



**HealthLink Miami Valley
Management Team Meeting**

February 18, 2003
10:30 AM to 12:30 PM
Kettering Center

MINUTES

1. Introductions

Attending: Rudy Arnold (MVHIC), Kate Cauley (WSU), Kimberly Conner (WSU), Mary Crimmins (WSU), Bill Iames (ODJFS), Carla Clasen (WSU), Janet Grant (CareSource), Fred Steed (CHD), Jack Pascoe (WSU, CMC), and Allyson Sepp (WSU)

2. Review Meeting Roles

Facilitator: Kate Cauley
Notetaker: Allyson Sepp

3. Review Meeting Agenda

4. Work Through Agenda

A. Members Update:

B. General Issues

Health Management Associates: Kate reviewed the previous discussions on the Articles of Incorporation and Bylaws. The sample Board of Directors list was reviewed specifically.

- Specific services covered in Montgomery County: Janet distributed an outline of the Medicaid benefits and information on the age distribution of the health uninsured in Montgomery County. She reminded us that 77% of Medicaid cost overall is for 25% of the population—Aged, Blind and Disabled. The CareOhio rates to provide benefits similar to Medicaid were reviewed. Kate reported that Dannetta cited a rate of approximately \$150 per month per person for Medicaid costs which includes children and HS/HF. The group suggested considering a package with fewer benefits, ambulatory care with no inpatient services. Janet will obtain a comparison of Medicaid benefits, CareOhio benefits and HealthLink options. One of the difficulties in determining the cost per person is that there is pent-up demand. It is anticipated that the per capita cost will initially be higher. Kate requested a break down of the cost by service category. Mary inquired if Community Health Advocates were included in the cost of service. For CareSource, case managers are included in the administrative cost. The group reviewed the Jackson County, Michigan benefit list. The group agreed that the focus must be to maximize the number of people served with fewer benefits rather than serve fewer people with more benefits. Carla pointed out that there would be many serious conditions that such a plan would not cover. Fred noted that the Reach Out clinics run into that situation regularly. Mary suggested that individuals with serious conditions might need assistance applying for disability and reinforced the notion of using Advocates or case managers to assure comprehensive treatment of

problems. Rudy inquired if HMA had had any lawsuits filed against any of the plans they developed.

The group concluded additional information was needed: check with private insurers for rates comparisons, and check with the Chamber of Commerce re: data on small business coverages, costs and services provided.

What is missing in the community for a large segment of the population are basic ambulatory services.

We would need to build in a requirement that you can't have had health care for the last six months or similar to avoid potential crowd out.

- Options for Administration of services: Janet noted that the outreach component of the plan would be a part of the administrative services. The majority of CareSource's case management occurs over the phone, but they have the capacity for home visits. Kate summarized three general administrative models. First, HealthLink could hire someone that is already functioning as an administrator of a health plan (e.g. CareSource). Second, HealthLink could hire a small staff to manage provider contracts. Third, HealthLink could hire a large staff to manage contracts, provide case management service, customer service, etc. HMA will provide specific details for each of these models and others in the next meeting.

Members concluded we would need to look into some kind of cross sector case management function in addition to continued outreach for the new plan.

- Potential providers of service: Outpatient hospital clinics, clinics, the Combined Health District and Private Physicians would all be potential providers. The Primary Care Provider (PCP) serves as the "gatekeeper" for all specialist care. The majority of patient care in Michigan occurs in clinics and county health departments; however, there are private practices involved with providing service and there are limited specialty care services.
- Review of provider agreements

C. Task Force Reports/Actions Steps from Previous Meeting/New Members

- MIS: The results for the blind test were distributed. Bill reported that the test has made it clear that the hospitals involved in the test and the Job Center see different populations of people. There were very few duplicates found between the hospitals and the Job Center. Miami Valley and Good Samaritan were not involved in the test, but it is anticipated that both hospital systems will provide data in the future. This blind test has provided a demonstration of proof of concept. Kate will arrange a meeting with Bricker and Eckler LLP, the law firm that works with many of the area hospitals, to have an interpretation of potential data sharing mechanisms involving hospitals which are HIPAA compliant.
- Outcomes/Evaluation: The partnership questionnaire will be forthcoming. The task force will review the Institutional Review Board (IRB) application for disease focus groups tomorrow. Upon making the needed corrections, Carla will submit the application to Wright State University.
- Outreach
- Strategic Planning
- Management Team: press conference with Covering the Uninsured, First Year Review of HLMV, Healthy Dayton

D. Speaking engagements/invitations/presentations/publications review

- Chamber panel during Covering the Uninsured Week: The Dayton Area Chamber of Commerce will host a panel discussion at 7:30am on the 10th of March. Mary will represent HealthLink.

- WHIO will be doing a feature during the week, Marilyn and Bill will be participating in this.
- Public Relations (PR) for both Wright State and Sinclair recommended that HealthLink arrange a press conference in the weeks following the Covering the Uninsured Week. The press conference would focus on the way that HealthLink has worked with the community to provide access to Healthcare for the uninsured.
- Jack and Mary will represent HealthLink at the Western Ohio Pediatric Society meeting on the 11th of March. This meeting will be held at the Medi Terra Restaurant in downtown Dayton.
- The group discussed events occurring in other cities throughout the state for Covering the Uninsured. In Cincinnati, city hall will be hosting the kick off event for the week. Columbus has a roundtable discussion as well as a breakfast with the faith-based community.
- APHA Abstract submissions: Kate distributed the abstract submissions made by HealthLink for the conference. It was noted that Marilyn also submitted an abstract for the conference, and a copy will be sent to Management Team.

E. Issues for HealthLink Network Review/Approval

F. Issues for Discussion

- Specific invitation to Sukey Barnum for future meetings
- Hospital CEO meeting Thursday 2/20/03
- Medicaid Petition: The team discussed the Medicaid Petition that Janet sent by email. Kate noted that since HealthLink Miami Valley is grant-funded, there are lobbying constraints. Bill said that signing the petition would probably not be considered lobbying. Kate will check with Wright State. Janet proposed that HealthLink sign as an organization and encouraged individual members of the Management Team to sign the petition. Rudy raised the concern that the petition may be viewed as contentious by the legislature and advised that some of the wording in the petition be changed.

G. Work to be Completed/Action Steps

5. Future Agendas and Schedules

NEXT MEETING: March 4, 2003, 8:30AM – 10:30AM

6. Evaluation of the meeting

7. Adjournment