MINUTES MEDICAL SERVICES FUND ADVISORY COUNCIL MEETING October 10, 2014

Members and Alternates Present

Cindy Beane, Acting Commissioner, BMS
Charles Covert, Chairman, Hospital Representative
Marshall Long, Physician Representative
Thom Stevens, Physician Alternate
Dennis R. Lewis, Pharmacist Representative
Patrick Kelly, Nursing Home Representative
Amy Sowards, Nursing Home Alternate
M. B. Ayoubi, Physician Representative
Mark Drennan, BH Representative
Chuck Thayer, BPH Alternate
Jeff Johnson, Alternate for Ron Stollings, Senate LOCCHRA
Sherri Ferrell, PC/FQHC Alternate

Bureau for Medical Services Employees Present

Alva Page III, General Counsel Tony Atkins, Deputy Commissioner, Finance, BMS Stacy Broce, Bureau for Medical Services Julia Caton, Bureau for Medical Services Ed Dolly, MIS

Interested Parties Present

Anita Hayes, BCF
Barbara Good, WVSMA
Perry Bryant, WVRHC
John D. Law, KCAD
Drew Lewis, Dignity Hospice and Home Heath
Jennifer Britton, APS
Brenda Nichols Harper, Wellpoint / Unicare
Phil Shimer, TSG
David Cross, MTM
Crystal Richardson, MTM

Public Comment Speaker

Welcome and Opening Remarks

Acting Bureau for Medical Services Commissioner Cindy Beane welcomed everyone to the meeting, and announced that there will be presentations from the NEMT Broker and Tony Atkins, the new Deputy of Finance at BMS.

Approval of Minutes

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Chairman Charles Covert called for a motion to accept the minutes from the July MSFAC meeting. A motion was made and seconded. All were in favor. The minutes were approved.

Health Care Reform

Acting BMS Commissioner Cindy Beane presented the update on Health Care Reform.

- 150,000 expansion members are now receiving health care
- We did an excellent job of making it easier to get on our roles
- There is a slight strain on the provider community due to the influx of membership
- We are working with corrections and hospital based presumptive eligibility for prisoners who are in an overnight stay in a hospital over 24 hours
- We are looking at a Phase II plan for prisoners who are ready to come out into society who will be Medicaid eligible
- Unless CMS does additional expansion, the enhanced PCP Bump will be expiring December 31, 2014. Even though it is expired, we are required to audit in 2015.
- We are in our last phase of letters for provider re-enrollment. Our hospitals will be in our last phase. Our goal is to have re-enrollment completed by July 2015.
- We are preparing for ICD-10. CMS recommended certain formats with regard to our policies, so you will see some format changes. If there is a change in your policy manual, we will let you know. If it is just formatting issues, we will still put the policy up for 30 day comment. We are currently doing some internal testing activities. The first quarter of the calendar year, we plan on doing external testing activities.
- Our Waiver Programs have had a new rule which CMS has recently come out with called an integrated rule. Our three waiver programs have to have a transitional study.
- Working closely with BH Association at expanding our current managed care benefit and adding in BH services.
- We are looking at a study group regarding Long Term Care Services.
- NEMT Broker started October 1, 2014.

David Cross, our NEMT Broken, presented to the group.

Policy Update

Health Home Initiative started on July 1, 2014. Dr. Becker reported there four behavioral health centers, one FQHC, one primary care center, one free clinic and one University participating as providers.

Financial Update

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Tony Atkins introduced himself to the Council. He said he needed input from the Council.

- Chairman Covert asked if the financial report could be broken down to see specific categories in Managed Care.
- Council would like to have the financial presentation prior to the Council meeting
- Council would like to see more of a break down on funding sources.

Communication Update

None given

State Plan Amendments

Alva Page reported that four state plan amendments were approved by CMS and one had to be resubmitted.

<u>Information Technology Update</u>

- Continue to work with CMS on validating the MMIS system.
- Continue to work with CHIP on compliance issues.
- Data Warehouse went live in September 2014.
- Continue to have account transfer issues with the Market place but have a work around process.
- Fall provider workshops will be in November

By-Laws Committee Update

Pat Kelly presented the changes to the by-laws. Vote on by-laws will take place at next meeting.

Public Comment

None

Minutes submitted by: