**CRC Advisory Minutes**

5/12/16

**Advisory members’ action steps/follow-up requests:**

Share any/all of below as pertinent to your team. Highlights:

* + **Southwest**- If you have a family you’d like to give passes who has already used the new maximum **please let us know the number you would have liked to offer; it will help us determine how many to request for next year.**
1. Any resource lists, webpages, etc. that we should create or update? Or other administrative/clerical project ideas for possible college intern?
2. DHCD now has an EA telephone intake option for those who cannot make it to a local office: 866-584-0653. We’d love to hear about your patients’ experiences with this new option. (Do they accept referrals or turn people away? Do they require justification for using phone rather than appearing in person?)
3. Prior to next meeting, please ask teams if they have any feedback, questions, project ideas, or resources to share.

Thanks!

***Style note****- Agenda content in black text; discussion, further information and follow-up requested in* ***purple****.*

Our big thanks and fond farewell to Barbara Maxam who has served on this committee for years and has been a special friend and collaborator with the CRC. We’ll miss you Barbara! Congrats on your retirement!

**Selected Updates**

* **Programs without Immigration Requirements** handout- UPDATED: [detailed](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/SpecificPopulations/SP_Immigrants_Prms_Undoc/Programs%20Without%20Immigration%20Requirements.pdf) and [brief](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/SpecificPopulations/SP_Immigrants_Prms_Undoc/Programs%20Without%20Immigration%20Requirements_short_vs.pdf) versions
	+ Note: **Fuel Assist/LIHEAP no longer on list**- now must have “qualified” status, but no 5 year bar ([more info](http://healthcare.partners.org/ss/ssframebottom/staffresources/news/2016/3-Newsletter.html#LIHEAP))
	+ **How would I find this on the website- is it under “Undocumented” somewhere?** Yes- we have a page of resources for the undocumented (See: [Undocumented Immigrants](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/SpecificPopulations/SP_Immigrants_Undocumented.html)) – including these documents and other related information.
* **New** [**DTA page**](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Basic%20Needs/BN_PB-CA_DTA.html) (as well as new [DTA Office **LIST**](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Basic%20Needs/DTA%20Offices.docx) - 5/16, created by Lindsey Krenzel (Also see [DTA Offices - **Search by Town**](http://webapps.ehs.state.ma.us/DTAOffices/default.aspx)) – page lists programs administered by DTA (on each program’s page it says to refer at DTA office- but we sometimes get the question from the other direction- what can one apply for at DTA.
* New [**Medical Food**](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Basic%20Needs/Nutrition/BN_Nutrition_MedicalFood.html) coverage page (Ensure, Boost, medical infant formula)
	+ After our discussion have added the following to the page: “Advocacy tip: Carnation Instant Breakfast is less expensive than Ensure and Boost. Before substituting, patients should ask their medical provider if it would be an acceptable substitute for them. (*Thanks to Barbara Maxam for this tip!*)”
* [**Obtaining a Death Certificate** -](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Health%20%26%20Illness/HI_Death-Dying_Fun-Bur.html#DeathCert) instructions
* New resource document: [**Financial Assistance, Exchange and Recycling Programs for Hearing Aids and Assistive Technology**](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Basic%20Needs/Hearing_Aid_List.doc) - Mass Commission for the Deaf & Hard of Hearing (12/15)
* [**CORI page**](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Legal/Legal_CORI.html) - revised & expanded; criminal records in employment & housing
* [LIHEAP/Fuel Assistance](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Basic%20Needs/BN_Utilities.html#FuelAssist) **Extended through May 13**
* [**Medical Marijuana - Guidance for Law Enforcement**](http://www.mass.gov/eohhs/docs/dph/quality/medical-marijuana/law-enforcement-guidance.pdf) (*Case consultation- can a pt can grow her own?*)
	+ Discussion- are there dispensaries open? Yes, there are [6 dispensaries](http://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/medical-marijuana/dispensing-rmds.html) open, though not convenient for all (hence the question of growing one’s own).
	+ Additionally, it is not illegal to purchase other than through a dispensary; excerpt from guidance document: **Where may a registered patient with a medical use of marijuana Program ID Card acquire their marijuana right now?** Chapter 369 allows a registered patient with a Program ID Card to possess a 60-day supply of marijuana. The law is silent about where the marijuana may be purchased, although once the RMDs are operational and open for business, patients will be able to purchase marijuana and marijuana infused products from an RMD. (*Emphasis added.*)
	+ After we had difficulty finding on the Staff Access Index under Medical Marijuana added an additional link just under Marijuana.
* [**2016 Special Needs Summer Camp List**](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/SpecificPopulations/2016SummerCamp.pdf) (2/16)

