

MO HEALTHNET OVERSIGHT COMMITTEE MEETING MINUTES

February 4, 2021
Via WEBEX Conferencing

ATTENDANCE

Committee Members Present:

Nick Pfannenstiel, Chairman	Josh Moore, MHD	Heidi Geisbuhler Sutherland, MSMA
Bridget McCandless, Co-Chair	Kim Evans, FSD	Helen Jaco
Gerard Grimaldi	Kirk Mathews, MHD	Jackie Schmitz, Senate Staff
Joe Pierle	Leann Hager, MHD	Janelle Schumaker
Kaylyn Lambert	Nate Percy, MHD	Jennifer Colozza, Conduent
Senator Holly Rehder	Olivia Rush, MHD	Jessica Petrie, Winton Policy Group
Representative Tracy McCreery	Nora Bock, DMH	Jim Moody, HB Strategies
Sara Oerther	Tony Brite, MHD	Joe Miller, CHC Strategies
Senator Jill Schupp	Donna Siebeneck, DMH	Josh Haynes
Todd Richardson, MHD Director	Abby Barker, MHD	Julie Allen
Sam Alexander	<u>Guests:</u>	Kaitee Brown
David Ott	Alena Wheeler	Kurt Hendrickson
Jennifer Tidball, DSS Director	Alisa Gordon, Milliman	Kylie Ahrendsen, Accenture
Mark Stringer, DMH	Ally Siegler	Laura Hill

Members Not Present:

Mark Sanford	April Ash	Maggie Fairchild
Representative Jon Patterson	Ashish Kumar	Mandy Hagseth
Randall Williams, DHSS Director	Audrey Rattan	Megan Fast, Conduent
<u>DSS/State Gov't Staff:</u>	Brian Kinkade, MHA	Megan Price, Senate Staff
Bobbi Jo Garber	Cara Hoover	Robert Groeneveid
Caitlin Whaley, DSS	David Willis	Robert Heldman
Darin Hackmann, MHD	David Winton	Ron Fitzwater
Gail Luecke, MHD	Donna Checkett	Russell Oppenborn
Jessie Dresner, MHD	Emily Wright, Gibbons Workman	Shantel Dooling
	Tracy Hoerschgen	Susan Henderson-Moore

All meeting presentations are located on the web at: <http://dss.mo.gov/mhd/oversight/meeting.htm>

AGENDA

Welcome/Introduction/Approval of Minutes

- Dr. Nick Pfannenstiel called the meeting to order at approximately 12:00 p.m. The committee approved the minutes from the November 12, 2020 meeting.
- New committee member Senator Holly Rehder was introduced.

Director's Update

- Todd Richardson, MO HealthNet Director, gave an update on Medicaid Expansion. The Governor's recommended budget has been released including funding for Medicaid expansion. The total amount included was \$1.8 billion with a net general revenue cost of \$105 million. Three things that specifically guide the agency's action and inform what is in the Governor's requested budget include:

(1) coverage for eligible individuals starts July 1; (2) the agency is directed to have a health benefit package in place that meets the benchmark or benchmark equivalent standards; and (3) submission of required state plan amendments to CMS by March 1.

In terms of how we have chosen to structure the implementation, we are calling this group the Adult Expansion Group (AEG). The benefit package will mirror the current state Medicaid plan and current services that are offered to adults. It will also include habilitation benefits to meet the benchmark requirement. The covered services delivered to this population will be through Managed Care with the same services carved out of managed care, which include some behavioral health services and pharmacy. These carved-out services will continue to be delivered in a fee-for-service environment. We realized not everyone that is eligible will be enrolled by July 1 but we do anticipate that approximately 275,000 will be enrolled by the end of FY22. This estimate was derived by looking at the experiences of other states such as Virginia and their recent expansion and enrollment process.

