MINUTES MEDICAL SERVICES FUND ADVISORY COUNCIL (MSFAC)

TC Energy (formerly Columbia Gas) Conference Room December 2, 2022

Members and Alternates Present

Cindy Beane, Commissioner, Bureau for Medical Services (BMS) Representative

Sarah Young, Deputy Commissioner, BMS Representative (alternate)
Sherri Ferrell, WV Primary Care Association, MSFAC Chairperson
Debra Boyd, WV Primary Care Association, Representative (alternate)
Dr. Tracy Hendershot, WV Academy of Family Physicians Representative
Gerri Stover, WV Academy of Family Physicians Representative (alternate)
Jessica Hall, Hospice Council of West Virginia Representative
Christopher Rawlings, Hospice Council of West Virginia Representative
(alternate)

Todd Jones, WV Healthcare Association Representative Hallie Mason, Dental 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

Christy Donahue, The Health Plan Phil Shimer, TSG

Welcome and Opening Remarks and Commissioner's Update:

- Commissioner Beane provided the following West Virginia Medicaid update:
- Beane announced that the MSFAC meetings will now take placed at the TC Energy (formerly Columbia Gas) conference room.

- Beane introduced the new MSFAC Chair, Sherri Ferrell, Primary Care Association. The position was formerly held by Carol Haugen, West Virginia Hospital Association.
- Sherri Ferrell presented the MSFAC Meeting Minutes, Minutes were approved.
- Beane presented information regarding the Public Health Emergency (PHE) ending at the State level. Beane announced that Governor Jim Justice rescinded the PHE ending at the State level, but PHE at the federal level will be ending. Since West Virginia Medicaid is on a state/federal partnership, Medicaid still has the flexibilities under the State PHE.
- Telehealth flexibilities have received the most inquiries on whether or not Telehealth services will still be available once the PHE ends. Beane stated those services will continue under the federal health provision. Beane announced that once the federal PHE ends, West Virginia Medicaid's plan is to update the Medicaid's policy manuals to include new Telehealth post COVID-19. Medicaid members will still get to receive their flexibilities with telehealth, however, this does not apply to Medicare as their flexibilities are under the federal level.
- Regarding the federal PHE, Beane presented information on her discussion at the Medicaid Directors Conference. Directors along with the Centers for Medicare and Medicaid Services (CMS), discussed the uncertainties of when the PHE will end as it had been extended. During the conference, it was also discussed on how states will prepare to unwind PHE, the effect it will have on the 6.2% federal medical assistance percentages (FMAP) state benefits, once it officially ends. The PHE is slated to end in January.
- Some states have already begun preparing for the unwinding, Beane announced that Deputy Commissioner of Operations Sarah Young has been assigned to coordination the preparation for West Virginia Medicaid's Unwinding Campaign.
- Beane announced that the West Virginia Department of Health and Human Resources (DHHR) McChrystal report is now available online. The report was assigned to the Consulting Group by Governor Jim Justice to assess the Department as goal to improve its operations. As a result, restructuring of the DHHR is being implemented adding new leadership to the Department.
- Beane addressed questions regarding the DHHR restructuring.

- Beane announced that American Rescue Plan Act (ARPA) ad pays are currently being distributed to providers.
- Beane presented an overview on the Drug-Free Mom and Baby (DFMB) program. The program supports individuals during their pregnancy and postpartum who have issues with a substance use disorder. They are assigned a community health worker to find them medication assistance treatment (MAT) services, follow-up with treatment, find the individual substance use disorder treatment and prenatal care as well.
- The DFMB is a state plan amendment (SPA). Initially, the program was grand funded to assist with program planning and SPA development. The DFMB SPA 22-0003, was approved September 6, 2022, but became effective June 9, 2022. Services were offered members prior to the SPA approval. Several healthcare sites in the State have already begun offering services. The program is currently serving 69 individuals and their families and is already producing positive outcomes.

