

MINUTES
MEDICAL SERVICES FUND ADVISORY COUNCIL
MEETING
April 16, 2019

Members and Alternates Present

Cindy Beane, Commissioner, BMS

Sarah Young, BMS (alternate)

Carol Haugen, Hospital Representative

Carol Buffington, Dental Representative

Larry Robertson, Hospice

Marcie Vaughan, WV Behavioral Healthcare Providers Association

Mark Drennan, WV Behavioral Healthcare Providers Association (alternate)

Matt Walker, WV Academy of Family Physicians (alternate)

Debra Boyd, WV Primary Care Association (alternate)

Cathy Slemper, Bureau for Public Health

Bureau for Medical Services Employees Present

Ryan Sims, General Counsel, BMS

Tony Atkins, Deputy Commissioner, Finance, BMS

Fred Lewis, BMS

Margaret Brown, BMS

Brandon Lewis, MIS

Tanya Cyrus, BMS

Interested Parties Present

Vanessa VanGilder, WV Behavioral Health Planning Council

Benita Whitman, Legal Aid

Barbara Good, The Health Plan

Hallie Mason, Charleston Area Medical Center

Matt Walker, WV Lobbyist Group

Shana Phares, TSG Consulting, LLC

Phil Shimer, TSG Consulting LLC

Welcome and Opening Remarks

- Commissioner Beane welcomed attendees to the meeting. She announced the new facility for the meeting and asked that Council members take part in a poll on whether or not they agree with the new meeting facility, the WV Water Development Authority.

- It was announced that the previous MSFAC meeting was the final one for former MSFAC Chairman Pat Kelly. Commissioner Beane expressed her appreciation for the former Chairman's dedication and service to the Council and that a new Chairman and Vice Chairman will be elected in today's meeting.
- Commissioner Beane announced that due to the vacant Chair position, that BMS Deputy Commissioner of Operations, Sarah Young, will be heading the meeting today.
- Young presented the Meeting Minutes from October 23, 2018 meeting. The Meeting Minutes were accepted and approved.
- Young announced that the MSFAC's Chair and Vice Chair positions are currently vacant. She stated that the by-laws state that "At the first meeting of the calendar year, the Council will elect a Chairperson and a Vice Chairperson."
- Young asked if there were any nominations for the vacant positions, Commissioner Beane nominated Carol Haugen, who expressed interest in the position. Motion was made to nominate and elect Haugen as the new Chairperson of the MSFAC Council with no oppositions.
- Young requested nominations for Vice Chair, Commissioner Beane nominated and elected Haugen as the new Chairperson of the MSFAC with no oppositions.

Commissioner's Update

- Commissioner Beane announced that this is the first meeting since the Legislative session. She announced that the session was very productive this year. One of the Bills that is considered exciting news for Medicaid, is the expansion for pregnant women for 185% Federal Poverty Level (FPL), more pregnant women will be covered for the length of their pregnancy and two months post-partum. The Bill will make sure women are getting prenatal care and making sure Medicaid is working with and ensuring healthy births in West Virginia.
- During the Legislative session, there was discussion of House Bill 2010, the Omnibus Foster Care Bill, which included Medicaid components.
- The most significant component was the transition of Medicaid's foster care and adopted youth population into Managed Care environment. The goal for that population transition is set to be completed by January 2020.

- Commissioner Beane announced that during the meeting, their main discussion will be what Medicaid is doing for the youth population due to the substance use disorder (SUD) crisis which has created a crisis on the child welfare system. West Virginia leads the nation of children being removed from their homes.
- BMS is working closely with the Bureau for Children and Families (BCF) to not only move populations into a coordinated care environment but to also add services for that population.
- Commissioner Beane announced that a presentation regarding the youth population, will take place later in the meeting by Jennifer Eva. She will present information on the new 1915(c) Waiver, this waiver will be up for public comment on April 23, 2019, Medicaid is currently working diligently on preparing for the Waiver.
- The Waiver will bring a new program to youth who will receive in-home support to foster families as well as families in Medicaid who have a child with severe emotional disorder who requires the support that will be provided through the new program. The program will help support families to prevent children from being removed from their homes.
- Commissioner Beane announced one of the Managed Care Plans is leaving the market as of July 1, 2019, leaving Medicaid with three Plans in West Virginia. Medicaid is working with other Plans, the enrollment vendor to provide a seamless transition of members into the other three Plans.
- Commissioner Beane provided an update on the SUD Waiver, Residential Services are now available. There are 446 residential beds that the Waiver covers; 154 Peer Recovery Specialists who are now certified.
- There were no questions for the Commissioner's update.

