
Medicaid & Exchange Advisory Board
Meeting Minutes
December 8, 2014

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Board Members Present: Trinka Kerr, Kay Van Woert, Rebecca Heintz, Amy Vaughan, Julie Lineberger (phone), Donna Sutton Fay, Gladys Mooney, Ellen Gershun (phone) Vaughn Collins (phone), Larry Goetschius, Jackie Majoros, Paul Bakeman (phone), Christina Colombe (phone), Joan Lavoie, Clifton Long, Julie Tessler, Dale Hackett, Sharon Henault (phone), and Sheila Reed.
Board Members Absent: Bram Kleppner, Peter Espenshade, Lisa Maynes, Shannon Wilson, Laura Pelosi, Madeleine Mongan, Cathy Davis, Sharon Winn, Tim Ford and Harry Chen.

Other Interested Parties Present: Nathaniel Waite, Caroline Webster, Sherry May, Deborah Pereira, Matt McMahon, Susan Gretkowski (phone), and Kristen Bigelow-Talbot.

Staff Present: DVHA: Selina Hickman, Victoria Jarvis, Jaqueline Rose, Jason Pope, Dylan Frazer and Clark Eaton.

HANDOUTS

- Agenda
- Medicaid & Exchange Advisory Board (MEAB) November 10, 2014 Meeting Minutes
- MEAB Improving Access Work Group Report & Recommendations (12/4/14)
- MEAB Individuals and Families Work Group Minutes (12/3/14)
- Vermont Health Connect (VHC) Update (12/8/2014)
- Green Mountain Care: Benefits Background & Process (12/8/14)

*all are posted to the VHC website

CONVENE

Donna Sutton Fay chaired the meeting.

Welcome/ Introductions/Approval of Minutes

Board members and meeting attendees introduced themselves around the room. Following introductions, the meeting minutes for November 10, 2014 were reviewed and adopted.

MEAB Work Group Updates – Work Group Chairs

Small Employer Work Group – Julie Lineberger reported that the Small Employer Work Group has not met recently. This Work Group will meet in 2015, after small employers are allowed to purchase insurance plans through VHC.

Improving Access Work Group – Work Group Chair, Trinka Kerr, reported that the group last met on December 4th at DVHA in Williston. There has been concern that there could be more progress on some of the group's suggestions surrounding the Durable Medical Equipment (DME) acquisition process, improvements to Notices of Decisions for Prior Authorizations, and reductions in paperwork for consumers. Commissioner Larson will attend the next Work Group meeting to discuss these concerns. The next meeting will be held on February 3 at DVHA.

EPSDT Work Group – Kay Van Woert reported for the group, which last met on December 2. The meeting focused on Early Intervention (EI) for children up to age three. Most of the conversation focused on trying to define and articulate the issues that represent barriers to EI. The most recent EPSDT minutes will be provided to the board, along with a copy of the EPSDT group's recommendations that were supported at the November MEAB meeting. The next EPSDT Work Group meeting will be held in early February.

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VHC Individuals and Families Work Group – Work Group Chair Donna Sutton Fay, reported that the group met on December 3rd. The group focused on the concern for individuals who are eligible for cost sharing reductions (CSR's), but are not enrolled in a Silver Plan. There are approximately 1226 individuals eligible for CSR at the highest levels enrolled in platinum and gold plans. DVHA/VHC has identified this group as their priority for outreach since these are the individuals most likely to be paying more for their coverage than they need to (since their CSR would bring them up to a gold or platinum level plan with a silver premium). The best outreach options were discussed and will occur no later than January, 2015. The next Work Group meeting is scheduled for January 5th at DVHA.

Care Giver Reimbursement Work Group – This Work Group previously (summer, 2014) completed work on establishing broad principles for health care provider reimbursement. The group met again on December 4th and is now focusing attention on direct care giver reimbursement. Considering the historic underfunding of Medicaid direct care programs and providers, there needs to be consideration for developing a viable reimbursement strategy that supports our Vermont community based care system and supports a wage that will allow for hiring and keeping direct care workers. The Work Group submits that AHS and other Departments (in addition to DVHA) need to be involved to be able to address and solve this problem. Someone also has to be identified to represent community health care providers. Mark Larson agreed to meet with the leadership of the Work Group and discuss how to move forward, to include the possibility of having an AHS representative at the table. Mark first will have a discussion with the Agency Secretary.

