

Medical Care Advisory Committee

Minutes of July 20, 2023

Participants

Committee Members (via phone)

Michael Hales (Chair), Jennifer Marchant, Rachel Craig, Maritza Erickson for Dale Ownby, Brian Monsen, Lisa Heaton, Stephanie Burdick, Calleen Kenney, Dr. Jennifer Brinton, Kim Dansie, Gina Tuttle, Alan Ormsby, Michael Jensen, and Cassidy Matthew

Committee Members Absent

Joey Hanna, Carlos Flores, Luis Rios, Dr. Robert Baird, and Davis Moore

DHHS Staff (via phone)

Nate Checketts, Eric Grant, Brian Roach, Melissa Aitkens, Allison Allred, Josip Ambrenac, Tracy Barkley, Laura Belgique, Matt Lund, Jennifer Meyer-Smart, Samantha Moore, Michelle Smith, James Stamos, Greg Trollan, Jennifer Wiser, Kolbi Young, Sharon Steigerwalt, and Dorrie Reese

Guest (via phone)

Ciriac Alvarez, Alexis Athens, Emma Chacon, Jill Chang, Nelson Clayton, Landon Cleverly, Adam Cohen, William Cosgrove, Jeannie Edens, Neil Erickson (DGO), Julie Ewing, Jacob Glenn, Erica Gradwell, Robert Hall, Kory Holdaway, Michelle Jenson, Vicki Jessup, Kristeen Jones, Rosemary Lesser, Jesse Liddell, Jenifer Lloyd, Rebecca Martinez, Thomas Merrill, Joni Nebeker, Andrea Neilson, Dale Ownby (DWS), Stuart Pappas, Clint Pollock, Jennifer Radcliffe, Andrew Riggle, Destiny Rockwood, Leigha Rodak, Caitlin Schneider, Randal Serr, Daniel Sloan, Stacy Sanford, Stacey Swilling (DEQ), Bill Tibbitts, Sunny Todhunter, Christopher Williams, Audry Wood, Todd Wood, and Sheila Young.

Approval of Minutes:

Rachel Craig made the motion to approve the May 18, 2023, and June 15, 2023, MCAC minutes. Calleen Kenney seconded that motion. The group unanimously agreed.

Requesting Nominations:

Michael Hales mentioned that the MCAC is requesting nominations for a Consumer Representative for Medicaid Recipients. If you are or if you know anyone who is interested in this, please send information to Sharon Steigerwalt at ssteigerwalt@utah.gov

Director's Report:

Brian Roach gave an update.

- Policy changes: Brian Roach
<https://docs.google.com/document/Director's Report>
- Division Changes: Eric Grant
 - Michelle Smith – Currently filling in as Interim Office Director for the Office of Eligibility Policy until that position is filled, we are currently recruiting.
 - Jennifer Wiser – CHIP Director
 - Jason Stewart – Operations Director
 - John Curless – Office Director for the Office of Reimbursement Coordinated Care & Audits (ORCA)
 - Jamie Sorenson – Office Director for the office of Financial Services (OFS)
 - Yoon Kim-Butterfield – Medical Director, we will be moving the pharmacy team that was in Health Policy and Authorizations (HPA) to report to Yoon in the Director's Office.

[https://medicaid.utah.gov/Documents/DIH Org Chart Jul 20 2023.pdf](https://medicaid.utah.gov/Documents/DIH%20Org%20Chart%20Jul%202023.pdf)

- Governor's Budget: Eric Grant
- PRISM Update: Eric Grant
 - CNSI merged with Acentra Health
- Plan for Justice-involved Members: Melissa Aitken
[https://medicaid.utah.gov/Documents/Justice Involved Reentry Initiative Presentation for MCAC.pptx](https://medicaid.utah.gov/Documents/Justice%20Involved%20Reentry%20Initiative%20Presentation%20for%20MCAC.pptx)

Questions:

Jennifer Marchant asked in your presentation you listed that upon release, they have a 30-day supply of medicine. Is there another program in place that will help them with long-term medication needs.

