

Medicaid Medical Advisory Committee Meeting Minutes

Tuesday, November 15, 2022

- Meeting called to order at 4:02pm.
- Roll call of committee members in attendance: Matuor Alier, Tim Blasl, Dr. Joan Connell, Donene Feist, Trina Gress, Amy Hornbacher, Courtney Koebele, Nancy Kopp, Elizabeth Larson Steckler, Senator Tim Mathern, Janelle Moos, Lisa Murry, Stephen Olson, Gayla Sherman, Shawn Stuhaug, Dr. Nizar Wehbi.
- Jennifer Folliard was also in attendance and is filling the seat of Bobbie Will. Joining the group later was Senator Judy Lee and Brenda Bergsrud.

Discussion

- American Rescue Plan temporary 10% increase to FMAP for certain Medicaid HCBS: Tina Bay. Since March 2022 there has been work with agency and non-agency Home and Community Based Services (HCBS) providers for retention and recruitment incentives. See <u>American Rescue Plan Act</u> <u>Funds for Home & Community-Based Services (ARPA HCBS) Funds.</u>
 - Statistics:
 - 53 agencies requested retention incentives (27 in Developmental Disabilities (DD) and 26 in Aging)
 - 36 agencies requested recruitment incentives (20 DD and 16 Aging).
 - 200 Qualified Service Providers (QSPs) and 300 self-directed support employees received incentives.

Incentives will run through the end of December 2022. There will then be an assessment done looking at effectiveness of the incentives, changes, etc.

- American Rescue Plan option for states to extend Medicaid postpartum coverage from 60 days to 12 continuous months: Jodi Hulm. This change was sent to CMS on October 28th. Hoping for approval by end of the year from CMS. Changes on Medical Services' end are ready to go. Communications announcing this have already begun to go out and will be shared with MMAC members. The extension was announced in the <u>September 2022 Provider newsletter</u> and the <u>November 2022 Member newsletter</u> and will also be shared via a press release and among stakeholders.
- Faces of Medicaid subcommittee report: Amber Blomberg with BCBS ND gave the update. The subcommittee of stakeholders (Community Healthcare Association of the Dakotas, BCBSND Caring Foundation, ND Hospital Association, and the ND Department of Health and Human Services) have produced four 30 second videos with the goal to create a better understanding of individuals who are served by Medicaid, addressing the misconceptions and stigma and sharing real stories of how Medicaid provides support. Four personas are featured including an individual in recovery, a senior citizen, a person with a disability, and a single mother. The Governor & First Lady previewed one of the videos at the recent Recovery Reinvented conference. A toolkit is ready and will be shared for stakeholders to help publicize the campaign. It includes social media posts and ready-to-use information. The expected launch date is November 21st.
- Codes/Services subcommittee report: Courtney Koebele. A letter dated November 15th drafted by this subcommittee was discussed. The letter is addressed to key legislative groups in advance of the upcoming legislative session. It explains that this subcommittee's job is to offer recommendations to Medicaid for additional coverage for five different codes and services. The five proposed items are:

- Family Adaptive Behavior Treatment (allows providers to educate parents and caregivers to continue to carry out plans and recommendations from Applied Behavioral Analysis (ABA) therapy).
- Dental Screening and Assessment of a Patient (screening is to determine an individual's need to be seen by a dentist for diagnosis and assessment is a limited clinical inspection performed to identify possible signs of oral or systemic disease, malfunction, or injury and the potential need fore diagnosis and treatment).
- Dental Case Management (collaborative process of assessment, planning, facilitation, care coordination, and advocacy).
- Teledentistry Asynchronous ("store and forward" teledentistry refers to patient/provider interactions that do not occur in real time).
- Applied Behavior Analysis Across the Lifespan and for Individuals with a variety of diagnoses (assess and treat common behavioral problems across the lifespan for individuals with a variety of psychological and medical diagnoses).

The subcommittee proposed Medicaid coverage for all five codes and the letter is for legislators to decide whether to introduce a bill on these items at the upcoming 2023 Legislative Session. Committee members voted to approve this letter. Courtney will send the letter.