DOL Rule-New FLSA Regulation for Home Care Workers – Stuart Schurr, DAIL

Stuart Schurr, Deputy Commissioner, Department of Disabilities, Aging and Independent Living (DAIL), provided an update on the implications of the new Federal labor Standards Act (FLSA) regulation that will go into effect on January 1, 2015, specifically the regulation's impact on wages for home care workers. The new regulation will more clearly define wage protections for services. Live-in and family support services – companionship services - would be exempt from minimum wage and overtime requirements. Third party employers/providers, who could include the state and private agencies, would not be exempt from adhering to minimum wage and overtime requirements. Exemptions also would be available to individual employers. Stuart reviewed the new regulation's requirements for companionship services; he will provide the site to review the details and a written summary of the changes. DAIL's guidance on the new regulation will be issued in December. DAIL will be invited back to provide follow-up information on this topic at the January MEAB meeting. Other AHS departments should have input also, including DCF and DMH.

Public Comment Opportunity – Co-Chairs

There was no public comment during the mid-portion of the meeting.

Follow-Up Topics – Selina Hickman, Medicaid Policy Director

Foster Children Coming into Vermont – Selina Hickman, Medicaid Policy Director for AHS, discussed the situation where foster children (under age 26) who have aged out of another state's program, would not be covered when coming into Vermont. Vermont is waiting for CMS's formal regulatory decision on this scenario before deciding on whether to move to grant coverage. Hopefully, a decision will be coming soon.

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Medicaid Verification Requirements – In the interest of time, Selina will send out a brief summary on what Vermont is doing to implement verification requirements under the ACA as it pertains to Medicaid and Qualified Health Plans. If desired, the summary can be reviewed at the next meeting.

DVHA Topics – Mark Larson

Mark Larson, DVHA Commissioner, announced that Hal Cohen has been appointed as the new Secretary of the Agency of Human Services effective in January, 2015. Dr. Harry Chen, the interim Secretary, will return to his role as Commissioner of the Vermont Department of Health. Mark also noted that there is significant effort being put into adjustment recommendations for the current SFY '15 budget and the development of the upcoming SFY'16 budget. The Governor's budget address is scheduled for mid-January. On another topic, the state Office of Professional Regulation recently had a hearing on potential licensing for autism services. DVHA participated in the hearing and supported the MEAB's recent recommendations regarding autism services within Vermont.

Vermont Health Connect (VHC) Topics – Robert Skowronski

Open Enrollment Period – Cassandra Gekas, Health Access Policy & Planning Chief at the VHC, discussed the open enrollment period (11/15/14 to 2/15/15) and covered key activities following the start date of November 15. Currently, VHC has received 1,338 paper applications. There have been 909 paper applications received since 11/15, and overall, to date, 854 have been processed. Donna Sutton Fay expressed a concern that some applications are taking longer than 30 days to process. This is a legitimate concern, and the state is adding more support to reduce the processing time. Another challenge receiving special attention is managing the backlog of 2014 Change of Circumstance (CoC) requests; there are almost 5,000 requests in the queue, many of which are duplicate requests. The majority of CoC's are being processed as a part of 2015 renewals. Individuals with critical access to care issues will be directly enrolled with carriers. Interaction with the IRS concerning error rates and accuracy for Form 1095A has been very positive; the initial error rate has been only 4%. Unverified social security numbers represent the biggest hurdle. Sean Sheehan briefed the board on changes to the Assister Login online on the VHC Homepage. There are three new security features related to the log-in process.

