



**Behavioral Health Partnership
Oversight Council
Coordination of Care Committee
Council on Medical Assistance Oversight
Consumer Access**

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Chairs: Representative Jonathan Steinberg, Janine Sullivan-Wiley, Kelly Phenix & Benita Toussaint

MAPOC & BHPOC Staff: Richard Eighme & David Kaplan

The Committee will work with the Departments of Social Services, Children and Families, and Mental Health and Addiction Services, and the administrative services organizations that administer medical, behavioral health, dental and non-emergency transportation, to identify and monitor key issues that may impact whether individuals and families in the HUSKY Health program and receive person-centered coordinated services. The Committee and its partners, along with parent and community input, will seek to ensure that participants in the HUSKY Health program receive behavioral health care that is coordinated with their medical (primary and specialty care), dental, pharmacy, and transportation services.

Meeting Summary: September 27, 2017

1:00 – 3:00 PM

1E LOB

Attendees: Chair Representative Jonathan Steinberg, Chair Janine Sullivan-Wiley, Chair Kelly Phenix, Chair Benita Toussaint, Lois Berkowitz (DCF), Michael Carone (DSS), Tayla Fauntleroy, Mike Finley, Bill Halsey (DSS), Olivia Hathaway, Brenetta Henry, Jana Hunkler, Ellen Mathis, Quiana Mayo, Sabra Mayo, Marty Milkovic, Laura Morris (OHA), Linda Pierce (CHNCT), Ann Phelan (Beacon), Sandra Quinn (Beacon), Trevor Ramsey, Cathy Risigo-Wickline, Bonnie Roswig, George Sousa (Logisticare), Eunice Stellmacher, Kimberly Sullivan, Eddie Tosado (Logisticare), Sheldon Toubman, Mark Vanacore (DMHAS), and Rod Winstead (DSS)

Introductions

Chair Benita Toussaint convened the meeting at 1:05 PM and introductions were made by members. Chair Janine Sullivan-Wiley introduced Representative Jonathan Steinberg as the new Co-Chair appointed by MAPOC. She then asked to flip the order of agenda items 4 and 5 to accommodate time for a better discussion.

BHP Consumer/Family Advisory Council Update- Brenetta Henry

Brenetta Henry reported to the committee that the third annual iCAN Conference will be the next day on September 28, 2017 at the Artist's Collective in Hartford. There will be a strong young adult voice. The conference will begin at 8:00 AM and will run through 2:00 PM.

CFAC members are putting together training for its members to learn how to effectively testify in front of legislative hearings. This training will occur at the LOB later in the fall. Co-Chair Janine Sullivan-

Wiley added that members from Keep the Promise Coalition will have training on the legislative process at the LOB on October 12, 2017.

Update from DSS on Pharmacy Data Questions

Bill Halsey (DSS)



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Bill Halsey (DSS) distributed a chart (see above) on Narcan prescriptions from pharmacies. It showed a significant increase in these prescriptions. Bill said that the chart relates to a discussion from the last meeting about Narcan and its availability at pharmacies in Connecticut. He said the department is giving a comprehensive presentation on the Opioid Crisis to the Alcohol Drug Policy Council on December 19, 2017. It will cover the Substitute Disorder Services (under Medicaid) and together with the other state agency partners, the ASO, and the Pharmacy Unit, a deeper depth of the Opioid Crisis will be covered. He continued by saying that in every communication with pharmacy providers for prescriptions, the department is sending out an electronic and hard copy document that should go along with the one-time 7-day and 14-day supply; this is being done at the corporate and/or local level. Co-Chair Jane Sullivan-Wiley thanked Bill for getting back to the committee on previously posed questions.

Discussion

Brenetta Henry asked if the Department has looked at people who are in-patient psych at CT Valley Hospital. She talked about seeing in-patients at CVH who are overly medicated. Mark Vanacore (DMHAS) talked about learning collaboratives and the role of discharge planning with medication assisted treatment. Brenetta asked if they could include families in these meetings. Janine discussed high risk populations that are the most likely for opioid overdoses: those leaving rehab and the correctional system. Co-Chair Kelly Phenix added that people are going to street meds to self-medicate.

Sheldon Toubman stated that patients who are under prescribed are also the victims of the opioid crisis because doctors are reluctant to prescribe medications. He explained that a consequence of people getting cut off and/or tapered from medications is that they turn to the streets, where medications and drugs can be tainted and kill them. Sheldon believes we are adding to the opioid death numbers by not recognizing that people have been long stabilized by these medications. Bill Halsey (DSS) deferred a response to Dr. Zavoski, who was not present, because he is a part of reviewing prior authorizations for high amounts of opioids. Dr. Zavoski receives a packet about all of the medication a person is on and Bill explained that he is quite reluctant to bring someone down if there might be a negative impact and that it is a fine balancing act.

Sheldon added that these people are addicted and even if the underlying medical issue is gone, not everyone can be tapered down. Bill believes there are people that could be on a very long term taper. Kelly suggested having a larger conversation about this at another time. Co-Chair Janine Sullivan-Wiley stated this was an issue she also raised recently and agreed without this should be put on a future

agenda.