**Feedback/Resource Sharing**

* **Feedback, questions, project ideas, resource sharing from teams?**
	+ **Will we be requesting an increase in Southwest Airlines passes?** Yes- we had stable use for several years, and returned unused passes at end of year, meaning someone else wasn’t able to use them. This year the program usage took off (so to speak), so had to limit number of passes to max. 2 passes per family per year. We are monitoring and may adjust limits. Will request more passes next year. If you have a family you’d like to give passes who has already used the new maximum **please let us know the number you would have liked to offer; it will help us determine how many to request for next year.**
* **New Patient Handouts (as requested by CRC Advisory):**
	+ [**The PCA Program**](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/SpecificPopulations/SP_Disabled-PCAs.html) (3/16)
* **Student Intern-** in process of interviewing a possible summer intern; college senior (social psych). Seeking resource (or other appropriate) projects – lists that need updating, new lists, webpages needing updates, or other administrative/clerical project ideas? Please let Ellen know if you have any ideas; does not have to be resource oriented.
* **Resource Updates**
* **EA family shelter** - **DHCD now has an EA telephone intake option for those who cannot make it to a local office: 866-584-0653. We’d love to hear about your patients’ experiences with this new option.** (Do they accept referrals or turn people away? Do they require justification for using phone rather than appearing in person?)
	+ **Martha’s Vineyard and Nantucket Transportation Access Program –** highlighting because of our relationship with Nantucket Cottage Hosp. TAP is available through Martha’s Vineyard Community Services. If approved, the program will pay up to $750 per year for transportation and hotels for patients who live on Martha’s Vineyard or Nantucket who need to travel off-island for medical care. More [information and applications](http://www.mvcommunityservices.com/programs-and-services/transportation/). (Thanks to Martha Southworth). Where is this on website? On [Transportation](http://healthcare.partners.org/ss/ssframebottom/staffresources/New%20Site/Basic%20Needs/BN_Transportation.html) page, under Local Transportation & Information.
	+ **PCA Advocacy tip- Parents of ADULTS with disabilities:** one parent may serve as legal guardian and/or surrogate and the other may be paid as a PCA. (*Thanks Clorinda!*) Have added this tip to the webpage and the PCA handout.
		- Discussion- parents of **minors** are legally responsible relatives, so cannot be paid as PCA. A parent of an **adult** with disabilities can serve as PCA as long as the parent is not also a legal guardian or a surrogate. When a guardian or surrogate is needed for an adult, one parent can fill that role and the other can be paid to provide care as a PCA. **What if both parents are co-guardians?** Cannot serve as PCA- but may want to get legal advice as to whether to revise the guardianship. **What of an adult child** **of a disabled elder?** Same rules apply- the adult child can serve as a PCA as long as not guardian or surrogate, or couples can split roles.
	+ **Health Safety Net (HSN) Cuts as of 6/1 and 6/23**
		- **Joe Ianelli (Patient Financial Services) to present at SS Staff Mtg on 5/26/16**
		- **Program description:** not insurance,financed by hospital and health plan assessments and to a lesser amount the state. Serves those who don't qualify for other programs, those without a legal immigration status and those who need wrap-around coverage, such as those awaiting activation of their insurance, elders not covered by Medicare, and for legally authorized immigrants awaiting eligibility for comprehensive coverage (5 year bar).
		- **Changes:**
			* **Retroactive coverage**- as of 6/1/16 **10 days before application;** formerly 6 months retroactive. Hospitals and health centers will be able to determine applicants presumptively eligible even if unable to complete the application to protect the date.
			* **FULL HSN income limit decreases** – as of 6/23/16 limit for full HSN coverage will be 150% FPL; down from 200% FPL
			* **Partial HSN deductible begins at lower income– as of 6/23/16 Partial HSN deductible** begins after 150% FPL (formerly 200% FPL).
			* The **maximum income** **for PARTIAL HSN** **decreases** - as of 6/23/16 income limit for partial HSN is 300% FPL, down from 400% FPL. Though that those with high medical expenses may still qualify under “medical hardship” based on medical bills in excess of a certain percentage of income.
				+ **Impact on Partners physicians**: Even though the HSN regulations do not apply to physicians, our Partners Financial Assistance Policy requires POs to discount HSN Full patients 100% and HSN Partial patients 70%. Under new regulations the POs will be providing a 70% discount to patients 150%-200% FPL and will be billing 300%-400% FPL patients at full charges.
			* **Households determined eligible for Connector Care lose HSN eligibility after 90 days** of HSN eligibility **except for dental coverage** In other words, those eligible for Connector Care have 90 days to select and enroll in a ConnectorCare plan. At the end of the 90 days, these individuals may only use the HSN for HSN-eligible dental services.
				+ Due to system issues, this rule has only recently been enforced.
				+ As the Connector is now in a closed enrollment period, those who did not enroll by April will not be able to enroll now unless they qualify for a special enrollment period based on misinformation or errors by MassHealth, the Connector, application assisters or navigators. People with limited English who did not get accurate information in their language may have a basis for enrolling late.
				+ Going forward, new applicants found eligible for ConnectorCare will have 60 days from being found eligible to enroll, but if they fail to enroll, their HSN coverage will drop to “dental coverage only” 90 days after application.
			* MassHealth will communicate with stakeholders on the process and timing of re-determining those who would no longer meet the eligibility limit for HSN and the process and timing of re-determining and sending HSN approval notices containing new deductible amounts to those already eligible for the HSN program.

**Next meeting date:**

**August 11, Sept 8 or 15? (12:00) – please complete** [**Doodle Poll**](http://doodle.com/poll/haemw8i4tmhi87xi)