VHC Dashboard – Cassandra reviewed highlights as of 12/3/14. Almost 16,000 individuals have been checked out into 2015 health plans (out of 38,704 in the renewal pool). So far, there are 2,140 individuals that are new to VHC that have been checked out into 2015 health plans. Quality control volunteers have reviewed more than 10,000 cases. Dashboard pages for the Qualified Health Plans (QHP), Medicaid, and the Call Center were displayed, showing month to month trends. Daily trends for new QHP and Medicaid applications were also displayed. For the future, the board asked to have enrollment figures by month for the various programs-Medicaid/Dr D, QHP. The idea is to be able to view (from month to month) the enrollment in each program and be able to identify how enrollment is changing over time. DVHA used to do this for its health care programs monthly, using the number of individuals enrolled in the program on the last day of the month as the enrollment number for that month.

The Call Center call monthly volume has gone down over the last two months. Board members are encouraged to make further suggestions on how to better present data.

Current VHC information and activities can always be viewed at www.vermonthealthconnect.gov

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Green Mountain Care: Benefits Background & Process – Devon Green

Devon Green, Health Care Reform Special Counsel, briefed the MEAB on the benefits background and process for Vermont's Green Mountain Care program. Devon started by reviewing the four goals of health care reform and the ongoing design and implementation considerations, including how Vermonters are covered. The benefits process was outlined in detail and how Vermont has moved forward using the principles of Act 48 in 2011, and the ACA Essential Health Benefit parameters outlined in 2012. The Green Mountain Care Board may make further benefits process recommendations this month. Devon went on to describe the legal parameters of the Green Mountain Care (GMC) program as it pertains to Medicaid and to the ACA Waiver. Her discussion also included: 1) GMC benefits required by the ACA, 2) GMC covered services parameters, 3) Essential Health Benefits covered services, and 4) GMC Benefits and the level of cost sharing.

MEAB Discussion – Board Members

The MEAB reviewed the proposed monthly meeting dates scheduled for calendar year 2015, including the proposed location for the meetings. The group also reviewed a draft of the MEAB Orientation Program and Presentation Topics that is being anticipated for January. Donna Sutton Fay also asked board members to consider and review potential agenda items (listed below) for the January 26 MEAB meeting.

Public Comment Opportunity – Co-Chairs

There was no public comment at the end of the meeting.

Adjournment

The meeting was adjourned at 3:00PM.

Topics for Regular Update:

- Vermont Health Connect Topics/Discussion
- Commissioner Updates (Current Topics Discussion)
- Duals/VHIP/SIM Update/Discussion
- GC Waiver (as Necessary)
- Medicaid Shared Savings Program
- MEAB Work Group Meeting Reports
- Quarterly Advocate Report (Legal Aid)

Draft Topics for January 26 Meeting:

- DVHA SFY '15 and '16 Budget discussions
- DAIL Budget briefing/discussion
- DVHA Policy Follow-up Topic -- Medicaid Verification Requirements
- Follow-up: DOL Rule Regarding the New FLSA Regulations for Home Care Workers
- VHC/Member Services Update Concerning the Open Enrollment Period

Future Meeting Topics:

- Health Care Reform - single payer models

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- Reinvestment in Community Based Services
- Affordability and reinvestment pertaining to provider rates
- Minimizing administrative complexity for businesses that offer insurance

Data Request(s) for Future Meeting:

- Termination Data from Carriers
- Total Medicaid Budget – what portion is entitlement/what is not?

Issue Tracker List:

- Inventory of Perverse Incentives
- Diapers
- Medicaid transportation
- Out-of-State travel
- Specialist or preferred providers
- Mental Health fee schedule changes
- Prior Authorization concerns
- Coordination of Benefits between Medicare and Medicaid

Ongoing Small Group Works

- EPSDT Work Group
- Improving Access Work Group
- Small Employer Work Group
- Individuals and Families Work Group
- Caregiver Reimbursement Work Group

Next Meeting

January 26, 2015

Time: 11:00AM – 3:00PM

Site: DVHA, 312 Hurricane Ln, Williston, VT

Please visit the Advisory Board website for up-to-date information:

http://info.healthconnect.vermont.gov/advisory_board/meeting_materials