- **Comment:** Representative McCreery said that Medicaid expansion was given its own line and not just integrated into other parts of the budget. She expressed her concern that this could easily be removed and asked if there was a backup plan if this were to happen.
 - **Comment:** Mr. Richardson said from a budgetary perspective, this involves not only the MO HealthNet Division (MHD), but also the Family Support Division (FSD) which handles eligibility and enrollment as well as Medicaid Audit and Compliance.. The Department will work with the General Assembly as the budget process moves forward.
 - **Comment:** Dr. Bridget McCandless stated that Virginia allowed people to begin enrollment prior to July and asked if MHD had a similar plan.
 - **Comment:** Mr. Richardson said it was unlikely that we could do this because there is significant systems work that needs to be done and FSD would not be ready to start the enrollment process prior to July 1.
 - **Comment:** Gerard Grimaldi asked for a definition of the “frail population” be sent out. He also asked if a PMPM was used to come up with the budget figure.
 - **Comment/Action Item:** The definition of the “frail population” has been sent to the committee as requested. In response to the budget question, Mr. Richardson advised it is still in draft form. It is anticipated that the rate will be refined by the end of February; however, it will not be finalized until sometime in May.
- Mr. Richardson next updated the committee on the current Missouri COVID-19 response effort and health data. ***The complete presentation is available online.***

The state is currently down to 7000 cases a week and the positivity rate is down from 20% to 9.3%. Another significant drop is the hospitalization rate. Mr. Richardson said we are not out of the woods yet, but trending in the right direction.

- **Comment:** Kaylyn Lambert had asked a question from the last meeting about how the funding was allocated at the beginning and how or if the different jurisdictions were tracking that.
- **Action Item:** Mr. Richardson will check to see if the information is available yet and get to the committee by the middle of next week.

Chief Transformation Officer's Update

- Kirk Mathews, MHD Chief Transformation Officer, presented an update on the Missouri Benefit Enrollment Transformation Project. ***The complete presentation is available online.***

Mr. Mathews advised the project is well into Phase II, which is the design and testing phase. Tight timeline but we are on schedule. The final review will be the week of February 8 and in line to submit for CMS review by March 1. The intention is to roll right into implementation and train staff and community partners on how to use the new application and to have this ready to go by July 1.

- **Comment:** Senator Schupp asked if the committee could get a copy of the application and how it would be distributed to applicants.
- 1. **Action Item/Comment:** Mr. Mathews advised he would share the latest version of the application to the committee. Applicants will be able to enroll as they do today, which is primarily through the resource centers. We will also be engaging with our community partners, such as our FQHCs and legal aid.
- **Comment:** Dr. Pfannenstiel asked if we will only use the new application after implementation or will there be a period where both the new and old will be used.
- **Comment:** Mr. Mathews said there could be a period where the dual use of both processes will occur but the ultimate goal is to use just the one.

Chief Operating Officer's Update:

- Jessie Dresner, MHD Chief Operating Officer, introduced the new Program Integrity Pharmacist, Olivia Rush. Ms. Rush graduated from UM-KC in 2018 and from there went to work for Conduent as a clinical pharmacist. She joined MHD in September of 2020. She said her main focus in this new position is to guide the Division's efforts through cost avoidance rather than just focusing on cost recovery. She also works with MMAC and Provider Education to make the program the best it can be.
- Ms. Dresner shared information on Long Acting Reversible Contraception (LARC), which was asked about at a previous meeting. **The complete presentation is available online.**
 - **Comment:** Dr. McCandless said that in the past, providers were frustrated that they had expensive devices and if the patient was a no show they could not use the device on another patient. She asked whether MHD had heard from providers if the change in policy to allow this made things easier regarding same day insertion when women came in.
 - **Action Item:** Josh Moore, Pharmacy Director, said he would check with his staff and get an answer back to her.

IT Update

- Darin Hackmann, Chief Information Officer, and Tisha McGowan, Project Management Manager, gave a presentation on the Business Intelligence Solution and Enterprise Data Warehouse (BIS-EDW). Ms. McGowan reported on the goals and gave a brief overview of the project. **The complete presentation is available online.**
- Mr. Hackmann also talked about the Pharmacy Point of Sale (POS), CyberAccess and SmartPA migration to the Cloud. **The complete presentation is available online.**

It was recognized long ago that our systems were outdated and in need of an upgrade. Moving the systems to the Cloud gives a much quicker and more secure way to upgrade the platform software, improves system performance, adds capacity as needed and improves disaster recovery capabilities. The migration was completed in December, 2020.

