D.C. MEDICAL CARE ADVISORY COMMITTEE
Eligibility and Enrollment Subcommittee

Meeting Minutes
Wednesday, January 19, 2022
District of Columbia Department of Health Care Finance (DHCF)

Attendees
- Eric Scharf, Depression and Bipolar Support Alliance* (Subcommittee Chair)
- Mark LeVota, Executive Director, DC Behavioral Health Association*
- Taylor Woods, Special Projects Officer, Health Care Policy and Research Administration (HCPRA), DHCF (Subcommittee staff lead)
- Danielle Lewis-Wright, Associate Director, Division of Eligibility Policy (DEP), HCPRA, DHCF
- Yemi Geteye, Management Analyst, DEP, HCPRA, DHCF
- Caitlin Brandt, Management Analyst, DEP, HCPRA, DHCF
- Melanie Williamson, Chief of Staff, DHCF
- Shante Trumpet, Human Services Specialist, DCAS
- April Grady, Associate Director, Division of Analytics and Policy Research (DAPR), HCPRA, DHCF
- Karina Wagnerman, Data Analyst, DAPR, HCPRA, DHCF
- Ben Layton, Data Analyst, DAPR, HCPRA, DHCF
- Rodrigo Coca-Flores, Data Analyst, DAPR, HCPRA, DHCF
- Lorena Ortiz, Data Analyst, DAPR, HCPRA, DHCF
- Mario Ramsey, Supervisory Policy Analyst, Division of Regulation and Policy Management (DRPM), HCPRA, DHCF
- Mark Barnhart, DCAS Contractor, DCAS Program Administration, DHCF
- Alessandra Klug, Policy Analyst, DRPM, HCPRA, DHCF
- Irene Hui, Attorney Advisor, Office of the General Counsel, DHCF
- Daniel Rifile, Policy Analyst, Adult Services Delivery, Department of Behavioral Health (DBH)
- Akeisha Guy, Health Homes Coordinator, Community Services Administration, DBH
- Darien Wynn, Covid-19 Legal Fellow, Bread for the City
- Leslie Lyles Smith, Executive Director, MedStar Family Choice DC
- Carl Chapman, MedStar
- Cleveland Woodson, MedStar
- Rick Thomas, Case Manager, Christ House
- Diana Whitfield-Locke
- RJ Respress, Billing Manager, Pathways to Housing
- Jo A. Spillman, Managed Care, Credentialing, Invitae Corporation
- Chris Babcock, Mercer
- Kathleen Bernstein, Alkermes
- Jennifer Baron
- Beth Henson, The Henson Group
• Firmin Djontu, CEO, Case Management, Priority Health Systems
• Michele April-May
• Adam Vanden-Elzen, Senior EDI Analyst, SKYGEN US
• Shamaal Sheppard, Policy Analyst, DC Primary Care Association (DCPCA)
• Tamara Smith, Chair, DCPCA
• Sharon Henry, Director of Clinical Operations, MedStar Family Choice DC
• Yulonda Barlow, CareFirst
• Abby Wolf Stanton, Elder Law Attorney, Elder & Disability Law Center
• Robyn Griffin, Senior Legal Aid Attorney, Legal Counsel for the Elderly
• Catherine Yourougou, Staff Attorney, Legal Counsel for the Elderly
• Swapna Yeluri, Senior Attorney, Legal Counsel for the Elderly
• Tatiana Newman, COO JA Community Services
• Ashley Taylor, HSCSN Enrollment Services
• Anna Dunn, President, HSCSN
• Tabitha Morris, Eligibility and Benefits Coordinator, HSCSN
• Nadine Coy, HSC Health
• Katie Rines, HSC Health
• Lisa Proctor, Vice President, Marketing and Outreach, HSCSN
• Maria Nuñez, Executive Director, Capital Clubhouse
• Marie Morilus-Black,
• Stephanie Hafiz, Member Engagement Director, AmeriHealth Caritas DC
• Chioma Oruh,
• Anthony Thompson
• Anna Bodison
• Claudia Jackson, Director of Community Outreach, HSC Health
• Chris DeYoung, Medicaid Enrollment Supervisor, Medicaid Team, DC Department for Aging and Community Living (DACL)
• Eugene Simms, Acting Director, HCPRA, DHCF
• Robert Howard, Attorney Advisor, Office of General Counsel, DHCF
• Tamika Fitzgerald, Director, DCAS Administration, DHCF
• Katie Nicol, Deputy Director, Marketplace Innovation, Policy, and Operations, DC Health Benefits Exchange (HBX)
• Stephanie Knight, Assistant Deputy Administrator, Economic Security Administration (ESA), Department of Human Services (DHS)
• Francis Ekeh, Section Chief, ESA, DHS
• Joyce Speaks, Program Manager, ESA, DHS
• Omotayo Ajani, Section Chief, ESA, DHS
• Michael Ribar, Deputy Administrator, ESA, DHS
• Brian Campbell, Senior Policy and Program Advisory, ESA, DHS
• Steph Bloch, Chief, Strategic Planning and Project Management, ESA, DHS
• Catherine King, DHS
• Taylor Woods, Program Analyst, ESA, DHS
• Regina Jefferson, Faith-Based Initiatives Coordinator, AHPP, DC Health
• Chris DeYoung, Department of Aging and Community Living (DACL)
• Rebecca Shields, Program Manager, ESA, DHS
• Tracy Felton, Section Chief, ESA, DHS
• Gaurav Mehra, AVID Contractor, DCAS Administration, DHCF
• Emmanuel Akinleye, Program Specialist, Long Term Care Administration (LTCA), DHCF
Summary of Meeting
Eric Scharf, Chair, called the virtual meeting to order at 3:03 PM. The group discussed the agency’s action to restart eligibility determinations after the end of the federal health emergency, heard presentations from DHCF on the District Direct portal, collected ideas for topics over the next year, and covered current enrollment trends in DHCF programs.

