

MEDICAID OVERSIGHT AND ADVISORY COMMITTEE

Minutes

September 15, 2022

Call to Order and Roll Call

The Medicaid Oversight and Advisory Committee met on Thursday, September 15, 2022, at 10:00 AM, in Room 131 of the Capitol Annex. Representative Daniel Elliott, 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, and Lisa Willner.

Guests: Veronica Judy-Cecil, Deputy Commissioner, Department for Medicaid Services, Cabinet for Health and Family Services; Todd Trapp, Assistant Director, Division of Family Support, Department for Community Based Services, Cabinet for Health and Family Services; Ryan Sadler, Plan President; Nicole Basham, Vice President for Network and Operations; and David Hanna, Program Director, Health Services, Passport Health Plan; Frances Feltner, DNP, MSN, RN, Director, University of Kentucky Center of Excellence in Rural Health; William Mace Baker, RN, BA, Director, Kentucky Homeplace; and Ernie Scott, Director, Kentucky Office of Rural Health.

LRC Staff: Chris Joffrion, Logan Bush, and DJ Burns.

Approval of Minutes

A motion to approve the August 11, 2022, minutes was made by Senator Meredith, seconded by Representative Gibbons-Prunty, and approved by voice vote.

Medicaid Eligibility Redeterminations

Veronica Judy-Cecil, Deputy Commissioner, Department for Medicaid Services, Cabinet for Health and Family Services, discussed the flexibilities granted to states during the federal public health emergency declared on January 31, 2020, by the Secretary for the Department of Health and Human Services. She discussed Kentucky's plan for unwinding those flexibilities and the renewal process for Medicaid eligibility redeterminations that have been waived since the public health emergency was declared.

In response to questions and comments from Representative Elliott, Ms. Judy-Cecil stated that an algorithm estimated 210,741 Medicaid recipients may lose eligibility due to income information pinged from the federal hub.

In response to questions and comments from Senator Meredith, Ms. Judy-Cecil stated that she is concerned about having enough resources for the redetermination process. She discussed how efforts by the Commissioner of the Department for Community Based Services to increase salaries have helped with retaining and recruiting employees. She stated that the Centers for Medicare and Medicaid Services have given states some flexibility on how to allocate the population over the 12 month period which is helpful in creating monthly caseloads. Todd Trapp, Assistant Director, Division of Family Support, Department for Community Based Services, stated that staff turnover and retention are a big concern, but that staff raises have helped and moral is on the rise. Ms. Judy-Cecil stated that the Medicaid enrollment total number will grow by about 100,000 compared to pre-Covid numbers after this redetermination process is completed. She discussed the contract with Anthem Blue Cross Blue Shield and the process of transitioning those members to new MCOs.

In response to questions and comments from Senator Carroll, Ms. Judy-Cecil stated that if the cabinet receives notice from the federal government in November for the PHE to end in January, the state will continue to receive the additional 6.2 percent point increase in the federal share of Medicaid funding through the first quarter. She stated that recipients can ask for continued coverage during their 120 day appeal period which will be covered by the federal match. Mr. Trapp stated that as of this week, all staff are back in the office at least three days a week. Ms. Judy-Cecil stated that the federal Department for Health and Human Services will announce by the end of October if they will extend the PHE beyond January.

In response to questions and comments from Senator Alvarado, Ms. Judy-Cecil stated that the Center for Medicaid and Medicare Services has required the continuous coverage in order for states to receive increased federal funding, but states did get to choose which flexibilities to implement. She also stated no one automatically gets enrolled in Medicaid; they have to file an application and that if someone is dual enrolled in programs and receives a request for back payment they can request to not pay those capitation payments back to the state.

In response to questions and comments from Representative Willner, Ms. Judy-Cecil stated that the cabinet has been sending text messages and e-mails to communicate to recipients that the PHE is ending soon and to make sure their contact information is updated. She stated Kynectors and the DCBS office are the best resources for recipients looking for information on eligibility.

