

MEDICAL ASSISTANCE ADVISORY COMMITTEE MEETING

July 22, 2021

Members present: Deborah Ann Shoemaker, Kathy Cubit, Teri Henning, Joe Glinka, Deron Shultz, Minta Livengood, Julie Korick, Jeff Bechtel, Richard Edley, Mark Goldstein, Eric Kiehl, Linda Litton, Sonia Brookins, Heather King, Kelly Leite

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

Deborah Ann Shoemaker, Chair, called the July meeting of the Medical Assistance Advisory Committee (MAAC) to order at 10:00 a.m. Roll call was taken for committee members and Department of Human Services (Department) staff.

A motion to approve the minutes was made by Sonia Brookins, and a second motion was made by Jeff Bechtel. The committee approved the June minutes.

OMAP Update

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

Deputy Secretary Sally Kozak began with the HealthChoices Procurement. It was noted that the Department is moving forward with the readiness reviews and the selected plans have been notified. Outstanding issues regarding the procurement protests remain with the court and the Department will await the court's decision before entering final negotiations and signing a contract.

Ms. Kozak reported on the status of the Home and Community Based Services (HCBS) spending plan submitted under the American Rescue Plan Act of 2021 (ARPA) which was available online for review and comment. The comment period ended July 6, 2021. Numerous comments were received and are currently being reviewed by the program offices. The initial spending plan was submitted to the Centers for Medicare & Medicaid (CMS) on July 14, 2021, followed by an update at the request of CMS. The submission of the update included the original spending plan. CMS has indicated they are unable to meet the 30-day response time as they are experiencing delays due to the numerous state submissions that require additional collaborations with other organizations. All the individual program offices continue to work on their individual plans.

Ms. Kozak responded to Teri Henning's comment related to the level of crisis that members and providers are experiencing and her request to speed up the process. Ms. Kozak indicated that the Department is aware of the concerns, but due to the unprecedented opportunity provided to states, as well as the public health emergency (PHE), CMS is experiencing some additional unanticipated delays.

Ms. Kozak confirmed that the budget was approved as submitted and there were no changes from what was presented in March 2021. The budget was fully funded.

Ms. Kozak provided an update regarding the reopening of the Commonwealth. The Commonwealth offices are reopening with a staggered return. Ms. Kozak noted that some people have already returned to the office while a large majority of DHS staff will continue to work remotely. The county assistance offices (CAOs) have resumed in-person operations effective July 12, 2021. The CAOs are following guidelines from the Centers for Disease Control and the Pennsylvania Department of Health (DOH). Masks are not required, but masks are encouraged if unvaccinated. The Office of Income Maintenance (OIM) and CAOs continue to encourage everyone to apply online and remind people of the availability to apply, make updates, and submit paperwork virtually.

Ms. Kathy Cubit asked whether CAOs are accepting walk-ins. Ms. Kozak confirmed with OIM walk-ins are being accepted.

Ms. Kozak gave the committee an update to the vaccination progress, reporting that the Department continues to work with managed care organizations (MCOs) to identify individuals who have not been vaccinated. Ms. Kozak reported continued outreach to assist with scheduling appointments and arranging for transportation. Additionally, the Department continues its ongoing efforts with DOH to identify homebound individuals.

Nick Watsula from UPMC for You requested an itemization of the Medicaid approved budget for physical health HealthChoices versus Community HealthChoices (CHC), as well as the percentage in the capitation increase for next year and whether that number included the members that were not disenrolled as a result of the PHE.

Ms. Kozak reiterated that the rates are actuarially sound and deferred to the budget presentation provided in March 2021. The capitation was at \$17 billion which included physical health and behavioral health but indicated that if more detail is needed to inquire via email with specific questions.

