

**Medicaid & Exchange Advisory Board**  
**Meeting Minutes**  
December 21, 2015

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**Board Members Present:** Bram Kleppner, Trinka Kerr, Julie Tessler (phone), Lisa Maynes, Rebecca Heintz, Madeleine Mongan (phone), Clifton Long, Amy Vaughan, Jackie Majoros, Kay Van Woert, Erin McIntyre, Michelle Fay (phone), Paul Bakeman, Joan Lavoie, Christina Colombe (phone), Sharon Henault (phone), Nate Waite, and Dale Hackett (phone).

**Board Members Absent:** Peter Espenshade, Gladys Mooney, Donna Sutton Fay, Leslie Nulty, Sharon Winn, Larry Goetschius, Vaughn Collins, Laura Pelosi, Shannon Wilson, Cathy Davis and Tim Ford.

**Other Interested Parties Present:** Kelly Barnier, Betty Morse, Ethan Latour, Kirsten Murphy, Melissa Miles, William Lambrukos, Susan Gretkowski (phone).

**Staff Present:** Department of Vermont Health Access (DVHA): Marybeth Bizarri and Clark Eaton. AHS Policy: Danielle Fuoco.

**HANDOUTS**

- Agenda
- Medicaid & Exchange Advisory Board (MEAB) November 23, 2015 Meeting Minutes
- Department of Vermont Health Access (DVHA) Medicaid Enrollment and Cost Comparison (November, 2015)
- EPSDT Work Group Minutes (12/4/15)
- Vermont Health Connect (VHC) MEAB Update (12/21/15)
- Medicaid Program Enrollment and Expenditures Report, Q1 SFY '16 (12/1/15)

\*all are posted to the VHC website

**CONVENE**

Bram Kleppner chaired the meeting.

**Welcome/Introductions/Approval of Minutes**

Board members and meeting attendees introduced themselves around the room. A quorum of 17 members was present. The meeting minutes for November 23, 2015 were reviewed and approved, with 17 yeas, 0 nays and no abstentions.

**DVHA Discussion Item: Medicaid Analytics – Steven Costantino**

Steven Costantino, DVHA Commissioner, and Lisa Schilling, Financial Director, reviewed slides on recent and projected Medicaid data, focusing on Medicaid enrollment and cost comparisons. DVHA's SFY '15 actual program expenditures (\$976 mil) exceeded the SFY '15 program's appropriated budget by \$26 mil. The DVHA SFY '16 current program estimate is at \$1,014 mil. Increased actual caseloads for general and new adults in SFY '15, that were post - Affordable Care Act (ACA), were significant in pushing the SFY '15 program expenditure upward. A number of factors resulted in new adults taking advantage of their post-ACA eligibility. These factors included: 1) there was no requirement for students to take on inadequate and/or expensive school coverage, 2) eligibility was granted retroactively to the first of the application month, and 3) there were expanded income considerations for eligibility (i.e. depreciation, worker's comp payments, child support, expanded tax deductions). Lisa indicated that DVHA's upcoming budget book will take a closer look at Medicaid analytics and point to what the specific cost drivers are for the Medicaid program. The presentation also covered caseload details from SFY '10 forward, residency requirements and the verification process for participation in the Vermont

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Medicaid program, and category of service trends in SFY '15. Kay Van Woert noted that it would be great to have trending information from other Departments in AHS that have Medicaid elements in their budgets.

**Discussion Item: Global Commitment Register – Ashley Berliner**

Ashley Berliner, AHS Policy Director, provided an overview of the state's Global Commitment Register. The Register is now part of DVHA's website and represents a new way to post and present proposed policy changes. It also provides a means to clarify existing Medicaid policy under Vermont's 1115 Global Commitment to Health Waiver. Ashley showed and described the new Global Commitment Register on the DVHA website, which includes links to Final Policy Changes, Proposed Policy Changes, and Policy Clarifications. As in the past, MEAB members also will continue to receive information (through e-mail) on policy activity.

