

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance



D.C. MEDICAL CARE ADVISORY COMMITTEE (MCAC)

Location: Virtual Meeting via WebEx

Wednesday, April 27, 2022

MEETING MINUTES

ATTENDEES:

MEMBERS:

Abby Wolf Stanton, EDLC
Eric Scharf, DBSA
Justin Palmer, DC Hospital Association
Marie Morilus-Black, MBI Health Services
Mark LeVota, DC Behavioral Health Assoc.
Robert Hay Jr., MSDC
Sharra Greer, Children's Law Center

MCAC Ex-Officio Members

Barbara Bazron, DBH
LaQuandra Nesbitt, DOH
Melisa Byrd, DHCF

GUESTS:

Aida Fitzgerald, Legal Aid Society of DC
Alondra Jones, DHCF
Allie Liss, DHCF
Amy Maisterra, DCPS
Angelique Martin, DHCF
Anna Dunn, HSC Health
April Grady, DHCF
Araceli Simbulan, DHCF
Catherine Yourougou, AARP
Cavella Bishop, DHCF
Christine DeAngelis, GW Medical Faculty Assoc.
Cindy Snyder, Viiv Healthcare Company
Cleveland Woodson, MedStar
Claudia Schlosberg, Castle Hill Consulting
Colleen Sonosky, DHCF
Craig Umstead, MedStar
Daniel Feeley, MedStar
Danielle Lewis-Wright, DHCF

GUESTS CONTINUED

DaShawn Groves, DHCF
Ellen Wiggins, KC Community Services
Eugene Simms, DHCF
Elizabeth Garrison, DHCF
Janet Blackwood, Comagine
James Christian, AmeriHealth Caritas DC
Jenny Ozor, CareFirst CHPDC
Jonas Terry, DHCF
Jordan Kiszla, DHCF
Judith Levy, DC Coalition on Long Term Care
Karyn Wills, CareFirst CHPDC
Katherine Rogers, DHCF
Katie Rines, HSC Health
Kelly-Ann Daniels, DHCF
Kerda DeHaan, DHCF
Ieisha Gray, CareFirst
Leslie Lyles Smith, MedStar
Lindsay Dafir, HSC Health
Lisa Truitt, DHCF
Lorena Ortiz, DHCF
Lucy Ohiosikha, DHCF
Mario Ramsey, DHCF
Michelle Weinterstein, MedStar
Nadine Coy, HSC Health
Okechuku Enyia, DHCF
Peter Stephan, University Legal Services
Patricia Quinn, DCPCA
Qiana Heckstall, MedStar
Raymond Tu, MedStar
Sharon.Henry, MedStar
Seema Kazmi, MedStar

I. Call to Order

The meeting was called to order by Justin Palmer, MCAC Chair.

II. Special MCAC Budget Presentation Continuation: Medicaid Program Overview Senior Deputy Director/Medicaid Director Report

Melisa Byrd, Senior Deputy Director and Medicaid Director, Department of Health Care Finance (DHCF) went over the presentation agenda. *(The presentation is available on the MCAC page of the DHCF's website. It is located under the April 2022 MCAC Meeting Agenda and Materials link.)*

a. Medicaid Program Overview

April Grady, Division of Analytics and Policy Research Lead, DHCF, presented on the Medicaid Program Overview. Beyond historic data presented through FY21, the FY22 Medicaid enrollment data continues to climb in the first few months of the year. You can find the information on that in reports that DHCF posts on its' website each month ([link](#)). Additional information shared included the fact that total spending for a given population is affected by growth in both enrollment and per capita spending; in some cases, spending can decrease if we enroll fewer beneficiaries or have steady enrollment with a decrease in spending per beneficiary.

b. Medicaid Program Trends

Lisa Truitt, Director for the Health Care Delivery Management Administration, DHCF, presented on Medicaid Managed Care.

Dr. Jonas Terry, Pharmacist for the Division of Clinician, Pharmacy & Acute Provider Services, DHCF, presented on the pharmacy data and proposed pharmacy programs that have been included in FY 2023 Proposed Budget and Financial Plan.

Melisa Byrd presented on the Behavioral Health. DHCF has been working on the Behavioral Health Transformation since 2019, partnering with the Department of Behavioral Health (DBH) and Dr. Bazron. The goal is to carve in the Fee For Service (FFS), Mental Health Rehabilitation Services (MHRS) and Substance Use Disorder Services (SUDS) into the Managed Care Program. In November 2021, DHCF issued a new procurement for Managed Care contracts. It includes Behavioral Health Services (BHS) and brings BHS to Alliance members (currently, those services are available for them through DBH).

