



DIVISION OF MEDICAL ASSISTANCE

MEDICAID ACCESS MONITORING

UPDATE

Jeff Horton
Utilization Committee Chair, DMA

December 2, 2016

Progress to date



- **DRAFT plan developed during the spring and summer of 2016.**
- **Data for plan provided by DMA Business Information Office**
- **Provider trends and utilization of services were main areas analyzed**
- **Analysis was also performed from a statewide, rural and urban perspective to determine access to providers and utilization of services.**

Progress to date



- **To allow for the required 30-day comment period, the DRAFT Plan was posted to the DMA website for public comment from August 25 – September 26, 2016.**
- **Several comments were received with suggestions to further break down services by age/disability group and other metrics.**
- **Plan was submitted to CMS on September 30, 2016 (deadline was October 1, 2016)**

Progress to date



- **General impressions from the access monitoring plan submitted to CMS are that utilization (measured in visits/1000 Medicaid beneficiaries) decreased from 2014 to 2015 for most all services including primary care and home health services, but there was no commensurate increase in emergency room visits or inpatient hospital admissions.**
- **With the exception of home health providers, which can provide services over greater distances, there are more providers available in urban and metropolitan areas of the state compared to rural areas.**

Next Steps



- **The agency is currently in the process of re-running data approximately on a quarterly basis to determine to identify trends in provider enrollment and utilization of services**
- **As previously noted, breaking down data by age/disability groups is also being considered.**
- **Other metrics are being considered that will better assist the agency in determining any access to services**

Next Steps



- **Any rate reduction state plan amendments (SPAs) sent to CMS must contain an access monitoring review plan that outlines how the Medicaid agency plans to monitor access to those services affected by any rate reductions. Access must be monitored for 3 years.**

Questions?