

# Summary of Discussion from February 15, 2013 Duals Implementation Council Meeting

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## **Integrating Medicare and Medicaid for Duals Eligibles**

### **Implementation Council Meeting**

**February 15, 2013 1 PM – 3 PM**

**Transportation Building, 10 Park Plaza, Boston,  
Conference Rooms 1-3 on the Second Floor**

**Council Members Present:** Suzann Bedrosian, Bruce Bird, Theodore Chelmow, Myiesha Demery, Joseph Finn, Anne Fracht, Rebecca Gutman, Dennis Heaphy, Audrey Higbee, Jeffrey Keilson, Denise Karuth (by phone), David Matteodo, Daniel McHale, Dale Mitchell, Vivian Nunez, Jorge Pagan-Ramos, Olivia Richard, Robert Rousseau, Peter Tallas, Howard Trachtman, Florette Willis

**Council Members Absent:** N/A

**Additional Attendees:** Robin Callahan, Catherine Harrison, Wendy Trafton

**Handouts:** Agenda, membership list and Ombudsperson presentation

**Next Open Meeting:** March 15, 2013 from 1 PM – 3 PM, 10 Park Plaza, Boston.

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## 1) Introductions

- Wendy Trafton, facilitator from UMass Medical School, welcomed Implementation Council members and attendees, presented the meeting agenda and lead Council member introductions. Future Implementation Council meetings will be planned and facilitated by the Implementation Chair and Co-Chairs.
- Implementation Council members and MassHealth representatives provided brief introductions including name and organizational affiliation/representation.

## 2) Ombudsperson Discussion

- Implementation Council members discussed options for the development of the Ombudsperson role. The following feedback on the Ombudsperson was heard:

### *Timing*

- The timing of the Demonstration should be taken into consideration. The Ombudsperson Office will need to be operational as soon as ICOs begin accepting enrollees.
  - Establishing an Ombudsperson Office within a state agency may be the fastest route to operationalizing the Ombudsperson entity.

### *Independence*

- Several Council members expressed concern with the independence of the Ombudsperson if located in a state agency.
  - It was noted that the nature of the Ombudsperson role requires conflict free judgment and ability to act.
  - In addition to independence from the state, it was noted that Ombudsperson should also be independent of ICOs and organizations that contract with ICOs as providers and IL-LTSS Coordinators in order to maintain the highest level of objectivity.
  - It was suggested that the Ombudsperson entity could be developed in such a way that the individual or individuals responsible for the role report directly to the Secretary of the Executive Office of Health and Human Services (EOHHS).

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### *Competency*

- A council member noted that Ombudsperson level of competency is essential to consider when developing the job description for the role. Noted important competencies and features include:
  - Conflict free
  - Knowledge of Medicare and Medicaid rights
  - Knowledge of the Duals Demonstration
  - Knowledge of Waiver structures and requirements
  - Knowledge of appeals systems and rights
  - Legal capacity - either on staff attorneys or access to attorney resources
  - Trust by the community
  - Extensive ties to community organizations
  - Aging and disability competencies
  - Language and cultural competencies
  - Capability of communicating with individuals cognitive and intellectual disabilities
  - Accessible to individuals located outside of the Greater Boston community
  - Familiarity with disability rights laws such as the Olmstead Decision and Independent Living principles
  - Knowledge of medical necessity criteria
  - Multiple modalities of communication capability via telephone, internet, and in-person
  - Ability to raise issues with decision making entities
  - Timely response capability

### *Capacity*

- Members agreed that the Ombudsperson needs to have the authority to adequately address problems brought to him/her.
- If the Ombudsperson entity is not housed within MassHealth, a relationship with MassHealth must be developed in order to access data within the MassHealth system.

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- In this circumstance, it was noted, that MassHealth would develop a line of communication between the Ombudsperson Office and the MassHealth staff with access to relevant member data.
- Ombudsperson entity will need to access difficult to reach populations such as the homeless, individuals with substance use disorders, victims of domestic abuse, and individuals who speak diverse languages.

### *Additional Comments*

- Clarification was requested on how complaints filed to an Ombudsperson Office would fit into the Duals Demonstration.
  - It was noted the Grievance and Appeals process is a distinct process under the Duals Demonstration and may not directly involve the Ombudsperson.
- One member suggested that a subcommittee or workgroup of the Implementation Council could work toward submitting recommended job description for the role of the Ombudsperson.
- It was noted that Wisconsin, Vermont, Hawaii, and New York have Ombudsman Office models in place and may be used as a resource regarding questions that arise around the role and structure of the Ombudsperson role in Massachusetts.
- It was clarified that by independent entity, the group was referring to a private/non-profit entity, not an individual acting as an independent consultant.

### ***Implementation Council Decisions***

Motion: The Ombudsman unit will be housed in an external entity, outside of state government.

- Ayes: 13
- Nays: 7
- Abstain: 1

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### 3) Consumer Chairperson Discussion

The role of and eligibility requirements for the Consumer Chair position were reviewed. The following motions were brought forward by Implementation Council Members:

#### *Implementation Council Decisions*

Motion: The Implementation Council will be facilitated by two Co-Chair persons.

- Ayes: 20
- Nahs: 0
- Abstain: 1
- Nominees for Co-Chair position:
  - Dennis Heaphy
  - Howard Trachtman
  - Florette Willis
- Council members were asked to vote for two individuals via a ballot vote.
  - Dennis Heaphy received the most number of votes
  - Florette Willis and Howard Trachtman received an equal number of votes

Motion: The Implementation Council will be facilitated by a Chair and two Co-Chairs.

- Ayes: 20
- Nays: 0
- Abstain: 1
- The motion for Dennis Heaphy to serve as Implementation Council Chair and for Howard Trachtman and Florette Willis to serve as Co-Chair persons was carried.

### 4) Meeting Structure Discussion and Work Plan

- Due to time limitations the Implementation Council did not discuss future meeting structure or a Work Plan.