers.

**2016:** Attest to 2015-2017 (Modified Stage 2) criteria

**2017:** Attest to either 2015-2017 (Modified Stage 2) criteria  
**OR** full version of stage 3

**2018:** Attest to full version of Stage 3

# Electronic Health Records (EHR) Incentive Program

## Resources

**Website:** [www.hca.wa.gov/HealthIT](http://www.hca.wa.gov/HealthIT)

On the left side, hover over **LIBRARY AND TRAINING RECOURCES** and choose **ELECTRONIC HEALTH RECORDS LIBRARY**

Look under **ELIGIBLE PROVIDERS** (Including Specialists and Dentists)

Click on these links:

Click on "**EP AIU AND MU eMIPP USER GUIDE 2014**"-(step-by-step process)  
and/or the **PATIENT VOLUME WORKSHEET** (tool for you to gather your numbers)

These will walk you through the basic process.

Please see our other training tools and resources on our website.

**eMail: HealthIT@hca.wa.gov**

# Electronic Health Records (EHR) Incentive Program

## Webinar Requests?

If your clinic has a topic of interest you would like covered in a brief webinar, please send us an email at [HealthIT@hca.wa.gov](mailto:HealthIT@hca.wa.gov)

Please click on the link below for a brief survey for HCA EHR/Health IT Staff

<https://www.surveymonkey.com/r/J2TXWX7>



# Medicaid Transformation Waiver

# Medicaid Transformation Waiver

- Application submitted on August 25
- Federal comment period ended on October 9
- Available at  
*[http://www.hca.wa.gov/hw/Pages/medicaid\\_transformation.aspx](http://www.hca.wa.gov/hw/Pages/medicaid_transformation.aspx)*
- Nothing to report from discussions with CMS
  - CMS is still coming up to speed

# Medicaid Transformation Waiver

The Medicaid Transformation Waiver Tribal Workgroup will be meeting on:

- November 20, 2015, Friday, 9 a.m. – 12:30 p.m.
- December 15, 2015, Tuesday, 9 a.m. – 12:30 p.m.

Location: 626 8<sup>th</sup> Avenue SE (Cherry Street Plaza)  
Olympia, Washington

# Medicaid Transformation Waiver

Topics for the November Tribal Workgroup meeting:

- CMS Discussions/Negotiations – Update (10 min)
- Timeline/Milestones for Waiver (20 min)
- Medicaid Transformation Projects
  - Toolkit drafting to meet project requirements (1 hr)
  - Coordinating entity requirements (1 hr)
- Long-term services and supports – Update (30 min)
- Supportive housing/employment – Update (30 min)

# Medicaid Transformation Waiver

If you would like to participate in the Tribal Workgroup and have not participated earlier, please let me know at

[tribalaffairs@hca.wa.gov](mailto:tribalaffairs@hca.wa.gov)

We will offer webinar or video conference access.

Any questions?

# **Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup**

# Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup

## Joint Agency-Tribal Summit

- Requested by Tribes during April 2015 DSHS Tribal Leader Summit

## Planning Workgroup

- Request for Tribal representatives to workgroup sent on July 16, 2015
- Objectives:
  - Plan the Summit agenda, protocols, and process to ensure that the Summit is effective
  - Plan the date, time, and location for the Summit

# Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup

## Planning Workgroup Meetings since last M3

- September 3, 1 pm – 2 pm
- September 10, 1 pm – 2pm
- September 10, 1 pm – 2pm
- September 24, 1 pm – 2 pm
- October 16, 9 am – 10 am
- October 23, 9 am – 10 am

## Next Meeting of Planning Workgroup

- November 6, 9 am – 10 am



# Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup

## Potential Dates:

- First week of January
  - Calendar did not allow for earlier dates

## Potential Locations:

- Focusing on places within 30 minutes of Olympia

# Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup

## Potential Topics:

- Behavioral Health
  - BHO Implementation (DSHS-BHSIA) and Fully Integrated Managed Care/Early Adopter Implementation (HCA)
  - Concerns from Tribal and non-Tribal substance use disorder treatment providers/agencies regarding BHO and Early Adopter implementations
  - Implementation of Adult Behavioral Health Task Force and Tribal Centric Behavioral Health Task Force Recommendations
  - Access to BHO services, Tribal DMHPs, Full faith and credit to Tribal ITA orders

# Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup

## Potential Topics:

- Children's Health
  - Coordination of foster care medical/foster care MCO, WISe, Children's Admin, and case management services
  - HCA, DSHS-CA, and Tribal ICW programs to discuss
- Data/System Initiatives
  - Need inventory of state data/system initiatives
  - Lack of AI/AN data or quality data in state data/systems
  - Behavioral health EHR challenges
  - Need Tribal data workgroup

# Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup

## Potential Topics:

- Medicaid
  - Access to care (primary/specialty care) in fee-for-service
  - ITU Referrals Deemed In-Network by MCOs
- Churning between Plans (Medicaid and QHPs)
  - Need more appropriate approach for AI/ANs than brokers
  - Healthplanfinder/MAGI Medicaid (HCA) vs. WA Connection/Classic Medicaid (DSHS)
- Long-Term Care/Money Follows the Person
- Foundational Public Health

# Joint Agency-Tribal Summit on State Health Care Reform: Planning Workgroup

If you would like to participate in the Planning Workgroup and have not participated earlier, please let me know at

[tribalaffairs@hca.wa.gov](mailto:tribalaffairs@hca.wa.gov)

We hold the meetings by telephone conference.