- **Comment:** Senator Schupp asked if the system edits will allow electronic submission of prior authorization requests.
- **Comment:** Mr. Hackmann responded that it does support electronic submission for most of our services; however, we do still have some types of service authorizations that are still in a more manual process which require submission of additional data such as needing information from a person's medical records. Our goal is to be able to convert all service authorization types into a more automated process at some point.
- **Comment:** Senator Schupp asked if there was a timeline to get this done and what is the priority.
- **Comment:** Mr. Hackmann said a procurement process was started to either upgrade the existing or replace the prior authorization system; however, we are in the early stages of the process and there is no timeline set. The committee will be updated as progress is made.

Managed Care Update

- Rebecca Logan, Manager of the Managed Care Policy Contracts and Compliance unit, gave an update on the program for SFY22. The most significant update is the addition of the AEG that will be effective July 1. Also being added into the program are (1) coverage for former foster care youth from other states up to age 26; (2) CAR-T therapies, which is an immunotherapy used for cancer treatment; (3) psychosocial treatment for obesity, which provides integrated medical nutrition and behavioral health services to facilitate behavior changes to manage obesity and associated comorbidities; and (4) interoperability rule, which is a federal regulation that requires insurers, both commercial and the Medicaid and Medicare plans to develop application programming interfaces that are like an application for a phone or tablet and allows members and providers access and/or ability to download medical and billing records. Ms. Logan also gave an update on the RFP timeline for SFY23. **The complete presentation is available online.**
 - **Comment:** Dr. Pfannenstiel asked if the RFP would be going out for at least 3 bids, as in the past.
 - **Comment:** Ms. Logan concurred there would be 3 awardees. In addition, MHD will be awarding the specialty plan which will cover our foster care children to one of the three major awardees.
 - **Comment:** Gerard Grimaldi ask if the foster care plan she just mentioned would be implemented sooner and if it was a separate group from the former foster youth group from other states. Ms. Logan confirmed it was a separate program from the later program he mentioned.
 - **Comment:** Mr. Grimaldi asked if behavioral health for the foster care youth would be provided in the managed care realm.
 - **Comment:** Ms. Logan said the plan was to include it in SFY23 plan. We are still working on what services will be carved back into the plan and what services will stay carved out.
 - **Comment:** Mr. Grimaldi asked in the SFY23 rebid, if behavioral health would be provided under managed care for the new population under expansion.
 - **Comment:** Ms. Logan reminded that the new population under expansion is an adult population and most of their behavioral health services are already carved in. Some of the CSTAR type services are already carved out and will remain that way even in SFY23.
 - **Comment:** Representative McCreery asked if there were any additional services outside of the state plan with CMS that the managed care organizations would need to provide.
 - **Comment:** Ms. Logan said that for the purposes of the rebid, the really significant addition is going to be the carve-in of the behavioral health services for children in foster care and in DYS custody.
 - **Comment:** Dr. McCandless asked if there was any chance for public input or review of the RFP before it is released.
 - **Comment:** Ms. Logan said to view the current contract you can go to <https://dss.mo.gov/business-processes/managed-care/> and can send any comments to Ask.MHD@dss.mo.gov.
 - **Comment:** Joe Pierle asked there would be anything to encourage addressing the social determinants that are impacting people with Medicaid.
 - **Comment:** Ms. Logan said that MHD realizes this is an important topic and is working on policies and requirements around the social determinants of health.

Pharmacy Director Update

- Josh Moore, Pharmacy Director, gave a presentation on Specialty Drugs, the pipeline and projected cost of the program. **The complete presentation is available online.**

Legislative Update:

- Caitlin Whaley, DSS Legislative Liaison, advised the group that the Department's budget has been presented to the House and will be sent to the Governor and Senate next week. Other than the FRA that needs to be passed each year, there isn't anything else legislatively moving right now.

Budget Update:

- Tony Brite, MHD Finance Director, gave the budget update. **The complete presentation is available online.**

Public Comment:

- There were no public comments.

