

MEDICAL ASSISTANCE ADVISORY COMMITTEE MEETING
April 28, 2022

Updated - May 24, 2022

Members present: Deborah Ann Shoemaker, Sonia Brookins, Kathy Cubit, Richard Edley, Joe Glinka, Terri Henning, Russ McDaid, Nancy Murray, Julie Korick, Jeff Bechtel, Heather King, Mike Grier, Mark Goldstein

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

Deborah Shoemaker, consultant for the Pennsylvania Psychiatric Leadership Council, began with the roll call of the MAAC members.

Motion to approve the minutes was made by Sonia Brookins and seconded by Nancy Murray. Minutes for the March 2022 MAAC meeting were approved.

ODP Update

Mr. Jeremy Yale, Director of the Bureau of Policy and Quality Management with the Office of Developmental Programs (ODP) provided the ODP update.

Mr. Yale began with an overview of the Intellectual Disability/Autism (ID/A) waiver amendments. Discussion was provided related to the major changes in the amendments including changes to the delivery of services while a participant is hospitalized, expansion of eligibility to children with medically complex conditions, new family medical support assistance services, transition to independent living payments, and requirements for providers of residential services. The Center for Medicare & Medicaid Services (CMS) requested additional information for the ID/A waiver amendments.

ODP proposed substantive amendments to the Adult Autism Waiver (AAW) including permission for residential habilitation services to be rendered in homes owned by the provider of residential habilitation services. Also included in the proposed amendments were changes related to simplifying the service system, the development and support of qualified staff, and the addition of other remote supports.

Mr. Yale continued the ODP update with a report on the status of the American Rescue Plan Act (ARPA) spending plan. Mr. Yale reported that \$155 million has been distributed to address high staff vacancies and turnover rates. On March 11, 2022, funds were sent to the nine providers who submitted funding proposals for staff training, credentialing, and Business Associates Programs for employment. On April 15, 2022, thirteen providers were issued funds for technology that enhances the Home and Community Based Services (HCBS) provision.

OLTL Update

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

Ms. Buchenauer began the OLTL report with an update related to the Financial Management Services (FMS) transition. The go-live date for the transition has been extended to July 1, 2022. Community HealthChoices (CHC) managed care organizations (MCOs) and Tempus continue efforts to obtain paperwork from common law employers and their direct care workers to complete the enrollment process. The Department has received information from about 74% of direct care workers and 75% of participants.

Tempus is conducting trainings on their new electronic visit verification and time tracking systems. In person sessions are being organized at locations across the Commonwealth to provide a resource for employers and direct care workers who need assistance with filing paperwork, completing paperwork or to answer questions. OLTL will announce dates soon.

Ms. Buchenauer also provided an update related to the procurement of an FMS vendor for the Fee-for-Service (FFS) population which includes OBRA and Act 150 program participants. A request for action was released. Proposals were due April 22, 2022. At this time, the contract with Public Partnerships, LLC will be extended.

Ms. Buchenauer continued with an update regarding heightened scrutiny related to the Home and Community Based Services (HCBS) settings rule. CMS published a final rule in 2014 establishing acceptable qualities and characteristics for a provider of HCBS to receive payment whether the provider owns or controls that setting. MA Bulletin 59-16-14, issued in 2016, advised providers they must meet these requirements to bill and receive payment for services. Additional information will be issued announcing the provider sites that are targeted for heightened scrutiny. The deadline for compliance with the final rule was September 17, 2022, however because of the public health emergency (PHE) the date was pushed back to March 17, 2023.

Ms. Erin O'Dea asked Ms. Buchenauer to clarify which waivers would run through Tempus. Ms. Buchenauer clarified that participants in CHC who self-direct their own care will switch to Tempus.

Mr. Jeff Iseman stated in the comments that there has been a lot of confusion among participants applying for services and who are on ODP waiting lists. He then asked if DHS has put forth information showing the comparison as to what people with intellectual disabilities would get in CHC as opposed to ODP waivers. Ms. Buchenauer provided information related to concerns from individuals on the waiting list for ODP services, specifically, participants who enroll for CHC and realize the service benefit package does not fit their individual needs. A request was received for a document comparing the services provided in CHC and ODP waivers. While OLTL and ODP work with their administrative entities to provide participants and their families with

information about this choice, participants should work with their service coordinators on this issue.

Mr. Lloyd Wertz inquired if there were special provisions to provide financial management for CHC individuals with mental health concerns. Ms. Buchenauer said that there is not a special pathway for individuals transitioning to Tempus, however Tempus and CHC-MCOs are reaching out to individuals and their direct care workers to prepare individuals for the transition.

OMHSAS Update

Ms. Kristen Houser, Deputy Secretary for the Office Mental Health and Substance Abuse Services (OMHSAS) provided the OMHSAS update.

