

MEDICAL ASSISTANCE ADVISORY COMMITTEE MEETING

May 27, 2021

Members present: Russ McDaid, Deborah Ann Shoemaker, Kathy Cubit, Teri Henning, Joe Glinka, Nancy Murray, Minta Livengood, Laval Miller-Wilson, Jeff Bechtel, Richard Edley, Julie Korick, Linda Litton

This meeting was held via webinar due to the COVID-19 pandemic.

Mr. Russ McDaid, Chair, called the May meeting of the Medical Assistance Advisory Committee (MAAC) to order at 10:02 a.m. Roll call was taken for committee members and Department of Human Services (Department) staff.

The minutes from the April 2021 meeting were approved by the committee.

Secretary's Update

Acting Secretary for the Department of Human Services, Meg Snead, joined the committee for an introduction and to discuss her focus and vision for the Department as she moves into her new role.

Acting Secretary Snead began by talking briefly about her background. She shared that she started her career in state government working for the Department as a policy specialist on Medicaid and mental health and substance abuse services. Prior to her appointment as acting Secretary of the Department she had been serving as the Secretary of Policy and Planning within the Governor's Office for the past two years. She stated that the services and programs that the Department administers are a passion for her and she is excited to be back. Acting Secretary Snead stated that there are approximately 18 months left in Governor Wolf's administration and the focus during that time will be to promote good health and economic well-being for the people served by the Department's programs and to continue to promote quality and licensed facilities around the Commonwealth.

Acting Secretary Snead stated that we continue to be in the midst of a pandemic, and it is important to have a clear vision to assist in navigating the changing circumstances. She shared that the American Rescue Plan Act provides an array of financial and policy resources to help states recover from the pandemic. The Department is working with the Governor's Office to plan for the most effective ways to utilize funds that are available.

Acting Secretary Snead also shared that she believes safe and stable housing is critical to ensure good health and well-being and she would love to use her time as Secretary to advance the Department's work in this area. Rental assistance funds received through the most recent Consolidated Appropriations Act and the American Rescue Plan Act allow the Department to provide stability to those who have been most

affected by the unstable economic climate caused by the pandemic. Acting Secretary Snead expressed concern for what could occur if the moratorium on evictions is lifted. She stated that we are still in a public health crisis and if a wave of evictions begins it will create another crisis which will extend far beyond this pandemic. She stated that the Emergency Rental Assistance Program (ERAP) is an opportunity to help renters and landlords who are struggling with past due rent or upcoming balances, so that they are able to settle deficits without further needing to destabilize someone with an eviction. Acting Secretary Snead said Pennsylvania received more than \$800 million for ERAP through the Appropriations Act and more funding is coming through the American Rescue Plan. She shared that according to a recent U.S. Census household poll, nearly 34% of Pennsylvania adults are living in households which are behind on rent or mortgage payments and facing eviction or foreclosure in the next two months. She stated that the Department will begin an aggressive promotional strategy for ERAP in the next few weeks and asked that committee members support the effort by promoting the program in areas where they live. Information about ERAP is available on the Department's website at www.dhs.pa.gov/ERAP.

Acting Secretary Snead went on to share that she is excited about the opportunity to extend the postpartum coverage period for mothers who are covered by Medicaid. That flexibility will give the Department the opportunity to support both mothers and children. Pennsylvania's Maternal Mortality Review Committee found an analysis of pregnancy related deaths that occurred from 2013-2018 which showed that nearly 60% of pregnancy related deaths came between 40 days and 1 year postpartum. Currently, postpartum coverage in Medicaid ends 60 days after the birth of a baby.

Finally, Acting Secretary Snead spoke about the Department's focus on licensing and quality-of-care in licensed facilities. She stated that this work requires strong regulations, and the revision of those regulations is not something that always moves as quickly as many would like. She stated that it is essential to focus on the goal of protecting vulnerable children, adults and seniors who require daily care and services. She promised that work to improve licensing oversight and promote quality of care will be a priority as long as she remains in the role of Secretary, and she expressed hope that this will create momentum across the provider system to continue this focus even after the current administration leaves office.

