

Operations Committee - Meeting Minutes



DATE AND TIME OF MEETING: Date June 3, 2016 Time: 2:30 -4:00 PM	Internal	External	Recorder: Jane Matyszyk	Draft	Final
	x				x
Location: Hartford Room – Beacon Health Options			OperationsMtgAgen 6-3-2016 da6-3-16.doc Attendance.pdf		
ΤΟΡΙΟ			DISCUSSION/RECOMMENDATION		
APC Implementation in Hospital & impact on BH Access	information http://www.cr • Some Hig • Fee • New • Prof Q	t.gov/dss/cwp/v ghlights: Schedule tried v Revenue & Pr ressional Fees	pitals for all outpatient services - go live date of 7/1/2016 – See below view.asp?a=4598&q=538256 to mirror Medicaid rocedure Codes are billable within the ED (LCSW's can bill in the hospital ED settin should be used and will this require a prior authorization? heck		itional
ECC Expansion Update	 Effective date 7/1/2016 Provider Provisional Authorization Letters have been sent Information detailing the provisional auth criteria Regions with New ECC's - Waterbury, Torrington, Stamford, Norwalk, Bridgeport (2) There are not enough resources for the demand – looking at more creative solutions (ex: primary care physicians who are willing to provide services) Beacon is conducting focus groups for providers to learn about the MAT process, answer any questions. OATP (DMHAS program) has been expanded to include methadone/suboxone/vivitroal treatment services. Noted: Success rates are much higher in members who receive a good aftercare plan (therapy as well as medication) and handoff into the community for follow-up services 				
Adequacy of Network Services for Opioid Clients (are the identified areas of shortages of providers or particular services?) MAT Suboxone All MAT Suboxone OTP Providers 6-3-16.pdf Providers Only 6-3-16 Substance Use DMHAS-funded Provid	Maps for MA will be upda Northeast C Beacon is co potential ban NOTE: PCS pres	T providers w ted as new pro Γ. nducting focus rriers, etc. SO Website ha scribing issues	nd to identify areas where there are gaps in services vere shown by Beacon (see embedded documents) which are "livin oviders are added to the network– There is limited service for Nor s groups with providers to discuss MAT program/ answer question s trainings, webinars, and ability to post questions and have a mer arded a grant for Vivitrol.	thwest and	



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State Agency Assessment of Impact of Budget Reductions on Service Access and Continuation	 All state agencies are working to minimize impacts on services due to the budget reductions. Internally state employee vacancies are not being filled; employee layoffs; new positions have been eliminated. Dental reduced by 5% Transfer of ASD from DDS to DSS More info will be given at upcoming Oversight Council meeting.
Home Health Care	 \$20 million net savings by 2017 - Rate reduction posted in Law Journal; 6/1 - rate reduction letter to providers. Per Bill (DSS) 15% reduction represents \$14 - 15 million. Concerns surrounding the 15% rate decrease to be implemented 7/1/2016 - Home Health Care agencies have been working to implement cost savings practices - Med Techs, prompting, etc - Tracy Wodatch (CT Health Care) and Kimberly Nystrum (NEHC) discussed cost savings efforts - their records indicate a \$4 million savings within the last year. Due to the 6 month lag in Claims data these savings may not yet be available. With a 15% rate reduction Homes may not be able to sustain services.
Operations Subcommittee Objectives	Susan reviewed the objectives / responsibilities of the Operations Subcommittee (See embedded document)

Connecticut BHP Supporting Health and Recovery