

Arkansas Health Reform Task Force Recommendations Comparison Matrix for Other Traditional Medicaid Changes

Category	#	Recommendation	Source of Recommendations	
			TSG	Dmd Care
Pharmacy	1	Expand prescription drug list, including behavioral health meds (anti-psychotic)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	2	Pharmacy lock-in and provider lock-in options for preventing prescription drug abuse and diversion	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	3	Explore multi-state prescription drug list (value based purchasing)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	4	Move manual reviews by licensed psychiatrist from age 6 to 7, and eventually up to age 10 with evidence of continued higher cost avoidance	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	5	Add another 100 drugs to the CAP (Competitive Acquisition Program)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	6	Give Medicaid access to prescription monitoring program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	7	Include reimbursement to pharmacy for immunizations, with certain criteria and referrals	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	8	Consolidate the outsourced pharmacy call centers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	9	Remove prescription drug limits on maintenance medications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	10	Re-contract the retail pharmacy network seeking better ingredient cost discounts for brand drugs and lower dispensing fees for all brand and generic prescriptions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dental	11	Capitated full risk managed care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	12	Implement value based third party administrator for dental with dental homes and case management	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Payment improvement initiatives	13	No new EOCs for primary care and incorporate into the PCMH initiative	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	14	Stop further expansion of EOCs	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Home and community-based care enhancements	15	Move towards enhancing community based care - rebalancing LTC	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	16	Improve the reimbursement approval process for providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	17	Reimburse residential care facilities for transportation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	18	Rationalize rules guiding residential care facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Contract changes to embrace enhanced PCMH or full risk managed care	19	Renegotiate IT Contracts Following the Principles in the TSG Recommendations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	20	Implement contract changes as recommended in TSG Recommendations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	21	Discontinue certain IT contracts already planned to be discontinued by DHS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Organizational changes to embrace enhanced PCMH or full risk managed care	22	Modify organization structure to better manage the providers and services to stakeholders	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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Enhance program integrity	23	Identify additional verifications required for specific programs as contained in TSG recommendations, including design and development of enterprise eligibility hub that is supported by DFA	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	24	Develop Arkansas Works program, with proper EEF and redetermination system approaches	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	25	Strengthen program integrity of traditional Medicaid and Arkansas Works	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Streamlined 1115 waiver	26	Make Community-First Choice Option part of 1115 waiver negotiations without entitlement	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	27	Seek a global 1115 waiver and consolidate all existing waivers and SPAs for traditional Medicaid program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Developmental disabilities	28	Seek a global 1115 waiver and consolidate all existing waivers and SPAs, and include the expansion population	<input type="checkbox"/>	<input type="checkbox"/>
	29	Develop supportive employment programs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	30	Independent Assessment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	31	Incentivize supported employment with an annual benchmark of getting more people engaged in meaningful employment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Behavioral health	32	Establish a commission on the future of the Human Development Centers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	33	Beneficiary must have diagnosis of mental illness and will require referral	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	34	Independent Assessment		
	35	Apply a tiered approach based on diagnosis and level of treatment and incorporate school based services into the tiered referral system with care coordination	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	36	Allow PCP to bill for behavioral health services in their offices	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Aging	37	Define benefit limits and conduct assessments	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	38	Independent Assessment			
	39	Place cap on beneficiaries	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	40	Place tiers on services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Long term care	41	Utilize existing infrastructure of rural nursing facilities to provide care coordination and home & community based services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	42	Reform levels of care to a higher level of acuity for nursing facility level care and adding a preventive level of care designed to keep people from deteriorating to a NF level of care based on the TennCare Choices acuity based assessment instrument, levels of service and payment structure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Hospital	43	Independent Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	44	Work to transition more beneficiaries to home care following rehab stays	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	45	Eliminate provisional rates	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	46	Cap liability insurance reimbursement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	47	Increase the threshold for population based methodology	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	48	Study the impact of moving to DRG (Diagnosis Related Group) reimbursement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	49	Implement DRG model	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	50	Levelize reimbursement rates among state-supported institutions and private institutions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Arkansas health improvement dashboard	51	Create a health improvement dashboard	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Integrate and promote Healthy Active Arkansas	52	Provide health education with support from UA Extension Offices through the Healthy Arkansas Plan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	53	Provide new enrollee Medicaid orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	54	Possibly model education after Minority Health Commission protocol	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other	55	Administrative finding of deficiency not be used for civil action or liability	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	56	Develop options for liability insurance	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	57	Develop collaborations with Arkansas colleges and universities to recruit future Arkansas health care leaders	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	58	Create a strategic state planning and analysis research center similar to that of (nSPARC) at MSU	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	59	Develop an action strategy to address the mentally ill and jail diversion	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	60	Clear the backlog in long term care financial eligibility determinations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	61	Continuing moving to telemedicine services	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	62	Create Legislative oversight panel for implementation and transition	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Other waiver options	63	Revoke State Plan Amendment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	64	Apply for 1915i waiver (State can control costs and place caps on services)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	65	Revoke personal care state plan amendment (State can control costs and place caps on services)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	66	Apply for waiver that would create bundling of services and eliminate duplicate services (ElderChoices, AAPD-Alternative for Adults with Physical Disabilities, Independent Choices, LCAL-Living Choices Assisted Living)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	67	Reform ACS Waiver - keep current 1915c Waiver, but reform	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	68	Revoke DDTCS as State Plan Amendment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	69	Apply for a 1915i waiver to bundle and include current services (CHMS, DDTCS, Transportation, ST, PT, OT) based on assessed needs	<input type="checkbox"/>	<input checked="" type="checkbox"/>