- <u>Public Health Emergency (PHE) unwinding</u>. The current PHE is scheduled to expire on January 11, 2023. States have been promised a 60-day notice prior to the ending of the PHE. The federal Health and Human Services announces when the PHE ends and when it is extended. It is not known for what amount of time it will be extended in January 2023. Prior extensions were 90 days.
 - Medicaid eligibility will be reviewed for all people whose coverage was extended due to the COVID-19 public health emergency to make sure they still qualify. It is important for Medicaid members to make sure their contact information is correct. They can report any changes by calling Medicaid or contacting a human service zone.
 - The Health and Human Services website has a header on its main page encouraging Medicaid members to update their contact information. There is a separate page https://www.hhs.nd.gov/StayCoveredND with more information about Medicaid Renewals and the PHE ending. Materials have been prepared to inform a variety of stakeholders about this process and are currently being prepared for future distribution. An informational webinar is scheduled for 12/7 from 12-12:45pm. MMAC members will be invited.
- Overview of <u>Interim Human Services Committee</u> work. Senator Lee provided an overview of this work and shared that a more detailed report can be viewed at the Legislative website -<u>https://www.ndlegis.gov/sites/default/files/resource/committee-</u> <u>memorandum/hs_2021_final_report.pdf</u>.
- Community Health Worker interim bills. Mandy Dendy shared that two bills were passed by the Interim Health Care Committee relating to Community Health Workers and each bill contains language about Medicaid reimbursement.
 - <u>23.0103.02000 Relating to regulation of community health workers and Medicaid</u> reimbursement for community health worker services
 - o 23.0069.01000 Relating to a community health worker task force

Medical Services Division Updates

- Value-Based Payment Model for Fee-for-Service Medicaid: Erik Elkins. Stakeholder meetings have been occurring monthly since November 2021 and to date there have been 10 meetings. Good progress towards implementation is being made. There have also been Quality Workgroups formed out of the VBP Stakeholder groups to concentrate on detail aspects of the measures, reporting, and data. Updates and any decisions and/or information are then shared with the broader VBP stakeholder group.
 - The development of two tiers is currently wrapping up with Tier 1 being a pay-for-reporting model and Tier 2 being a pay-for-performance model. Work on the third tier is in process and we are requesting stakeholder's review of a concept paper and provide to initial feedback. The initial pay for reporting period is expected to start in early 2023. Tier 2 will start after the initial Tier 1 pay-for-reporting period is wrapped up. Currently, the VBP project

is focused on the six PPS health systems statewide, but there will be consideration of other healthcare delivery systems forthcoming once the initial VPB project is implemented.

- State Plan Amendments
 - Postpartum coverage extension submitted at end of October (covered above in discussion)
 - 1915i approved changes relating to conflict-of-interest rules, non-medical transportation: Melissa Klocke-Joyce. These changes went into effect November 1st. See <u>1915(i) State plan</u>
 - The <u>conflict-of-interest</u> rules apply to conducting assessments, care coordination, and provision of other 1915(i) services in counties where there is a community-based behavioral health provider shortage area and Conflict-of-Interest Protections are implemented. All counties but Burleigh and Cass are considered areas of communitybased behavioral health provider shortage areas.
 - <u>Non-medical transportation</u> is now billed at a 15-minute rate.
 - Care coordinator qualifications changed to require necessary competencies and either:
 - a bachelor's degree and one year of supervised experience working with special populations or
 - in lieu of a bachelor's degree, three years of supervised experience working with special populations.
 - Click <u>here</u> for more information about 1915(i).
 - Provider & Individual Enrollment reports appear here.
- Waiver Updates.
 - Home and Community Based Services Waiver amendment: Nancy Maier.
 - The purpose of the HCBS aged & disabled waiver amendment is to incorporate QSP enrollment and revalidation changes that were approved under <u>ND Amin Code § 75-03-23</u> effective 10.1.2022. The amendment would allow agency QSPs to reenroll every 5 years instead of every 2. Individual QSP reenrollment is also every 5 years but requires the QSP to submit a document of competency at the 2.5 year mark.
 - QSP enrollment changes also require a Medicaid State Plan amendment. It will also further define waiver language under the services of Environmental Modification, Specialized Equipment, Residential Habilitation, Community Supports, and Adult Residential Services. The amendment would also update internal processes for person-centered planning, explanation of client choices, handling reasonable modifications requests and exceptions to waiver caps, Long-Term Services and Supports Options counseling and Critical Incident Reporting.
 - Expected Timeline
 - Submit for public comment no later than 12.1.22
 - Submit to CMS no later than 1.1.23
 - Tentative CMS Approval 4.1.23
- MMAC member survey results
 - Majority of members responding to the survey prefer to meet on Tuesday afternoons. Time of 3-5pm was proposed and supported on Tuesday afternoons for the below 2023 dates.

February 28 May 23 August 22 November 21

The meeting adjourned at 5:58pm.