

Unified Long Term Care Budget: Care Management Sub Committee

MINUTES

DATE **1/31/08** TIME **1:00-4:00** Place: **ODA**

	Name	Name
ATTENDEES	Glenda Collins	
	Diane Dietz	Steve Schnabl
	Kim Donica	Suzanne Shelpmann
	Beth Foster	Bev Tatro
	Janet Grant	Sharon Williams
	Sandee Ferguson for Joe Ruby	Judy Patterson
	Dawn Kennedy	Victoria Gresh
	Brett Kirkpatrick	Holly Saelens
	Sheri Kiser	
	Diana Kubovcik	
	Marti McParland	
	Erin Pettegrew	
	Larke Recchie	
	ABSENT	Sara Abbott
Angie Bergefurd		
Donna Conley		Gwen Tomey
Fonda Dawkins		Lucretia Vonderheide
Jenni Harris		Susan Wallace
Representative Shannon Jones		Joe Ruby
Belle Likover		
Rose Ann Lonsway		

Agenda topics

DISCUSSION	Review Minutes and Action Items from 12/20/07		
	The subcommittee was given the opportunity to edit/discuss the 1/17/08 meeting minutes previously distributed via email.		
CONCLUSIONS	Minutes were approved. .		
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE	
Post minutes from 1/17/08 meeting on the website	Judy Patterson		

DISCUSSION	Update on the Unified Long Term Care Budget Work Group		
CONCLUSIONS	The Care Management Recommendations will be presented at the work group on 2/21/08.		
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE	
N/A			

DISCUSSION	Review and Discussion of Draft Recommendations		
	Handouts Care management Subcommittee Recommendations- 3rd draft		

	<p><u>Introduction</u></p> <p>Reviewed and accepted with no changes.</p> <p><u>Definition of Care Management</u></p> <p>A description of the long term care service system was added to provide a context for discussing care management.</p> <p>This section of the report was reviewed and accepted with minimal word/word order changes.</p> <p><u>Role of the Care Manager</u></p> <p>The discussion focused primarily on the following issues: distinction between authorizing a long term care service and implementing a service/treatment plan, oversight of state plan home health services, the definition of "Medicaid expenditures", and how the care management process could impact a provider's ability, specifically in the nursing facility, to deliver long-term care services in an efficient and effective manner.</p> <p><u>Who Benefits from Care Management</u></p> <p>This section of the report was reviewed and accepted with minimal word/word order changes.</p> <p><u>Coordination with Managed Care Plans</u></p> <p>The discussion focused on the common goals of managed care and care management, the importance of coordinating with both Medicare and Medicaid managed care plans, and acknowledged coordinating with managed care plans supports the goals and values care management outlined throughout the document.</p> <p>The following coordination opportunities were identified:</p> <ul style="list-style-type: none"> -1st 60 days of a nursing facility placement of a managed care consumers -State plan long term care services used by the ABD population -SNPs
<p>CONCLUSIONS</p>	<p><u>Role of the Care Manager Decisions</u></p> <p>Nursing Facility care/placement is an example of a long-term care service and is authorized by the care manager.</p> <p>Each resident of a nursing facility has an individualized care/treatment plan, authorized by the physician, that the facility is responsible for implementing. The care manager is not responsible for authorizing the services on the care/treatment.</p> <p>Medicaid expenditures are defined as any long term care service not included in the nursing facility reimbursement rate and purchased with the state plan benefit. At this point, acute care expenditures are not included in the definition.</p> <p>Additional language is needed to reflect a "present-minded, future-oriented" understanding of the role of the care manager. The existing structure for the delivery of long term care services is the point of reference and the role of the care manager isn't dependent upon the elimination of waivers, integration of acute care and long term care, or the expansion of managed care.</p> <p>Additional language is needed to clarify the "authorizing services" role of the care manager and to address the benefits of care manager with state plan home health services.</p>

Additional language, specifically the terms coordinate, collaborate, and monitor, was recommended to ensure the role of the care manager described in the narrative was reflected in the final recommendation.

Format options for the recommendation were made.

Who Benefits from Care Management Decisions
Changes will be reflected in the next version of the draft report.

Coordination with Managed Care
Additional language is needed to capture the salient points from the discussion and provide a context for the recommendations

Presentation Format
The presentation to the workgroup will include the final narrative report, a separate page listing final recommendations should be listed in the order they appear in the narrative and be the same language, and a power point presentation that mirrors the attachment.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE

DISCUSSION	<p>Next Steps:</p> <p>Final draft to the subcommittee by 2/8 Submission to the Workgroup by 2/14 Presentation at the Workgroup on 2/21</p>	
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CONCLUSIONS		
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ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE

DISCUSSION		
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CONCLUSIONS		
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ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE