MEDICAL ASSISTANCE ADVISORY COMMITTEE MEETING

December 8, 2022

<u>Members present:</u> Deborah Ann Shoemaker, Sonia Brookins, Kathy Cubit, Richard Edley, Joe Glinka, Mark Goldstein, Teri Henning, Julie Korick, Russ McDaid, Nancy Murray, Derron Shultz, Nick Watsula, Heather King

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

Chairperson Deborah Shoemaker, consultant for the Pennsylvania Psychiatric Leadership Council, began the meeting with roll call of the MAAC. A motion to approve the October 2022 minutes was received by Sonia Brookins and seconded by Julie Korick. The October 2022 minutes were approved.

ODP Update

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

Ms. Ahrens began with an overview of the American Rescue Plan Act (ARPA) funding initiatives related to the enhanced Federal Medical Assistance Percentage for the Home and Community Based Services (HCBS). The amount of \$200 million was budgeted for supplemental payments to providers for COVID-19 relief, recruitment, and retention efforts. Of this \$200 million, \$155 million in supplemental payments were mailed to providers who applied in December 2021.

In July 2022, the Department submitted a request to the Centers for Medicare & Medicaid Services (CMS) to update the spending plan to include three new initiatives. The first initiative is to move the health risk screening data into the data warehouse. This will provide more efficiency and accuracy and build provider support capacity. The second initiative is to find a vendor to provide a second capacity building institute. This is aimed at a system to better support children related to individuals with co-occurring mental illness and developmental disabilities. The third initiative is for recovery and expansion efforts for community participation supports also known as day programs, employment, and support coordination organizations. The Department anticipates approval with the Appendix K waiver. Additional information will be provided in the future for the structure of our payments.

Ms. Ahrens continued with an update on the status of the Consolidated and Person/Family Directed Support (PFDS) waiver. The current waiver authority has been extended for the second time. The Department is working with CMS to negotiate through concerns related to teleservices. The anticipated approval date is January 1, 2023.

The state transition plan for the Home and Community Based Services (HCBS) Heightened Scrutiny setting rule includes heightened scrutiny settings determinations and other documentation related to the determinations. This plan is posted for public comment through December 19, 2022.

Ms. Kara Beem asked if there will be an update on Enterprise Case Data at future meetings. Ms. Ahrens stated that she would look into this for a future meeting.

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 by providing an update on the COVID-19 vaccination rates from the Community HealthChoices (CHC) managed care organizations (MCO). The data for each CHC-MCO was provided. The data was separated by the number of HCBS participants that are dually eligible for Medicare and Medicaid, HCBS participants that are eligible for Medicaid only, Nursing Facility (NF) participants dually eligible, NF participants eligible for Medicaid only, and NF ineligible individuals.

The CHC-MCO service coordinators continue to assist individuals with making appointments and arranging transportation, if necessary, to receive vaccinations. If the participant is homebound, the service coordinators will connect the individual to a mobile vaccine provider. If an individual is not part of the HCBS or NF populations, the CHCMC-O's care management team conducts outreach. Communications are distributed regularly through text messages, emails, mailers, and newsletters announcing vaccination opportunities available.

Ms. Buchenauer updated the MAAC on the status of Agency with Choice procurement. OLTL previously reported a blackout period due to protests that were filed. The protest process has moved forward. The protests were denied by the Department. As a result, two appeals were filed with the Commonwealth court. The procurement is currently stayed until the appeals are resolved.

Ms. Buchenauer provided a reminder that the proposed amendments for both the CHC and OBRA waivers are available for public comment until December 14, 2022. Additionally, Agency with Choice is a service option for the participant directed services model in both the CHC and OBRA waiver.

The negotiations for the 2023 CHC-MCO agreements are being finalized. The Department continues to work on the CHC re-procurement. The current CHC-MCO agreements will expire in December 2024. OLTL will not issue a request for applications until the new incoming administration has transitioned.

