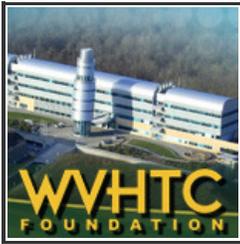


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Advocates want new Medicaid plan suspended

By Anna Sale



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June 12, 2008 · A coalition of religious, labor and health advocacy groups are calling for the state's redesigned Medicaid program to be halted, just seven months after the program went statewide, DHHR Secretary Martha Walker accuses them of hanging on to the status quo.

A coalition of religious, labor and health advocacy groups are calling for the state's redesigned Medicaid program to be halted, just seven months after the program went statewide. State Department of Health and Human Resources Secretary Martha Walker accuses them of hanging on to the status quo.

The new program, called Mountain Health Choices, offers two plans – a scaled-back basic plan, and an enhanced plan that covers more if recipients sign an agreement to take more responsibility for their health.

According to an analysis by the FACES on Medicaid coalition, just seven percent of the eligible low income children and adults that are enrolled in the redesign program are in its more comprehensive, enhanced plan. That means that 93 percent are in the basic plan. That plan doesn't cover things like smoking cessation, nutrition education, and some mental health services. It also limits prescriptions to 4 per month.

Advocates are afraid that many of the children and parents that ended up in this basic plan didn't choose it, but ended up there because they didn't understand the changes.

"The fact is that the Medicaid redesign program is a failed policy," said Perry Bryant, the director of West Virginians for Affordable Health Care.

"Medicaid has spent a year and a half doing virtually nothing other than the redesign program," Bryant said. "They've put all their effort into that. It's time to set that aside and work at improving the health status of Medicaid recipients."

To enroll in the enhanced plan, Medicaid recipients have to go to the doctor and sign a member responsibility agreement. If they don't make it in on time, they go into the default plan, which is the stripped-down basic one.

That's the idea with adults, at least. 80% of Mountain Health Choices recipients are children, so it's up to their parents to get them in the right plan.

Evelyn Dortch says there is a lot of confusion about how this new program works. She runs the Direct Action Welfare Group, an organization made up of people on Medicaid and other public assistance.

"They get a packet in the mail, and it says go to your medical home. It doesn't explain what a medical home is. And they're saying, what's a medical home?" Dortch said. "I get calls from doctors saying they've brought this packet in, now what am I supposed to do with it,

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because it's the doctors responsibility to then fax it in this fax number. And I have doctors calling me. And I'm not in charge of the program. We're just an advocacy group made up of people who get Medicaid and get welfare."

The FACES of Medicaid Coalition says the redesign program was rolled out before the necessary policies were in place to make sure it worked.

For example, the Manchin Administration's redesign plan included something called Healthy Reward accounts. It described them as a way for people to accrue credits for making good health decisions, like staying out of the emergency room when it wasn't an emergency or not missing scheduled doctor's appointments. Medicaid recipients could then use the credits to cover services Medicaid didn't. But these healthy reward accounts have not been approved yet by the federal government and are not available.

In the meantime, the coalition says, Medicaid recipients are inadvertently landing in the basic plan, and are surprised to come up against limits on things like prescriptions.

"We are concerned that Medicaid redesign hurts more people than it helps," Dortch said.

The coalition wants the Mountain Health Choices program suspended. While the kinks are worked out, they want the state to return the traditional Medicaid model or at least make the enhanced plan the default.

The Department of Health and Human Resources says that is not going to happen. John Law is the agency's spokesman.

"Well, we're not going to suspend Mountain Health Choices because it's a good program," Law said. "It's a good program that allows people to make a choice in their health care, and that's something we haven't had in Medicaid. So, if there are problems, we'll certainly work through. We'll work through them with our members and our providers, but we're not going to suspend the program."

Law says that the longer programs have been in counties, the more people are finding out about how it works. In the three counties where the program started more than a year ago, the enrollment rate in the enhanced plan is higher, but it doesn't exceed 21 percent anywhere, according to the coalition's analysis.

"A lot of times, you don't make the choice that you want an enhanced plan if you're healthy and you feel well. That may or may not be a good choice. That may be an area of education that we need to address at some point but I think allowing people to make that choice is very important," Law said.

DHHR Secretary Martha Walker issued a strongly worded statement on Wednesday. She called group's report a rehash of old information, and continued, "There are some groups satisfied with the status quo. Maintaining that status quo is their job security."

That didn't sit well with Perry Bryant with West Virginians for Affordable Health Care.

"I'm personally offended that they would equate our concerns about the redesign program with job security," Bryant said. "It has nothing to do with job security. Frankly, I wish they would stick to the issues, and let's talk about the issues, as opposed to personal attacks, which I don't find beneficial or meaningful."

What happens after this dust-up isn't clear. Coalition members say they hope this gets the Manchin administration's attention, while the administration remains committed to this model. DHHR says it will take about five years to enough data to evaluate Mountain Health Choices'

impact.

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