

MINUTES
MEDICAL SERVICES FUND ADVISORY COUNCIL
VIRTUAL MEETING
June 24, 2022

Members and Alternates Present

Cindy Beane, Commissioner, Bureau for Medical Services (BMS) Representative
Sarah Young, Deputy Commissioner, BMS Representative (alternate)
Ayne Ahmjad, Bureau for Public Health (BPH) Representative
Lisa Costello, WV State Medical Association Representative
Sherri Ferrell, WV Primary Care Association Representative
Tracy Hendershot, WV Academy of Family Physicians 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
Marty Wright, WV Healthcare Association Alternate 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. James Becker
Jennifer Myers
Carrie Mallory
Alice Niday
Joy Burns
Garland Holley
Virginia Evans

Interested Parties Present

Benita Whitman, Legal Aid
Jeff Wiseman, The Health Plan
Julie Vinson, Unknown
Tamika Briscoe, Unknown
John Magan, Unknown

Welcome and Opening Remarks and Commissioner's Update:

- Commissioner Beane announced that without any objections, the next MSFAC meeting will be held in person.
- Commissioner Beane announced that MSFAC will be accepting nominations for a new Chair for the Council.
- Minutes from the previous MSFAC meeting on February 28, 2022 were presented and approved.
- Beane provided updates on the Legislative session where several Bills were passed that directly affected West Virginia Medicaid. Those Bills are:
 - The Certified Comprehensive Behavioral Health Centers (CCBHC) Initiative Bill whom BMS collaborated with the Bureau for Behavioral Health along with stakeholders, the Behavioral Health Association. The Bill will allow West Virginia to become a CCBHC state. Medicaid is currently working on the CCBHC State Plan Amendment. As a result, the Bill creates Centers of Excellence for Behavioral Health, West Virginia will also receive additional funds as a CCBHC state.
 - In Federal Legislation, the Gun Violence Bill, passing a measure that includes support for states to implement “red flag” laws and investments in mental health services.
 - Medicaid is also working with Bill Senate 419, which puts value-based purchasing and quality incentives for the Substance Use Disorder programs.
 - Another Bill passed, West Virginia Children’s Health Insurance Program (WVCHIP) will now be under the Bureau for Medical Services (BMS), Stacy Shamblin has been appointed Deputy for WVCHIP. BMS will work on aligning their services with WVCHIP within the next year.
- BMS is working on rates and which rates that will require revisions especially with Workforce and with different provisions from the Centers for Medicare and Medicaid Services (CMS), BMS is methodically reviewing areas of opportunity for rate adjustments, enhancements or for new methodologies such as CCBHC. Several workgroups are working with providers types on rate reform.
- West Virginia Medicaid received an additional quarter on the 6.2 Federal Medical Assistance Percentage (FMAP) with the Public

Health Emergency (PHE), which adds \$50 million to the Medicaid budget. There is discussion on when the PHE may end, it will go through until the end of the calendar year, but it is still unknown if it will go beyond that year. There will be a 60-day advanced notice when the PHE will end. The Medicaid population has increased during PHE as no one has been rolled, but 100,000 members are anticipated to be rolled off when the PHE ends.

- Beane announced that the State Medical Director, Dr. James Becker is retiring and will no longer serve as Medical Director. Becker served in the position for 14 years. Dr. Becker will be retained for the next several months during the transition with the new Medical Director Dr. Hyla Harvey. Commissioner Beane congratulated Dr. Becker on his retirement.

Policy and Operations Update:

- Deputy Commissioner of Operations, Sarah Young provided the following updates regarding policy manuals:
 - Chapter 519, Practitioners Services' Policy 519.13, Podiatry Services was updated. Telehealth was removed from non-covered services to a covered service.
 - Chapter 519, Practitioners Services' Policy 519.17, Telehealth Services was updated adding Interstate Telehealth Providers due to legislation. Additional changes will be made once the PHE ends.
- Young announced a provider enrollment update. Effective October 1, 2022, due to the certification change, Peer Recovery Support Specialists must enroll as a provider with West Virginia Medicaid.
- Due to Electronic Visit Verification, private duty nursing and home health providers are required to enroll with West Virginia Medicaid, this is effective January 1, 2023.
- Young announced that Margaret Brown will be compiling a distribution list association and provider contacts to send out notifications for Policy Manual 30-day Comment Public Notices on the BMS website.
- Young provided a reminder for preparing of the end of PHE and recommended to visit the BMS website COVID-19 webpages for PHE updates.
- When PHE ends, the eligibility unwinding is planned to take place over a 12-month period. Those members, who failed to do a renewal

or determined ineligible, will be divided over that time period and Medicaid will do their best to align their services with other programs. For example, if the member has SNAP or WV Works renewal, will try to align it.

