

# **MEDICAID OVERSIGHT AND ADVISORY COMMITTEE**

## **Minutes of the 2021 Interim**

**May 20, 2021**

### **Call to Order and Roll Call**

The meeting of the Medicaid Oversight and Advisory Committee was held on Thursday, May 20, 2021, at 1:00 PM, in Room 131 of the Capitol Annex. Senator Stephen Meredith, Chair, called the meeting to order, and the secretary called the roll.

Present were:

Members: Senator Stephen Meredith, Co-Chair; Representative Daniel Elliott, Co-Chair; Senators Ralph Alvarado, Danny Carroll, Jimmy Higdon, and Morgan McGarvey; Representatives Jim Gooch Jr., Melinda Gibbons Prunty, Steve Sheldon, and Lisa Willner.

Guests: Representative Kimberly Poore-Moser; Lisa Lee, Commissioner, Department for Medicaid Services, Cabinet for Health and Family Services; Dr. Beth Partin, Chair, Advisory Council on Medical Assistance.

LRC Staff: Chris Joffrion, Hillary Abbott, and Amanda DuFour.

### **Approval of Minutes**

A motion to approve the October 28, 2020 minutes was made by Representative Elliott, seconded by Senator Alvarado, and was approved by a voice vote.

### **Update from the Advisory Council on Medical Assistance**

Elizabeth Partin, Chair, Advisory Council on Medical Assistance (MAC) presented the following information to the committee: a review of the MAC's end-of-the-year reports, review of potential legislation impacting COVID-19 emergency regulations, and information and recommendations related to infant mortality and maternal morbidity as requested by the Department for Medicaid Services (DMS).

In response to questions from Senator Alvarado, Dr. Partin stated that she did not disagree with his position regarding the risks associated with substance use, specifically marijuana, during pregnancy and that disclosure of substance use by a patient would be subject to patient/provider confidentiality.

In response to questions from Representative Sheldon, Dr. Partin stated that the MAC did not contribute to the reimbursement methodology for Medicaid pharmacy benefits developed by DMS in implementing in 20RS Senate Bill 50.

In response to questions from Senator Meredith, Dr. Partin stated that there has not been a resolution reached with DMS regarding cross payments for rural health clinics.

## **Update on the Impact of COVID-19 on the Kentucky Medicaid Program**

Lisa Lee, Commissioner, Department for Medicaid Services, Cabinet for Health and Family Services provided the following updates on COVID-19's impact on Medicaid: increased enrollment; changes in Medicaid expenditures in both the managed care and fee-for-service (FFS) populations; changes in utilizations of emergency rooms, in-person encounters and telehealth encounters; increased reimbursement rates; and administrative regulation changes.

In response to questions from Representative Elliott, Commissioner Lee stated that presumptive eligibility has been around for a while and unless an applicant's official application is completed and processed, the applicant will fall off the list at the end of their period of presumptive eligibility. Commissioner Lee stated that just because someone qualified under presumptive eligibility, does not guarantee them Medicaid coverage. The application process is what helps DMS ensure that only qualified applicants receive Medicaid.

In response to questions from Representative Sheldon, Commissioner Lee stated that the increase in usage of chiropractic services is most likely due to the lifting of prior authorization requirements.

In response to questions from Representative Moser, Commissioner Lee stated that the number of people who qualified for Medicaid under presumptive eligibility will drop off based on when they first qualified and when their period of eligibility ends.

In response to questions from Senator Meredith, Commissioner Lee stated that she would provide the committee pre and post-COVID Medicaid enrollment numbers, as well as past presumptive eligibility figures.

### **Legislative Implementation Update: 20RS SB50, 20RS HB8, 21RS HB183, 21RS HB276, and 21RS HJR57**

Commissioner Lee provided the committee with an update on implementation of the following recently enacted pieces of legislation:

20RS SB50 which requires DMS to establish and directly administer the outpatient pharmacy benefit program for all Medicaid beneficiaries.

20RS HB8 which establishes the Medicaid ground ambulance service provider assessment and requires the Cabinet to promulgate administrative regulations to implement and pay for the assessment.

21RS HB183 which was signed into law on March 22, 2021 and requires DMS to enact a hospital rate improvement program.

21RS HB276 which requires DMS to accept employment of temporary COVID-19 personal care attendants as meeting training for state registered nurse aides.

21RS HJR57 which requires the Cabinet for Health and Family Services to implement a bridge insurance work group.

In response to questions and comments from Senator Meredith, Commissioner Lee stated that DMS is meeting the single source credentialing obligations outlined in 21RS HB438. Commissioner Lee stated that while fears of technology glitches are warranted

with new rollouts, DMS is doing all they can to ensure no glitches happen for providers when new DMS issued software is implemented.

In response to comments from Representative Sheldon, Commissioner Lee stated that she will look into the data source discrepancy in the determination of cost of goods to ensure the most equitable data is used.

### **Status Report on Outstanding Medicaid Waiver and State Plan Amendment Applications**

Commissioner Lee informed the committee that the 115 demonstration waiver to provide Medicaid coverage for substance use disorder treatment to eligible incarcerated individuals is pending final review by the Federal Centers for Medicare and Medicaid Services.

Lee also provided the committee with an update on other pending state plan amendment applications and pre-prints including updates on changes to reimbursement for school-based services, mandatory medication assisted treatment for substance use disorder coverage, a Case Mix Nursing Facility per diem rate add on, Program for All-Inclusive Care for the Elderly (PACE), Kentucky Child Health Insurance (KCHIP) coverage for pregnant women between 185-200 percent of the federal poverty level (FPL), a pharmacy pre-print for state fiscal years 2019, 2020, and 2021, a pre-print for implementation of the single pharmacy benefit manager for all Medicaid beneficiaries, and a durable Medicaid equipment (DME) pre-print.

### **Medicaid Managed Care Organization Request for Proposal Process (RFP)**

Commissioner Lee testified that due to ongoing legal disputes, she was unable to comment on the status of managed care organization contracts.

In response to questions and comments from Senators Alvarado and Meredith, Commissioner Lee stated she could not comment on any pending litigation.

In response to questions from Representative Elliott, Commissioner Lee stated that DMS is not considering any home and community based program that requires additional funding.

### **Adjournment**

There being no further business, the meeting adjourned at 2:31pm.