Acting Secretary Snead next opened the floor for any questions from committee members. Mr. Joe Glinka, Gateway Health and Chair of the Managed Care Delivery Systems Subcommittee, asked about thoughts on increasing resources for postpartum screening and associated early intervention for children to stabilize lives for the long-term. Acting Secretary Snead responded that we need to be looking at maternal health more broadly. She stated that the United States has the highest rate of maternal mortality in the industrialized world, and it disproportionately affects communities of color. She explained that it will be important to not only focus on expanding this coverage but also look for other resources that can be offered to mothers and the family as a whole. Ms. Sally Kozak, Deputy Secretary, Office of Medical Assistance Programs, added that over the past several years the Department has increased the focus and

commitment to ensuring that mothers and newborns have an opportunity to get off to a healthy start in life. She also stated that in 2019, requirements for a minimum number of maternal home visits were added to the HealthChoices agreement. The purpose of those visits is to assess the health of the mother and child and provide access to early intervention services when needed. Ms. Kozak shared that those requirements were expanded with the 2021 agreement, to include all caregivers and children up to 18 months of age. Requirements were also added for additional screenings, including screenings for maternal depression and child development.

Minta Livengood, Vice Chair of the Consumer Subcommittee, expressed concerns about rental and utility assistance and shared that she is aware of situations where individuals who need assistance find that they are not eligible through any of the available categories. Acting Secretary Snead responded that she is equally concerned about this issue. She also shared that there are enough funds available through this program, that in her opinion, no one should be getting evicted. She stated that the Department did not add any additional limitations on the program above and beyond what the Federal Government required. She stressed that in the coming weeks the Department will be going into communities across the Commonwealth to promote ERAP and work with local officials to get available dollars to individuals who need them as quickly as possible.

Dr. Richard Edley thanked Acting Secretary Snead for her remarks and expressed hope for continued and increased transparency and for the ability for providers and other stakeholders to be a part of the decision-making process. He also expressed a hope that as pandemic-related restrictions continue to be lifted, that Department leadership would get back to visiting facilities and programs to see issues firsthand. Ms. Snead responded that she would be happy to visit facilities and programs. She also shared that she greatly values stakeholder involvement and hopes to work to improve in that area moving forward.

Ms. Terri Henning asked if the Acting Secretary could give any additional information regarding the Department's plans for American Rescue Plan funding. Acting Secretary Snead responded that the Department is in active conversations with the Governor's office regarding this funding. She shared that there are some limitations on how this funding is used because the Department must work with the General Assembly to appropriate the dollars. She stated that the Department will stay engaged with stakeholders throughout the process and will provide updates as funding begins to go out.

An audience question was received from Mr. Lloyd Wertz, who asked if Acting Secretary Snead could share any intentions to ensure that consumer and family input will be used in developing processes and programs for behavioral health. Acting Secretary Snead stated that the individuals who receive services and participate in programs through the Department need to be involved and their input is critical. She stressed that she is happy to come visit programs and learn more about what is happening where services are being provided. She asked for individuals to reach out

and share opportunities where the Department may be missing opportunities for consumer input.

OMAP Update

Ms. Sally Kozak, Deputy Secretary, Office of Medical Assistance Programs (OMAP), provided the OMAP update.

Ms. Kozak began with an update on RISE, the statewide research and referral tool. Earlier this month the emergency procurement for the tool was cancelled. Ms. Kozak stated that there were requirements associated with the emergency procurement that could create challenges and potentially jeopardize the long-term feasibility of the procurement of the tool. Ms. Kozak stressed that this does not mean that the Department has given up on RISE, but that cancelling the emergency procurement gives more time to reassess the scope of the project and determine how to move forward in a sustainable manner. Ms. Kozak said that the goal is to create sustainable improvements in service coordination, delivery, and quality of care.

Ms. Kozak next announced that the Department is rescinding the waiver of prior authorization and allowing the managed care organizations (MCOs) to do the same. Ms. Kozak stated that prior authorization had been waived for various services at the beginning of the public health emergency. The waiver of prior authorization will be removed effective July 1, 2021. A corresponding Medical Assistance Bulletin (MAB) has been issued and is available on the Department's website. Ms. Kozak noted that the waiver of prior authorization for pediatric shift nursing will remain in place at this time.

OLTL Update

Ms. Jamie Buchenauer, Deputy Secretary, Office of Long-Term Living (OLTL), provided the OLTL update.

Ms. Buchenauer began by providing updates on OLTL's COVID-19 response. She announced that updated guidance for Adult Daily Living Centers was jointly issued by OLTL, ODP, and the Department of Aging on May 13, 2021. The updates included in the guidance address reopening and testing requirements specific to vaccination rates and vaccination status. The updated guidance can be found on the Department's COVID-19 Provider Resources webpage.

