



MEDICAL CARE ADVISORY COMMITTEE (MCAC) MEETING MINUTES **December 10, 2021 (10:30 a.m. – 12:30 p.m.)**

Participation by audio only: Dial +1 984-204-1487; Phone Conference ID: 113486024#

This MCAC meeting was held via Microsoft Teams on Friday, December 10, 2021 at 10:30 a.m. - 12:30 p.m.

MCAC MEMBERS PRESENT

Gary Massey, MCAC Chair, Marilyn Pearson, MCAC Vice Chair, Kim Schwartz, MCAC Secretary, Samuel Clark, Dave Tayloe, III Benjamin Smith, Kristy Preston, Ivan Belov, Billy West, LaSonia Barnett, Thomas Johnson, Ted Goins, David Sumpter, Paula Cox Fishman, Jenny Hobbs, and a host of MCAC Interested Parties.

STAFF PRESENT

Jay Ludlam, Debra Farrington, Shannon Dowler, Adam Levinson, Julia Lerche, Emma Sandoe, Kathy Batton, Pamela Beatty, and others.

CALL TO ORDER

Gary Massey, MCAC Chair

- Meeting was called to order at 10:30 a.m. followed by a roll call. Pamela Beatty declared a quorum.
- Chair Massey entertained a motion to approve the September 24, 2021 meeting minutes. Motion made by Kim Schwartz and seconded by Marilyn Pearson. Minutes approved by the Committee.
- Chair Massey welcomed the new MCAC members (Ramon Llamas, Kristy Preston, LaSonia Barnett) and asked them to introduce themselves except for Ramon who could not be present due to a conflicting schedule.
- Chair Massey encouraged participants to review the Clinical Policy Written Report and State Plan Amendments included in the meeting materials.
- Chair Massey turned the meeting over to Debra Farrington to give opening remarks on behalf of Dave Richard, Deputy Secretary, NC Medicaid.

OPENING REMARKS:

Debra Farrington, Chief of Staff, NC Medicaid

- Debra welcomed the new members to the Committee and shared the following updates:
 - Acknowledged Secretary Cohen's resignation and the magnificent job she has done for the state of North Carolina. Debra further stated that Secretary Cohen has also done an excellent job leading us through the pandemic and has been a terrific advocate for NC Medicaid. She was very instrumental in our Medicaid Transformation and will be a tremendous loss.
 - The Division is excited that Kody Kinsley (Chief Deputy Secretary for Health) will be moving into the role of DHHS Secretary and looks forward to working with him.
 - Debra highlighted Medicaid related components in the budget bill passage and stated the Department is disappointed that Medicaid Expansion was not included in the budget bill passage. However, we are excited about the inclusion of the following items:
 - An unprecedented amount of funds were approved for direct care professionals and providers.
 - 1,000 additional Innovations Waiver slots were allocated
 - Pregnancy coverage extended for 12 months
 - Retention of Medicaid benefits for eligible parents with children in the foster care system as long as they are in a treatment program or making efforts to reunite with their children.

- Behavioral Health I/DD Tailored Plans implementation date was changed from July 1, 2022 to December 1, 2022.
- Lastly, the Department has received positive news regarding the transition of counties from Cardinal Innovations to other LME-MCOs. There has been no disruption in beneficiary care thus far. All transitions are anticipated to be completed by January 1, 2022.

MEDICAID MANAGED CARE UPDATE

Jay Ludlam, Assistant Secretary, NC Medicaid

- The Department is continuing to track things that did not go the way we hoped with the implementation of the Standard Plans.
- The health plans have been very good collaborative partners and have worked through a number of contracting issues. Some of our network policy waivers were extended for the health plans with contracting issues. The policy waivers sunset at the end of November 2021.
- The Department continues to track NEMT and claims payment issues and is working with the health plans and their NEMT brokers to improve their level of service to our beneficiaries. There has been some improvement.
- Jay invited Julia Lerche and Emma Sandoe to present an update on the status of the North Carolina Medicaid Reform Section 1115 Demonstration Waiver.

Emma Sandoe, Associate Director, Strategy and Planning, NC Medicaid

- Emma provided background on the components of the North Carolina 1115 Waiver (approved from November 1, 2019-October 31, 2024). Section 1115 Waiver of the Social Security Act allows states to make broad changes to their Medicaid programs that would otherwise not be allowable under federal law.
- The 1115 Waiver enabled the Department to launch Managed Care, including the Standard Plans (Jul. 2021), Behavioral Health I/DD Tailored Plans (Dec. 2022), the Healthy Opportunities Pilots (Feb. 2022), and the Foster Care Plan (Jul. 2023).
- The 1115 Waiver also allowed NC to receive the Substance Use Disorder (SUD) Demonstration Waiver which supports the state's efforts to expand access to the full continuum of health care services for individuals with substance use disorders. The Department is working to implement new benefits to serve a significant amount of our populations, including adolescents.
- Emma noted that the Department is proposing an 1115 Demonstration Waiver Amendment to align with the realities that the Division has experienced and lessons learned in the launch of Managed Care. Emma highlighted three main areas of focus in the waiver.
 - Timeline adjustment to reflect the July 2021 MC implementation date instead of November 2019.
 - Adjustment to the populations that will be covered through the Behavioral Health/I/DD Tailored Plans
 - Expansion of eligibility and modification of the implementation details of the Healthy Opportunities Pilots
- Emma turned the discussion over to Julia Lerche to address the 1115 Waiver Amendment