OLTL Update

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

Ms. Buchenauer provided a few updates beginning with the financial management services (FMS) transition. All three CHC MCOs have contracted with one vendor, Tempest Unlimited Incorporated, and are holding meetings with stakeholders to inform them about the transition. Stakeholders were provided with an update on June 28, 2021, regarding the plan for the FMS transition and OLTL provided an update for the remaining self-directed Fee-for-Service (FFS) Act 150 and OBRA waiver population. The FFS population will be added to the Office of Developmental Programs (ODP) FMS procurement. The current vendor, PPL, will remain the vendor for all populations until at

least January 1, 2022. Ms. Buchenauer indicated that OLTL is also awaiting CMS approval of the HCBS spending plan. OLTL continues to work internally on the details of the spending plan.

Ms. Buchenauer provided an update regarding the language and funding from Act 24 of 2021 in which \$247 million in funding will be appropriated for long-term living programs. The funds will be distributed to nursing facilities, personal care homes, and assisted living residences. \$198 million is being allocated using 3rd quarter calendar year 2019 information. \$49 million is being allocated based on licensed beds for all facilities as of March 31st, 2020. Assisted living and personal care homes will receive \$30 million with \$27 million allocated based on occupancy from the most recent inspection on or before April 1st, 2020, and then another \$3 million allocated based on the number of Supplemental Security Income (SSI) residents in the personal care home in March of 2020. Act 24 of 2021 will also provide a \$5 million grant for indoor air management strategies in long term care facilities. A facility can receive up to \$15,000 for different indoor air management strategies as outlined in Act 24 of 2021. The Department is required to post the application to the website and more information will be available soon.

Ms. Buchenauer responded to the question raised by Teri Henning of the Pennsylvania Homecare Association regarding any advocacy from the Department for additional Act 24 funding for HCBS. Ms. Buchenauer indicated that most of the efforts from OLTL were around spending the 10% FMAP but HCBS providers could be targeted.

Ms. Kathy Cubit, representative for the Center for Advocacy for the Rights and Interests of the Elderly, requested a summary of updated information related to vaccination rates. Ms. Buchenauer confirmed the vaccination rate for AmeriHealth Caritas was at 39% of participants, PA Health and Wellness reported 47% of participants are vaccinated and UPMC reported an overall vaccination rate of 55.9% and 61.2% of their HCBS population was vaccinated.

Mr. Laval Miller-Wilson, council for the Pennsylvania Health Law Project requested updates to the Independent Enrollment Broker procurement. Ms. Buchenauer affirmed the Department remains in the blackout period.

ODP Update

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

Ms. Ahrens began with an update on the five-year waiver renewal due July 1, 2021. A 90-day extension was granted from CMS and ODP anticipates requesting another 90-day extension. The new extension request cannot be submitted until the end of August. Ms. Ahrens reported that the updated waiver renewal must adhere to specific requirements outlined in the State Medicaid Directors Letter 21-003 issued May

13, 2021, to receive the draw-down of the additional 10% match. ODP is in conversations with CMS. Proposed changes will be out for public comment. It was noted that the published proposed rates will not be implemented but there will be a data refresh for all ODP waivers including the Adult Autism waiver.

Ms. Ahrens discussed the submitted waiver amendments for July 1, 2021, which included language that added parameters to remote supports. The amendment expanded the allowable credentialing for some of the employment professionals and benefits counseling. ODP received a formal Request for Additional Information (RAI) from CMS. Responses to the RAI have been submitted. Ms. Ahrens indicated that most of the questions in the RAI were specific to remote services and supports.

Ms. Ahrens continued by summarizing additional amendments for submission by January 1, 2022. The amendments include an initiative around better serving children with medical complexities and make some of the authorities provided through Appendix K permanent. ODP is currently working through the parameters and limitations in their service definitions and a request for public comment is expected to be published in late August 2021.

Ms. Ahrens reported that ODP will be holding a series of listening sessions related to the renewal of the autism waiver, consolidated waiver, and the person/family directed and community waiver due July of 2022. Communications regarding those listening sessions are expected to be released within the next week.

Ms. Ahrens confirmed that ODP has requested the full length of extension on all Appendix K flexibilities. Currently all flexibilities are available until 6 months after the public health emergency (PHE) ends. Specifically, extensions have been requested regarding enhanced rates. CMS recently provided clarification on the mandate to continue current enhanced rates and eligibility of the draw-down.

