Redesigning THE MEDICAID PROGRAM



MRT Work Group Meeting Summary

WORK GROUP NAME:

Program Streamlining and State/Local Responsibilities

MEETING DATE, TIME, LOCATION:

July 7, 2011 10:00 a.m. - 2:00 p.m. NYS Department of Health NYC Field Office 90 Church Street, New York, NY

MEMBERS IN ATTENDANCE:

Steve Acquario, Joe Baker, Kate Breslin, Maggie Brooks, Wendy Darwell, Triby de Jung, Robert Doar, Melinda Dutton, Denise Figueroa, Deborah Mabry, Ann Monroe, Loren Ranaletta, Martha Robertson, Fran Turner

SUMMARY OF KEY MEETING CONTENT:

The first meeting was focused on providing background information to ensure that the group started its work from a common knowledge base. The group began by reviewing and approving its work group charge. It then reviewed the efforts over the past three years to simplify the program, the new requirements under the Affordable Care Act (ACA) that will further streamline program rules and change state and local government responsibilities, and the DOH and NYSAC reports on State Administration of the Medicaid program. Finally, the group discussed prioritizing the work to ensure the development of a useful product in October.

Most of the discussion centered on the ACA and what the Health Benefit Exchange will mean for Medicaid and the state and local roles in administering the program. Members agreed that the work group should prioritize the issue of Medicaid administration in the context of the Exchange. Some members expressed a desire for the State to be "all in" or "all out" of Medicaid administration. Phasing administrative functions to the state or a segregation of roles could lead to greater confusion. Members agreed that the lines of accountability and liability need to be clearer between the State and the local districts in the administration of Medicaid.

Members agreed to defer establishing priorities for long-term care simplification until they could better understand the scope of the Managed Long Term Care MRT Work Group, specifically whether that group was assessing long-term care eligibility.

Redesigning THE MEDICAID PROGRAM



Members asked for additional information to guide their work. Specifically, members requested:

- Any program streamlining and simplification proposals that have been advanced, but not enacted for consideration by the group
- Performance indicators for the new Enrollment Center with respect to Call Center operations and renewal
- Summary of the proposed regulations for implementing eligibility determinations using Modified Adjusted Gross Income (MAGI) for Medicaid and the Exchange when issued by HHS
- Summary of State Exchange Legislation

At the end of the meeting, the members voted unanimously to send a message that the State should enact Exchange legislation to facilitate New York establishing its own Exchange.

NEXT STEPS/PRELIMINARY AGENDA FOR NEXT MEETING:

The next steps are to provide the information requested by members. The group agreed to devote the next meeting to a discussion of the Exchange. The agenda will review the functions of the Exchange and focus on those that intersect with Medicaid. The group will identify and discuss the major decisions that need to be made including eligibility and enrollment, consumer communications, subsidy eligibility interface with screen and enroll and workforce issues.

NEXT MEETING DATE, TIME, LOCATION:

August 11, 2011 10: 00 a.m. – 2 p.m. One Fulton Street, Troy, NY 12180