

Meeting Summary for MAPOC (Full Council) Zoom Meeting

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Quick recap

The team discussed the challenges and improvements needed for healthcare access for individuals with developmental disabilities in Connecticut, with a focus on personalized care, legal protections, and systemic improvements. They also addressed the consolidation of PCSPs into large corporations and the potential negative impacts of a capitated model on healthcare providers and patients. Lastly, updates were provided on the ongoing Request for Proposal for Any NEMT and the Covered Connecticut program, with concerns raised about recent cuts to the Medicaid program.

Next steps

Walter Glomb to provide information on how healthcare providers can bill for accommodations for patients with disabilities.

Connecticut Department of Social Services (DSS) to examine payment models that cover accommodations for primary care to individuals with developmental disabilities.

Connecticut Legislature and Administration to review if current state statutes, policies, regulations, practices, and capacity are adequate to ensure people with disabilities get necessary accommodations in healthcare.

DSS to continue discussions with Department of Motor Vehicles (DMV) and Department of Transportation (DOT) regarding credentialing requirements for non-emergency medical transportation (NEMT) drivers.

DSS and Medical Transportation Management (MTM) to expand the facility escalation line to more healthcare providers for resolving NEMT issues.

DSS and MTM to continue outreach efforts to increase stakeholder engagement, member accessibility, and service delivery for NEMT services.

DSS and MTM to explore ways to improve data collection and analysis for NEMT services to inform policy and operational decisions.

DSS and MTM to consider expanding the on-demand NEMT program to more healthcare providers in rural areas.

DSS and MTM to continue efforts to improve self-service options for members and healthcare providers for NEMT services.

DSS and MTM to address capacity issues at the Department of Public Health for handling discrimination complaints related to healthcare accommodations.

Summary

Preparing Live Meeting on Developmental Disabilities

The meeting was to be recorded and covered by CT-N, and Walter Glomb, the Executive Director of the Connecticut Council on Developmental Disabilities, was set to discuss healthcare access for people with developmental disabilities.

Improving Healthcare Access for Developmental Disabilities

Walter expressed concern about the access to healthcare for individuals with developmental disabilities in the state. He noted that the majority of this population relies on Medicaid for commercial healthcare and that they have found inadequate accommodations at vaccine sites, leading to concerns about primary care access. Walt highlighted that the council aims to enhance home and community-based services for individuals with developmental disabilities and to inform people about their rights. The issue of poor health outcomes for this population

due to inadequate primary care was identified as a national problem that Connecticut is addressing, with the University of Connecticut Center for Excellence in Developmental Disabilities developing best practice guidelines and surveying barriers to healthcare access in the state.

Addressing Healthcare Access for People with Disabilities in Connecticut

Walt reviewed the progress and challenges related to healthcare access for people with disabilities in Connecticut. He discussed the efforts made over the past year, including efforts at the federal level, to address the issue of healthcare disparities for individuals with developmental disabilities. He indicated that while some promising practices exist, there are still significant challenges to overcome, such as obtaining accurate data and developing payment systems to accommodate healthcare providers. Walt also revealed that the Connecticut Health Council is developing a website to educate both patients and healthcare providers about the Americans with Disabilities Act. Finally, he outlined the channels for filing complaints related to healthcare access and highlighted a backlog issue at the Department of Public Health.

Personalized Care for Patients with Special Needs

Walt discussed the importance of personalized care for patients with special needs, emphasizing the need for direct communication with patients to understand their specific requirements. He highlighted improvements made to identify patients' needs during vaccine appointments and expressed concerns about the potential negative impact of a capitated system on providers' willingness to provide accommodations for patients with disabilities. Walt also raised questions about provider compensation for extra time spent with patients with disabilities and the implications for payment models for primary care to individuals with developmental disabilities. He advocated for the use of electronic health records to pre-consult with patients and called for further discussion on these issues.

Improving State-Level Disability Protections and Challenges

Walt and Sen. Lesser discussed the need for stronger state-level legal protections for people with disabilities, mirroring the federal protections provided by the Americans with Disabilities Act. Walt emphasized the importance of enforcement mechanisms at the local level instead of relying on the US Department of Justice. They also discussed challenges with tracking data, coordinating non-emergency medical transportation, and accommodations for telehealth. Walt expressed his desire for systemic improvements and highlighted that while these issues were on his radar, his small office relied on experts and grantees to address them. Kelly Phenix suggested that insights from MTM, given their involvement in the call, could be valuable.

Addressing Challenges in Intellectual Disability Care

Walt, Kelly, Akriti Rai, and Ellen Andrews discussed the challenges faced by individuals with intellectual disabilities residing in state-run group homes. They identified issues in the current protocol for handling severe behaviors, which often result in emergency room visits and transportation. Kelly proposed the potential benefits of telehealth, while Akriti pointed out the need for more specific training for drivers handling individuals with autism and developmental disabilities. Ellen stressed the necessity of changing the culture among primary care providers to provide care for this vulnerable population, and the team agreed on the need for a more holistic and well-coordinated approach to care.

Consolidation of PCSPs and Impact on Healthcare

Walt discussed the consolidation of PCSPs in Connecticut into large corporations, primarily hospital chains, and the resulting shift in decision-making power from local offices to central

call centers. Ellen suggested that regulatory and enforcement mechanisms at the state level, as well as legislative support, could positively impact this situation. Sheldon, as a litigation attorney for disability rights, raised concerns about the potential negative impacts of a capitated model on healthcare providers and patients, emphasizing the importance of education and monitoring to ensure appropriate use of codes. Martin's, who has experience in caring for children with special healthcare needs, agreed with Sheldon's concerns and criticized the current model for primary care providers. He pointed out a lack of commitment to primary care models and quality measures, which he suggested was hindering potential improvements and perpetuating the shortage of primary care providers.

RFP Update and Service Improvements Discussed

Commissioner Andrea Barton Reeves provided an update on the ongoing Request for Proposal (RFP) for Any Mt, highlighting the need to maintain its integrity and the company's efforts to improve service quality and accessibility in collaboration with Equity's team in Connecticut. Akriti from MTM detailed the company's recent performance metrics, including a 25% increase in trip volume, a 63% increase in call volume, and a 54% decrease in complaints, with a member satisfaction rate of 92.91% in May 2023. The discussion also covered improvements made to enhance services for members and healthcare providers, including the introduction of field audits, a new facility escalation line, and a new facility portal, among others. There was also a discussion on the company's credentialing process for drivers and plans to expand on-site facility visits throughout the state.

Covered Connecticut Program and NEMT Outreach

Yvonne Pallotto (DSS) discussed the Covered Connecticut program, which provides free health insurance, dental coverage, and non-emergency medical transportation coverage to around 32,000 enrollees. She also outlined the objectives of the NEMT outreach program, which aims to increase stakeholder engagement, improve service delivery, and identify areas for improvement. The program has developed informative brochures in English and Spanish and plans to expand its outreach to other areas. However, concerns were raised about recent cuts to the Medicaid program, particularly the reduction in eligibility for 'Husky A', and the implications for coverage under 'Covered Connecticut'. The meeting also touched on updates regarding payment alternative mechanisms and scheduling issues for future meetings.