Family Support Division (FSD) Update:

- Kim Evans, FSD Director, presented the FSD update. **The complete presentation is available online.**
- Ms. Evans reported that caseload has reached the 1 million mark. Due to the public health emergency no cases are being closed unless a participant dies, moves out of state, someone voluntarily closes their case, fraudulent activity, or CHIP recipients turn 19 and are no longer eligible.
 - **Comment:** Dr. McCandless asked for an explanation for the drastic drop of nearly 20,000 women accessing screening and contraceptive services through the Extended Women Health Services program.
 - **Comment:** Ms. Evans said part of the reason is those cases have been frozen since March 2020. For example, if they would have normally moved past post-partum to the uninsured or extended women services programs, they were frozen due to the public health emergency at the post-partum level of care. Once they are allowed to release those cases in the system, we will probably see those roll down. These two programs do not provide the minimal essential coverage and we cannot allow them to roll down past post-partum. The program is administered by Health and Senior Services and FSD does the eligibility part. Ms. Evans said she could look at the numbers again to verify this.
 - **Comment/Action:** Ms. Dresner said MHD had followed up on this as well by doing a historical look back to 2012 to the present. She advised once they have compiled the information and meet with FSD to go over the data, they hope to be able to provide what the trend has been over the past nine years.
- Pending applications latest figures are 960 MAGI and 9200 adult Medicaid. FSD has worked through everything received during open enrollment for November and December. A new open enrollment period will run February 15 through May 15.
- Twenty-one resource centers are currently open for individuals by scheduled appointments. On February 16, FSD will reopen an additional 55 centers and another 55 on February 22. The Metro area (Springfield St. Louis and Kansas City) centers will open after March 1. The resource centers will utilize an appointment scheduling system at first and then once social distancing and safety guidelines are put in place, they will start the transition to allowing walk-ins as we move through the spring and summer months.
- Ms. Evans advised FSD is going through final review of their Medicaid expansion policy. They are in the development stage in MEDES system for expansion.

They are also working on the training and communication piece, which is very large. This involves not only their staff, MHD and other internal staff associated with Medicaid but also entails reaching out to the community, participants and providers. Training is planned for providers. The plan is to do a couple of sessions, which will be taped and made available to all providers as well as other advocacy and community groups that would like to view the training. The training will show (1) the new simplified/streamlined application; (2) giving instructions on how individuals can access FSD online; (3) how they can access the phone centers and (4) different ways to help participants gain access to coverage. Handouts will be provided on general eligibility requirements as well.

FSD plans to start the communication piece in early March through social media and flyers. Training is

scheduled for the end of March to early April for providers and others.

In response to an earlier question regarding how individuals will be notified, Ms. Evans advised they will use the Federal Funded Exchange (FFE) to send notices to those that applied through the Exchange and are potentially eligible. These individuals will receive a letter asking them to update their application through the FFE if they are still interested in the program. Once the information is updated, it is sent electronically to the state and automatically updates the MEDES system. Their staff can pick up the information from there to process, eliminating the need to hand key anything from paper applications. FSD is working on scripts for the call centers to help them answer any questions they receive about the new process.

In regard to another question regarding the phase out of the current application and implementing the new streamlined application, FSD's plan is to do a clean break; however, any old applications received will be processed.

Ms. Evans advised the committee that an electronic verification piece will also be available that will allow the process to move much quicker.

- **Comment:** Dr. McCandless asked how far back they will look on the FFE to see if a person qualifies for Medicaid expansion.
 - **Comment:** Ms. Evans replied they are waiting on some clarification from CMS to determine that. She also said the participant would update the information into the Federal Marketplace and then the information would be sent to Missouri.
 - **Comments:** Dr. Pfannenstiel asked Ms. Evans how many applications she feels can be processed each day once the new application systems is up and running smoothly.
 - **Comment/Action:** Ms. Evans advised that was too hard to predict right now but could probably provide a better answer in April.
- The meeting at approximately 2:40 p.m. The next meeting is scheduled for May 25, 2021.