Cathy Risigo-Wickline talked about a symposium she attended and States that are having success with opioid addictions by referring people to occupational therapy services.

Sheldon asked if there were more answers to previous pharmacy questions. He referred to the minutes of the last meeting. Bill stated that he would check in with Herman Kranc (DSS) and get an answer on the flyers for denials.

Update on Trip Data, Call Center, and Complaints on Non-Emergency Medical Transportation (NEMT)

Rod Winstead (DSS) and George Sousa (General Manager at Logisticare)



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EMT CAC Committee |

Rod Winstead (DSS) introduced George Sousa, Logisticare General Manager who gave the presentation and update (see above icon).

Discussion

Sheldon Toubman said that the data from the presentation is deceiving, and needs to identify when Logisticare is at fault over transportation quality. He commented that George Sousa (Logisticare) had agreed with this assessment at the last meeting, but not changed what is displayed in the presentation. George responded that the formatting of the information is done as DSS requests and is in fact more detailed than that provided in other states.

Sheldon believes if a title is going to imply that something is 100 percent the fault of the providers than it should be 100 percent their fault. Sheldon asked DSS if 100 percent of the 588 provider complaints are the fault of the provider and not Logisticare. Rod Winstead (DSS) responded that DSS does not have that level of staff to research every complaint. Sheldon stated that while it is reasonable that DSS might not have the amount of staff to do this it is not reasonable to misrepresent that 100 percent of the complaints are the providers fault.

Co-Chair Benita Toussaint commented on quality and the format of the presentation. She explained the importance of training providers and ASO staff and encouraged they do spot checks.

Cathy Risigo-Wickline talked about working with Children and the situations they have had with NEMT. George requested more information. Cathy provided examples, of which all have been called into Logisticare. Co-Chair Janine Sullivan-Wiley thanked her for sharing the examples.

Co-Chair Kelly Phenix asked a question about closest provider and if there is a redetermination process. Eddie Tosado (Logisticare) talked about the provider certification form for medical necessity for trips over 15 miles which are good for one year. Bill Halsey (DSS) explained that they are trying to meet the patients' needs and there is a balance.

Bonnie Roswig expressed her concern about the accuracy of the data. She asked if there is an online system they can use to complain. The only option for facilities is a phone call complaint. George stated that the data is accurate, and there is no incentive to be deceptive in what is displayed. Sabra Mayo asked how long the process takes when people need medical transportation. The process usually takes 1-2 business days. Sometime incomplete forms can delay the process and they have started the process of outbound calls to confirm or deny the request.

Bonnie commented that the issue with the data is not the numbers on the paper but rather the efforts on Logisticare to collect the data.

Janine thanked Logisticare and members for the conversation.

They were offered the option of leaving as the discussion about the NEMT contract was to be discussed. They chose to remain.

Update to the Status of the RFP for NEMT - Rod Winstead (DSS)

Rod Winstead explained that proposals in response to the RFPs were obtained from all areas around the country. There had been five focus groups in Connecticut, including this committee, that advised that RFP. . Total Transit, Inc. from Arizona was awarded the right to negotiate a contract for NEMT. The contract will be from January 1, 2018 to December 31, 2020. Logisticare will continue the current contract until December 31, 2017.

Bonnie Roswig questioned the RFP contemplating a 3 month transition period. Rod stated the Department anticipates total transit to go live on January 1st. Sheldon stated that while the anticipation is that the contract goes live on January 1st, there could be issues with the negotiations. Bill Halsey (DSS) stated that there is always that chance but they hope for the best. Co-Chair Kelly Phenix asked when the negotiations started. They stated in March.

Co-Chair Janine Sullivan-Wiley added that she hoped that all of the concerns and comments from this committee, over the years, have been considered in negotiations. Bill stated they have.

Discussion of Getting a More Rounded Consumer Representation

Consumers from the Consumer Family Advisory Council are encouraged to bring in more consumer representation from around the state to the Coordination of Care/Consumer Access Committee meetings. Cathy Risigo-Wickline suggested that social media would be a good way to reach the attention of consumer from around the state but Kelly noted that many Medicaid consumers have low access to the internet. There is still a vacancy for a member from MAPOC. Sheldon Toubman felt that the transportation costs should be covered for consumers. George Sousa said that providers from NEMT could be asked to donate/volunteer transportation services to the meetings. It was also suggested that providers could invite people from their facility and give them a ride. The car ride would also allow time for orientation conversation. Michael Lonergan, a guest at the meeting, commented that the work and impact of this committee be clearly described so that it would be clear to potential consumer members. The co-chairs and staff will work to develop this.

Other Business and Adjournment:

Co-Chair Janine Sullivan-Wiley asked for any new business. Hearing none, she called for a motion to adjourn. Sabra Mayo made the motion and it was seconded by Ellen Mathis. Benita announced the next meeting will be on November 29, 2017 at 1:00 PM in 1E. The meeting was then adjourned at 2:42 PM.

***NOTE: Date CHANGE: Next Meeting: Wednesday, November 29, 2017
@ 1:00 PM in Room 1E LOB**