Ms. Buchenauer continued with an overview of the Affordable Connectivity Program (ACP). The ACP is sponsored by the Department of Community and Economic Development and can provide up to \$30 for eligible households to offset the cost of broadband service. An announcement will be made through the LISTServ.

Lastly, Ms. Buchenauer provided the status of the ARPA fund distributions. Most of the funds were distributed to enrolled long term care providers in November. The Department is working through payment distributions for approximately 12,000 non-enrolled providers individually.

Ms. Kathy Cubit, representative for the Center for Advocacy for the Rights and Interests of Elders (CARIE) and a member of the MAAC, requested clarification on the date of the data Ms. Buchenauer provided related to the vaccination rates and whether the information was inclusive of individuals who are fully boosted or just considered vaccinated. Ms. Cubit expressed concerns with the growing death rate and impact of older adults being under vaccinated. Ms. Deborah Shoemaker, MAAC chair, further requested data related to the number of shingle vaccines distributed. Ms. Buchenauer noted that further information will be provided at a later date.

Ms. Teri Henning, representative for the Pennsylvania Homecare Association and member of the MAAC, requested public access to the 2023 CHC-MCO agreement when it is signed. Additionally, Ms. Henning requested next steps related to ongoing challenges with the Electronic Visit Verification process. Ms. Buchenauer stated no updates are available at this time.

Mr. Joe Glinka, representative for Gateway Health and member of the MAAC, inquired about vaccination rate standards set for the CHC-MCOs. Ms. Buchenauer reported no standards have been set at this time.

Ms. Hannah Kratz asked if there were reporting requirements for Act 54. Ms. Buchenauer confirmed no reporting requirements for Act 54 at this time but the reporting template and portal for the Act 24 funding and the strengthening the workforce funding is available.

Mr. Lloyd Wertz asked about the impact of the motion made at yesterday's Managed Long Term Support Services Subcommittee (MLTSS). Ms. Buchenauer stated the motion will be set before the MAAC. Ms. Shoemaker clarified that the motion will be addressed by the MAAC once the language from the motion is sent over from the MLTSS.

OMHSAS Update

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

Ms. Snuffer began the update on the progress of Act 32. Act 32 requires changes to regulations as it relates to confidentiality and sharing substance use disorder (SUD) information. Proposed regulations are to align with the federal requirements in Health Information Portability and Accountability Act (HIPAA). OMHSAS is also reviewing the federally proposed rule for confidentiality of SUD patient records.

Dr. Adair continued the OMHSAS report with a general update on the 988-crisis service. OMHSAS is continuing efforts to develop and expand the crisis continuum. OMHSAS released funding opportunities to counties in October for crisis planning and building crisis response teams. OMHSAS recognizes different counties may need to take a different approach based on individual needs. OMHSAS has received 13 applications for the funding opportunity including multi-county initiatives. While OMHSAS would like to have seen more county applications, there are concerns from some counties about continued funding. The hope is that additional counties will apply upon seeing other counties programs.

Dr. Adair discussed an outage of the national 988 crisis service last week. Calls were diverted to that national backup lines. Text and chat features were not impacted by the outage. October data indicates Pennsylvania maintains an answer rate between 80% and 86%.

The Behavioral Health Commission submitted a report to the General Assembly on October 3, 2022, outlining the recommendations for spending the \$100 million of ARPA funds for adult mental health services. The General Assembly did not act on those recommendations during the last session. The Senate Health and Human Services Committee began hearings regarding the future of the Behavioral Health Commission and their recommendations. The Department anticipates additional information in January or February of 2023. Mr. Glinka asked about the timeframe for utilizing ARPA funding. Dr. Adair stated ARPA funds must be utilized by June 2025.

OMAP Update

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

Ms. Kozak began the OMAP report with an update on the COVID-19 public health emergency (PHE). The PHE is expected to be extended on January 11, 2023. Ms. Kozak provided a reminder of the CMS commitment to provide states with 60-day advanced notice of the PHE ending. If this is the last extension, that update would be provided in mid-February and the PHE would end around April 11, 2023. All eligibility would be maintained through April 30, 2023, and redeterminations would begin May 1, 2023.