Julia Lerche, Chief Strategy Officer & Chief Actuary, NC Medicaid

- Julia highlighted the following proposed 1115 Demonstration Waiver Amendments:
 - The Department is requesting an end date of June 30, 2026 to allow the full five-years implementation and evaluation of the new program components.
 - Julia emphasized the proposed 1115 Waiver Amendment is asking CMS for authority to require individuals with significant behavioral health needs in certain residential settings to enroll in a BH/I/DD Tailored Plan to retain access to critical services that will enable them to live safely in their current residence.
 - The Department is proposing to remove dual eligibles receiving both Medicare and Medicaid benefits from the current 1115 Waiver except for dual eligibles enrolled in the States Innovations and TBI 1915(c) waiver programs.
 - Dual eligibles participating in the States Innovations and TBI 1915(c) waiver programs will enroll in BH I/DD Tailored Plans for physical, behavioral health, I/DD, and TBI services.

- Pilot-related Waiver Amendments include: 1) Request to CMS to lengthen the time Pilot capacity building funds can be spent; 2) Requesting flexibility from CMS to update the enrollment and operational details of the Health Opportunities Pilots.
- Julia turned the discussion over to Emma Sandoe, who closed the presentation by stating that the Department is also requesting to restart discussions on a previously proposed Tribal Uncompensated Care Pool to increase access to care and expand services for Tribal members.
- The 1115 Waiver is currently under a 30-day public comment period which runs through December 27, 2021. Shortly afterwards, the Department will begin negotiations with CMS to get it approved.
- Comments can be mailed (address in handout) or emailed (Medicaid.NCEngagement@dhhs.nc.gov), indicating that they are related to NC Section 1115 Waiver.
- Chairman Massey opened the floor for questions. Jay Ludlam, Julia Lerche, and Emma Sandoe responded to questions respectively.

MEDICAID ENROLLMENT AND FINANCIAL UPDATE

Adam Levinson, Chief Financial Officer, NC Medicaid

- Adam provided a high-level overview on the following items:
 - Current & Forecasted Enrollment, SFY 2022
 - Current Spending, SFY 2022
 - Legislative Budget Highlights, SFY 2022
 - Looking Ahead
- Looking ahead, Adam highlighted factors to watch closely, including: 1) Continued enrollment growth; 2) Build Back Better Act; and 3) Drug Rebate Invoices and Collections

MEDICAID UPDATES FROM THE CMO

Shannon Dowler, Chief Medical Officer, NC Medicaid

- Shannon provided a high-level overview of what the Department is doing to provide reassurance that it is attentive to what is happening with the Managed Care launch and to ensure continued services.
- The Department, in collaboration with AHEC, is holding monthly “back porch chats” (public webinars) to discuss hot topics in Medicaid Managed Care. A recent chat in October 2021, included a discussion on “How to Move Beneficiaries from a Standard Plan to Medicaid Direct.” In November, the discussion was on “Behavioral Health Collaborative Care Codes”.
- As a result of the low vaccination rates amongst Medicaid beneficiaries in the State, the Department is working to increase the vaccination rate amongst Medicaid beneficiaries in various ways:
 - Partnership with the PHPs, providers, and direct outreach to our beneficiaries
 - Vaccine Counseling code launch; which has had a significant impact on the vaccination rates
 - Beneficiary incentives for COVID-19 vaccine shots
- The Department recently issued a baseline survey with an exceptionally high response rate of almost 60%. The survey focused on primary care and OBGYN providers to determine how they feel about Medicaid Managed Care and how it is working. The survey showed satisfaction with the timeliness and accuracy of claims processing. The most frustration expressed was with access to care for behavioral health providers and health therapists. As a result of provider requests, NC Medicaid added the Behavioral Health Collaborative Care model with coverage codes to allow reimbursement for behavioral health integration in primary care settings.
- Shannon closed by encouraging the participants to listen to the back porch chats held on the 3rd Thursday of each month. Recordings and PowerPoint presentations are available on the AHEC website.
- Chairman Massey opened the floor to Committee members and others for questions. Shannon addressed each question respectively.

DIRECT CARE WORKFORCE CRISIS UPDATE

Heather Burkhardt, Executive Director, North Carolina Coalition on Aging

- Chairman Massey asked that the Direct Care Workforce Crisis update be postponed to our next meeting due to time constraints.

PUBLIC COMMENTS

- Mary Short commented on the dual eligibles participating in the Innovations and the 1915(c) Waivers. Mary voiced concern about the State changing its approach for covering dual eligibles. She stated the proposed policy will move dual eligibles to Tailored Plans coverage to include physical health. This seems to go against CMS regulations, she stated. Mary commented further that in the CMS documents that she found, the 1115 Waiver and 1915(b) Waivers specifically provide protection for Medicare and Medicaid beneficiaries to retain their eligibility and free choice of providers.
- Emma Sandoe provided clarification that the amendment does not change eligibility for Medicaid but it changes whether or not the person will receive Tailored Plan coverage.

CLOSING REMARKS

- Our next scheduled meeting will be held virtually on Friday, March 25, 2022. Future MCAC meetings will alternate between virtual and in-person.

MEETING ADJOURNED