



2018 MID-YEAR REPORT

NAME: Linda L. Piazza, MS, CCC/SLP

DATE: 6/29/18

EXECUTIVE BOARD OFFICE:

COMMITTEE CHAIR POSITION: ASHA State Advocate for Reimbursement (STARs)

1. Primary Accomplishments of 2018 to date:

Tie each to the strategic plan and goals submitted in January

I have participated in monthly conference calls facilitated by Laurie Havens, Director, Private Health Plans & Medicaid Advocacy, ASHA. STARs from differing states are on the calls so we are able to share our problems, concerns and challenges as well as reimbursement issues in other states. This information is then shared with the Vice President of Health Issues and with the Health Care Committee. I have learned by listening to Medicaid challenges in other states, that Mississippi Medicaid reimbursement rates for speech/language services are higher than in many states.

The Division of Medicaid was reauthorized during the 2018 Legislative Session with only a few changes to the program. A special committee was authorized to study the cost effectiveness of the Managed Care Program. The bill does contain a measure that allows the Division of Medicaid to cut provider rates if the division thinks there will be a budget shortfall for the year. This will be monitored closely.

2. Major Challenges:

1. Telepractice: I will work with Jeffalyn Trammell on this issue. Jeffalyn has worked tirelessly on this issue and has made significant progress. The challenge is for the Division of Medicaid to add speech/language pathologists to the list of approved telepractice providers. Other states are having difficulty with obtaining Telepractice for speech/language services approved, as well.
2. Habilitative Services. At this time, there is limited coverage of these services by companies in the Mississippi Marketplace.

The STAR call in June was to be a presentation on reimbursement and coverage of Habilitative services. However, the Trump Administration told a federal court recently that it would no longer defend crucial provisions of the Affordable Care Act that protect consumers with pre-existing medical conditions. Due to the uncertainty as to what the ramifications of this will be, that presentation was postponed until there is more information about this recent development.

3. Molina Care is now a Managed Care Provider for MSCAN. I have been informed by several other states that have Molina Care, that it is very difficult to obtain speech therapy prior approvals from Molina Care. I discussed this with a representative from Medicaid at MSHA and she told me that they had heard concerning information about Molina Care as well. I was assured that Molina Care would be required to follow the Division of Medicaid policy for providing services. She requested that we keep her informed of any problems that providers encounter with approvals/reimbursements for speech therapy services with Molina Care.
4. Mississippi Medicaid has requested a Medicaid work requirement under its section 1115 waiver and is now awaiting federal action.

Plans/Directions for remainder of 2018:

1. I plan to continue with the STAR call participation and to provide pertinent information to MSHA.
2. I will continue to monitor Medicaid related issues that affect the delivery of needed services to patients.
3. I will continue to work with VP of Healthcare to coordinate our efforts as advocates for providers in their efforts to serve their clients/patients.
4. I would like to develop a survey to assess the needs and primary concerns of SLP's who provide therapy services and bill Medicaid/MSCAN or Mississippi Marketplace plans for these services.