MINUTES

Medicare-Medicaid Enrollees Advisory Subcommittee
National Multiple Sclerosis Society
900 S. Broadway, Second Floor, Denver, CO 80209
Tuesday, March 12, 2012
1:00 p.m. - 3:00 p.m.

The mission of the Department of Health Care Policy and Financing is improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

Meeting objectives:

1. To review and finalize Subcommittee administrative items.
2. To review and discuss potential enrollment materials for the Demonstration.
3. To update the Subcommittee on the RCCOs and the Demonstration.

I. Opening Remarks	Introduction Upcoming Meeting Reminders Upcoming Opportunities Learning Labs	Co-Chairs (15 minutes)
II. Review	Minutes (Public Comments and Discussion)	Co-Chairs/All (5 minutes)
III. Discussions and Actions	Enrollment Materials (Public Comments and Discussion)	The Department (60 minutes)
IV. Updates	- Subcommittee Update - Monthly RCCO Updates - Program Improvement Advisory Committee Update - Demonstration Updates (Public Comments and Discussion)	Co-Chairs/All The Department (35 minutes)
V. Closing Remarks	Follow-up Information Other	Co-Chairs (5 minutes)

Reasonable accommodations may be provided upon request for persons with disabilities. Please contact Laura Pionke at Laura.Pionke@state.co.us or 303-866-3980 for assistance.

If you would like to call in for the next Medicare-Medicaid Enrollees Advisory Subcommittee meeting, please use the following information:

Phone Number: 1-877-820-7831
Passcode: 946029#

DRAFT

Participants

Elizabeth Baskett
Adam Bean
Sheryl Bellinger
Teri Bolinger
Bob Bongiovanni
Marceil Case
Drew Kasper - phone
Rob DeHerrera
Julie Farrar
Tom Hill
Steve Holsenbeck
Julie Holtz
Laurey Jaros - phone
Catania Jones
Mary Kay Kisseberth
Nicole Konkoly
Donna Lastra
Colin Laughlin
Todd Lessley
Francesca Maes
Barry Martin
Arlene Miles - phone
Amy Miller
Donna Mills
Gary Montrose
Lois Munson
Jenny Nate
Sharon O'Hara
Kristen Pieper
Laura Pionke
Lora Roberts
Jim Rowan
Keri Schroeder-Jaeger
Joanne Smiley
Kelly Vivian
Heidi Walling

Julie Farrar, Co-Chair, welcomed everyone and called the meeting to order at 1:05 p.m.

Review

Julie asked the Subcommittee to review the previous meeting minutes. Sharon O'Hara moved to accept the minutes; Francesca Maes seconded the motion, and it passed unanimously.

Presentation

Teri Bolinger provided background on the enrollment materials review and Colin Laughlin presented preliminary findings and recommendations.

Colin provided the update on the current status of the process on the enrollment materials. Subcommittee members and meeting attendees asked questions, expressed concerns about the current enrollment materials, and gave suggestions for improved language and packaging of materials.

Mary Kay Kisseberth moved that the advisory subcommittee submit all of the suggestions to the department for consideration by those preparing the enrollment materials. Joanne seconded the motion. The motion carried without any objections. The suggestions are attached to the minutes for the record.

Sheryl Bellinger provided an update for the next two meetings and informed the subcommittee that the Subcommittee meeting in April will be on quality measures for the Demonstration. In May, the Subcommittee meeting will allow for a follow-up regarding the Ombudsmen simplification process.

RCCO representatives provided updates to the subcommittee: Jenny Nate, Region 1; Lora Roberts, Region 4; Julie Holtz, Region 5; Adam Bean, Region 6; each reported on their current

DRAFT

efforts to support the Demonstration in their respective regions.
Teri gave an update on the Center for Health Care Strategies conference in Washington DC. Due to weather concerns, only 9 states were able to attend. Teri mentioned that CMS thinks very highly of Colorado's efforts regarding the Demonstration. The Department anticipates more information from CMS on a timeline in the near future.

ACTION ITEMS	RESPONSIBILITY	TIMEFRAME
Continue to map a Medicare-Medicaid enrollee's experience on the first day of the Demonstration	The Department	Over the coming months
Finalize Learning Lab for April	Co-Chairs	By the end of the month
Finalize Learning Lab for May	Co-Chairs	By the end of the April

RECOMMENDATIONS: ENROLLMENT MATERIALS
Envelope appearance/messaging.
Remove the picture as it does not fit all demographics and may alienate some. Additionally, it makes the letter feel more like an advertisement.
"You will be" wording may be thought of as offensive.
It is unclear whom the letter is from.
Suggestion for an official or executive signature on the bottom of the letter.
Please check the information/language/process regarding the phrase "You will receive a call."
Language regarding the contact call should be: "Please call your service provider."
Language should also read: "please confirm receipt."
Include additional FAQs. Suggestions included: Does this change my prescription coverage? Is my durable medical equipment coverage changing? Are benefits going to change?
This is a legal notice and needs to be clear. However, many thought a change to the wording "This letter is your only notice about this change" was warranted. Clear suggestions were to make it more person-centered and less hostile.
Include the language, "our information shows" as it allows the opportunity to provide correct information.
A table for all the phone numbers would help organize the information.
Given that this is an official notice, we believe the language reading "This letter is your only notice," should remain. It would be helpful if the letter were very clear at the top that it comes from the State of Colorado, as is the case with other notices.

DRAFT

RECOMMENDATIONS: ENROLLMENT MATERIALS
Suggestion that the language read: "You are being enrolled into a new program that will coordinate your Medicaid and Medicare benefits. This is your only notice about this change."
LEP Access: We always recommend that notices include a sheet with information in multiple languages about what number to call for help.
"Welcome to a New Program." We suggest that you say something along the lines of "You are being enrolled in a new program". It's a little softer in our view, and is more likely to let people know that there is something they can do to change the course of their enrollment.
It would be clearer to people who may not realize they are on Medicaid and Medicare if the letter said, "On June 1 you will be in a new program designed for people like you who get Medicare and Medicaid services."
The document should include information on the clinic/practice line that reassures people in the event the information in the box is not correct. As an example, you might say something like: "According to our records, your primary care doctor is _____. If that is not correct, please call _____ so that we can update our information."
Include some language that assures readers that they may keep seeing their primary care doctor regardless of whether that physician is in the ACC. We don't want people to think that they may no longer see their physician.
Include information about other options, including Denver Health, Medicaid, and the PCPP program so that people can look those up and understand the difference between those programs and the ACC. Also, there needs to be clear information conveyed about PACE and SNPs
The section: "What if you don't want to be in the new program? If you don't want to be in the program - please call right away." We are concerned that people may not understand that they have time to opt out and would suggest language that helps them understand they need to call, but that not only do they have time, but they may opt out at any time in the future.
Regarding the three questions answered on the back: and the suggestion that there is no cost to you. This implies to the people we had review the document that people may not be subject to copayments.
Include a postage paid envelope
Concern over the information and placement of: "If you don't want to be in the program…."
Concern over the placement of the "Three Questions" or the FAQ's

DRAFT