

OPEN MEETING MINUTES

Name of Governmental Body: Medicaid Advisory Committee (MAC)		Attending: Ritu Bhatnagar, Allison Espeseth, Rebekah Fox, David Gundersen, Lauren Jerzak, Joshua Merskey, Dipesh Navasaria, Bobby Peterson, Randy Samuelson, Laura Waldvogel, Luisana Wakau, Mike Wallace, Jennifer Winter	
Date: 4/6/2022	Time Started: 9:00 a.m.	Time Ended: 11:30 a.m.	
Location: Virtual Zoom Meeting		Presiding Officer: Director Lisa Olson*	

Minutes

Members absent: Samantha Falk, Veronica Gunn, John Rathman

Others present: Lisa Olson, Curtis Cunningham, Krista Willing, Janye Chapman, Gina Anderson, Emily Loman, Ruth Sullivan, Makalah Wagner, Ian Stevens, Dana Raue

Meeting Call to Order, Emily Loman, DMS Policy Initiatives Advisor

- Roll was called. 13 members were present, constituting a quorum.
- *It was explained to the committee that Chairperson, Dr. Veronica Gunn, had something unexpected come up and would not be present at the meeting. It was also explained that both Ms. Loman and Director Olson were only performing administrative roles and not acting as proxies for Dr. Gunn.
- The agenda was reviewed.
- Minutes from the 1/5/22 meeting were reviewed and finally approved. Motion to approve by Dipesh Navasaria, second by Randy Samuelson. No opposed, no abstentions.

Lisa Olson, DHS, Medicaid Director, Administrator, Division of Medicaid Services

Director Olson provided a brief overview presentation of the 1115 Waiver for extension of Medicaid postpartum coverage from 60 to 90 days, and facilitated discussion on what additional reforms DMS could explore to improve outcomes for birthing parents.

- MAC member recommended policies aimed at strengthening workforce capacity as midwifery programs have been stopping across the state.
- MAC member suggested revising federal and state policies that require unmarried pregnant women to identify the other birth parent because the ramifications for noncompliance can be termination in eligibility for services and the recovery of birth costs can be levied against birth mothers. The policies can create high levels of stress for pregnant women, which can lead to compromised health outcomes for them and their babies. These policies also have a disproportionate impact on low-income women of color. DHS response: the legislative directive in the budget is narrow, and no other policy changes are contemplated.
- Some MAC member expressed support for the waiver, but urged the Department to consider extending eligibility to a full year. DHS response: DHS needs state legislation to be able to further extend coverage.
- MAC member observed that from a behavioral health perspective, the rate of addiction and overdose is higher for the first year than any other period in a woman's life.
- Several MAC members suggested enhancing resources and education to help women identify and transition to other sources of coverage.
- MAC member suggested policies aimed at increasing the quality of prenatal care coordination programs in addition to extending eligibility for coverage.

Ian Stevens, DHS, Section Manager Service Authorization

Mr. Stevens provided a just-in-time update on changes to the Prior Authorization process within the ForwardHealth portal to an approval-based system.

- MAC member welcomed this new innovation, and asked whether the system would offer feedback to the provider on why a claim was denied. DHS response: functionality to provide this type of feedback does not currently exist, but DHS expects to be able to do real-time feedback in the future.
- MAC member asked what type of data the Department expects to be able get from the auto PA system to address concerns about lack of coverage under EPSDT.
- MAC member asked how this change to PA would impact HMOs. DHS response: The new approval-based system is for FFS benefits only, but DHS will hold HMOs to similar coverage criteria; HMOs do have some autonomy, but cannot be more restrictive than the department.

Drivers of Health Discussion, Lisa Olson, Medicaid Director

Director Olson provided background context from efforts within Medicaid Managed Care to collect information on members' experiences with Drivers of Health. Member, provider and MCO experience with this initiative prompted reassessment of the overarching objective. Questions for MAC discussion included:

- What should the objective of the Medicaid program be in addressing Social Determinants of Health/Drivers of Health (DoH)?
 - MAC member suggested identifying specific DoHs and prioritizing resources according what is most achievable in both the short and long-term. DHS should also support and showcase what seems to already be working at the community level.
 - MAC members suggested looking at the 5 specific domains that Healthy People 2030 have identified.
 - MAC member suggested moving away from a transactional model of care because that system has incentive to show change even if change doesn't actually exist. Non-traditional models of care, such as community health workers and home visits, promote social connectedness and relational care, and are cost-effective.
 - Some MAC members suggested better screening and care coordination to help families better navigate available resources. Medicaid should incentivize collaboration amongst stakeholders and eliminate barriers to collaboration.
 - MAC member offered that Medicaid should work to build members' trust in the health care system and to connect people to resources that actually work for them, not to organizations that make them jump through more hoops to get their needs met.
 - MAC member offered that Medicaid should support case management of services that come to members where they live. For example, peer recovery coaches paid by Medicaid in New Jersey find members in their specific location.
 - MAC member offered that Medicaid cannot be expected to fix everything, but can strengthen existing linkages to services and share data with other agencies.
 - MAC member suggested that Medicaid consider itself as an important voice in the discussions about broader policy issues, such as improving health in youth and adults, smoking laws, sugar tax.
- What measures indicate that the Medicaid program is achieving the objective?
 - MAC member offered that ED utilization is a good measure because people will go there when nothing else is working in the system. The measure is easily available. It can show not only the number of times they go to the ED, but why they are going and what barriers to other care they are experiencing.

Receive Public Comment on Medicaid Equity and Inclusion Initiative

Two members of the public joined the meeting but did not offer comment.

Wrap-up, Emily Loman, DMS Policy Initiatives Advisor

- Next meeting is July 6. Topic for that meeting will be determined and communicated before the meeting. MAC officers will follow-up with an email with links to materials.

Adjourn

- Motion to adjourn, David Gundersen. Second, Bobby Peterson. The meeting concluded at 11:30 am central time.

Prepared by: Emily Loman on 6/10/2022.

These minutes are in final form and were approved by the governmental body on: 7/6/2022