Policy and Operations Update:

- Bureau for Medical Services (BMS) Deputy Commissioner of Policy and Operations Sarah Young, announced the following policy manuals have been finalized:
 - Policy 519.24, Gender Affirmation Surgery public commented ended on October 1, 2022. The policy became effective on September 1, 2022 to align with a court decision.
 - Chapter 511, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) new updates became effective on July 1, 2022.
 - Policy 519.19, Women's Health Services updates became effective on September 13, 2022 to align with House Bill 302.
- Young announced the following reminders:
 - Work on the Peer Recovery Support Specialists is still ongoing. The Bureau for Medical Services (BMS)online certification is no longer available. For peer recovery support specialist (PRSS) certification and enrollment, all new and current PRSS should be working on obtaining new certification from the West Virginia Certification Board for Addiction & Prevention Professionals (WVCBAPP) in order to be reimbursed by Medicaid. All PRSS

- must receive their national provider identifier (NPI) and be enrolled in the system by January 1, 2023.
- The deadline for Electronic Visit Verification (EVV) services for Private Duty Nursing and Home Healthcare agencies to get their attendees enrolled by the official "go live" date of January 1, 2023.
- The Fall Provider Workshops took place on October 11, 2022 through October 20, 2022. The Workshops experience a high attendance from providers. The attendance was 635. In the future, in-person and virtual workshops are being considered. Currently, there is only a virtual option for Provider Workshops.
- Regarding PHE unwinding communication efforts, Medicaid members are being notified to update their contact information.

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 Managed Care Unit is currently working on two large projects procurements and request for proposal (RFP) for Medicaid's West Virginia Children's Health Insurance and Managed Care programs. The release goal date is March 2023.
- Mountain Health Trust's Request for Procurement (RFP) is currently in "blackout."
- The Quality Unit is working with Medicaid's managed care organizations (MCO) on Adult and Child Core Measures data.
- Lewis announced that the reimplementation of the Quality Withhold Program.
- 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 11 different audit concepts.
- The Office of Program Integrity (OPI) have recovered \$400,000 from MCOs that resulted from a credit-balance audit.
- Lewis reported that the Payment Error Rate Measurement (PERM) team is ahead of schedule with data submissions.

- Lewis announced that final revisions are being applied to policy manuals *Chapter 800, Program Integrity* and *Chapter 100, General Information* and will be available for public comment soon.
- The Medicaid Fraud Unit is being provided with access to Medicaid's Claims Reporting System.
- The Pharmacy Unit is launching a new effort, started by the state of Missouri, the issue of poorly tolerated drugs. Lewis used the example of Oncology drugs that contain poisons that target cancer, but also include harsh side effects. The effort is a growing trend amongst states.
- Pharmacy services will be initiating their Retro Drug Utilization Review (DUR) contract, the new provider is Kepro. This will be effective January 1, 2023.
- Lewis addressed questions and discussed plans.

State Plan Amendment (SPA) Update:

- BMS General Counsel, Riley J. Romeo presented the following State Plan Amendments (SPA):
 - SPA 22-0015, Vaccine Administration and COVID-19 Testing and Treatment, SPA was passed.
 - SPA 22-0021, Presumptive Eligibility Determinations, SPA was passed.

Finance Update:

- Deputy Commissioner of Finance, Becky Manning provided finance update announcing the close of the first fiscal quarter of 2023.
 Manning made comparisons to member enrollment compared to 2022 and the impact it has on financials, revenues and expenditures.
- There was an increase in the enrollment and utilization of 40,000 This is a result of the PHE Medicaid Maintenance of Eligibility.
- Manning broke down the enrollment by population categories such as children, fee-for-service (FFS) and adults.
- Managed Care services received a six percent increase in enrollment.
- Current total Medicaid enrollment is over 600,000.

- Questions from Council members regarding enrollment and budget concerns regarding rolling off individuals when PHE ends were addressed.
- Comparing SFY 22 to first quarter 23, \$106 million more was spent in federal funds and \$40 million in state funds.
- Long-Term Care and Home and Community-Based Services saw an increase in expenditures, this may be attributed to the ARPA.
- Council member Gerry Stover discussed breaking down data how well members are doing with chronic illnesses. Stover used the example of the WV Health Homes Program. Commissioner Beane stated that Medicaid works with WVU Office of Health Affairs to break down data.

Public Comment:

• There were no public comments. Meeting was adjourned.

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