Ms. Kozak provided a reminder that the redetermination process has continued to operate. However, DHS has not terminated MA eligibility because of flexibilities

provided through the federal PHE authority. Notices are sent when a redetermination is processed. If the PHE ends around April 11, 2023, the standard MA redetermination process will be operational. Individuals who do not respond or who are determined ineligible will receive advance notice. CMS has advised the 1135 blanket waiver flexibilities end when the PHE expires. There is no authority to provide phase out flexibilities. A traditional state plan amendment must be submitted and approved by CMS prior to the end of the PHE to continue 1135 flexibilities past the PHE.

Dr. Richard Edley, representative from the Rehabilitation and Community Providers Association and member of the MAAC, requested the number of individuals who may be impacted by the reinstatement of redetermination process. Ms. Kozak stated the data will be shared at the January meeting with the most recent numbers.

Ms. Kozak continued the OMAP report with an overview of the Parents as Caregivers initiative. Current regulations prohibit reimbursement to legally responsible relatives (LRR) for personal care services (PCS). The Department obtained a waiver of those regulations during the PHE and developed a process for LRRs to be reimbursed during the PHE for providing PCS. That flexibility ends on the date the PHE ends. The Department recognizes the impact this will have on the current workforce and over 400 families. The Department is committed to working with CMS to develop a long-term solution. One solution is for families to designate a non-LRR to provide PCS.

Ms. Teri Henning, Mr. Joe Glinka, and Ms. Shoemaker thanked Ms. Kozak for the continued attention to the concern over the loss of flexibilities to Parents as Caregivers. Mr. Laval Miller Wilson, council for the Pennsylvania Health Law Project and the Consumer Subcommittee of the Medical Assistance Advisory Committee, offered the support of the committee and willingness to provide written support to CMS if needed.

Ms. Kozak announced the Department received approval from CMS for the good faith waiver related to Electronic Visit Verification. The new requirements must be in place by January 1, 2024. Additional communication will be forthcoming.

Enrollment data provided verified 65,979 applications for MA were submitted between October 17, 2022, and November 11, 2022. This represents a 5.3% decrease from the same four-week period one year ago. As of November 11, 2022, there are 1,076,684 newly eligible individuals in HealthChoices receiving the adult benefit package under Medicaid expansion.

The Department is hosting informational sessions with our physical and behavioral health MCOs to discuss and understand any current initiatives around gun violence prevention. Most of the MCOs, and particularly those in the Philadelphia area, are partnering with local organizations and have some level of initiatives. Medicaid plays an important role in meeting the healthcare needs of those individuals and their families who have experienced gun violence. Amerihealth Caritas hosted a successful educational session and will be sharing their strategy with the other MCOs. Awareness

is a key step to elevating the issue and moving towards action. CMS has provided guidance highlighting different pathways state Medicaid programs can use.

Mr. Jeffrey Iseman asked for an update on the Medical Assistance Transportation Program (MATP), the new MATP form that was issued, and if the Department started work on the Human Services Transportation Workgroup. Ms. Gwen Zander, Director for the Bureau of Managed Care Organizations, provided an update on the MATP. A newly developed form was released and posted to the DHS website along with an operations memorandum. The form will be used by both physical and behavioral health MCOs, CHC-MCOs, MATP administrators, agencies, and county assistance offices for all forms of transportation referrals. The form was designed to streamline the referral process. Provider feedback is welcomed.

Ms. Zander added that the Pennsylvania Department of Transportation (PennDOT) is doing a study to identify options for funding human services transportation in the future. PennDOT has contracted with a couple of entities to assist with the study. Mr. Miller-Wilson stated that MATP utilization data was shared and is available from the Consumer Subcommittee meeting. The data provided a comparison of utilization pre-PHE with present day utilization.

