

COOPERATIVE AGREEMENT
Between The
AMERICAN SAMOA DEPARTMENT OF HEALTH MATERNAL AND CHILD HEALTH
TITLE V PROGRAM and the AMERICAN SAMOA MEDICAID STATE AGENCY

The cooperative agreement is made and executed this 18th day of July, 2018, by and between the American Samoa Medicaid State Agency (Title XIX) and the American Samoa Department of Health Maternal and Child Health Program (MCH Title V Grantee). This agreement between the two agencies is to ensure maximum utilization of medical services for pregnant women, infants, children and adolescents including children with special health needs (CSHCN) at the Federally Qualified Health Centers Community Health Centers (FQHC CHC). This agreement will also define the responsibilities of the parties hereto with respect to what each agency provides or pays for in terms of medical services available in American Samoa for the MCH Population.

American Samoa Medicaid State Agency:

The Medicaid Agency will reimburse primary health care services in any of the FQHC CHC for medical services provided to pregnant women, infants and children up to 21 years of age according to the Medicaid State Plan.

American Samoa Department of Health (DOH):

The DEPARTMENT OF HEALTH is the state agency that administers the Maternal and Child Health Program (MCH) under Title V of the Social Security Act; is also the state agency responsible for administering CSHCN in conformity with Title V of the Social Security Act; as well as the governor-appointed lead agency for administering early intervention services in conformity with Part C of the Individuals with Disabilities Education Act.

Maternal and Child Health Program (MCH):

The Title V MCH Program shall monitor, assess and fund, in part, MCH projects, which provide public health services including care coordination to pregnant women, infants, children and adolescents including CSHCN in American Samoa. MCH projects include advocating for early screening to promote prevention and protect overall health for pregnant women and children. Such screenings include Rheumatic Heart Disease for all school aged children, developmental screenings at well baby clinics, and comprehensive oral health screenings throughout the young ages of life.

The MCH Title V Program will ensure that all CSHCN, including infants and toddlers born to Zika positive mothers, will receive appropriate care coordination for all medical services available in any of the Medicaid provider facilities to improve accessibility, managed care and medical coverage. Care coordination services include tracking and monitoring of health care services, transportation, translation, home or school visits to assist in child find and medical home enrollment. CSHCN are enrolled with parental consent only. Referral to specialty care will be provided if physical screening determines a need and such specialty care is available on island.

MCH is responsible to implement interventions that are comprehensive, well-coordinated, and culturally sensitive and appropriate. MCH also collects all pertinent data information to re-evaluate the community-based Need Assessments every five years to determine health priorities and emerging needs to meet local health gaps identified. MCH Program will also advocate for families of CSHCN to both Title XIX and LBJ Tropical Medical Center to ensure that their CSHCN receive medical services and medication needed in an affordable rate or with no facility cost charged.

State Level Coordination

Continuous Liaison: To assure effective communication between Title XIX and Title V, both agencies will identify staff that will serve as liaisons between Title V, Title XIX, and the FQHC CHC. These persons shall have the authority to represent their respective agencies in the development and implementation of work plans and in the resolution of any programmatic or procedural problems. Any unresolved matters shall be submitted to the agency heads.

Data Sharing – Medicaid and DOH, through administration of the State Systems Development Initiative (SSDI) grant, will work cooperatively to improve data collection and analysis capacity in the MCH Program. Data will be used to carry out needs assessment activities, including identification of health priority needs for the MCH population. Cooperation will include sharing of data, support linking of data sets, research methodology and statistical analysis from each agency's appropriate personnel.

Periodic Review: The designated representatives shall meet as needed to evaluate and assess the joint efforts outlined in this agreement. The representatives shall meet not less than biannually to review and change or reaffirm this agreement.

Evaluation Policy: Each agency will assure an opportunity for the liaison staff and other affected staff to review and comment on proposed policy changes or initiative that may affect women, infants and children, including those children with special health care needs. Liaison staff may also propose policy changes for consideration by other programs.

Confidentiality: The disclosure by any party of any protected health information or other confidential information concerning a recipient of services purchased under this agreement for any purpose not directly connected with the administration of the responsibilities of the Medicaid Office or DOH with respect to any such services is prohibited, unless (1) the use or disclosure is permitted under state and federal law and written approval of the disclosure is given by both Medicaid Office and DOH, or (2) the recipient, recipient's attorney, or recipient's personal representative has signed a valid authorization for disclosure of the information.

Amendments: This agreement may be amended at anytime. Such amendment shall be effective only when it is in writing, is mutually agree to and is incorporated into the agreement.

By  07/23/18 07/23/18
Motusa Tuileama Nua Date
Director, American Samoa Department of Health

By  7/18/18
Sandra King Young Date
Director, American Samoa Medicaid State Agency