

Medical Assistance Advisory Committee
Wednesday, February 8, 2012

State Staff Attending: Susan Buettner, Ruth Vineyard, LaRue Cole

Members Present – Dr. Joe Acierno, Dr. Scott Applegate, Heath Boddy, David Burd, Ed Erickson, Dr. Deb Esser, Tami Frank, Lynette Helling, Terri Melvin, Natalie Torrez

Members Absent – Joni Cover, Ron Jensen, Dr. Ed Schneider, Ricky Ann Trobaugh

Members Absent (Unexcused) – Mary Barry-Magsamen, John Milligan, Brad Rasmussen, Dr. Dale Zaruba

- I. **Review of January 11, 2012 Meeting Minutes** – approved as written.

- II. **Department Issues**
 - A. **EHR Incentive Payment Program Update** (handout attached) – Ms. Vineyard said the launch date is May 7. Permanent staff hired to manage the program are LaRue Cole and Karen Cheloha. Their contact information is on the handout that was distributed. Sarah Briggs will oversee the program. Thirty-one hospitals have registered through CMS. We are working with a few hospitals testing calculations on Medicaid patient volumes. Our plan through May is to do education and outreach. We would like your input on how to get the word out. Please review the handout and give one of the two staff members listed your input. We could also discuss at the next meeting. Ms. Cole said the volume is counted according to paid claims.
 - B. **Provider Preventable Conditions** – will be on the March agenda.
 - C. **Diagnosis Related Group (DRG) Grouper RFP** – Ms. Buettner said we are in need of a qualified contractor to support our new grouper by October. The grouper is related to prospective payment and how we pay hospitals. We are seeking help for a new Grouper or software to determine a Diagnosis Related Group (DRG). An RFP has been released and includes the need for ICD-10 compliance. Answers are due to questions from prospective bidders February 13 and proposals will open February 22. Tentative date to award is in March.

- III. **Legislative Report** – Ms. Buettner discussed each of the five bills that have been to hearing. DHHS testified in opposition of the following bills - LB 826

to change provisions relating to legislative consideration of proposed rules and regulations under the Medical Assistance Act; LB 891, which would provide for a Medicaid waiver to provide coverage for certain low-income HIV-infected individuals; LB 952 to change appropriation provisions relating to the medical assistance program; and LB 1041, which would adopt the Department of Health and Human Services Delivery Improvement and Efficiency Act. DHHS testified neutral on LB 1158 to provide requirements for medical assistance behavioral health managed care contracts.

- IV. **Member Issues** – The Nebraska Medical Association, Nebraska Health Care Association, the Nebraska Hospital Association and Madonna Rehabilitation Hospital have heard significant concerns about Medicaid claims submitted electronically not getting paid. Relay Health has said they are not 5010 compliant and they aren't paying claims that have been electronically submitted. Members offered to do more provider education if that's part of the problem. Mr. Burd suggested a separate meeting on this topic. Ms. Vineyard said Jeanne Larsen, Deputy Director of the Claims Unit, has been working on the issue. Ms. Melvin said Madonna's are being rejected at the clearinghouse. Mr. Boddy stated more than once that DHHS staff really are trying to help and he really appreciates that. Ms. Vineyard assured them we will try to fix it. Mr. Burd asked that we give providers feedback on the plan to catch up the payment of claims. Ms. Vineyard said they will send some type of communication after they meet with Ms. Chaumont and Ms. Larsen and will get something to you as soon as possible. A request was made to have could someone talk with Relay Health also.
- V. **Other Issues** – Our next meeting is Wednesday, March 14, 2012, at 5:30pm in Classroom 1 at the Lincoln Medical Education Partnership, 4600 Valley Road, Lincoln, Nebraska.
- VI. **Adjournment** – adjourned at 6:30pm.