Policy Updates

- Deputy Commissioner of Operations, Sarah Young, provided the following update on Medicaid policies since the last meeting in October 2018:
 - Chapter 519 Women's Health Services was updated in November.
 - Chapter 508 Home Health was updated in December.

- Chapter 501, Aged and Disabled Waiver (ADW) and 512 Traumatic Brain Injury Waiver (TBIW) were updated in January 2019.
- Chapter 503 Appendix F, Residential Children's Services was updated in February 2019.
- There are two policies available for public comment, Chapter 504 Neonatal Abstinence Syndrome (NAS) Services and revisions for Chapter 504, SUD Waiver.
- Other policies that are currently being updated are Chapter 534Dialysis Centers, Chapter 528 Bone Density/Mammogram Services, Portable X-Ray Services.
- Chapter 538 School-Bases Health Services will be updated but will not be effective until August 2019. However, this policy has been posted early. The old and new policy will be available, their effective dates are also included for both policies.
- Chapter 524 Transportation Services was updated.
- Chapter 509 Hospice Services and Chapter 532 Private Duty Nursing are currently being updated.
- Young announced the dates, locations and additional information for the Spring Provider Workshops. She announced a location change for the 2019 Fall Provider Workshops. The workshop that usually takes place in Morgantown will be in Bridgeport.

Special Topic

- Jennifer Eva, Program Manager for the Serious Emotional Disorder (SED) Waiver presented information on the upcoming program.
- An application is currently being written for the SED Waiver.
- The Waiver will provide services to youths between the ages of three and 21.
- The starting age was chosen because of the Birth to Three program.
- Youth who have a mental impairment that interferes with daily life functions qualify for the program.
- The goal is to provide services to these children and keep them with their families while receiving services to improve their outcome.
- One of the goals is to serve 500 children on the program as there are currently 500 children who are in placement in and out of state.
- Children must meet a financial and medical eligibility. Any child on the program must have a medical card.

- Most of the children consists of foster children, but the Waiver is not limited to this population.
- They must be a resident of West Virginia and must choose home and community-based services.
- Eva presented information on medical eligibility. Intense services and other supports that the SED program will provide to the member.
- Eva provided information on how to submit public comments on the new Waiver.
- The goal is to go live with the program on October 1, 2019. Applications for the program will be accepted beginning January 1, 2020.
- Meeting attendee asked if the program will be on a first come first serve basis? Commissioner Beane responded with the Waiver will function the same as the current 1519 (c) Waivers do.
- Commissioner Beane congratulated Eva and BCF on their efforts getting the application ready and meeting timeline goals.

State Plan Amendment (SPA) Update:

- General Counsel Ryan Sims presented the following SPAs:
 - 19-0001 - Federally Qualified Health Care SPA was presented and approved.
 - 19-002 and 19-003 - Physical and Occupational Therapy was presented and approved.
 - 19-0004 - Medicaid State Plan Eligibility for Pregnant Women was presented and approved.

Finance Update:

- Deputy Commissioner of Finance Tony Atkins presented a Source of Funds Summary. Medicaid is currently receiving a federal share of 74.34%. The federal match will increase because of the Federal Medical Assistance Percentages (FMAP). The Expansion percentage is currently 93% but will drop to 90% by January 2020.
- Cash Receipts and State Funds Summary was presented. State-appropriate receipts have totaled in state fiscal year (SFY) 2019: 1.052.
 - In seven months, West Virginia Medicaid has received \$522 million in state funds for SFY 2019, down from SFY 2018 total of \$578 million.

- Expenditure Summary was presented. In seven months, \$2,285,000,000.00 has been spent so far. Retroactive payments from July 1, 2018 will be sent to providers and MCOs, these payments do not mean that members have not received services.
- Member Enrollment Summary was presented. There are currently 514,000. There is a slight decrease from last year, August 2016 saw the highest enrollment. Enrollment is declining in the adult population. The decrease can also be attributed to the state population declining with adults who must look for job opportunities out of state. Adults who remain in the state have found employment from the improved economy.

