



**Rhode Island Medicaid Medical Advisory Committee (MCAC)
Meeting Notes
March 10, 2010
Louis Pasteur Building, 7:00 AM**

MCAC Committee Attending: Mark Braun MD, Stephen Chabot MD, Catherine Cummings MD, Dave Feeney, Jerry Fingerut, MD, Marie Ghazal RN, Elizabeth Lange MD, Renee Rulin MD, Craig Syata

MCAC Chair & Ex Officio Members Attending: Ray Maxim, MD, Elena Nicolella

State Staff Attending: Rebecca Boss, Deborah Florio, Patricia Martinez, Ellen Mauro, Corinne Calise-Russo, Ralph Racca

Members of the Public Attending: Jill Beckwith, Paul Block PhD, Suzanne Chiarito, Elizabeth Earls, Randy Edger, Holly Grant, Stefan Gravenstein MD, Arianne Lynch, Laura Oliven, Jody Rich MD, Alan Post DC, Michael Ryan, Matthew Smith, MD

Support Staff: Marty Dellapenna

Meeting Began: 7:00 AM

Attendee Introductions

Review of the First MCAC Meeting Minutes

After a review of the December 9, 2009 MCAC Meeting Minutes, the committee moved to accept them without edits.

Budget Update

Elena Nicolella reported that the FY 2010 Supplemental Budget has not been finalized as yet. For SFY 2011, there are two budget proposals to address:

1. Managed Care Reprourement- Deb Florio, Administrator in the Department of Human Services (DHS) is on the agenda to speak about this initiative
2. Long-Term Care- This is an initiative with approximately \$12M (State and Federal funds) in savings. This involves connecting acute care services with long-term care services and supports at a time when individuals transition from one type of service to another. The focus is on better coordination of care and the State is working on how to do this. DHS meetings with representatives from Washington State and Vermont, where similar initiatives have been implemented are planned in the near future. Also, a Request for Information (RFI) will go out this Spring that will ask for feedback on innovative approaches on how focus more closely on members who have acute care and long-term care needs.

Managed Care Reprocurement

Deb Florio spoke to the Committee about the upcoming managed care contract reprocurement, which will encompass services for the RIte Care population, the Children with Special Healthcare Needs, the Children in Substitute Care and the Rhody Health Partners Program population into one contract.

A Request for Information (RFI) was released in February and responses were received from 8 different organizations including 5 managed care companies (two being out-of-state). The RFI asked for innovative ideas around a patient-centered medical home, more patient responsibility in their healthcare and enhanced care management.

Deb indicated that the Request for Proposal (RFP) is being developed in April and a contract award around June.

Article 20 is pending General Assembly Legislation that would change the way managed care health plans pay hospitals and is closely tied to the cost savings captured in the Managed Care Reprocurement initiative. Craig Syata (HARI) spoke in opposition of the passage of this legislation. Craig stated that it would have negative effects on the hospitals and in addition, would have negative implications on the private insurance industry in the State.

Screening, Basic Intervention and Referral to Treatment (SBIRT) Update

At a previous meeting, the Committee had moved to recommend to DHS that SBIRT codes be added to the Medicaid Management Information System (MMIS) system. DHS is looking at the scope of the systems changes and at the overall cost involved in implementing SBIRT services to at least some segment of the Medicaid enrollees. Clinical programming needs to be considered and the MCAC would like to be involved in the process. Committee members stated that physicians want easy ways to find resources in the community and that an adequate referral base for outpatient referrals is instrumental to SBIRT services being implemented in the community.

Smoking Cessation Treatment in Medicaid

The Committee agreed that coverage of smoking cessation therapies for all populations currently covered by Medicaid is both cost-effective and responsible. Dave Feeney commented that currently, there are certified smoking cessation programs available in the community through pharmacies. As an example, Oxnard Pharmacy has been providing smoking cessation programs and weekly Support Group meetings for a number of years.

Dr. Rulin noted that the success of the Massachusetts Medicaid program can be attributed in part, to a massive public health media campaign that really boosted public awareness of the ill effects of smoking and encouraged cessation programs.

Several Committee members cautioned that appropriate community supports are vital for certain segments of the population. Consideration will be given to all the Committee comments and a status update will be ready for the June 9 meeting.

Pain Management

Dr. Matthew Smith spoke to the Committee based on his own experience in the private practice of pain management in Rhode Island. Dr. Smith indicated that although the modalities for managing chronic pain are many, no one therapy is effective for everyone. Dr. Smith's overview led off a group discussion.

Discussion:

- Understanding who is responsible for the problem of chronic pain and whether it is physical, psychological or behavioral/social and what the external locus of control is.
- Chronic Disease Self-Management was identified as a way to work with people to empower them to help themselves.
- Best Data: Cognitive Behavioral Treatment Psychologists- helps to understand the problem and how to best manage it
- The Rhode Island Pain Society has identified their #1 agenda item to be the pill addiction problem that is growing in the State.
- Regulatory and Oversight functions were discussed
- It was noted that more information would need to be explored by the Committee before any recommendations about covering pain management treatments by Medicaid can be made to the State.

Agenda Items for Next Meeting:

1. SBIRT Update
2. Smoking Cessation Update
3. Pain Management Discussion

Next Meeting: Wednesday, June 9, 2010 (7:00 AM – 8:00 AM)

Meeting Adjourned: 8:15 AM