In response to questions and comments from Representative Gibbons-Prunty, Ms. Judy-Cecil stated that the cabinet has put the system changes on hold every time the federal PHE has been extended. It has used the extra time to focus on staff training and reaching out to the public to inform them of the changes once the PHE ends.

In response to questions and comments from Senator Higdon, Ms. Judy-Cecil stated that the cabinet verifies addresses for recipients using different databases, both on the state and federal level.

In response to questions and comments from Senator Meredith, Ms. Judy-Cecil stated that telecommuting has enabled the Department for Medicaid Services to hire and retain new employees. Since the change in policy, it has tried to be flexible with employees based on their situation. She stated the cabinet has granted an extension until January for the return to a 3 days in the office policy.

In response to questions and comments from Senator Carroll, Ms. Judy-Cecil stated that it is her understanding the personnel cabinet makes the rules on the telecommuting policy.

Medicaid Managed Care Organizations' Efforts to Improve Health Outcomes, Network Adequacy, and Access to Care – Part 4

Ryan Sadler, Plan President, Passport Health Plan, discussed member stories, Passport's commitments to the Commonwealth, and Medicaid membership count by region. Nicole Basham, Vice President for Network and Operations, Passport Health Plan discussed initiatives Passport Health Plan has developed to ensure network adequacy and strategies for addressing the financial position of rural health care providers. David Hanna, Program Director, Health Services, Passport Plan Health discussed initiatives Passport is implementing to improve the health of the Medicaid population in Kentucky, the effectiveness and efficacy of their substance abuse treatment programs, and strategies for ensuring equity in health care delivery across Kentucky.

In response to questions and comments from Senator Meredith, Ms. Basham stated that Passport was able to secure a dental provider in a region that had previously not had a Medicaid dental provider. She stated Passport is discussing mobile behavior health services to provide access to regions that do not have services currently, as well as expanding telehealth services to members who do not have internet access with one stop shops. She stated Passport contacted providers in eastern and western Kentucky during the natural disasters to inquire if they needed help getting facilities set up after the destruction.

In response to questions and comments from Representative Willner, Mr. Sadler stated Passport has housing specialist to help members find housing. Mr. Hanna stated that Passport accepts referrals from all members and passport has a relationship with the Housing Authority in Louisville because of the specialist it employs. He stated Passport is

looking to expand its housing program into other regions and hoping to make connections throughout the state.

Update from the University of Kentucky Center of Excellence in Rural Health

Frances Feltner, DNP, MSN, RN, Director, University of Kentucky Center of Excellence in Rural Health, discussed the center's efforts to improve the health of Kentuckians in rural communities who are on Medicaid, the role of community health workers in rural communities, and 22 RS HB 525. William Mace Baker, RN, BA, Director, Kentucky Homeplace, discussed the center's role in training community health workers. Ernie Scott, Director, Kentucky Office of Rural Health, discussed an overview of the Small Rural Hospital Improvement Program grant awarded to the Office of Rural Health Policy in 2021.

In response to questions and comments from Representative Elliott, Dr. Feltner stated that there is a need for more community health workers in the workforce.

In response to questions and comments from Senator Meredith, Dr. Feltner stated that the academic programs are limited to what the university offers, the residency program is through the federal program, and the center can only graduate 4 residents a year for rural health. She stated the center receives \$15 million a year in grants but are limited to the outcome measures set forth in those grants. Dr. Feltner stated the center also receives money in state funding and that she welcomed the opportunity to lobby for more state funding to expand the center's programs.

In response to questions and comments from Senator Carroll, Dr. Feltner stated that when Kentucky Homeplace was first funded it received \$1.9 million in state funds and it now receives \$900,000 a year. The center has cut community health workers due to loss of funding and raises in salaries. He also stated the loss in funding led to the closure of the center's operations in western Kentucky.

Adjournment

There being no further business, the meeting was adjourned at 12:30 PM.