Ms. Buchenauer next shared information regarding the American Rescue Plan Act as it relates to OLTL and home and community-based services (HCBS). She shared that a State Medicaid Directors Letter was issued on May 13, 2021, which provides guidance to states on the uses of the enhanced Federal Medical Assistance Percentages (FMAP) for HCBS. Enhanced FMAP will be provided from April 1, 2021, to March 31, 2022. States are permitted to use the enhanced FMAP funding through March 31, 2024. Guidance outlines examples of activities to support the state, including: COVID 19 HCBS needs, HCBS capacity building, and LTSS rebalancing reform. Initial

State spending plans and narratives are due within 30 days. Ms. Buchenauer stated that OLTL is using input from stakeholders on how the additional funds should be used within the program. She encouraged stakeholders to provide suggestions to OLTL, preferably in writing, if they have not done so already.

Ms. Buchenauer next provided several updates on Community HealthChoices (CHC). She announced that on May 13, 2021, OLTL and the CHC Managed Care Organizations (CHC-MCOs) held the first stakeholder meeting for the upcoming Financial Management Services transition. OLTL and the CHC-MCOs reviewed the upcoming changes to the CHC program. An approach for the Act 150 program and OBRA waiver is still under review. The next stakeholder meeting on this topic is scheduled for June 28, 2021, and an invitation will be released soon.

Finally, Ms. Buchenauer discussed what OLTL is referring to as the “1768 Process”. Effective June 1, 2021, CHC-MCOs are to resume following the processes outlined in the Ops Memo entitled, “Circumstances When CHC Managed Care Organizations (MCO) Must Transmit the Home and Community Based Services (HCBS) Eligibility/Ineligibility/Change Form (PA 1768)”. The PA 1768 is used to notify the County Assistance Office when a CHC participant is determined clinically eligible for CHC HCBS or when a CHC participant, who is receiving HCBS, experiences a change affecting his or her eligibility for HCBS. Ms. Buchenauer noted that if the participant refuses to obtain a comprehensive needs assessment for a period of 30 days or more, the CHC-MCO must notify the participant in writing that the participant must complete the comprehensive needs assessment to receive HCBS. If the CHC-MCO is unable to contact the participant after attempting contact by phone three times, on three different days, at three different times of the day, the CHC-MCO must send the participant’s Service Coordinator or other CHC-MCO representative to visit the participant in-person at their home. If, after 30 days, the CHC-MCO is still unable to contact the participant, the CHC-MCO will then provide the participant with written notice of the contact attempts and pending termination of HCBS via a certified letter.

Ms. Livengood expressed concern with agencies finding coverage for individuals to come to the home to assist with the care of program participants and stated that the MCOs do not have enough staff. She offered to provide more detail later. Ms. Buchenauer stated that she would reach out for follow-up on this issue.

Mr. Glinka asked if the enhanced FMAP was available across the board to be used as the Department sees fit, or if it is limited to specific services. Ms. Buchenauer responded that specifics are outlined in the State Medicaid Directors letter, and it is limited to use in specific areas.

Ms. Kathy Cubit asked if there is any backlog in assessments due to the pandemic. Ms. Buchenauer responded that it is her understanding that there is no current backlog in assessments with the MCOs.

OMHSAS Update

Ms. Kendra Snuffer, Chief of Staff, Office of Mental Health and Substance Abuse Services (OMHSAS), and Dr. Dale Adair, Chief Psychiatric Officer, OMHSAS, provided the OMHSAS update.

Ms. Snuffer began with an update on the American Society of Addiction Medicine (ASAM) implementation. OMHSAS has been exploring options to increase rates in response to the costs associated with implementing ASAM for the past 2 months. While OMHSAS does not yet have a full solution or plan to share, discussions and development of a plan are underway.

Ms. Snuffer next provided an update on telehealth as it relates to the public health emergency. The Bureau of Professional and Occupational Affairs sent a notification regarding the temporary regulation waivers issued during the disaster declaration, referencing that the end of the state emergency declaration may also mean the end of many regulatory suspensions that have been in effect during this time. Ms. Snuffer stated that the letter used telemedicine as an example, and understandably this has created significant confusion and concern among the providers licensed by OMHSAS. Some of the telehealth flexibilities may indeed end with the emergency declaration, and OMHSAS can allow the use and reimbursement of telehealth for the delivery of many services beyond the public health emergency. OMHSAS is continuing to prepare the Pennsylvania Behavioral Health – Telehealth Bulletin for release and public comment.

Next, Dr. Adair provided an update on the National Suicide Prevention Hotline implementation. The national hotline will be moving to a 3-digit number, 9-8-8 effective July 2022. He shared that Pennsylvania was one of 46 states to be awarded a planning implementation grant to support the hotline rollout. OMHSAS has a project team in place to support the planning process. There will be a total of 13 9-8-8 call centers across the state. Legislation related to 9-8-8 is currently being developed.

