
Medicaid & Exchange Advisory Board
Meeting Minutes
March 28, 2016

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Board Members Present: Trinka Kerr, Donna Sutton Fay, Amy Vaughan, Sharon Henault (phone), Rebecca Heintz, Jackie Majoros, Kay Van Woert, Michelle Fay, Paul Bakeman, Joan Lavoie, Vaughn Collins (phone), Christina Colombe (phone), Erin McIntyre (phone), Madeleine Mongan (phone), Peter Cobb, Gladys Konstantin, Sharon Winn (phone) Nate Waite, and Dale Hackett (phone).

Board Members Absent: Bram Kleppner, Julie Tessler, Leslie Nulty, Clifton Long, Laura Pelosi, and Lisa Maynes.

Other Interested Parties Present: Kelly Barnier, William Lambrukos (phone), Susan Gretkowski (phone), and Lucy Guerin (phone).

Staff Present: Department of Vermont Health Access (DVHA): Marybeth Bizarri, Rob Larkin, Paul Hochanadel and Clark Eaton.

HANDOUTS

- Agenda
- Medicaid & Exchange Advisory Board (MEAB) January 25, 2016 Meeting Minutes
- Medicaid & Exchange Advisory Board (MEAB) February 22, 2016 Meeting Minutes
- Vermont Health Connect (VHC) MEAB Update (3/28/16)
- Department of Financial Regulation Medicare Supplement Insurance Letter (2/10/16)

*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. Board members unanimously approved the meeting minutes for January 25 and February 22, 2016.

MEAB Discussion Items: Work Group Chairs

Improving Access Work Group – Trinka Kerr, Work Group Chair, noted that the meeting that was scheduled for March 21 at DVHA was postponed until sometime after the Legislative session. It will probably be scheduled for a time in May.

EPSDT Work Group – Nate Waite, the Work Group Chair, noted that Monica Ogelby, the Clinical Services Director for the Children with Special Health Needs unit at the Vermont Department of Health will be chairing this group in the future. The group last met at DVHA in Williston on March 4. Kay Van Woert provided a brief summary of the meeting. There was an assessment and planning discussion regarding a specific cohort of children and families requiring a high level of medical care and care management. The purpose was to describe/understand this specific group of children and families, identify services and supports they are receiving, barriers they are experiencing, and point to potential solutions or steps for the Work Group to focus on next. The meeting was fortunate to have the participation of two parents of a child with complex medical needs who were willing to tell their story, and discuss some of the challenges they are experiencing. The next meeting is scheduled for May 6 at DVHA in Williston.

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Discussion Item: DAIL – Monica Hutt, Commissioner and Staff

DOL Regulations/Overtime Impact – Claire McFadden, Assistant Director, Developmental Services Division, and Sarah Lane, Director, Choices for Care, addressed the impact of new rules that went into effect last October requiring overtime payment for Developmental Services (DS) caregivers for time exceeding 40 hours per week. These caregivers typically support families or shared living providers. If their normal funding is going to be exceeded, and the care recipients are going to be “at risk”, additional funds can be requested to cover the overtime. The DS Division’s overall estimate to cover current budget overtime needs was approximately \$400k; after some experience and monitoring, it might turn out to be a little less. MEAB members cited some scenarios that could be problematic; DAIL is monitoring the situation overall to identify potential issues that need to be addressed. Sarah discussed the specifics for the Choices for Care (CFC) program. For CFC, overtime needs may also require a budget plus up to meet regulatory overtime requirements. Jackie Majoros expressed concern that the new overtime process will be cumbersome and could result in reduced services in the field – the users won’t make the adjustments to accommodate the overtime program. DAIL will return to report on progress/results concerning the overtime changes at the end of the current SFY. The July or August meeting might be best.

DAIL/Medicaid Budget Summary – Monica Hutt, DAIL Commissioner provided a brief overview of her Department’s SFY 2017 budget, focusing on Medicaid related areas. DAIL’s overall SFY ’17 budget was about \$453 mil, an approximate 3% increase over the prior year. DAIL’s Adult Services Division (including Choices for Care) is about 92% Medicaid funded and its Developmental Services Division is about 99% funded by Medicaid. Most of the Department’s requested 3% increase is to support these two divisions. Kay Van Woert asked about the Department’s High-Tech program, where some children have been shifted to the Department of Health for support. Monica noted that there are still about 20 individuals that remain in DAIL’s High-Tech program.

DAIL’s Governor’s SFY ’17 Budget Testimony is on-line and can be viewed at <http://dail.vermont.gov/dail-statutes/legislative-testimony-2016/sfy17-dail-budget-testimony-final2>.

Discussion Items: Vermont Health Connect – Sean Sheehan

Sean Sheehan, Director, VHC Outreach and Education, provided updates on Vermont Health Connect (VHC) key activity.

