

Michigan Department of Community Health
Traumatic Brain Injury (TBI) Waiver Stakeholder Meeting

Meeting Minutes

November 3, 2014
10:00 a.m. – 12:00 p.m.
Capitol Commons Center – Lower Level

Finance & Reimbursement

Facilitators: Carol Hansen, Elizabeth Gallagher

Attendees:

I. Welcome and Introductions – Carol Hansen

II. TBI Cost Presentation - Bill from Rainbow Rehab Centers

- PowerPoint Presentation to be sent to Carol Hansen.
- Community integration is costly.
- Following licensing rules is costly.
- Power point showed that the provider's cost to provide services to the typical MOU client is over \$800.00 per day. The MOU Program currently pays \$377.00 per day. That rate was set in 2007 and has not been increased since then.

III. Setting Capitation Rates – Penny Rutledge, MDCH Actuarial Section

- Capitation rates must be actuarially sound, approved and certified by an actuary. The final capitation rates must be reasonable, and the documentation must be sufficient to demonstrate that the rates comply with applicable laws.
- Actuarial soundness ensures that health plans serving state Medicaid programs are adequately reimbursed based on the cost of health care expenditures and the populations served. These rates must also be sustainable to ensure companies will not go out of business.
- CMS has strict guidelines what we are allowed to reimburse for under the waiver application. Only those costs are included in rate setting.
- Rates are usually historically based and also based on availability of State funds. Rates stratified based on what the data shows.
- Usually a cost differential on what Medicare/Medicaid pays.
- Reimbursement is typically a capitated payment once per month for each individual an agency serves. Not a daily cost. Totally different from fee-for-service.

IV. Open Discussion – All

- Brain Injury Waiver Proposal Concept Paper handed out – plan to discuss in more detail at a future meeting.
- What kind of data do TBI providers have to help develop rates?
 - There is a rate document that most use.
- State of Maine – costs may provide guidance
- Anything need to be carved out?
 - Vehicle/Home Mods – super small population. May need to be carved out.
 - Higher cost populations
- Capitation seems difficult to calculate with such a small population. If we went fee-for-service, the program may need to use fee screens. Not desirable to some.
- The purpose of this waiver is to access federal funds to help pay for the program.
- Question about how to get more funding – An increase in funding is not currently in the FY 2016 budget. A request may or may not have been submitted (unsure). Advocates should talk to MDCH leadership to encourage more funding.
- For this waiver, the proposed financial eligibility would be 300% of SSI. Individuals can't spend down to that amount.

Next Meeting – Quality and Critical Incidents, Monday, December 8 from 10:00-12:00