

**MINUTES**  
**MEDICAL SERVICES FUND ADVISORY COUNCIL**  
**CAMC Cancer Center Conference Room**  
**September 30, 2022**

**Members and Alternates Present**

Cindy Beane, Commissioner, Bureau for Medical Services (BMS)  
Representative  
Sarah Young, Deputy Commissioner, BMS Representative (alternate)  
Carol Haugen, WV Hospital Association Representative  
Sherri Ferrell, WV Primary Care Association Representative  
Gerri Stover, WV Academy of Family Physicians Representative (alternate)  
Matt Walker, WV Academy of Family Physicians Representative (alternate)  
Jessica Hall, Hospice Council of West Virginia Representative  
Todd Jones, WV Healthcare Association Representative  
Hallie Mason, Pharmacist Representative  
Mark Drennan, WV Behavioral Health Provider Association Representative

**Bureau for Medical Services Employees Present**

Riley J. Romeo  
Fred Lewis  
Margaret Brown  
Dr. Hyla Harvey  
Mandy Carpenter  
Jennifer Myers

**Interested Parties Present**

Benita Whitman, Legal Aid  
Jason Landers  
Christy Donahue, The Health Plan

**Welcome and Opening Remarks and Commissioner's Update:**

- Commissioner Beane provided the following West Virginia Medicaid update:
- The renewal of the Strategic Plan was delayed for over two years due to COVID-19 pandemic. West Virginia Medicaid had to change their focus from the Strategic Plan to the pandemic response.
- Currently, there are 652,000 West Virginians enrolled in Medicaid. The increase is a result of the Public Health Emergency (PHE).

During PHE, Medicaid cannot disenroll anyone. Prior to the PHE, the member enrollment was 515,000.

- The PHE notification may be ending first of the year. The Centers for Medicare and Medicaid Services (CMS) will give all state Medicaid programs a 60-day notice. There will be members who will lose coverage.
- Members will be notified if their services will no longer be available and ample time will be given so they can find alternative medical coverage.
- Commissioner Beane addressed questions regarding the PHE wind down and how the 6.2 Federal Medical Assistance Percentage (FMAP) will be handled as it decreases or goes away completely once the PHE ends. There is discussion at a federal level to trim down the unwind quarterly instead of the 6.2 going away all completely. Beane encouraged Medicaid advocacy for the trim down option. If the FMAP goes from 6.2 to 0 and stops all at once, it is a \$233 million cost to Medicaid.
- The West Virginia Department of Health and Human Resources (DHHR) is preparing for special session, Medicaid will not be adding any Bills, but there may be Bills presented that will affect Medicaid.
- Commissioner Beane announced two initiatives: Certified Community Behavioral Health Clinics (CCBHC) Bill was passed, Beane thanked Mark Drennan and the West Virginia Behavioral Health Association for their assistance in getting the Bill passed.
  - There are federal dollars that states can apply for to be a CCBHC state and West Virginia will be applying for those dollars. The goal is not to slow down the progress, but to build on the progress that is already exists.
  - 1115 Substance Use Disorder (SUD) Demonstration Waiver Renewal has been submitted.
  - There is a six-month extension on the waiver. The Waiver renewal includes the serious mental illness (SMI) population who will now be able to receive SUD services, previously only the SUD population received Waiver services. The renewal will get approved, but may take some time for approval.
- American Rescue Plan Act (ARPA) dollars have been redirected for direct-care area in home and community-based services.

- Money must go to enhance current home and community-based services, not services that was provided prior to the distribution of ARPA dollars
  - The ARPA initiative will help retaining workers and providers can give hiring bonuses.
- Another ARPA initiative is the Mobile Crisis Program, Beane announced that General Counsel, Riley J. Romeo, will be presenting the State Plan Amendment for the program later in the meeting.
- Beane introduced the new State Medical Director, Dr. Hyla Harvey.
- Dr. Harvey introduced herself and provided a background on her career.
- Commissioner Beane announced that she was invited to speak at the Primary Care Association's Value-Based Conference. Beane stated that while the strategic plan is still in progress, value-based payments and going towards that direction to all of Medicaid's services, although West Virginia Medicaid provides value-based payments, the goal is to be the leader in value-based payments in the Strategic Plan.
- Out of 26 applicants, West Virginia was chosen to attend a two-day workshop in Chicago and speak on partnerships with Bureau for Behavioral Health and Social Services.
- West Virginia Medicaid was chosen for the 2022 Medicaid Innovation Award. There is no application for the Award, it is based on recognition.
- Commissioner Beane introduced the meeting's next agenda subject , Special Topic, she called for nominations for Chair, MSFAC
- MSFAC Council member Hallie Mason nominated Sherri Ferrell
- All members were in favor, no one opposed, Sherri Ferrell will now serve as MSFAC Council Chair. The position was previously held by Carol Haugen of the West Virginia Hospital Association.