Operations – The Customer Support Center has brought on additional staff during March to improve responsiveness. The inventory of change requests continues to go down and is trending in the right direction. Tax forms (1095-A and B) have been mailed ahead of schedule. Sean also reviewed 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 began in January, 2016; initial notices were mailed to the 3rd and final legacy group on March 22. Overall response to date from the first two groups has been 56%. VHC is stepping up communications on the importance of members completing necessary actions. VHC member groups will be handled between May – October, 2016. Sean also covered the near-term functionality priorities that will be pursued to benefit the VHC customer experience.

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Metrics — Sean provided slides on overall current coverage for Vermonters, plan types that have been selected, and results from the customer support center. The monthly call answer rate has improved significantly in March and is now above the desired rate. Sean also described the financial assistance that VHC-enrolled individuals are receiving, and data on Qualified Health Plan-enrolled individuals.

New Report on Health Coverage for Children – During the first year of coverage under Health Exchanges, a new national report indicates that Vermont has the lowest percentage of uninsured children (1.2%) in the nation. Vermont has very low uninsured rates for children among households with low, middle and high income rates.

Outreach & Education – Sean discussed mailings to Medicaid providers to enlist support for Medicaid renewals, materials for stakeholders and partners, and outreach information for newspapers and local Front Porch Forums.

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

Discussion Item: AHS Outlook – Hal Cohen AHS Secretary

Hal Cohen, Secretary of the Agency of Human Services, provided the agency's outlook and focus moving forward. The agency has developed a strategic plan as an umbrella for all of its Departments. The plan identifies many different things but has five essential goals that cut across all Departments: 1) addressing the state's substance abuse problem, -- capacity may be the biggest current barrier. The current waiting list may be around 400; a new treatment hub in the St Albans could reduce the waiting list by 250. 2) child protection – there is about a 30% increase in children coming into state child protection custody; the new budget will provide for an additional 35 staff to deal with this increase. 3) ending homelessness/providing housing – this is a continuing state initiative to end homelessness by 2020. Excellent progress is being made; 4) reducing recidivism within the Corrections process, and 5) working internally and externally with designated agencies to operate with meaningful performance outcomes. Hal stressed that there are many more important goals and areas of concern beyond these five key goals.

MEAB members introduced other concerns like chronic underpayment to providers and the subsequent difficulty for individuals eligible to receive services to actually be able to acquire services from providers. Recidivism is very complicated, and will require a difficult multitask approach to make positive headway. The AHS Medicaid Policy Unit needs to continue to improve Department coordination and positively impact how services are delivered across the agency.

Secretary Cohen discussed the S107 legislative initiative introduced and passed through the Senate this year that would restructure state government with the creation of an Agency of Health Care Administration. AHS is generally against this major restructuring; the legislation is now in the House. Michelle Fay also expressed concern about the overall dollar cost (about \$1.5 mil?) needed for such a restructure. Gladys Mooney Konstantin felt public input should be considered; a change such as this might increase the "silo effect" that state government has worked hard to overcome.

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Discussion Item: DVHA – Howard Pallotta, DVHA

Human Services Board Appeals – Howard Pallotta, DVHA General Counsel, provided summaries of the length of time Medicaid appeals cases have taken before the Human Services Board (HSB) during 2014 and 2015. The data presented was limited to Medicaid eligibility and coverage and showed that many appeals (from filing to decision) took more than the standard 75 days to be decided. The HSB does have the ability to extend the timeframe. The MEAB requested that the same data be requested for Vermont Health Connect appeals; Howard will request this information and try to have it for the next monthly meeting.

MEAB Discussion Items – Chair

DFR Medicare Letter -- Donna Sutton Fay previously had provided a 12/8/15 letter that the VT Association of Area Agencies on Aging had sent to the Commissioner of the Department of Financial Regulation (DFR). In January, the MEAB supported the letter in a resolution that was also forwarded to DFR. The original letter addresses an issue in the Medicare Supplemental Insurance Minimum Standard regulations; currently, the regulations do not explicitly provide a guarantee issue period for Vermonters who lose their eligibility for Medicaid or a Medicare Savings Program. The DFR has responded (in a 2/10/2016 letter), but it still looks like there is a rulemaking concern. Donna Sutton Fay will continue to follow up.

The board chair also asked board members to consider and review potential agenda items (listed below) for the next MEAB meeting.

Public Comment Opportunity – Chair

There was public comment during the meeting.

Adjournment

The meeting was adjourned at 2:40PM.

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 April 25 Meeting:

- DVHA Update/Discussion
- All Payer Model
- Human Service Board Appeals Update
- Request Other Department Budget Briefs (DMH)

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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

April 25, 2016

Time: 11:00AM – 2:30PM

Site: DVHA, State Office Complex, Waterbury, VT

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

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