

Medical Assistance Advisory Committee  
Wednesday, August 10, 2011

State Staff Attending: Vivianne Chaumont, Ruth Vineyard, Sarah Briggs, Cindy Kadavy

Members Attending – Dr. Joe Acierno, Dr. Scott Applegate, Mary Barry-Magsamen, David Burd, Joni Cover, Ed Erickson, Dr. Deb Esser, Lynette Helling, Ron Jensen, Terri Melvin, John Milligan, Brad Rasmussen, Dr. Ed Schneider, Natalie Torrez, Larry Voegele, Dr. Dale Zaruba

Ms. Chaumont introduced Ruth Vineyard, Deputy Director of the Operations Section in Medicaid & Long-Term Care. She is responsible for special projects, claims, eligibility, implementation of Health Care Reform, ICD-10, program integrity, etc. Ms. Vineyard spoke briefly. Members introduced themselves and stated their affiliation.

- I. **Review of June 8, 2011 Meeting Minutes** – approved as written.
- II. **Department Issues**
  - A. **MCO Marketing Materials** – Ms. Chaumont asked for comments. One change was recommended. There were no concerns.
  - B. **[EHR Incentive Program Update](#)** – Sarah Briggs, administrator for Medicaid IT Initiatives, distributed handouts and gave a basic overview of the program. Launch is scheduled for October and Nebraska hopes to be paying in November. Ms. Briggs listed websites where individuals can find more information. The second handout includes the federal flow chart, payment analysis, and a broad overview of the differences between Medicare and Medicaid. Ms. Briggs stated individuals can not register for the Medicaid piece until our program begins in October, although they can register on the Medicare side. Formats for training are being reworked.
  - C. **ICD-10** – Ms. Chaumont reported work is beginning on moving from ICD-9 to ICD-10. The new way of coding things goes into effect October 2013 for services rendered as of October 1, 2013. We will use ICD-9 through September 30, 2013. CMS believes the shorter the lag time states have data will be better and strain on our system will be less. We currently have 12-month timely billing filing. Ms. Chaumont would like to move to a shorter time frame for timely filing so there's not a lapse where we have two systems. She asked members for input on changing the normal billing time to 120 days, although there will be exceptions such as TPL and eligibility. She asked members to talk with their constituency and we will discuss again at a future meeting. A large percentage of claims are already billed within 120 days. As soon as a decision is made we will start sending

provider bulletins well in advance, six months if possible. Ms. Chaumont will gather data to find out who takes longer to bill - what percentage of providers bill within 120 days, what percentage bill within 180 days and what group(s) bills later than that. She will bring that information to the September meeting and include what other states are doing in that regard.

- D. **Home Health** – Home Health is one of the long-term care programs Cindy Kadavy manages. She distributed handouts stating staff has worked with the home health association getting their input. The committee was positive regarding proposed changes to the prior authorization process and aligning definitions with federal definitions. The committee felt more work needed to be done on payment rates.
- E. **Payment for Circumcisions** – Ms. Chaumont asked if members believe Medicaid should stop paying for circumcision. She receives emails/letters annually from those against circumcision. More and more states are not paying for circumcision. Dr. Applegate explained that the American Pediatric Association doesn't recommend it or recommend against it. Members agree we should continue to pay.

- III. **Member Issues** – Ms. Chaumont explained that RFP bidders for statewide managed care, effective July 2012, will need to provide their network information. We plan to award two companies. The 10 counties that currently have managed care won't be included. She said at some point in the future we will have one contract for the entire state and decide on two or three providers (MCOs). There will be two contractors for the 10-county area and two for the 83-county area although they may not be the same two.

Members want information about health care reform and its implications on Medicaid. It will be on the September meeting agenda. Members told her they want to learn about the Exchange also since Medicaid will be tied into the Exchange. Ms. Chaumont will ask someone from the Department of Insurance to give a presentation at the October meeting.

- IV. **Other Issues** – Our next meeting is Wednesday, September 14, 2011, at 5:30pm in Classroom 1 at the Lincoln Medical Education Partnership, 4600 Valley Road, Lincoln, Nebraska.
- V. **Adjournment** – adjourned at 7:10pm.