WILLIAMSON COUNTY & CITIES HEALTH DISTRICT
MEMORANDUM

Date: April 16, 2008

To: Judge Dan Gattis, Sr., Comm. Lisa Birkman, Comm. Ron Morrison, Comm. Valerie Covey, Comm. Cynthia Long, County Auditor David Flores, Asst Co. Atty. Dale Rye

From: Bride Roberts, WCCHD Community Health Education & Social Services Division Assistant Director

Subject: Proposed revision to Williamson County Indigent Health Care Program (WilCo Care) program cap

Recommended Action: Consider allowing limited primary and preventive care services for duration of fiscal year for persons who have met $30,000 spending cap during that fiscal year.

Issue:
The present limitation on WilCo Care expenditures, following state guidelines, is a maximum of 30 days hospitalization or $30,000 per year per enrollee. This cap has not changed since the original indigent health care legislation in 1986.

After an individual has met the spending cap, no more services are paid for that enrollee for the duration of the fiscal year. Managing physicians are ethically bound to continue to serve those with chronic medical needs, and often continue to do so without reimbursement. Providers and patients are further frustrated due to lack of funding for necessary prescriptions and diagnostic tests.

On average, 10 enrollees per year reach the annual spending cap each fiscal year. This is due in part to the ceaseless efforts of our team to achieve the most cost-effective medical management possible with limited funds, utilizing primary and preventive care services to best advantage. However, we have no control over major hospital costs due to motor vehicle accidents or other issues that may arise prior to enrollment in the program.

Proposal:
That, for persons who have met the annual cap on expenditures before the end of the state fiscal year, claims for certain limited medical services would continue to be paid—as long as that person continues to be eligible for services. Payable services would include: physician visits, laboratory testing, up to three prescription medications per month, diabetes testing supplies, ostomy supplies and oxygen therapy.

Following Commissioner Long's recommendation, we propose to cap additional expenditures per fiscal year at $5,000 per enrollee.

Pros

- The enrollee could continue to access necessary physician, pharmacy and lab services, up to the $5000 payment limit, during the same fiscal year as long as the person continues eligible
- Physicians would be more likely to contract as providers for WilCo Care if the program were revised in this manner.
- In the unlikely event that Williamson County would apply for state assistance funds, we have been informed by the state coordinator for indigent health care

services that expenditures over $30,000 may be considered as creditable expenditures and therefore eligible for reimbursement.

- Most enrollees with such high medical expenditures are in the process of applying for SSI. For those persons, procedures are in place to pursue Medicaid reimbursement to Williamson County for most services paid by our county. With improvements to that system planned during this fiscal year, we expect to achieve a higher rate of reimbursement than in the last two fiscal years.

Cons

- Cost to Williamson County would be slightly increased. If 10 persons per year cost as much as $5000 per year additionally, that would add $50,000 to program expenditures, or .2% of current year budgeted cost. (This amount has been included in our budget projections for FY2009.)

We will further seek to reduce the county's liability by assisting these patients to apply, as eligible, for donated medications through pharmaceutical manufacturer patient assistance programs. This will also assist the enrollee to access as many services as possible with limited funding.