Ms. Deborah Shoemaker, MAAC chairperson, reported a public comment indicating dismay because of the lack of an OMHSAS update and a request from Jeff Heisman for a Medical Assistance Transportation Program (MATP) broker update.

Ms. Kozak responded to Mr. Heisman's question and provided a status update on the MATP broker. She reported that the Department moved forward with a Request for Action following the introduction of legislation in 2019. Just as the Department was going to release a decision, concerns were raised by the legislature. The Department is currently in communications with the legislature, representatives from the County Commissioners Association of Pennsylvania, transportation providers, the Pennsylvania Department of Transportation (DOT), the Department of Drug and Alcohol Programs (DDAP) and other DHS program offices. DOT, DDAP, and program offices within DHS continue to meet on a regular basis. From those communications, a list of drafted recommendations was compiled and is being reviewed.

New Business

Ms. Shoemaker introduced new business related to Social Determinants of Health (SDOH) and the increasing gun violence and its impact on Medicaid. There has been a huge increase in gun violence across the board and there is concern about the impact it will have on the vulnerable Medicaid population, particularly children. Ms. Shoemaker indicated that Acting Secretary Snead previously expressed this as a concern of hers.

Mr. Miller-Wilson added that information released by the United States Government Accountability Office (GAO) related to healthcare costs and needs associated with firearm injuries addressed the known costs like the initial hospital treatment and first year costs. The report noted that throughout the country in 2016 and 2017, the amount spent is about \$1 billion a year and about half of that is Medicaid. The report discussed demographics and provided that about 90% of the patients were men between the ages of fifteen and twenty-nine. The report indicated race and ethnicity data that showed about half of the inpatient stays were African American. However, Mr. Miller-Wilson further stated that it is not just about cost. Additional questions were raised about how Medicaid is handling this situation and if it was addressed at the Regional Accountable Health Council (RAHC) level.

Ms. Shoemaker requested further comment and acknowledged the weight of the topic. She reminded the committee to review the GAO firearm annual report on their website. She indicated that this topic will be a future agenda item but for now, would like an update on the work the Department has done related to SDOH.

Mr. Joe Glinka, representative of Gateway Health plan, mentioned the follow-up care including visits to the primary care physician, specialists, and behavioral health specialists, as well as trauma to the family and indicated there is no identification of those costs. A data collection and review are necessary. Mr. Glinka reported that CMS provided a presentation related to violence, particularly gun violence, in April for Medicaid and CHIP.

Ms. Shoemaker reported a kickoff of the initiation of the SDOH Caucus at the congressional level yesterday with a Request for Information issued from all sources. Mr. Glinka added that the broader item is the impact to a person's ability to work which inhibits a pathway out of poverty.

Mr. Miller-Wilson also mentioned the need to consider the pathway for victims of firearms injuries as they navigate the healthcare system, specifically individuals who have experienced more serious injuries such as traumatic brain injury, spinal cord injury or amputations. Concerns were raised as to whether this topic is something that special needs units of the MCOs should be charged with handling.

Ms. Cubit added a reminder of the importance of intersectionality with victim services and the need to work with systems outside of the State agencies as well. Ms. Shoemaker confirmed the need to work with other agencies.

Ms. Kelly Leite of the Pennsylvania Chapter of the American Academy of Pediatrics reported the inclusion of other groups in our state that are already starting to deal with the gun violence and the affects. Additional research is needed to determine what the organizations are doing to address this detail. She reiterated the need to work together.

Ms. Kozak provided feedback on the issue of gun violence and indicated that it was a target of interest with some benchmarks set in the introduction of Healthy People which is now known as Healthy People 2030. Health risk assessments are being completed which include questions related to firearms. The DOH has some initiatives related to gun violence as well. A review of the RAHC plans is needed to determine whether gun violence was addressed. Ms. Kozak recognized the importance of this issue. CMS will be hosting technical assistance sessions on this topic to help states identify where gun violence prevention services fall. Some of the issues can be covered under rehabilitative services and long-term mental health services. The issue is being pushed to the forefront at both the federal and state level.

