


**Risk 362 + Tube Feeding =
Fiscal Responsibility**


Oregon WIC
Local Agency WIC Nutritionists

November 26, 2013
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Overview

- Background
- Medicaid in Oregon
- Western Region data
- Pilot project
- TWIST
 - New Tube feeding Question
 - Risk 362
- Input from LAWN




Background

- In Oregon, WIC is first payor for medical formulas
- OHP participants are referred to WIC for medical formula
- It is unknown how many WIC participants receive medical formula through tube feeding




Guidance from USDA

- WRO Policy Memo, 2001
- Medicaid will be first payor of medical formulas prescribed for WIC participants who are also Medicaid recipients
- State WIC agencies shall coordinate with Medicaid for provision of medical formulas



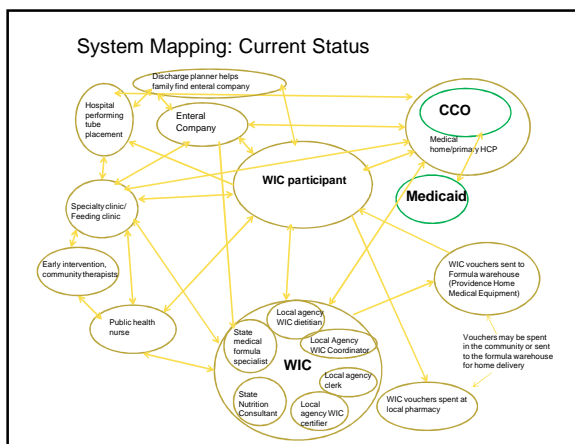
Medicaid in Oregon

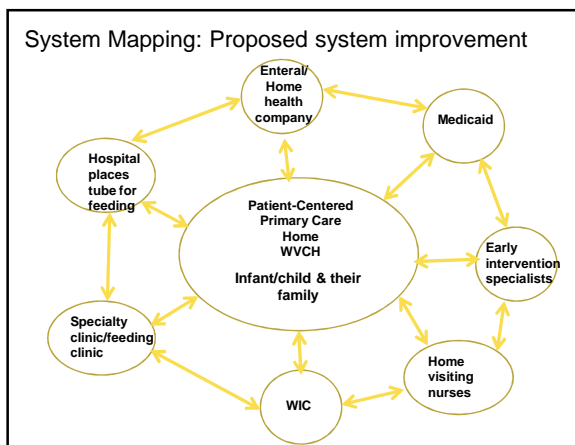
- Oregon WIC and the Division of Medical Assistance Programs (DMAP), do not have written guidance on coordination
- OHP typically provides the difference between the amount of formula needed and the maximum that WIC provides




How does this look in practice?

- Coordination is complicated and frustrating for families with medically fragile children
- Current system is messy and is an opportunity for systems improvement









What is WIC's role?

- WIC can provide food and oral supplementation
- WIC can provide education and referrals
- Medical nutrition therapy (MNT) is not WIC's primary role
- Home health/enteral companies are available 24/7 to monitor issues associated with tube feeding



How does Oregon compare?

- Survey of six Western Region WIC agencies
- Oregon is only state that is first payor of medical formulas
- Oregon WIC's formulary is twice the size of other states




Pilot Project

- Evaluate feasibility of transferring fiscal responsibility for medical formulas administered by tube feeding from WIC to Medicaid



Key Project Partners

- State WIC
- Option 1 Nutrition Solutions
- Marion County WIC
- Willamette Valley Community Health CCO
- DMAP
- OHA Innovator agent




Project Goal

- Identify tube fed participants
- Improve coordinated care for tube fed infants and children
- Medical formulas and tube feeding supplies provided by enteral supply company and billed to Medicaid
- Develop recommendation for statewide implementation




Questions?






Identifying tube fed participants

- Answer new tube feeding question in TWIST
- Located on infant and child's diet assessment questionnaire




TWIST Question

- “Is your child receiving any formula by tube feeding?”
- “Yes” response triggers assignment of Risk 362 and a high risk level




Risk 362

- Developmental, sensory or motor delays interfering with eating
- Includes tube feeding
- High risk
- Applies to all categories




Documentation of Risk 362 in Progress Notes

- Reason for tube feeding
- Type of tube feeding
- Name of formula being used
- Name of enteral company providing equipment and/or product




Project timeline

- Certifier training, 11/13
- Tube feeding question added to TWIST for Marion County, 12/13
- Develop communication tool for WIC and Option 1, 1/14
- Contact other enteral companies with shared Marion County participants, 1/14
- Assess progress, 2/14
- Ongoing conversations with DMAP




Input from LAWN

- Consistent use of Risk 362 for tube fed participants statewide
- Add tube feeding question for all agencies, 3/14
 - Training materials
 - Evaluation components
- Other thoughts for gathering tube feeding data?



Questions?





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