- Medicaid is in the first phase of the social media campaign encouraging members to update their information such as contact information or address change to determine their eligibility after PHE ends.

Managed Care, Program Integrity and Pharmacy Services Update:

- Deputy Commissioner of Plan Management and Program Integrity, Fred Lewis announced that long-time State and BMS employee Tanya Cyrus retired.
- Lewis provided the following Pharmacy Services update:
 - Hepatitis C criteria was recently changed allowing mid-level to treat uncomplicated cases without the requirement of a consult. Member sobriety requirement was also removed.
 - Medicaid is covering Apretude (the new long-acting injectable HIV prophylaxis medication) without a prior authorization requirement.
 - BMS continues to see increasing utilization of Sublocade (extended release injectable form of buprenorphine). We continue to monitor that closely. We want to see that it is improving member outcomes.
- Lewis provided the following Managed Care Services update:
 - BMS is working on the External Quality Review Organization (EQRO) vendor procurement.
 - Mountain Health Promise request for proposal (RFP) (RFP-in blackout) was submitted and is with BMS Purchasing Office review.
 - Mountain Health Trust's (Managed Care) RFP is under development by BMS.
- Lewis provided the following Quality update:
 - The BMS Recovery Audit Contractor project will go-live on July 8, 2022; recoveries will begin before the end of the year.
 - BMS Payment Error Rate Measurement (PERM) contractor informed BMS that West Virginia is leading our region in terms

of data submission for this cycle. Lewis shared a comparison of unidentified errors comparing 2016 and to the last 2020 audit cycle. Number of errors have decreased.

- Lewis addressed questions regarding the data provided.

State Plan Amendment (SPA) Update:

BMS General Counsel, Riley J. Romeo presented the following State Plan Amendments (SPA):

- SPA 22-0003 Targeted Case Management (Drug Free Moms and Babies) was presented and approved.
- SPA 22-0009 Personal Care Services was presented and approved.
- SPA 22-0010 Behavioral Health Services was presented and approved.
- SPA 22-0011 Targeted Case Management Services was presented and approved.
- SPA 22-0012 Prescription Refills was presented and approved.
- SPA 22-0016 Nursing Facility Rate Precision was presented, one opposed. Commissioner Beane discussed PHE increases and decreases for provider types. Margaret Brown performed a vote roll call for SPA 22-016. The following is the roll call list:
 - WV State Medical Association: aye
 - Dental Association: aye
 - WV Academy of Family Physicians: aye
 - WV Healthcare Association voted: no
 - Hospice of West Virginia: aye
 - WV Behavioral Healthcare Provider Association: aye
 - WV Primary Care Association: aye
- SPA 22-0018 Days Awaiting Placement, Commissioner Beane further explained SPA 22-0018. SPA was presented and approved.
- SPA 22-0020 Third-Party Liability was presented and approved.
- SPA 22-0022 Emergency Medical Services (EMS) Ground was presented and approved.

Finance Update:

- Commissioner Beane provided the finance update.
- Revenue increased from July 2021 to March 2022. The increase is attributed to the increase of the 10% FMAP from the American

Rescue Plan Act (ARPA) for home and community-based services (HCBS). First year of ARPA funding, around \$300 million extra payments were pushed out for HCBS, in turn the 10% FMAP match will give back \$587 million (state and federal funding) for HCBS. All of the dollars must be spent by March 2025, the previous deadline was March 2024.

- The overall FMAP has seen a decrease of .31%.
- Overall expenditures have increased by 17%, increased to \$571 million from last year, due to the unanticipated number of membership due to maintenance of effort requirement for PHE.
- There is a 2022 estimated surplus of \$343 million, it is projected the surplus will go away when the PHE ends.
- According to the Primary Care Report, Medicaid has paid fiscal year 2020 was the top year of spend for primary care at approximately \$385 million, previous year was \$254 million, in 2021, it was \$297 million. Primary care spending has decreases since 2020.
- Commissioner Beane addressed questions regarding the Finance Report.

Public Comment:

- There were no public comments. Meeting was adjourned.

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