Update on Planning Restart for the End of the Federal Public Health Emergency (PHE)
Danielle Lewis-Wright presented on the agency’s actions to restart eligibility after the end of the federal public health emergency. Danielle’s presentation covered categories starting restart now, Workgroup action to plan the rollout, and what to expect going forward. The Subcommittee expects to hear more from Subcommittee members asked questions or provided comments on the following topics:

- **Q:** We have not received any notices for redeterminations for clients at nursing homes but we have received notices they are. Can DHCF speak to that.
  - **A:** If they have lost coverage, let us know. This should not be happening.

- **Q:** Is there any way for clients to receive notices directly through Quickbase, rather than through the facility?
  - **A:** We are currently planning to sunset Quickbase through a gradual process, look to hear more from us on that process soon. This process to move past Quickbase will be a 4-6 month effort.

**District Direct Overview**
Tamika Fitzgerald presented on the components of the District Direct system’s components, rollout, and early results from the rollout. The presentation covered the app, DC Health Link, and all modalities for access to apply for and check on benefits. It included the number of applications by modality.

Subcommittee members provided the following questions and comments:
• Q: What is the link to District Direct?
  o A: https://dhs.dc.gov/page/district-direct-mobile-app

• Q: If there have been 70,000 downloads and only 18,000 signing onto District Direct, what is happening?
  o A: Downloads could be to manage benefits, or they may not have applied.

• Q: Has there been any discussions about adding an "authorized representative" feature to the District Direct online portal? This feature was available on the old online portal and allowed service providers to easily submit applications for clients without housing log-in information for accounts.
  o A: That is part of the conversation we’re having about the Provider Portal. We’re exploring that as an objective as part of those efforts.

• Q: Why do QMB applicants still need a paper form?
  o A: Not answered during the meeting.

• Q: Is there any opportunity in the future to integrate District Direct and DC Healthy Families system - hence one integrated platform?
  o A: Has not been discussed yet

• Q: How are tech assistance issues with the site handled? I know the Medicaid application site has been challenging for some families in the past
  o A: We have troubleshooting for technical issues because we’re still in the warranty period for the product and have not had major issues since Day 2.

• Q: Was there any update for the timing of translating District Direct to languages other than English?
  o A: We’re scheduling to complete translations around March, working with the vendor to finalize the plan and firm date for when those are deployed.

• Q: Is there a dedicated plan for rolling this out to the community broader than it has been?
  o A: I had been having weekly sessions with stakeholders but that has ceased. We will start a 3-4 month campaign with a vendor to increase awareness in the future.
  Comment: It would be excellent to have regular communication with stakeholders on District Direct every month.
  Comment: It could be good to require email as a required contact in District Direct as we get away from physical mail

• Q: It could be good to require email as a required contact in District Direct as we get away from physical mail. Is that information sent in the 1830 file sent to MCOs?
  o A: It is not mandatory but the optional place to put it is in the application. had been having weekly sessions with stakeholders but that has ceased. We will start a 3-4 month campaign with a vendor to increase awareness in the future.

**Topic Suggestions -2022**

Eric Scharf hosted a discussion on potential topics for 2022. He suggested that the Subcommittee could model itself on the Access Subcommittee, which chooses a specific topic for each meeting.

The Subcommittee heard the following suggestions and held the following discussion:

• Suggestion: Hold a conversation on PACE before it starts in 2022 and 2023
• Suggestion: Hold regular conversations on District Direct
• Suggestion: I’m sure there will be continuing interest in certification procedures related to the Alliance
• Suggestion: We may want to think about the variety of unique eligibility and enrollment issues for LTSS, such as PACE, D-SNPs, and other dual-eligible options and opportunities, so long as we’re not duplicating work in the LTSS subcommittee.
• Suggestion: Maternal Health Projects could present on the postpartum eligibility extension to this group
• Suggestion: There has been public testimony during performance/budget oversight for several years from beneficiaries requesting a Medicaid buy-in option for people with disabilities who otherwise qualify but exceed income limits. Is this a forum for DHCF to discuss its thinking on that possibility?
  o DHCF Response: This is the appropriate forum to raise that topic and there have been internal discussions on this matter.
• Suggestion: Interest in whether DHCF has done any analysis in partnership with HBX about the number of those who leave Medicaid coverage for the exchange (and vice versa). Also interest in making this process easier through interagency coordination.
  o DHCF Response: We can look into it but may be limited by IRS data being required.

**DHCF Enrollment Report**
April Grady provided an update on the current enrollment numbers and trends in DHCF programs. She provided a breakdown of number and percent of those enrolled by program.

• Q: When may medical renewals start this year?
  o A: Federal public health emergency is guaranteed to run until mid-April but that may be extended. We are still awaiting guidance from CMS on how to approach that. People have 60 days to respond to
• Q: Is there a breakout of how many are enrolled in the EPD Waiver Program?
  o A: There is a report linked on the DHCF website showing an enrollment just under 5,100 in the EPD waiver program.

**Takeaways and Next Steps**
• Eligibility and Enrollment Chair and DHCF staff will pick the topics of subsequent meetings
• The Subcommittee will consider when to meet in-person

**Adjournment:**
Subcommittee Chair Eric Scharf adjourned the meeting at 4:18 PM.