Any questions?

# Upcoming Roundtables & Consultations

# Miscellaneous

# 2015 Remaining HCA Tribal Affairs Meetings

## **Tribal Billing Workgroup (TBWG)**

Second Wednesday (\*unless noted)

9:00-10:00 AM

## **Medicaid Monthly Meeting (M3)**

Fourth Wednesday

9:00-10:00 AM

**November 12 (\*Thursday)**

**December 9**

**November 25**

**December 23**

**We plan to keep the same schedule for 2016:**

- **Tribal Billing Workgroup on the second Wednesday of every month**
- **Medicaid Monthly Meeting on the fourth Wednesday of every month**



# Status Updates Since August 26, 2015

Project	Status
PCCM	<b>Complete</b> - CMS approved SPA <ul style="list-style-type: none"><li>• Extends PCCM to Medicaid expansion clients since 1/1/2014</li><li>• Extends PCCM to non-AI/AN clients of I/T/Us</li></ul>
Presumptive SSI Claims	<b>Complete</b> - ProviderOne now paying I/T/U claims for substance use disorder services to non-AI/AN presumptive SSI clients
Medicaid Transformation Global Waiver	In preliminary discussions with CMS <ul style="list-style-type: none"><li>• Next Tribal Workgroup meetings on 11/20 and 12/15</li></ul>
Foster care medical and Tribal foster care	Preparing Dear Tribal Leader letter with draft HCA forms and draft process for CMS-required annual recertification

# Status Updates Since August 26, 2015

Project	Status
Joint Agency-Tribal Summit	Planning Workgroup meetings, with next meeting on November 6, 2015
Tribal Health Homes	Legislature funded Health Homes program through December 31, 2015 <ul style="list-style-type: none"> <li>• DSHS investigating alternatives</li> </ul>
MCO Payment of Wraparound Encounter Rate	Scoping changes that would need to be made to ProviderOne to enable
Forms for HCA Contracts with Tribes	Preparing form Indian Addendum for Core Provider Agreements
AI/AN Maternity Support Services (MSS) and First Steps	Medicaid reimburses community health representatives for case management
ACH-Tribal Engagement Technical Assistance and Tribal Meeting Facilitation	In negotiations with AIHC on contract terms

# Status Updates Since August 26, 2015

Open Item	Status
Federal Ownership Disclosure Requirements for I/T/Us	No update
Tribal Consultation on April 17, 2015	No update
MCO-Tribal Meeting on May 8, 2015	No update
Pilot of Mental Health Technical Assistance Review at Tribe	No update
Domestic Violence Perpetrator treatment and Medicaid coverage under Brief Intervention Treatment procedure	No update
Guidance regarding Tribal representation on ACH Governance Bodies	No update

# Status Updates Since August 26, 2015

Open Item	Status
CMS-Required Inter-Governmental Transfer Process	No update
Replies to AIHC briefing papers/questions	No update
Expansion of AI/AN exemptions from Medicaid estate recovery	No update
Amendment to HCA Tribal Consultation Policy	No update
Review of AIHC Medicaid eligibility materials	No update
Expansion of HCA resources on AI/AN eligibility	No update
IHS Services and Medicaid spenddown	No update
Tribal-State Data Workgroup	No update

# Medicaid State Plan Amendments (SPAs) and Waivers: Notices Since August 26, 2015

SPA#/Waiver# (Date of Letter)	Brief Description
DDA Home- and Community-Based Waiver Amendments (9/15/2015)	<p>This waiver amendment would implement the relevant provisions of Engrossed Substitute Senate Bill 6052, including:</p> <ul style="list-style-type: none"> <li>• Increase the capacity under the Basic Plus Waiver by 1,000 more individuals;</li> <li>• Increase the capacity under the Individual and Family Services Waiver by 4,000 more individuals;</li> <li>• Add wellness education as a waiver service;</li> <li>• Implement various changes in ProviderOne.</li> </ul>
BHSO 1915(b) Waiver (9/23/2015)	<p>This waiver application would implement the behavioral health service only (BHSO) benefit for the Fully Integrated Managed Care (FIMC) Regional Service Area (RSA) of Clark and Skamania counties. This benefit is analogous to the coverage provided by Behavioral Service Organizations (BHOs) but applicable only to Medicaid beneficiaries in the FIMC RSA.</p>
SPA 15-0040 (9/24/2015)	<p>This SPA is a regular update to the fee schedule for dental services.</p>

# Medicaid State Plan Amendments (SPAs) and Waivers: Notices Since August 26, 2015

SPA#/Waiver# (Date of Letter)	Brief Description
SPA TN15-0039 (9/29/2015)	This SPA would implement the Fully Integrated Managed Care (FIMC) benefit for Medicaid beneficiaries in Clark and Skamania counties. FIMC integrates the administration of physical health care, mental health care, and substance use disorder services under Medicaid managed care organizations.
BHO 1915(b) Waiver Amendment (10/9/2015)	This waiver amendment would implement the integrated administration of mental health services above the access-to-care standard and substance use disorder services under Behavioral Health Organizations (BHOs) in counties other than Clark and Skamania counties.



# Thank you!

## Office of Tribal Affairs & Analysis

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- Website: <http://www.hca.wa.gov/tribal/Pages/index.aspx>