Melissa Aitken mentioned there is a lot of focus with that case management that doesn't end as soon as they get out, there is going to be a post release case manager, whether that's the same one that was in the prison, or we do a warm hand off where that care plan is tailored to that individual to ensure it's a successful transition to the community with helping with appointments, and getting prescriptions for medications.

Sheila Young asked what does that case management hand off look like?

Melissa Aitken mentioned that we have been thinking about that. We know that California has done a few for service in the prisons and they've done a handoff to the ACOs to their managed care plans. Although we have not made a solid decision yet, we would like it to be the same case manager to remove a lot of those barriers.

Andrew Riggle asked what we're thinking in terms of a process for gathering stakeholder input, and what is your timeline looking like for doing that.

Nate Checketts mentioned that we've already done the public comment and submission on the original waiver request, it is with CMS. CMS has opened a bigger opportunity for us that is going to require more funds, that is something that we are going to have to consider when we start that process. We are going through those discussions now.

Andrew Riggle mentioned just to clarify If CMS approves the original waiver great. If not, you're moving forward with a funding request to the legislature to request to be developed depending on whether the funding is appropriated.

Nate Checketts mentioned If we get the original request approved, we may do both.

Stephanie Burdick asked do you have funding for a focus group with consumers?

Nate Checketts mentioned that is something that we could probably look at internally as we're building sort of developing this concept in preparation for these types of requests or do we need to wait until the legislature. DHHS will consider whether that is something to assess now or wait until the legislature funded it.

SPA's Rules:

[https://medicaid.utah.gov/Documents/MCAC SPA Summary](https://medicaid.utah.gov/Documents/MCAC%20SPA%20Summary)

[https://medicaid.utah.gov/Documents/MCAC Rule Summary](https://medicaid.utah.gov/Documents/MCAC%20Rule%20Summary)

Unwinding Continuous Medicaid Eligibility Update:

Michelle Smith gave an update on Unwinding, Continuous Medicaid Eligibility update.

The document which was presented are embedded in this document.

<https://medicaid.utah.gov/Documents/enrollment/Medicaid-Enrollment-REPORT-Dashboard.html>

Questions:

Stephanie Burdick asked whenever someone stops waiting on hold with DWS. How does that change the wait time, and how are we determining the average wait times?

Dale Ownby mentioned that the call volume, call wait time starts after the interactive voice response (IVR) menus. An individual selects an option to move into the queue. Once they hear the call wait times, if they're predicted to be over 45 minutes, they are given an option for a callback, if they choose not to do a callback and they hang up, it takes them out of the equation of the wait times, but it keeps them in the call volume and abandonment rate.

Stephanie Burdick asked if you there is something in writing that she can send out to members.

Dale Ownby asked Stephanie to email him a reminder at downby@utah.gov, he will get that to Dorrie to send to send out to the group.

Stephanie Burdick mentioned that she is getting questions from people they are having issues accessing MyCase, that it is complicated to enroll into the system. There are a lot of people dropping off because they cannot get through the enrollment process.

Dale Ownby stated that Michelle Smith is going to cover some things that we are working that will hopefully reduce some of that burdensome for both our clients and DWS staff.

CMS Strategies for Unwinding:

Michelle Smith gave an update.

[https://medicaid.utah.gov/Documents/Utah Plan to address procedural terminations](https://medicaid.utah.gov/Documents/Utah%20Plan%20to%20address%20procedural%20terminations)

Questions:

Michael Hales mentioned Becker Healthcare issued yesterday, CMS had a press release where they indicated a half dozen states were told to stop doing their reauthorizations or review process for redeterminations because they're metrics were poor. One of the things the article talked about was a few states had procedural termination rate above 90% as being a metric of concern, have we been put on notice as a state to halt our redeterminations because our rate is so high?

Brian Roach mentioned Utah have not been asked to pause disenrollments, we have been fully responsive to all of CMS requests for retaining in good standing. I just want to reiterate both rates are accurate, whether it's 97% total of disenrollments or 54% when measured among all reviews. Neither is better or worse than the other. They're just different ways of looking at the procedural terminations.

