

Connecticut
Medicaid Managed Care Council
Consumer Access Subcommittee
Legislative Office Building Room 3000, Hartford CT 06106
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www.cga.state.ct.us/ph/medicaid

Meeting Summary: June 30, 2004
Co-Chairs: Irene Liu Christine Bianchi
(Next meeting Wednesday July 28 at 10:30 AM in LOB RM 3800)

DSS Update

ü **Address Changes:**

- o Sue Greeno and Christine Bianchi had agreed to pilot the address change card that DSS had created prior to the dissolution of the central presumptive eligibility unit. Glendine Henry will check on the card format.
- o CHNCT plans to add all the regional office sites to their member post card. Approval pending from DSS, with whom CHNCT contracts for HUSKY services.
- o Assessment of the impact of the reminder card: 1) CHNCT will track response after their pilot is implemented, 2) ACS and CHNCT will provide baseline data, using an agreed upon time period, 3) the subcommittee will make recommendations to DSS that may include the interface of MCO change information with the EMS system after data is available.
- o Goal is to have pilots in place by September 1, 2004.

Addendum: Ellen Tracy was unexpectedly detained and could not attend the June 30th meeting. After the meeting, Ellen Tracy reported that the DSS change card format was agreed upon in DSS, but the actual tool was not produced upon the elimination of the central PE unit. The Department agrees that the CHNCT pilot is a good step, just needs Rose Ciarcia's approval of the form.

Action steps:

- Ø *Christine Bianchi, who has worked successfully with the Waterbury DSS regional office on this matter, will contact Sue Greeno and both will establish a pilot in collaboration with the DSS regional office in Ms. Greeno's area and the Waterbury office.*
- Ø *Staff will follow-up on approval of CHNCT process.*
- Ø *See above 3rd bullet for baseline information and tracking data collection.*

ü **DSS Human Service Infrastructure (HSI):** a DSS representative for the HSI was unable to attend this meeting. Ms Henry (DSS) stated one of the goals of the HSI initiative is to ensure clients have all documentation for application for the requested services that will be sent to the regional office. Three Community Action Program (CAP) agencies have piloted the program and that all 12 CAP agencies are expected to participating July 1, 2004.

Action Step: *staff will re-contact DSS HSI staff to arrange an overview presentation at a future*

CA SC meeting as well as to the Medicaid Managed Care Council.

Ü On-Line Medicaid & HUSKY Applications

Senator Harp has discussed this initiative with the Commissioner of DSS and Ms Liu. The CA SC work group was to put together ‘talking points’ for a meeting with the DSS (pending).

Addendum: Sen. Harp spoke further with the DSS Commissioner and with Ms. Liu. The Commissioner is interested in discussing this initiative further. The CA SC work group met with the co-chairs & DSS representatives July 16 to develop a document for the rationale and potential external/internal funding resources for on-line application pilots.

Action Steps:

Ø *The work group will complete the presentation for the Commissioner, which could be reviewed by the Subcommittee at the July 28th meeting.*

Ø *Senator Harp has arranged a meeting with the DSS Commissioner and her staff, the subcommittee co-chairs, Community Action Association and interested philanthropic organizations on August 5.*

Medicaid Presumptive Eligibility (PE) for Pregnant Women

At Sen. Harp’s request, CMS was contacted to identify states’ responsibility in implementing federal guidelines for Medicaid PE for pregnant women. While 1991 CT legislation required DSS to apply Medicaid PE for pregnant women, this did not become part of the Medicaid State Plan; therefore the State is not required to follow the federal guidelines. The CT DSS policy basically does follow the federal guidelines, however the infrastructure (i.e. identification of qualified entities) was not put in place and the implementation of the timely eligibility determination is, at best difficult, given the agency funding reductions, staffing reductions in the regions and the elimination of the central PE unit.

HUSKY MCOs were asked if the plan experienced enrollment delays of pregnant women.

Preferred One noted a significant % increase in women enrolling in their 3rd trimester during the 1st quarter 2004 compared to 2003 quarters. Other health plans did not indicate noticeable changes, at the June DSS/MCO meeting but may re-look at their data. There was discussion about getting a “snap shot” view of the late enrollments with Healthy Start programs using data from 1st quarter (Jan-March) 2004.

Addendum: reviewed the need for more descriptive data with Ellen Tracy (DSS).

Action Steps: staff has requested:

Ø *Regional Healthy Star programs, through Christine Bianchi, review their 1st quarter 2004 HS report to DSS, and provide Ellen Tracy of DSS with a spreadsheet with client ID, EDD of the pregnant women, geographic location, date of Medicaid application (Healthy Start does not have access to the EMS system to determine the date when eligibility is granted).*

Ø *Preferred One, through James Gaito, will provide the following information to DSS on pregnant women enrolled into POne for the 1st quarter 2004: client ID, EDD, date of membership in MCO, provider site and member’s address (zip code).*

Ø *Through Ellen Tracy, that DSS identify the following information for the eligibility category PO2 for the same time period 1st Q 04: client ID, EDD, coverage group, application date, effective date of Medicaid eligibility, system date when the DSS worker granted eligibility and town codes for the client.*

Transportation Policy by HUSKY Vendor

Christine Bianchi requested information from the MCO & their transportation vendors on how the type of transportation provided is determined (i.e. bus token, van, etc). Please see the transportation matrix for HUSKY A (page 3).

**HUSKY A TRANSPORTATION
Health Plan Responsibility
(Updated 3/03)**

(Give 48 hour notice prior to appointment date when arranging transportation with MCO)

MCO	CHNCT	BlueCare FP	Health Net NE	Preferred One (P-1)
Policy	CHNCT transportation vendor is <u>Coordinated Transportation Solutions, Inc. (CTS)</u> . *48-hour notice required *Urgent service available.	ABC FP provides services for HUSKY A through their vendor <u>Logisticare</u> .	Health Net provides transportation through its' vendor <u>Logisticare</u> *48- hour notice required. *Rides longer than 31 miles <u>require PA from member services</u> .	P-1 transportation vendor is <u>Coordinated Transportation Solutions, Inc (CTS)</u> . *Requires 48 hour notice, unless an emergency. *P-1 authorizes transportation for medically necessary services.
Process to Secure Service	Member/provider calls CTS @ 800 818-6781.	Provider or member calls BCFP for the service. BCFP confirms the appointment, connects caller to Logisticare.	Member/provider call 800-820-0210 to arrange transportation.	*Member calls vendor for ride @ (203) 736-8810 or (800) 818-6781. *Provider faxes service need to P-1 @ (203) 239-2474
Plan Contact Person; phone #	Member Services: Clarissa Cruz at (800) 859-9889	Provider: 800 828-2239 Member services: (800) 554-1707 #2	Vendor: (800) 357-2935 Member Services: (800) 820-0210	*Vendor (CTS) (800) 818-6781 *Member Services (800) 925-3606

Person to Contact with Problems	Member Services: Clarissa Cruz at (800) 859-9889	Providers call Susan Canning, Customer Service Manager: (203) 985-7177	Nicole Hanna at Member Services (800) 820-0210	Sarah Wearing, Transportation Coordinator (800) 925-3606 Ext 3137
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