**Discussion Items: MEAB Work Groups – Work Group Chairs**

*QHP Stakeholder Work Group* -- A balanced Work Group is in place (including some MEAB representation) to implement the best possible Qualified Health Plans (QHPs) for 2017. The new draft AV calculator is available and analysis of "cost share" and potential benefit changes is underway. Information will be shared with the MEAB. The Work Group will be preparing an approval presentation on 2017 QHP benefit designs for the Green Mountain Care Board for early 2016.

*Improving Access Work Group* -- The group last met on November 17<sup>th</sup>. It was decided to start meeting on a quarterly basis, unless there was a specific issue to work on. The first issue continues to be finding ways to improve prior authorizations. A summary of what two other states have for laws/procedures regarding prior authorizations will be presented at the next meeting scheduled for February 8 at DVHA in Williston.

*EPSDT Work Group* – The Early Periodic Screening & Diagnostic Treatment (EPSDT) Work Group met on December 4. The Work Group reviewed its internal issues tracking document used for monitoring issues impeding children's access to mandated EPSDT benefits and current efforts to address concerns. Low provider reimbursement rates continue to be a fundamental barrier to realizing adequate Medicaid services. These services include primary care, developmental and mental health services, and early intervention/ Children's Integrated Services (to name a few). Future discussion topics will include integrating family services, the application and verification processes for children with lifelong conditions, navigating the system, and care coordination. The next meeting is scheduled for February 12 at DVHA in Williston.

**Discussion Items: Vermont Health Connect – Cassandra Gekas**

Cassandra Gekas, Director of Operations for Health Care Eligibility and Enrollment, provided updates on Vermont Health Connect (VHC) key activity.

*2016 Open Enrollment* – Open enrollment began on November 1 and runs until January 31, 2016. January 15 will be the last day to enroll in or change plans for new coverage to start by February 1, 2016.

*Operations* – Cass covered Medicaid Renewals. For Medicaid for the Aged, Blind and Disabled (MABD), redeterminations began in November, 2015 and will continue on a monthly basis into 2016. For Medicaid for Children and Adults (MCA), redeterminations will begin in January, 2016, and will continue on a monthly basis. Legacy members will be handled between January – April, 2016. VHC members will be handled between May – October, 2016. Approximately 9,000

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members will be processed per month. Temporary employees will be hired to meet additional staffing needs. Cass also provided updates on verifications, notices and billing.

*Metrics* — Sean Sheehan, Director VHC Outreach and Education, reviewed slides on system performance, and results from customer support center activity. About 9 out of 10 calls are handled by the initial representative, without requiring a transfer for resolution.

*Enrollment Numbers* – Sean provided the board with the Medicaid Program Enrollment and Expenditure Report (Q1 SFY 2016) that was provided to the legislature. This is dashboard type information for enrollment; other DVHA dashboard information was provided showing a breakdown of healthcare coverage in Vermont as of November.

*Outreach & Education* – Sean discussed public events that are continuing, new materials available for distribution, and direct outreach to cost sharing reduction eligible customers. For 2016, the federal fee for not having health insurance will increase to \$695 per adult.

Members should contact VHC with any comments or suggestions on future VHC data/information presentations. Current VHC information and activities can always be viewed at [www.vermonthealthconnect.gov](http://www.vermonthealthconnect.gov)

**MEAB Discussion Item – Co-Chair**

An issue concerning Medicare Supplemental Insurance was on the agenda for discussion. Board members elected to defer this discussion until the January meeting. The board co-chair also asked board members to consider and review potential agenda items (listed below) for the next MEAB meeting.

**Public Comment Opportunity – Co-Chair**

There was public comment during the meeting.

**Adjournment**

The meeting was adjourned at 2:15PM.

**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 25 Meeting:**

- DVHA SFY '16 Update/Discussion
- AHS Outlook

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**Future Meeting Topics:**

- Health Care Reform - all payer model
- Medicaid Transportation – current and future budget
- Shared Savings/SIM update, including Learning Collaborative/Care Model
- 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
- 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
- Provider Reimbursement Work Group

**Next Meeting**

**January 25, 2016**

**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](http://info.healthconnect.vermont.gov/advisory_board/meeting_materials)