Ms. Kratz asked for an update on the status and timeline of the Resource and Information Service Enterprise (RISE) PA tool. Ms. Kozak provided an update that the RISE PA tool is going to be procured by the Health Information Organizations (HIOs) that run the statewide electronic health exchanges. DHS has three signed agreements. Following the finalization of one more agreement, the funding will be granted to the HIOs, and they will issue a request for applications (RFA) to procure the resource and referral tool and anticipate the implementation sometime after July 2023.

Subcommittee Reports

Consumer Subcommittee

Mr. Laval Miller-Wilson, council for the Consumer Subcommittee, provided the Consumer Subcommittee report. The committee heard updates from OMAP and OLTL.

Mr. Miller-Wilson reported more in-depth discussion of some of the same topics discussed in the MAAC meeting. Additional information was discussed related to the reinstatement of prior authorization for shift care services provided for children with complex medical needs. One MCO reported a backlog in part due to a 3-month renewal requirement. That MCO is revisiting their 3-month renewal requirement for a more efficient process.

A presentation of various models of value-based purchasing (VBP) was provided in the context of physical health HealthChoices. DHS is assessing the benefits of VBP and whether it is improving and making a difference in the health of consumers. A request was submitted for inclusion in the Department's continued efforts.

OLTL provided an overview of their PHE unwinding efforts, and the committee shared the importance of service coordinators in CHC to return to the rule of seeing participants in-person for annual comprehensive needs assessments. Data was provided on the percentage of in-person vs telephonic assessments during the month of November and the committee supported the return to in-person assessments.

The next meeting is scheduled for January 25, 2023, and will be held virtually.

Fee-for-Service Delivery System Subcommittee (FFSDSS)

Ms. Deb Shoemaker, chair for the FFSDSS, reported the committee met on November 9, 2022. Many of the items discussed during the MAAC were discussed at the FFSDSS meeting including the PHE unwinding and pediatric shift nursing.

A discussion related to Act 98 and some of the items in the legislation which includes pharmacy reimbursements for 34 days or 110 units. Individuals seeking additional information related to Act 98 can refer to the Department website.

An overview of provider enrollment and revalidation was given. The number of provider revalidations has not decreased. A reminder was given to providers to keep their provider portal information up to date to avoid disruption of reimbursements.

The next meeting is scheduled for February 8, 2023.

Long-Term Services and Support Subcommittee (LTSSS)

Ms. Kathy Cubit, chair for the LTSSS reported the LTSSS did not meet since the last meeting. The next meeting is scheduled for December 13, 2022.

Managed Care Delivery Systems Subcommittee (MCDSS)

Mr. Joe Glinka, Legislative Director for Gateway Health and chair for the MCDSS, provided the report.

OMHSAS highlighted their work on an initiative known as MyOMHSAS. MyOMHSAS is a web-based application process that will serve as a one-stop repository of useful information for guests and registered members. The roll out of this resource is expected within the next couple of months. OMAP is also investigating a similar resource.

The PHE unwinding efforts were discussed in detail in terms of redeterminations. Approximately 400,000 individuals have not submitted information with respect to updating their eligibility and another 500,000 individuals have submitted and either failed eligibility or they have returned some information but not all. The Income

Maintenance Advisory Committee reported their efforts to ensure adequate staffing during the PHE unwinding.

An update was provided on the implementation of the HealthChoices procurement. The limited number of expedited plan transfer requests is evidence of the stability in the program. Information was shared related to the EVV system, and a detailed discussion was provided from the MCOs regarding their response to complaints on providers. Their approach will be submitted to the committee in writing.

The next meeting is scheduled for January 12, 2023.

Managed Long-Term Services and Supports Subcommittee (MLTSS)

Mr. David Johnson, co-chair for the MLTSS, provided the report. The committee met twice since the last meeting. In November, OLTL provided an update on the ARPA and HCBS spending plans. The workforce shortage survey results were reviewed, and the Consumer Assessment of Healthcare Providers and Systems survey results were provided.

The December meeting updates included discussion on the timeframes for the PHE unwinding and Appendix K flexibilities. A program refresher was delivered on the Department's Living Independence for the Elderly (LIFE) program and Ms. Jennifer Hale, Director for the Bureau of Policy and Communications Management, provided an update on the HCBS Heightened Scrutiny final rule. The heightened scrutiny process is open for public comment until 11:59 PM on December 19, 2022.

