

DANE COUNTY SSI MANAGED CARE ADVISORY COMMITTEE

ISSUE LOG 2004-2005

ISSUE	DATE	STATUS	DECISION (Date Made)
1. Service Integration <ul style="list-style-type: none"> How does the rest of the system exist with the implementation of this funding structure? What would happen if managed care leaves? What condition would the county system be in? 	6/24/04	This question will be revisited throughout the process of program design and implementation.	
2. Core Measures and Unique Measures for QA need to be chosen. <ul style="list-style-type: none"> What type of forum will be used for data gathering? How will data be used? How will this process feed into the continuous quality assurance system? 	11/1/04	QA staff from the Milwaukee and Dane projects are communicating to allow for cross-fertilization of ideas and development of possible core measures across programs.	12/17/04
3. How will resources be pooled in the funding structure? <ul style="list-style-type: none"> How much risk will the plan assume and what is the county's ability to match funds? (The capitation rate will account for all Medicaid services to be covered by the plan.) 	6/24/04	This issue has been discussed in meetings between the partners, TMG, and State Administrators.	

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4. SSI population to be served through managed care needs to be defined.	7/30/04	An issue paper discussing medical status codes, demographic egg categories (including CDPS diagnostic groupings) and BRC populations I and II was developed and discussed.	<p>The following cohorts of the SSI population will be served:</p> <p>Adults over the age of 18 who are</p> <ul style="list-style-type: none"> • Physically Disabled • Mentally Ill, and/or have a Substance abuse Disorder • Persons who age into the program (turn 65 during enrollment) • Persons in CSPs <p>Populations to be considered for future enrollment include the:</p> <ul style="list-style-type: none"> • Persons with Mental Retardation • On Community-Based Waivers <p>Decided on 7/30/04.</p>
5. QA needs to include quality of life indicators.	6/24/04	<p>The quality assurance workgroup is considering using select info. from a number of tools/indicators on quality of life issues. Possible tools include:</p> <ul style="list-style-type: none"> • CAHPS • ROSA • MISHP <p>Indicators for MH/SA pops. include:</p> <ul style="list-style-type: none"> *Employment Status *Living Situation 	Ongoing
6. How will the public be informed/educated about the SSI Managed Care Program?	6/24/04	<ul style="list-style-type: none"> • Informing materials for the BadgerCare and iCare programs were handed out to the group on 7/30/04 and discussed on 9/24/04. • As soon as major policy decisions are made, the informing materials for both beneficiaries and providers will be created. 	Ongoing

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7. An enrollment option needs to be chosen for the program.	6/24/04	<ul style="list-style-type: none"> An issue paper was presented and discussed at an advisory committee meeting. The opt out period is currently being discussed by the committee. 	An All In/Opt Out Enrollment Model will be recommended to the Executive Steering Committee. A 60 mandatory and 120-day opt out period was chosen by the committee on 12/17/04.
8. A timeline for Implementation needs to be developed (Phase 1, Phase 2, Phase 3).	6/24/04	<ul style="list-style-type: none"> A draft timeline for Phase 1 has been developed. 1/28/05 	1/28/05
9. The Scope of Services to be provided needs to be defined.	6/24/04		
10. Capitation methodology and payments need to be determined.	6/24/04	<ul style="list-style-type: none"> The Rate-Setting workgroup is meeting on a regular basis to work on this issue. They are also working on the cost-effectiveness portion of the waiver application. 	Ongoing
11. Quality Assurance and Improvement measures and plan needs to be developed along with an evaluation plan.	6/24/04	<ul style="list-style-type: none"> Three QA workgroup meetings have been held so far. A quality indicator grid is being developed that reflects the health domains, potential measures, data sources, and whether the group accepts or rejects the indicator. Minutes for this workgroup are posted on the web at: http://dhfs.wisconsin.gov/medicaid7/advisory_committee/dane/workgroup.htm 	Ongoing
12. The Contract/QA Crosswalk needs to be completed and a draft contract developed.	6/24/04	<ul style="list-style-type: none"> TMG needs additional funding to finish the crosswalk. The contract template is being developed. 	Ongoing

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13. Consumer input into policies and procedures needs to occur.	6/24/04	<ul style="list-style-type: none"> Consumers have been recommended to participate in the advisory committee and workgroups. Three consumers presently are involved in the larger advisory group and workgroups. Two consumer advocates are members of the advisory committee. 	Ongoing.
14. An implementation workgroup is needed with representation from EDS and operations.	7/30/04	<ul style="list-style-type: none"> A bi-weekly meeting of state staff already takes place. EDS and operations will be invited to present to the committee as operational issues arise. 	No additional workgroup is needed at this time.
15. A 1915 (b) Medicaid Waiver Application needs to be made to CMS for the program.	9/1/04	<ul style="list-style-type: none"> The application is currently being prepared by the department. Input from the advisory committee and the Great Lakes Inter Tribal Counsel will be incorporated into the application. The Department will submit the waiver application to CMS in mid-February of 2005. 	Ongoing
16. Will an enrollment broker be utilized or will the State send out enrollment materials with follow-up from an as yet to be determined organization?	12/1/04	If Automated Health Systems Inc. is used, there will be budgetary considerations.	An enrollment broker will be used. 1/28/05
17. Length of Opt Out Period during Enrollment	9/1/04	The Milwaukee Initiative has chosen 120 days. Dane has yet to be determined.	The Dane Initiative chose a 120-day opt out period on 12/17/04.

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18. Identify the Developmentally Disabled Population.	12/1/04		Preliminary decision to not enroll only persons diagnosed with mental retardation. January 2005
19. Summary Chart of Monitoring Activities	2004-2005	The Quality Assurance Workgroup is developing an evaluation plan and will make recommendations to the advisory group. The following areas need to be addressed by the plan in the waiver application: <ul style="list-style-type: none"> • Evaluation of Program Impact • Evaluation of Access • Evaluation of Quality 	Chart completed 1/22/05.
20. Topics to be covered in the Medicaid contract should include: <ul style="list-style-type: none"> • Recovery Principles • Assessment/Care Plan • Consumer Choice • Formulary/Utilization Management • Disenrollment 	12/17/04	Contract language on each topic will be developed and presented to advisory committee for feedback.	12/17/04
21. Should an independent advocacy entity be engaged, in addition to the ombuds program?	12/17/04		Yes. 1/28/05

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22. It was decided that the MAPP population will be included in the target population for the Dane County Initiative.	12/17/04		12/17/04