

DRAFT Minutes
Statewide Health Care Transition Services Task Force
For Youth and Young Adults with Disabilities

Finance and Structure Subcommittee
Teleconference Call
November 7, 2008

ATTENDEES:

Phyllis J. Sloyer, R.N., Ph.D., PAHM, FAAP, Division Director, CMS; Subcommittee Chair
Gerry Smith, Florida Office of Insurance Regulation
Joseph J. Chiaro, M.D., FAAP, Deputy Secretary, CMS
Jorge Sallent, M.D., Pediatric Pulmonologist
Lanetta Jordan, MD, MPH, Sickle Cell Services, Memorial Regional Hospital
Debbie Richards, MSW, Program Manager, Florida Developmental Disabilities Council
Mary Beth Senkewicz, Florida Office of Insurance Regulation
Leigh Meadows, Agency for Health Care Administration

CALL TO ORDER:

Dr. Sloyer called the meeting to order at 8 am.

APPROVAL OF THE MINUTES FROM LAST MEETING:

A motion was made by Dr. Chiaro to accept minutes from the October 23 meeting and seconded by Dr. Sallent. The minutes were unanimously adopted.

DISCUSSION:

- Clarifications and corrections were made to the financing matrix:
 - Ms. Senkewicz confirmed that Florida statute does not specify an age limit for post-secondary student insurance, and that it varies by school.
 - Dr. Sloyer noted that the Family Opportunity Act (FOA) does not exist in Florida. The group agreed to include a recommendation to adopt FOA along with a Medicaid buy-in option for adults. These options will be taken out of the chart and positioned in a separate section.
 - There was agreement to include a recommendation to disseminate the matrix and identify ways for families and providers to use it when planning for health care transition.
- The group discussed recommendations concerning compensation for provision of services. Key provider reimbursement issues to consider are care plan oversight, co-management, and low Medicaid reimbursement rates.
 - A CPT code for *pediatric* care plan oversight has been established, however, few private insurers and Medicaid currently do not reimburse for the service. There is no accepted CPT code for care plan oversight within adult health care. Our report should include recommendations to promote 1) utilization of the established pediatric CPT code when transitioning YSHCN, 2) reimbursement by insurers (including Medicaid), and 3) development of a similar CPT code for use in adult health care.
 - Co-management allows two physicians to simultaneously co-manage the care of the patient. Right now, insurers make co-management reimbursement decisions on a case-by-case basis; it is not a commonly accepted practice. Dr. Sloyer will research both issues and forward information to Ms. Hess to include in the report.

- It was suggested that low Medicaid reimbursement rates be addressed in the report by recommending that rates recognize the complexity of the individual patient, and reflect the time and resources required for appropriate care. For example, the matrix of Medwaiver rates for therapy – which are typically higher than Medicaid rates – was developed out of a special study.
- Dr. Chiaro suggested that the report look at where we are now for YSHCN, and then where we would like to be.
- Ms. Hess and Dr. Sloyer will be in communication to put the draft together, and it will be sent out to everyone for review.

ADJOURNMENT

The meeting was adjourned at 9am. Next meeting will be the Full Task Force meeting on November 24 in Tallahassee.