Plan Management and Integrity Update:

- Deputy Commissioner of Plan Management and Integrity Fred Lewis provided updates on the following MCOs. There are 390,000 enrolled in MCO plan, which is 88.8% of the total Medicaid population.
- 61,220 members will transition from the former MCO plan Family Health into one of the remaining three plans.
- The Office of Managed Care is currently working on many projects such as the foster care population transition and coordinated care management plan.
- Institutions for Mental Diseases (IMD) was carved in on January 1, 2019.
- The SUD Waiver is being carved in to managed care as beginning July 1, 2019, except for methadone treatment which will remain under fee-for-service.
- Effective July 1, 2019, Family Health Plan chose not to renew their contract, leaving three remaining plans
- Family Health Plan members have already been notified that Family Plan has chosen not to renew their contract, 213 of those members have been transferred to another plan. Members have been notified that they must choose their new plan by June 17, 2019 or they will be automatically enrolled into one of the three available plans.
- Payment Error Rate Measurement (PERM) audits are currently taking place.
- Fraud, waste and abuse recordings will now be monthly rather than quarterly beginning July 1, 2019.
- Office of Quality Management recently completed their Adult and Children Quality Measures for the Health Homes Program.

- Lewis announced that the Office of Pharmacy Savings Report is now available on the BMS Pharmacy website.

Technology Update:

- Management Information Services (MIS) Manager, Brandon Lewis, gave an update on three current projects that MIS is working on.
 - Asset Verification Solution's (AVS) goal is to identify and detect fraud, waste and abuse amongst Medicaid, Temporary Assistance for needy Families (TANF) and Supplemental Nutrition Assistance Program (SNAP) population.
 - The AVS has been integrated into the eRAPIDs systems which allow case workers to have access to the information the AVS has found. For example: vehicle registration, life insurance, tax information, savings and checking accounts, etc.
 - The AVS system went live on April 1, 2019.
 - The BMS, MIS, and DXC Technology are working together to start automating licensing verification for provider groups. The Board of Medicine was the first group that was successfully streamlined the process to where all of Board of Medicine providers licensing comes through a portal site through DXC Technology. The goal is to get all Boards automated.

Bureau for Public Health Update:

- Commissioner Cathy Slemp presented information regarding the infectious disease implications from SUD epidemic and use of injected drugs.
- This population is at risk for several infectious diseases such as Hepatitis A, there are 2,749 cases throughout the State. The average is nine a year.
- Partnerships with Primary Care, Bureau for Behavioral Health, regional jails and recovery centers helped expand testing and vaccination services, they are now seeing the Hepatitis outbreak decline significantly.
- A study was performed on the cost to Medicaid due to the outbreak. 559 Hepatitis A cases and the costs for care were studied. The cost of vaccination was five percent of the cost of care.
- Human Immunodeficiency Virus (HIV) cases are increasing in Cabell County. West Virginia is one of the states who has the lowest HIV

cases. The Virus is mostly being transmitted through injected drug use.

- Mark Drennan announced that the Behavioral Health Providers Association is holding its sixth annual conference in Charleston. Topics that were discussed in today's meeting will be covered.

Public Comment:

- Benita Whitman, Legal Aid, commented on the transition of Medicaid members enrolled with the former Family Care Plan. Whitman commented if a member is automatically enrolled into a plan and their doctor is with another plan, is the member locked in to their plan that was chosen for them? Commissioner Beane replied that the notifications encourage the members to make their choice, after the member is enrolled with their current plan for a month, they can switch to another plan and that member is not locked into a plan and there are many safeguards locked in place to ensure continuity.
- Whitman commented that people leaving Medicaid in the adult category, has there been a study of those adults and do they still have health insurance? Whitman commented that cases have been found where the adult is employed but they cannot afford any insurance, not even through the Affordable Care Act. Whitman commented that could there be a partnership with WVU and Marshall to perform this study? Commissioner Beane replied that yes there could be a study. West Virginia Medicaid has not request one but will look into it.
- Whitman commented if there has been a reduction in expenditures in the Intellectual and Developmental Disabled Waiver (IDDW) population with the implementation of the new IDDW policy? Commissioner Beane responded that there was a decrease, but it allowed 300 individuals removed from the IDDW application waitlist onto the Waiver. Whitman commented if IDDW Waiver money was shifted anywhere else or does it go back to IDDW? Commissioner Beane responded that the money will not be shifted elsewhere, it goes back to the IDDW budget as that program is not a part of Medicaid's general revenue. Deputy Atkins commented that \$89 million a year is what the legislative appropriation has been for several years.
- Meeting was adjourned

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