OMHSAS Update

No OMHSAS update this month.

Subcommittee Reports

Consumer Subcommittee

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

Mr. Miller-Wilson provided highlights from the meeting including the coverage of mobility related to durable medical equipment in the HealthChoices program. The new coverage includes not just the equipment but also the installation. The Department has drafted a Medical Assistance (MA) Bulletin on this topic, but the Department is not waiting to approve services. The issuance of the bulletin is not holding up services being provided. Mr. Miller-Wilson indicated that good conversations were held regarding in person complaints and grievances given that CAOs and state offices have started to reopen. Consumers stated that they would like OLTL to continue to allow flexibilities related to in person or telephonic health assessments.

The next Consumer Subcommittee meeting will take place on September 22, 2021, at 1:00 p.m. via webinar.

Fee-for-Service Delivery System Subcommittee (FFSDSS)

Ms. Deb Shoemaker, FFSDSS Chair, reported no updates for the FFSDSS. The next FFSDSS meeting will take place on August 11, 2021, at 10:00 a.m. via webinar.

Long-Term Services and Supports Subcommittee (LTSSS)

Kathy Cubit reported no updates for the LTSSS. The next meeting will take place on August 10, 2021, via webinar or remote streaming.

Managed Care Delivery System Subcommittee (MCDSS)

Mr. Glinka provided the update for the MCDSS and discussed the renewal of the Behavioral Health Alliance for Rural Pennsylvania. Additional information will be provided related to ensuring the continuity of care and the fee schedule assessment as well.

Expansion enrollment numbers were reviewed. As of June 25, 2021, the expansion population was at 964,787 which is up 7,000 from the previous report. An update was provided with respect to Electronic Visit Verification and concerns related to rounding options. All of the MCOs provided an update to the committee. There were questions related to tracking denials in process and manual edits and whether or not the plans are doing these things. The next meeting will take place on September 9, 2021, at 10:00 a.m.

Managed Long-Term Services and Supports Subcommittee (MLTSSS)

The MLTSSS meeting was held July 7, 2021, at 10:00 a.m. via webinar. Jill Vovakes, OLTL Chief of Staff, gave the latest information on the FMS transition. She also discussed DHS priorities in the ARPA preliminary spending plan and which priorities could impact OLTL. She then provided updates on the ongoing steps OLTL is taking in the CHC programs. Dr. Howard Dangeholtz from the University of Pittsburgh Medical Research Center gave a detailed presentation on participant experiences before and after of the implementation of CHC. Lastly, each CHC MCO presented information about the call centers with a focus on how claims and grievances are being addressed. The subcommittee power point presentation and registration notes for the MATP listening sessions are available on the MLTSSS LISTSERV. The next meeting will take place on August 5, 2021, from 10:00 a.m. to 1:00 p.m. via webinar.

MA Bulletins

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

Ms. Lickers reported that bulletin 99-21-02 was issued on June 24, 2021 and updated the MA Program EPSDT periodicity schedule. Bulletin 99-21-05 was issued on June 28, 2021 and provided the 2021 Recommended Childhood and Adolescent Immunization Schedule which included the Catch-up Schedule. Bulletin 99-20-09 was issued on June 30, 2021 and revised the MA Program Fee Schedule. Bulletin 24-21-05 was issued on July 6, 2021 and increased the MA fee for disposable gloves to support

providers that are encountering an increase to the cost of disposable gloves particularly as a result of the PHE. The final bulletin, OMHSAS-21-06, was issued on July 8, 2021 and was jointly signed by Deputy Secretaries Sally Kozak, Jamie Buchenauer, and Kristin Houser. This bulletin explained that Medicare began coverage of Opioid Treatment Program (OTP) services for duals beginning January 1, 2021 and advised providers that the Department will begin to enforce the third-party resource requirements related to OTP on August 16, 2021.

Adjournment

The next meeting of the MAAC will take place on Thursday, September 23, 2021, at 10:00 a.m. via webinar.

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