

MCAC Access Subcommittee Meeting
Wednesday, April 5, 2017
441 Fourth St. NW, Washington DC
SUMMARY

Attendees

- Angela Miller, Medicaid Beneficiary*
- Edwin Chapman, M.D.
- Guy Durant, Medicaid Beneficiary*
- Nnemdi Elias, M.D.*
- Seiji Hayashi, M.D. Chair*
- Yorick Uzes, Special Projects Officer, DHCF

*MCAC member

Summary

Mr. Hayashi convened the meeting. Mr. Uzes presented a series of Powerpoint slides that provided an overview of DHCF's first Access Monitoring Review Plan, published September 2016, and listed possible next steps for monitoring and reporting on access issues. Subcommittee members had the following feedback/questions:

- The heat map showing the location of providers v. beneficiaries should break out smaller geographic increments, such as zip codes, census tracts, or ANCs. Wards are too large an area, and go into sufficient detail to understand exactly where the Medicaid population is. In particular, there was surprise that Ward 2 had a comparable beneficiary population to Ward 8 and significantly more beneficiaries than Ward 7. Small geographic increments would help better understand where in Ward 2 the Medicaid beneficiaries are.
- Subcommittee members asked several questions about the Medicaid eligibility categories, differences between Medicaid and Medicare, and distinction between DC Medicaid's managed care and FFS programs. Given all the complexity, there was concern about how Medicaid beneficiaries know which program they are in and what services they qualify for.
- Subcommittee members asked several questions about DHCF's plans to track complaints. They asked if complaint tracking would include complaints made to the ombudsman and directly to managed care companies. Mr. Uzes responded that the former would be included, and he would check on whether the latter was possible.
- One subcommittee member was concerned about access to social work services. The member wanted to know whether and how beneficiaries could access care from social workers. Mr. Uzes and Dr. Hayashi responded that social workers are imbedded in provider organizations that participate in

Please Note: This summary consists of informal notes taken during a MCAC subcommittee meeting. As such, it does not constitute official MCAC meeting minutes.

Medicaid, and beneficiaries get social work services through those providers, but there is no social work benefit per se. The member was interested in learning more about how social work services are provided through the Health Homes program.

Next Steps

Mr. Uzes will

- schedule the next meeting
- check whether DHCF has access to complaints made by beneficiaries to managed care organizations, and if so, whether it is feasible to include them in complaint tracking
- bring more information to the next meeting about how beneficiaries are steered into the FFS v. managed care v. waiver programs and how they find out what their benefits are
- inquire about social work services provided as part of the Health Homes program