

# Medicaid Matters

## State seeks federal approval of a new capitated care system

Calling Regional Care Organizations the “cornerstone” of Alabama’s Medicaid transformation plan, state officials asked the federal government to approve a plan to move Medicaid away from a fee-for-service payment model to a capitated managed care system. The request, in the form of a [Section 1115 Demonstration](#) waiver application, was submitted to the Centers for Medicare and Medicaid Services on May 30.



If approved, the waiver would allow the state to implement Regional Care Organizations by building on the successes of the Agency’s Patient 1st maternity and health home programs while injecting additional funds needed to build necessary administrative infrastructure and support providers through the transition.

Prior to submission of the waiver application, the Agency held two public hearings and reviewed more than 400 questions, comments and suggestions from providers, recipients, advocates and the general public.

“Our goal is to preserve the fundamental principles of these existing programs through the development of RCOs in order to improve care coordination, clinical outcomes, patient engagement, and access while ensuring the long-term sustainability of Alabama’s Medicaid program,” said Dr. Donald Williamson, State Health Officer and Chair of the Medicaid Transition Task Force. [Read more >>](#)

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## Gateway to Community Living expands resources for elderly, disabled

For elderly and disabled individuals, the dream of living in one’s own home is often replaced by the realities of disability, disease or age. It’s also a fact that once a person moves to an institution, returning to the community can be an overwhelming and challenging task.

Today, Alabama Medicaid recipients can call on the resources of the [Gateway to Community Living](#) initiative to help them determine if they can live safely in the community and if so, locate housing, arrange for necessary services and make the move.

“To successfully transition back into the community from a nursing home or other institution, a specialized – but temporary -- array of services are needed,” said Ginger Wettingfeld, project manager. “The Gateway to Community Living initiative is designed to support those recipients by providing a dedicated Transition Coordinator or Case Manager who can help plan the move, find affordable and accessible housing, purchase basic home-making supplies or perform other related tasks. The program is also set up to assist with one-time transition costs such as rental and utility deposits.” [Read more >>](#)



**Inside:** • East Alabama providers connect in test of Health Information Exchange  
• New technology helps drive quality improvement and cost-savings

Alabama Medicaid Agency P.O. Box 5624 Montgomery, AL 36103-5624

## East Alabama providers connect in test of Health Information Exchange

Improving patient health outcomes is one of the primary goals of the Alabama Medicaid Agency's proposed Regional Care Organizations (RCOs). To that end, a legislatively-mandated Quality Assurance Committee voted in May to use approximately 40 measures to assess the quality of care provided by RCOs and contracted providers. Now, a pilot project in east Alabama is helping providers test new technology to securely exchange patient data and provide feedback on those measures.



The pilot project will connect electronic health record systems at East Alabama Medical Center (Opelika), Lanier Memorial Hospital (Valley), four referring clinics in the area and approximately 15 local physicians to [One Health Record®](#), the state's health information exchange (HIE) system, according to HIE Operations Consultant Bill Mixon.

"We hope to have all of our participating providers connected by the end of June," he said, explaining that once connected, the providers will help the state test the function of the system over the next several months and identify any issues before Medicaid takes the system statewide.

Participating providers will benefit from the ability to access information on any patient with whom they have a clinical relationship, and will receive alerts when those patients are seen at the hospital or as the result of a referral to another provider, Mixon said.

Electronic exchange of health information has been a major priority as the Agency has moved away from a fee-for-service payment system to a risk-based system that recognizes and rewards quality and outcomes instead of volume. [Read more >>](#)

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## New technology helps drive quality improvement and cost-savings

With an average monthly enrollment of more than 1 million Alabama citizens, the Alabama Medicaid Agency knows that much of its future success depends on its ability to analyze data on illness, treatment and costs at a detailed level.

"What we have learned is that you cannot generalize about a group that represents roughly 22 percent of the state's population," said Medicaid Medical Director Dr. Robert Moon. "Our goal is to capture and analyze data to better inform the use of Medicaid's limited resources, but also to drive health care quality improvement as a part of our overall transformation process."



A federal grant awarded in 2012 made it possible for the Agency to create a Quality Analytics Unit to increase the agency's standardized collection and reporting of health care quality data for Medicaid-eligible adults. Using SAS Visual Analytics, an online tool that enables analysts to share data with decision makers, the agency is now able more precisely integrate and view data on illnesses, treatments and costs, segmented by population and geography.

"What we have been able to do is to turn data into information that can drive quality decisions and achieve better health outcomes," Dr. Moon said. [Read more >>](#)

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