



**DIVISION OF MEDICAL ASSISTANCE**

**MEDICAID ACCESS MONITORING**

**UPDATE**

---

**Jeff Horton**  
**Utilization Committee Chair, DMA**

**September 16, 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



- **Plan submitted to internal DMA staff, including Assistant Directors and Executive Leadership for review and comment**
- **Plan also submitted to Department staff for review and comment**
- **Presentation explaining the rule provided to the MCAC its June 3, 2016 meeting**
- **DRAFT Access Monitoring Review Plan sent to MCAC members for questions/comments on August 11, 2016**

# Progress to date



- Rule requires posting DRAFT Plan to website for public and provider comment for a 30-day period prior to submission to CMS on October 1, 2016
- DRAFT Plan posted to DMA website on August 25, 2016 and public comment period to end September 26, 2016
- Plan scheduled to be sent to CMS no later than October 1, 2016

# Next Steps



- **Current data/services in DRAFT Plan and soon to be final plan will require further review and analysis to determine what constituted a decrease in utilization in some areas, particularly primary care and home health.**
- **Data will be reviewed quarterly to identify trends in provider enrollment and utilization of 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?**