Michael Hales stated the department reported that 35,000 individuals were terminated, within a few weeks, you added 7,000 of those people right back on, so that it was 28,000. That doesn't seem to me, like, you have people reapplying, navigating the phones, and submitting a new application within a two-week period and having to be redetermined. I think there are some problems going on in the system. We may not be in a position where there's a cease-and-desist order by CMS at this point, but I think the role of the committee is to ask some questions. I think as we talk through these strategies, I would like the department to speak specifically to each one of those strategies. We will address some of the problems that members who have had their redeterminations done over the past three months would be having a different experience for those who are having their cases come up after these strategies get implemented.

Brian Roach mentioned we did plan our unwinding strategy for individuals who used their Medicaid benefits less frequently or individuals most likely to close at the start of the line.

Michael Hales asked how has your forecast been for member months, how does that stand up to actual enrollment for those months?

Brian Roach mentioned that we've not gotten to that specific of the forecast to be able to compare that.

Michael Hales asked given that the state has 12 months to review all these cases. Why are we reviewing so many that DWS employees are having to do overtime rather than try to figure out how to do it on a meaningful workload basis and give due diligence to all the cases that need to be reviewed? It seems like whatever the scheduling process is overly onerous in terms of a workload standpoint, and if you're putting too much pressure on the employees, to review the cases, and getting X Number of cases reviewed within a month to stay on schedule. If you will not that we're going to exceed the 12 months, it seems like we're being overly aggressive on getting them all done in an eight-to-nine-month period, any thoughts as to appropriate workload, balance over the 12-month, period. So, someone enrolled in Medicaid feels like she's getting a fair chance to be review with a reasonable workload of the people processing the case.

Brian Roach stated one clarification the cases were distributed based on the counts and there are some natural variations.

Dale Ownby mentioned if you look at the graph you can see Medicaid enrollment has increased more than 100% with folks who have never done a review.

Michael Hales mentioned as we look back on this in six to eight months, I want everyone to be unnoticed that I'm going to be asking for a report to be presented in the MCAC coming up how many people were terminated and reapplied for the program within a three-month period. So, we will have concrete measures on the churn impact and the additional work based on people who really were eligible who were terminated then we're back on the program within a three to six months period, to kind of give some visibility to the impact on the people who are trying to be enrolled in the program and stay on services.

Stephanie Burdick mentioned folks that were enrolled through the Medicaid expansion or during COVID they don't know how to do this process.

Michael Hales stated were going to hear what the department is proposing. In the last meeting there was a discussion about the MCAC, possibly, having a vote or making some recommendations. We will plan to at next month's meeting. I'd like to hear your recommendations and we will plan to put this on the August meeting, with a vote of the MCAC, in terms of some proposed corrective actions for the State Medicaid infrastructure, that we would like to see done. I will work with the members of the committee offline, in preparation for the Medicaid Executive Committee in early August to propose some action for the MCAC to formally vote and recommends the department takes some additional actions with DWS to get this under control.

Michelle Smith mentioned our agency has worked closely with DWS putting together this plan, we were both really committed to seeing this come through. We do recognize that we do need to address these procedural terminations.

Rachel Craig asked when you say Utah does not propose to implement these flexibilities is that because you need legislative approval. Or is that just a choice on the part of the department.

Michael Hales mentioned rather than just stating Utah does not propose to implement the flexibility. Please explain the why? And why you don't think it's okay. Or if you could give a brief overview on maybe the ones that are workable.

Michael Hales mentioned we will continue this discussion next month. I think there's a lot of Interest in this and between now and then I would like the departments to go back and reexamine your efforts here. I know you're busy, I know you have a lot going on, but this is something that we would like to see done as best as we can. I will reach out to the rest of the MCAC members, talk about, what type of vote we would like to take next month, and what type of a letter that the MCAC would like to consider entertaining submitting to the departments with our concerns and lacking confidence in what's going on.

Committee Members Updates:

Adjourn

Meeting was adjourned at 4:00pm. The next meeting is scheduled for August 17, 2023, at 2:00-4:00 p.m.