

Delaware Health and Social Services
 Medical Care Advisory Committee (MCAC)
 October 26, 2016

<p>Date: October 26, 2016</p> <p>Place: DHSS Campus 1901 N. DuPont Hwy. The Chapel New Castle, DE 19720</p> <p>Time: 9:00 AM – 10:00 AM</p> <p>Presiding: Dr. Julia Pillsbury, D.O., Chair</p>	<p>Member's Present: Paul Christian, DMD, Ann Phillips, Franjessica Whitsett, Yrene Waldron, Dr. Julia Pillsbury, D.O., Via Phone: Judith Chaconas, Lynn Robinson, Lisa Schieffert</p> <p>Guests: Cheryl Heiks, Chris Pollock, Tanika Bosley</p> <p>Members Absent: Thomas Barlow, Nadine Chance, Laura Howard, Emily Coggin-Vera, Dr. Leonard Nitkowski, M.D., Lori Ann Rhoads</p> <p>Staff Present: Janet Bailey, Dr. Anthony Brazen, D.O., Rebecca Gallagher, Stephen Groff, Kathleen Dougherty, Jose Tieso, Bill McGonegal, Glyne Williams, Lisa Zimmerman</p> <p>Staff Excused: Cynthia Denemark, Kay Wasno</p> <p>Vacant Positions: DHSS:DPH, Consumer Affairs DSAMH, Pharmacy, Consumer, Advocate Community, Hospital Association, Pediatric Society, Managed Care Organizations, OB/GYN Group, Home Health Agencies</p>
TOPIC FOR DISCUSSION	DISCUSSION / ISSUE
<p>Call to Order: <i>Dr. Julia Pillsbury, D.O., Chair</i></p>	<p>Chair Dr. Pillsbury welcomed everyone and called the meeting to order at 9:05 AM</p>
<p>Approval of Minutes: <i>Dr. Julia Pillsbury, D.O., Chair</i></p>	<ul style="list-style-type: none"> • Chair Dr. Pillsbury called for any additions, alterations or corrections to the August 3, 2016 Minutes. Being none, Ms. Waldron moved to accept the minutes as recorded. Motion carried. • Chair Dr. Pillsbury announced a new Vice Chairperson, member Ms. Yrene Waldron, replacing Mr. James Lafferty who has retired. • Director Groff announced a staffing change; Linda Murphy has retired and Bill McGonegal has been named as the new Chief of Program Integrity. • Director Groff announced Tanika Bosley has been named EPSDT Coordinator for the State of Delaware. The EPSDT is the federal mandate around services for children; Wwe hope to focus our efforts going forward and therefore find better ways to serve our children.
STANDING COMMITTEE REPORTS	
<p>Standing Committee Reports: Director's Update: <i>Director Steve Groff</i></p>	<p>DMMA Director Groff reported:</p> <ul style="list-style-type: none"> • On the budget front, I was hoping to be able to tell you what our budget request will look like as we will be submitting it in the next week or two; however, we are in the process of finalizing what our target is with the OMB. We are still actively negotiating our 2017 contracts with both our managed care programs. We will benefit from close to a 2% increase in our federal matching rate which equates to