Ms. Houser began the OMHSAS report with an update about the plans for 988 and crisis services. While the 3-digit 988 number is on track to be fully functional on July 16, 2022, there will not be wide advertisement across the Commonwealth until the summer of 2023. The Department has received a state planning grant specific to community based mobile response crisis intervention services. The grant focuses on an in-depth assessment about existing mobile response teams. The ability to enhance and expand access to mobile response, walk in, or respite centers is a high priority for the Department.

OMHSAS continues to work on draft regulations for Psychiatric Residential Treatment Facilities. The regulations will provide standards to meet the mental health needs of children, youth, and young adults that require care in a residential treatment facility. The target release date for public comment is fall 2022.

A detailed report regarding the changes that are happening at Norristown State Hospital was provided as part of the OMHSAS update. A portion of the existing campus is being conveyed to the borough of Norristown. The Department is currently utilizing two buildings at Norristown to provide 255 individuals forensic psychiatric services. Following the review of a 2019 utilization study, the Department is seeking to expand the facilities capacity to accommodate approximately 420 beds including an on- site medical unit.

The Department of General Services issued a solicitation for design professional applicants. The request includes all the elements the Department is seeking in a design. The selection process will take place later this spring. Community engagement is very important, and the Department has plans to hold public meetings throughout the process.

Mr. Richard Edley requested clarification on the ARPA distribution of \$83.5 million. Some providers have reported they must return a portion of their distribution. Other providers believe they should have received more. Ms. Houser stated providers

should contact the resource account to discuss payment information. Once the funds are exhausted no additional disbursements will be made.

Mr. Lloyd Wertz inquired if the calculations in the presentation assume that the Torrance Hospital Forensic site will remain open. Ms. Houser confirmed that the calculations assume the Forensic site will remain open.

OMAP Update

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

Ms. Kozak began the OMAP report with an update regarding the federal extension of the PHE. On April 12, 2022, the Biden Administration announced the 90-day extension of the COVID-19 PHE. The federal administration is committed to providing states at least 60 days advance notice. Also related to the PHE, the Department is preparing a bulletin to announce the coverage of disposable surgical masks, effective July 1, 2022.

Ms. Kozak continued with an update on the HealthChoices procurement. The implementation date was pushed back to August 1, 2022, to allow for additional time for some of the managed care organizations (MCOs) to complete negotiations within their network. A communications workgroup continues to discuss the timing of the release of information related to implementation.

Mr. Laval Miller-Wilson, council for the Pennsylvania Health Law Project, requested that the Department provide the number and identity of hospitals that may be subject to the work stoppage. Ms. Kozak informed the committee of data received from the Department of Health indicating that UPMC Presbyterian Shadyside, UPMC McGee's Women, UPMC Mercy, Armstrong County Memorial Hospital, Indiana Regional Medical Center, and Wilkes Barre General Hospital would be subject to the work stoppage provision. The total number of hospitals in the state is in the 160 range. No children's hospitals are on the list.

Ms. Kozak added that the intent of the provision is to ensure access to care. Work stoppages have caused delays in the rescheduling of services. Any hospital that is precluded from participation from the network would be reviewed in the same manner as any other hospital termination. It was also noted that the Department can waive this provision.

Mr. Jeff Bechtel, committee member and representative for Hospitals and Healthsystem Association of Pennsylvania (HHAP), informed MAAC attendees that the following proposed resolution will be formally read and placed as a part of the official record.

“Members of the Medical Assistance Advisory Committee (MAAC) applaud the Wolf Administration for their advocacy and commitment to provide access to high quality, comprehensive care to vulnerable Pennsylvanians. However, the proposed PH-HealthChoices contract language relating to “work stoppages” could inadvertently jeopardize access to care for Medicaid consumers. If the Administration, through the Department of Human Services, retains this language in the PH-HealthChoices contracts, MCOs will not be permitted to include in its network any provider that has experienced a work stoppage in the five years prior to implementation, unless that provider has a collective bargaining agreement or labor peace agreement that precludes work stoppages in the future. While an unintended consequence, Medicaid patients in Pennsylvania's Health Choices program could potentially experience care disruptions from the dozen or more hospitals or other providers that the administration may enforce the provision against later this summer. For thousands of people who rely on HealthChoices to access high-quality health care, this could mean being displaced from current providers, losing access to the only hospitals in some rural communities, or not being able to seek care at hospitals that offer specialized care for women, children, or people with cancer. For some Medicaid patients, these disruptions could be life threatening. Because the primary goal of the HealthChoices program should be to reduce hurdles for Medicaid consumers to receive care, rather than introduce barriers, we respectfully ask that the Department of Human Services remove this provision from the PH-HealthChoices agreement that will be effective August 1, 2022.”

