

**OCL Health Disparities Study  
Steering Committee Meeting  
June 7, 2007  
Meeting Minutes**

Present: Sandra Barrett, Betty DeFazio, Mayra Urrutia, Martha Ryan, Peter Sarver, and Amanda Torre-Norton.

The meeting began at 8:40 a.m. with a review of the May 10 minutes.

Today's meeting featured guest Steve Morgan, Executive Deputy Director of Social Services for Onondaga County, who responded to varied questions posed by the committee members present.

Steve stated that until recently, data was available by recipient only, that there was no aggregate data to be had. New York State now has a data warehouse from which information can be exported, processed and diagnosed. Queries used to take hours, but Steve and his staff now has Onondaga County's data on their own server to organize and view as they need to.

Medicaid refers an array of 10 to 12 different programs for which people may be eligible. Steve provided a chart outlining how much money is spent by the county on various Medicaid programs. Home health care seemed to be the leading expense.

Most of the Medicaid recipients are in managed care. Those in the SSI program are in managed care voluntarily at this point, but there are plans to change this. The end result, according to Steve, will be better and more streamlined care for recipients with a cost savings to taxpayers.

Steve's department uses data primarily to detect fraud and the misuse and abuse of services by recipients; they have a limited oversight over provider fraud. Using available data, Steve's department will analyze services to determine, for example, if recipients are abusing narcotics. They develop questions based on the data and begin an investigation. Once abusing recipients have been identified, some sort of intervention will occur to try to change the addictive behavior.

They will determine how many times a narcotics prescription has been issued to a recipient and whether the use is legitimate or not. Oftentimes, a recipient will fill an Rx from one provider and then another Rx from another provider. Much of the abuse problem occurs because recipients, such as those in SSI, are not in managed care where someone is responsible for coordinating the services provided. Steve provided the follow statistics: for those not in managed care, the top 10 "abusers" averaged 1.5 visits to emergency rooms per week; the top 100 "abusers" used ER's 900 times per year.

The State currently holds the authority to investigate miss use and abuse of the Medicaid system by providers. There are demo programs for this in several counties; Onondaga County is waiting for approval to look at the services provided.

Martha observed that the figures on Steve's chart indicate that Clinical Social Work expenditures are the least, when people on Medicaid require social work services the most. This fact could have a direct impact

on health outcomes. Steve agreed that the marriage of physical services and mental health services is fragmented.

Sandra asked Steve about the lack of Medicaid and Medicare providers. Steve responded that providers do not have to accept Medicare/Medicaid patients. Martha and Betty stated this problem is huge and has a direct impact on healthcare access and outcomes. The state is pushing for managed care, but in doing so, New York State needs the infrastructure to support these new enrollees.

Governor Spitzer is pushing to enroll more individuals who are eligible but currently uninsured, using facilitated enrollers as the arm of outreach. Steve thinks the number of eligible people in Onondaga County has been deemed higher than it actually is. He said the tape matches from New York State are done to determine who is eligible for services. They receive a card in the mail and “off they go.”

Betty asked whether the abuse that occurs matches the amount of effort made to uncover it. Steve responded yes, that there is a high potential for abuse in the areas of narcotics and ER usage. In 100 cases reviewed, 70% were using drugs correctly, while 30% gave either no response or unsatisfactory responses to questions posed by Social Services. The only recourse in these cases is to limit pharmacy access to correct the problem. Politicians say “look at abuse of the welfare system.”

According to Steve, on the client side, misuse and abuse are big problems, while fraud is not. On the provider side, fraud is the big problem. Providers are trying to maximize re-imburements by billing for unprovoked services, filling prescriptions not deliver to clients and billing for services provided at a higher rate than is allowed.

The session on Nutrition is scheduled for Monday, June 11 at the Dunbar Center.

The meeting was adjourned at 9:30 a.m.

**The next committee meeting is scheduled for Thursday, June 21 at 8:00 a.m. in Room 307 of University College.**