Medical Assistance Advisory Committee
Wednesday, October 10, 2012

State Staff Attending: Vivianne Chaumont, Jeanne Larsen, Dr. Alan Nissen, Sarah Briggs

Members Present – Dr. Scott Applegate, David Burd, Joni Cover, Ed Erickson, Lynette Helling, Ron Jensen, Terri Melvon, John Milligan, Jina Ragland, Dr. Ed Schneider, Ricky Ann Trobaugh, Dr. Dale Zaruba

Members Absent – Dr. Joe Acierno, Mary Barry-Magsamen, Heath Boddy, Dr. Deb Esser, Natalie Torrez

Members Absent (Unexcused) – Brad Rasmussen

I. **Review of September 12, 2012 Meeting Minutes** – approved as written.

II. **Department Issues**

A. **MCO Marketing Materials** - Dr. Applegate asked if everyone really is invited to UnitedHealthcare health education sessions or if it means only UnitedHealthcare plan members. Ms. Chaumont will verify that information and let the Committee know. If it's accurate there is no problem. There were no other issues.

B. **Update on New Changes for EHR Incentive Payment Program** – Ms. Briggs distributed a handout detailing the changes in the Medicaid EHR Incentive Payment Program planned for January 1, 2013. These are pending CMS approval of our revised State Medicaid Health Information Technology Plan. She explained the changes in the Stage 2 meaningful use (MU) rule. Current providers are Stage 1. If anyone has questions or wants to discuss, Ms. Briggs' contact information is at the bottom of the handout.

C. **Budget** – Ms. Chaumont highlighted the budget issues affecting Medicaid, and then highlighted the modifications that relate to the Medicaid budget. The modifications could be used if we go to a 95% budget. The Department's proposed budget was filed September 15. The Governor's budget will be out in January.

At a future meeting, Ms. Chaumont wants to discuss managed care for long term services.

III. **Member Issues** – If there is anything you want to discuss at a MAAC meeting, send Ms. Chaumont an email.

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IV. **Other Issues –** Ms. Larsen discussed the new provider screening and enrollment requirements mandated by the ACA. It is designed to ensure excluded or sanctioned providers are not enrolled. A spreadsheet was provided showing the federal requirements states have to follow. This is for new providers signing on and for the most part, current providers are okay until their revalidation date. She also distributed copies of the draft of a Provider Bulletin that is due to be sent next week. Ms. Larsen will verify if the provider retro-enrollment practice ceases with those received October 1, 2012 and after, which is in Provider Bulletin 12-36. She said whatever forms are on our site have been updated.

The next meeting is Wednesday, November 14, 2012, at 5:30pm in Classroom 1 at the Lincoln Medical Education Partnership, 4600 Valley Road, Lincoln, Nebraska.

V. **Adjournment** – adjourned at 7: 10pm.

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