Ms. Shoemaker added a reminder that the MAAC is an advisory board for Department. The opportunity to present a motion does not translate to any legally binding authority. A motion is a formal presentation on the position of the committee or a committee member. Mr. Edley further added that it is the responsibility of the committee to review any contract provision that may impact the access to care and encouraged the Department to continue their review of the impact of the provision for unintended consequences.

Ms. Kozak clarified the term “prospectively” as it relates to the provision. Currently, hospitals with a reported work stoppage in the past 5 years, can demonstrate that they did not have a work stoppage, or demonstrate there is a collective bargaining unit agreement in place, or demonstrate there is a labor peace agreement in place. The provision is a requirement in the agreement equal to other credentialing requirements, it is not a once and done requirement.

Ms. Nancy Murray inquired about the impact to physician practices or specialty clinics within a hospital. Mr. Miller-Wilson followed up stating a disproportionate number of hospitals affected by this provision are owned by UPMC and are in the Southwest region. Mr. Bechtel further opposed the provision by adding that although the number of hospitals is small, the intent of the provision is to apply it prospectively which creates unintended incentives.

Ms. Kozak confirmed the Department is currently working through those concerns and added that work stoppages are defined broadly as the temporary cessation of work as a form of protest and can be initiated by either employees or company management. She also reiterated the Department's ability to waive implementation of the provision.

Ms. Kozak concluded the OMAP report with confirmation that the Act 2 payments were disbursed in April. The Department has received a lot of questions related to those payments and is working on responding. Additionally, the Department continues to hold workgroups related to disparities in the system. Highlighting the individuals who were left behind during the COVID-19 PHE due to the lack of technology. This is a topic of conversation at all levels of the Commonwealth.

Subcommittee Reports

Fee-for-Service Delivery System Subcommittee (FFSDSS)

Ms. Deb Shoemaker, chair for the FFSDSS, reported that the subcommittee's next meeting will be held on May 11, 2022.

Long-Term Services and Support Subcommittee (LTSSS)

Ms. Kathy Cubit, chair for the LTSSS, provided a summary of the topics reviewed during the meeting held on April 12, 2022. The subcommittee discussed "agency with choice" and a new model OLTL wants to offer under CHC and OBRA waivers. Stakeholder input is being reviewed and an official public notice will be posted in the Pennsylvania Bulletin with a formal 30-day comment period. The subcommittee also discussed the HCBS settings rule and the FMS transition. Data information was shared and is available on the LTSSS webpage related to racial and social disparities for both the CHC and LIFE programs. The subcommittee will meet again on June 14, 2022.

Consumer Subcommittee

Mr. Miller-Wilson provided the Consumer Subcommittee report from the meeting held on April 27, 2022. The subcommittee discussed the potential end of the prior authorization freeze for pediatric shift nursing. The Department is moving towards lifting the freeze. OLTL provided an update related to grievances filed by CHC participants. Data from calendar year 2021 was shared. The Office of Income Maintenance provided an update on the plan for the ending of the PHE. The subcommittee will meet again on May 25, 2022.

Managed Long-Term Services and Supports Subcommittee (MLTSSS)

Mr. Mike Grier, chair for the MLTSSS, provided the report from the meeting held on April 5, 2022. The subcommittee continues to review the timeframe to resume in person meetings. The organization of the subcommittee agenda will be updated to

allow for follow-up from the prior meeting. Acting Secretary Meg Snead discussed the Department priorities for 2022. A joint presentation was provided by CHC MCO medical directors Dr. Larry Appel from OLTL, Dr. David Kelly from OMAP, Dr. Susan McAllister from Amerihealth-Caritas Keystone First, Dr. Craig Butler from PA Health and Wellness, and Dr. Crystal Clark from UPMC. The presentation reviewed the services and supports available for CHC participants and provided an overview of how the utilization of multiple support systems ensures individual needs are met. A representative from each CHC MCO discussed complex care units and shared success stories.

MA Bulletins

Ms. Eve Lickers, Director of the Bureau of Policy, Analysis and Planning, reviewed the following three MA Bulletins that were issued since the last meeting.

- MA Bulletin 01-22-07, "Additions to the Medical Assistance Program Fee Schedule for Multiple Respiratory Pathogens Laboratory Tests"
- MA Bulletin 99-22-01, "Extension of Postpartum Coverage from 60 days to 12 Months"
- MA Bulletin 05-22-01, "Additions to the Medical Assistance Fee Schedule for Personal Care Services Provided to Beneficiaries Under the Age of 21"

A list with hyperlinks to the bulletins and to the "What's New from OMAP" webpage was shared on the LISTSERV.

Adjournment

Ms. Shoemaker reviewed new and old business. Motion to Adjourn was received by Ms. Kathy Cubit and a second motion was received by Ms. Terri Henning. The next meeting of the MAAC will take place on Thursday May 26, 2022.