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	<p>about 24 million dollars. It also appears we will be hit again with a minimal COLA (Cost of Living Adjustment) and we may face a pretty hefty hike in the Medicaid share of Medicare premiums for dual eligibles.</p> <ul style="list-style-type: none"> • At the state level, there is really not much flexibility for expansion or enhancements. At this point, I believe we have close to about a 300 million dollar shortfall just to maintain existing programs at the state level. We will be asking for about 250 thousand dollars for emergency transportation rate increases which remain quite low. We will continue our policy efforts to move forward with other enhancements to the program providing we can do that without increases. • We have finalized our State Plan Amendment for Autism Spectrum Disorder and are very close to finalizing policy guidance related to services for individuals with gender. We are looking for ways we can expand our services for alternative approaches to pain management that will reduce our reliance on medication to address the opioid addiction issue. • We are currently addressing final regulations from CMS regarding the Managed Care Final Rule and the HCBS Final rule and Transition Plan, which Ms. Dougherty and Ms. Zimmerman will address shortly. • I want to thank Ann Phillips for a very interesting call with consumers; it became very clear that we could benefit from increased communication with families. Lisa and I have since had the opportunity to meet with several families. We have learned a great deal from their compelling stories and constructive criticism. • Some discussion ensued.
<p>MCO Update: <i>Ms. Kathleen Dougherty</i></p>	<p>Ms. Dougherty reported:</p> <ul style="list-style-type: none"> • Medicaid Managed Care Final Rule – states had options to send in recommendations for changes; I believe CMS did take some of the changes in, but not a lot. The final rule is very similar to the proposed rule, so the states have a guideline moving forward. CMS gave us some information on key goals and the reason for adopting this rule: <ul style="list-style-type: none"> ➤ Support state efforts to advance service delivery ➤ Improve the quality of care for members ➤ Strengthen the beneficiary’s experience and protection <p>We were glad to see the strengthening of the Program Integrity area so we have rules and regulations we can stand behind. The last time the federal government regulated Medicaid Managed Care was in 1970; they had not changed anything until the Balanced Budget Act in 1997, the Deficit Reduction Act in 2005 and the Affordable Care Act in 2010. The final rule was published May 6, 2016. The requirements are</p>

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	<p>staggered through dates within the next 5 years. Some of the regulations were immediate (within 60 days) we vigorously worked to get them operational and get them in the 2017 contract which is required by CMS. We have developed a steering committee and multiple work streams to review components of the rule and develop work plans to ensure compliance. The work streams include:</p> <ul style="list-style-type: none"> ➤ Contract review and change ➤ Rate setting for the MCO contracts ➤ Medical Loss ratio number we have to adhere to ➤ Finance and payment – how we pay the MCO’s ➤ Communications in general – to our advocates, MCO’s, etc. ➤ Network Adequacy ➤ Member issues – how does this affect the member? ➤ Health Information Systems and Data ➤ Non- Emergency Medical Transportation ➤ Pharmacy ➤ External quality review (EQRO) ➤ Quality Strategy Performance Measurement and Improvement ➤ Provider Issues ➤ Grievance and Appeal ➤ Mental Health Parity <ul style="list-style-type: none"> • A lengthy question and answer period ensued.
<p>New Business: Summary of the Lifespan Waiver Amendment <i>DDDS Deputy Director Marie Nonnenmacher</i></p>	<ul style="list-style-type: none"> • Due to time constraints, the Agenda was altered to allow Deputy Director Nonnenmacher to give her report (attachment #1). • A question and answer period followed.

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<p>Deputy Director's Update: <i>Deputy Director Lisa Zimmerman</i></p>	<p>Deputy Director Zimmerman reported:</p> <ul style="list-style-type: none"> • The HCBS Final Rule Transition Plan received initial approval from CMS. We are the 4th state to receive that approval; Tennessee is the only state to have full approval. • The work continues under the supervision of Glyne Williams and his staff. We have just completed the 4th iteration of our plan; out for public comment until November 9, 2016. It is posted on our website. This week, we conducted public hearings in all 3 counties. There was relatively small attendance; we believe that is a good sign as we want to convey the message that we have gone through this process, reviewed all the providers, etc. and found there could be tweaks made but we are in compliance with the rule and moving in the right direction • CMS was pleased with the work we completed, and invited us to come to Washington, DC at the end of August to participate in a panel with them Kathleen Mahoney, who works in our policy unit and I went down and shared our experience in Delaware around our transition plan. We fielded many questions from other states. • We hope to receive final approval on our transition plan by the end of the year from CMS. • A brief question and answer session followed.
<p>Public Comment: <i>Chair, Dr. Julia Pillsbury, D.O.</i></p>	<ul style="list-style-type: none"> • No public comments were offered.
<p>Adjournment: <i>Chair, Dr. Julia Pillsbury, D.O.</i></p>	<ul style="list-style-type: none"> • Being no further business, the meeting was adjourned at 10:33 AM.

Respectfully submitted,

Rebecca W. Gallagher _____

__2/15/17__

__ *Dr. Julia Pillsbury, D.O.*

Rebecca W. Gallagher
 Recorder

Date

Dr. Julia Pillsbury, D.O.
 Chairperson