Katherine Rogers, Director for the Long Term Care Administration, DHCF, presented on Long Term Care services and supports. Due to the Public Health Emergency (PHE) protections, we have more beneficiaries than ever using different services and supports in a Long Term Care Program.

c. Alliance

Melisa Byrd presented on the Alliance program updates and trends. Alliance and the Immigrant Children's Program (ICP) are fully funded by local dollars.

III. Questions:

Question from Claudia Schlosberg:

At the last meeting, Angelique Martin presented on the wage proposal from DSPs. The slideshow that we are planning to spend \$11.5M in ARPA funds in FY23 to make supplemental payments to providers that require us, the providers, to raise wages to 117.6% of the minimum and living wage on average the ARPA spending plan was submitted and approved by CMS does not appear to include this initiative. I'm assuming that \$11.5M is coming from the retention bonus pool. Is that a correct assumption? If not, can you identify which initiative is the source of this funding assuming that additional ARPA funds will be needed to fund this initiative in 2024. Will those funds also come from the bonus payment bucket of funds? What is the plan of saving those payments when ARPA funds are gone?

Answer:

Melisa Byrd responded that the intent of doing a three-year rollout to get to that 117.6% is to help make it a sustainable plan past the use of the ARPA funds. It was not in the initial ARPA plan. DHCF submits the quarterly reports. Eugene Simms noted that the initiative to increase the DSP wages is in the May report.

Robert Hay Jr. commented that additional information making some of the PHE pharmacy allowances will be good at the future MCAC and subcommittee meetings.

**IV. Senior Deputy Director/Medicaid Director Report
*Unwinding the Public Health Emergency***

a. Background on Medicaid policy during Federal PHE

Melisa Byrd covered the slide about the PHE extension and turned it over to Eugene Simms, Acting Director, Division of Regulation & Policy Management, DHCF. Eugene Simms went over the upcoming policy planning for unwinding and returning to normal operations.

b. Eligibility changes and operations related to the PHE.

Danielle Lewis-Wright, Supervisory Management Analyst for the Division of Eligibility Policy, DHCF, presented on returning to normal eligibility operations.

c. Long Term Care changes related to the PHE

Katherine Rogers provided a brief overview of flexibilities.

Melisa noted that the DHCF team will be happy to meet individually to answer any questions you may have. Please let the DHCF team know what information will be helpful to your organization as PHE concludes and we begin more strategic outreach in the communications process.

Question:

Will DHCF ensure the current in-person LTCSS assessment is conducted before making the decision to reduce or terminate beneficiaries' services?

Answer:

DHCF intends to present the plan for the resumption of the in-person assessments and the suspension of the adverse actions at the next Long Term Care Coalition meeting. As we approach the end of the PHE, we will resume in person assessments for all populations at the same time. Our intend is to resume reductions of terminations and the suspension of those actions, effective with LOC on their effective dates post PHE. More than 60 days after PHE if a person has new LOC beginning at that time will become effective that it would have been effective on the LOC effective date.

Question:

Are the contractors staffing up to ensure capacity for the resumption of in-person assessments?

Answer:

It is currently not a concern as DHCF has an opportunity to monitor it. The contractor has maintained and continued to do virtual assessments throughout the PHE. DHCF will work closely with Liberty to ensure they have a plan for resuming the in-person assessments from an organizational standpoint.

IV. Subcommittee Updates

a. Eligibility and Enrollment

Eric Scharf, Federal Advocacy Advisor, DBSA, mentioned that they had a meeting in January. The next meeting is scheduled for May 18th to discuss the restart of programs. Much higher participation than before.

b. Long Term Care

No report out.

c. Access

Robert Hay, Executive Vice President at MSDC, asked to keep an eye on a future meeting dates and topics. We look forward to continuing to engage the community.

d. Health System Redesign

Mark LeVota, Executive Director at District of Columbia Behavioral Health Association, noted that the meeting took place on March 2, 2022, to review upcoming practice transformation technical assistance activities. The preliminary date and time for the next meeting is May 11th at 4pm. The plan is to talk about the new State Medicaid Health IT Plan and get feedback on how to operationalize one of the recommendations (number 7), population health analytics tools and CRISP. The meeting is a week later than usual because of the speakers' availability.

e. Opportunity for Public Comment

No comments.

f. Announcements

No announcements.

g. Adjournment

Justin Palmer adjourned the meeting.