The next meeting is scheduled for January 4, 2023.

MA Bulletins (MAB)

Ms. Lickers provided an overview of the pharmacy and other MABs that were issued since the last meeting. The MABs may be found on the DHS <u>What's New at OMAP</u> webpage or <u>Bulletin Search</u> webpage.

Bulletin Number	Subject/Title	Issue Date	Effective Date
01-22-43	Prior Authorization of Acne Agents, Oral – Pharmacy Services	11/4/22	1/9/23
01-22-44	Prior Authorization of Alcohol Use Disorder Agents – Pharmacy Services	11/4/22	1/9/23
01-22-46	Prior Authorization of Antianginal Agents – Pharmacy Services	11/4/22	1/9/23
01-22-51	Prior Authorization of Antipsoriatics, Topical – Pharmacy Services	11/4/22	1/9/23

99-22-10	Enrollment of Providers for Medicare Cost-Sharing Only	11/4/22	11/17/22
01-22-47	Prior Authorization of Antibiotics, GI and Related Agents – Pharmacy Services	11/8/22	1/9/23
01-22-48	Prior Authorization of Antifibrotic Respiratory Agents (Formerly Idiopathic Pulmonary Fibrosis (IPF) Agents) – Pharmacy Services	11/8/22	1/9/23
01-22-52	Prior Authorization of Antipsychotics – Pharmacy Services	11/8/22	1/9/23
01-22-53	Prior Authorization of Antivirals, CMV – Pharmacy Services	11/8/22	1/9/23
01-22-55	Prior Authorization of Corticotropin (formerly H.P. Acthar Gel) – Pharmacy Services	11/8/22	1/9/23
01-22-58	Prior Authorization of Dupixent (dupilumab) – Pharmacy Services	11/8/22	1/9/23
01-22-59	Prior Authorization of GI Motility, Chronic Agents – Pharmacy Services	11/8/22	1/9/23
01-22-60	Prior Authorization of Glucocorticoids, Inhaled – Pharmacy Services	11/9/22	1/9/23
01-22-61	Prior Authorization of Glucocorticoids, Oral – Pharmacy Services	11/9/22	1/9/23
01-22-62	Prior Authorization of Hepatitis C Agents – Pharmacy Services	11/9/22	1/9/23
01-22-49	Prior Authorization of Antihemophilia Agents – Pharmacy Services	11/9/22	1/9/23
01-22-45	Prior Authorization of Angiotensin Modulator Combinations – Pharmacy Services	11/9/22	1/9/23
01-22-54	Prior Authorization of Bile Salts – Pharmacy Services	11/9/22	1/9/23
01-22-56	Prior Authorization of Cytokine and CAM Antagonists – Pharmacy Services	11/9/22	1/9/23
26-22-07	2023 Ambulance Fee Increases	11/10/22	1/1/23
24-22-32	At-Home Over-The-Counter COVID-19 Tests	11/10/22	12/5/22
01-22-57	Prior Authorization of Dry Eye Treatments (Formerly Ophthalmics, Immunomodulators) – Pharmacy Services	11/10/22	1/9/23
01-22-64	Prior Authorization of Hypoglycemics, Insulin and Related Agents – Pharmacy Services	11/10/22	1/9/23

01-22-66	Prior Authorization of Hypoglycemics, TZDs – Pharmacy Services	11/10/22	1/9/23
01-22-67	Prior Authorization of Immunomodulators, Atopic Dermatitis – Pharmacy Services	11/10/22	1/9/23
01-22-69	Prior Authorization of NSAIDs – Pharmacy Services	11/10/22	1/9/23

New/Old Business

No old or new business reported.

<u>Adjournment</u>

Ms. Kathy Cubit made the motion to adjourn the meeting and Ms. Deb Shoemaker seconded the motion. The next meeting is scheduled to be held on Thursday, January 26, 2023.