

## MEDICAID SUBCOMMITTEE MEETING

OCT. 9, 2006

**PRESENT:** Greg Gruman, Chairman Rod Barton, Commissioner Lorraine Saulino-Klein, Commissioner Barb Cohee, WHCC Director Susan Anderson

**ABSENT:** John Vandell, Teri Green

**Present from community:** Dan Lex (Quality Health Care Foundation of Wyoming), Mary Behrens - (Wyoming Nurses Association), Sen. Charles Scott

### DISCUSSION OF PROPOSALS

Susan Anderson presented a summary of the Milliman study, along with seven specific proposals for consideration. Discussion ensued as follows:

1. **“Underlying Idea” related to long-term care: the least restrictive environment saves money, and satisfies people’s need for independence.**

Dan Lex pointed out that, for many people, nursing homes are the best option and he suggested that moving people out of them could be inappropriate.

#### 2. Discussion of the 7 proposals

1. Eliminate LTC/Home services waiting lists. Greg Gruman estimated the cost of this at \$3-5 million. As the group discussed the potential cost savings, Rod Barton suggested that a way to describe the future needs of an aging population would be to model what the long term care costs would be in the future if population trends continue and no changes are made.
2. Enhance Project OUT. There was agreement that there is a need to educate providers, and that intervention that delayed even one year in long-term care would save money.
3. Encourage use of Hospice. Discussion covered why Wyoming people may be resistant to Hospice, including the idea that Hospice is accompanied by realistic expectations of death. Such methods as posting a sign in a doctor’s office asking “Is it time for Hospice” and encouraging nonprofit efforts were suggested.
4. Improve Workforce Supply. Greg Gruman described the continuation budget approach.” He described how, until just recently, the home care workers have not received raises in 17 years, and that many providers have closed in the state. In discussion about the suggestion to amend the Nurse Practice Act, Mary Behrens said that the nurses have concerns about the idea of less trained people performing some tasks generally reserved for nurses.

5. Encourage individuals to purchase private long-term care insurance – Discussion that people could be encouraged to buy their own and hold on to their assets. If the WHCC staff is directed to study this issue, other state plans such as Colorado, Kansas and New Mexico should be considered.
6. Review the utilization of the Lander Training School – Discussion ensued about the Milliman estimation of the current cost of each person at the Training School. The subcommittee decided not to endorse any specific suggestion from the Milliman study, but instead will forward on the findings of the study to the Health & Labor Committee.
7. Support Medicaid Transformation grant applications. Five grant applications have been submitted to the federal government that address issues brought up in the Milliman report: (a) Quality prescribing, (b) Pharmacists Clinical Intervention program, (c) Healthy Start, (d) ER training, and (e) Wyoming Total Health Records. The Healthy Start program that deals with illegal immigrants prompted philosophical discussion of the state's obligation to pay for such medical costs. Greg Gruman said that costs associated with premature babies and other childbirth and early childhood issues are very large, and prevention would be cost effective. He noted that there is \$150 million available to the 50 states for the various "Transformation" grants; it's not known what Wyoming might receive. Whatever is received will require some state matching money, and the committee decided to express support for Legislative funding.

### **3. Additional Proposals from Sen. Scott**

Sen. Charles Scott proposed several additional ideas for the committee to consider: (1) Implement private room requirement for nursing homes; (2) expand adult daycare, (3) expand respite care, (4) expand Lifeline services, and (5) implement adult foster care.

Discussion ensued regarding if there was enough infrastructure to handle the patients who would move out of nursing homes under the private room standard. Concerns were expressed that current residents most likely need the care they are currently receiving within the facilities.

Other forms of the "Lifeline" technology support idea were discussed, such as the APS "Health Buddy."

The committee expressed interest in the adult foster care concept, with some discussion from members about experiences in Oregon – there would be some issues involving the appropriate regulation of the foster care providers.

No action was recommended from the discussion—the issues will be discussed with the whole Commission.