ODP Update

Ms. Kristin Ahrens, Deputy Secretary, Office of Developmental Programs (ODP), provided the ODP update.

Ms. Ahrens began by providing an update on the call center that was set up by ODP, along with the partnership with Rite-Aid Pharmacies. She shared that the call center is primarily being used by families of people with intellectual disabilities who need assistance with accommodations for getting their family members vaccinated. The call center will remain open until it is no longer needed.

Ms. Ahrens next provided an update on the ODP adult autism waiver renewal. Delays due to COVID-19 resulted in ODP submitting an emergency extension request to the Centers for Medicare & Medicaid Services (CMS) for renewal. CMS approved the emergency extension until September 28, 2021. Primary changes in the waiver renewal

include continued alignment with intellectual disability and autism waivers (ID/A) including integration of behavioral support into residential service and a streamlined process for providers to enroll and qualify to render services for all four waivers.

Ms. Ahrens also provided an update on children with medical complexities. A State Plan Amendment for Targeted Support Management was approved on May 19, 2021. The State Plan Amendment expands eligibility criteria to include children with medical complexities without ID/A. A bulletin will be published for implementation on July 1, 2021. ODP is also anticipating amendments to ID/A waivers effective on January 1, 2022. These amendments will expand eligibility criteria to include children with medical complexities without ID/A.

Finally, Ms. Ahrens provided an update on Consolidated, Person/Family Directed Support, and Community Living Waiver amendments. CMS is currently reviewing and issued an informal request for additional information on May 25, 2021. ODP anticipates an effective date of July 1, 2021. The amendments include technical adjustments as well as clarifications related to remote supports versus direct services and adding allowable credentialing for remote support providers.

Subcommittee Reports

Consumer Subcommittee

Mr. Laval Miller-Wilson, Counsel for the Consumer Subcommittee, provided the update for the Consumer Subcommittee.

The subcommittee met on May 26, 2021. Much of what was covered in the MAAC was also covered in the Consumer Subcommittee meeting. Acting Secretary Snead joined the subcommittee for an introduction. The committee also received an update on MCO pay for performance and equity incentives.

The next Consumer Subcommittee meeting will take place on June 23, 2021, at 1:00 p.m. via webinar.

Fee-for-Service Delivery System Subcommittee (FFSDSS)

Ms. Deb Shoemaker, FFSDSS Chair, provided the update for the FFSDSS.

The subcommittee met on May 12, 2021. Discussion at the meeting included a subcommittee vacancy, the COVID-19 public health emergency, provider revalidation and 180-day claim exceptions.

The next FFSDSS meeting will take place on August 11, 2021, at 10:00 a.m. via webinar.

Long-Term Services and Supports Subcommittee (LTSS)

The next LTSSSS meeting will take place on June 8, 2021, at 10:00 a.m. via webinar.

Managed Care Delivery System Subcommittee (MCDSS)

Mr. Joe Glinka, Chair of the MCDSS, provided the update for the MCDSS.

The subcommittee met on May 13, 2021. The subcommittee discussed the housing initiative which is being worked on by both physical health and behavioral health MCOs. The subcommittee learned that there are currently approximately 3.25 million Pennsylvanians in the Medical Assistance program. The committee will receive a report in June related to gambling addiction.

The next MCDSS meeting will to take place on June 10, 2021, at 10:00 a.m. via webinar.

Managed Long-Term Services and Supports Subcommittee (MLTSSSS)

The next MLTSSSS meeting will take place on June 2, 2021, at 10:00 a.m. via webinar.

MA Bulletins

Ms. Eve Lickers, Director, Bureau of Policy, Analysis and Planning, provided the MA Bulletins update.

Ms. Lickers shared that two bulletins were published since the April MAAC meeting. Bulletin 99-01-23, Reinstatement of Prior Authorization for Certain Services, was published on April 30, 2021, with an effective date of July 1, 2021. Bulletin 01-20-10, Addition of COVID-19 Antigen Laboratory Test Codes to the MA Program Fee Schedule, was published on May 18, 2021, with an effective date of November 3, 2020. Ms. Lickers reminded the committee that these bulletins and other updates can be found on the "What's New at OMAP" section of the Department's webpage.

Adjournment

The next meeting of the MAAC will take place on Thursday, June 24, 2021, at 10:00 a.m. via webinar.

The meeting was adjourned at approximately 12:00 p.m.