### **Policy and Operations Update:**

- Bureau for Medical Services (BMS) Deputy Commissioner of Policy and Operations Sarah Young, announced that Commissioner Beane was awarded by *West Virginia Living* magazine as "2022 WV Wonder Woman of the Year."
- Young provided the following updates regarding policy manuals that are currently accepting public comments:

- Chapter 519.24, Gender Affirmation, although the policy is effective September 1, 2022, the public comment ends on October 1, 2022.
- Chapter 519.18, Tobacco Cessation Services is now accepting public comments until October 14, 2022.
- Chapter 518, Pharmacy Services is accepting public comments until October 14, 2022.
- Chapter 511, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) is accepting public comments until October 16, 2022.
- Chapter 519.19, Women’s Health Services has been updated to align with House Bill 302 regarding pregnancy terminations. Although the comment period ends on October 26, 2022, the policy is effective September 13, 2022 to comply with the State Law that was passed.
- Commissioner Beane announced that Women’s Health Services was updated to comply with the State Law. Also, Chapter 519.24, Gender Affirmation is already effective because West Virginia Medicaid had to comply with a court order because Medicaid lost the suit. The lawsuit is currently in appeal.
- Young announced that Foster Cards Medicaid Cards will be delayed for October due to printing issue. The delay will not affect coverage.
- State Plan Amendment regarding postpartum coverage extension was approved for 12-month postpartum, previously it was two months postpartum.
- For peer recovery support specialist (PRSS) certification and enrollment, all new and current PRSS will have to obtain certification from the West Virginia Certification Board for Addiction & Prevention Professionals (WVCBAPP) effective January 1, 2023. They must be in the system by the effective date.
- Peer Recovery Support Specialists will need to obtain a National Provider Identifier (NPI).
- Electronic Visit Verification (EVV), Home Health (direct-care workers) and Private Duty Nurses (PDN), must enroll with Medicaid. Welcome letters were sent out to agencies:
  - A "soft" go live is in December, and official live in January
  - There will be a "good faith" extension, but are working towards official deadlines.
- Young announced Provider Workshops dates, times and topics.
  - Workshops may return to in-person in the future or a hybrid mix of in-person and virtual.

- PHE unwinding is anticipated in mid-December.
- Phase 2 of PHE member communication effort is anticipated to start mid-November. The message will be more targeted. Currently, members are encouraged to update their information.
- Young addressed questions from meeting participants. Young confirmed that previous PRSS who obtained certification must be recertified.
- It was announced that the West Virginia Behavioral Health Association will be holding workshops and training for PRSS in November and December.

### **Managed Care, Program Integrity and Pharmacy Services Update:**

- Deputy Commissioner of Plan Management and Program Integrity, Fred Lewis provided the following Managed Care services update:
- The Mountain Health Promise procurement is currently in a blackout period.
- Mountain Health Trust's Request for Procurement (RFP) will continue to award contracts to three plans for the upcoming procurement. There is interest by several plans that are not yet located in West Virginia so BMS anticipates vibrant competition.
- BMS plans to send the RFP to the Centers for Medicare and Medicaid Services and the West Virginia Office of Technology in November, and anticipate release by the end of March.
- The External Quality Review Organization RFP is in development, and we expect it to be released within the next few months.
- Lewis said that BMS is honored to have participated in the very first cohort of the Medicaid Innovation Collaborative (MIC) project with Hawaii and Arizona around the issue of adolescent behavioral health, which the states highlighted as an area of special need. The project is just wrapping up the development of that and are moving into implementation. The project is focused on working through the managed care organizations (MCO) to implement strategies for Navigating and Coordinating Care, Resources, and Services for Adolescents and Families and to Provide Alternative Care Models for early intervention, crisis response, and ongoing follow-up services. Plans will be identifying technology-enabled solutions to help with this.

- BMS has been working with the Bureau for Public Health (BPH) and even CMS and a little bit with the Whitehouse on Hep C elimination. The State effort is dually focused on HIV as well.
- Office of Program Integrity (OPI) just completed a joint training event with the Medicaid Fraud Control Unit on June 27, 2022.
- The Recovery Audit Contractor (RAC) implementation is ongoing and operations have started with Health Management Systems and Gainwell Technologies issuing its first set of record request letters based on eight different audit concepts that have been approved by BMS.
- Lewis reported that the Payment Error Rate Measurement (PERM) or audit process continues to excel.
- Revisions are being applied to policy manual *Chapter 800, Program Integrity*. Lewis welcomed feedback on the policy manual from provider associations.
- Lewis addressed questions and discussed plans.
- Lewis stated members get to select their plan, Beane further discussed new plans, it will be hard for more than three plans to participate due to population. If population grows, it would be considered.
- Incoming plans have to pass readiness review.
- Legal Aid representative, Benita Whitman asked if any information will go out to members. Commissioner Beane stated that Maximus, the State's Enrollment Broker, will work with members on putting out info on new plans and understanding their rights.
- Council member Gerry Stover also addressed Whitman's question due to primary care shortage, the large workforce is not in West Virginia, but in urban areas.

### **State Plan Amendment (SPA) Update:**

- BMS General Counsel, Riley J. Romeo presented the following State Plan Amendments (SPA):
  - SPA 22-0013 Mobile Crisis was presented, SPA was passed

**Finance Update:**

- Deputy Commissioner of Finance, Becky Manning provided finance update with source of funds for state fiscal year (SFY) 2022 compared to SFY 2021.
- Once the 6.2 goes away, federal source of funds will decrease.
- Medicaid received \$447 million as opposed to \$302 million in 2021, this is a result of increase in medical services.
- Waiver State funds remains the same
- Lottery funds decreased by \$48 million in SFY 2022 compared to sFY 2021
- Provider taxes increased by \$43 million, but Trust Fund decreased by \$39 million in SFY 2022. Miscellaneous funds decreased by \$4 million.

**Public Comment:**

- There were no public comments. Meeting was adjourned.

Minutes submitted by:  
Margaret Y. Brown  
Bureau for Medical Services