

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance



D.C. MEDICAL CARE ADVISORY COMMITTEE (MCAC)

Location: Virtual Meeting via WebEx

Wednesday, December 16, 2020

MEETING MINUTES

ATTENDEES:

MEMBERS:

Guy Durant
Sharra Greer, Children's Law Center
Robert Hay Jr., MSDC
Suzanne Jackson, Health Rights Law Clinic
Mark LeVota, DC Behavioral Health Assoc.
Marie Morilus-Black, MBI Health Services
Chioma Oruh, Chi Bornfree
Justin Palmer, DC Hospital Association
Ian Paregol, Coalition of Disability Service Providers
Eric Scharf, Depression and Bipolar Support Alliance
Veronica Sharpe, DCHCA
Tamara Smith, DCPA
Joe Weissfeld, Families USA
Amy Maisterra, DCPS
Andrew Reese, DDS
Barbara Bazron, DBH
Heidi Schumacher, OSSE
Kirk Dobson, DDS
Marsha Lillie-Blanton, DBH
Melisa Byrd, DHCF

GUESTS:

Aida Fitzgerald, Legal Aid Society of DC
Alice Weiss, DHCF
Alonda Jones, DHCF
Alyssa Kahn
Amelia Whitman, DHCF
Angie Boulware
Anna Dunn, HSCSN
Anthea Seymour, DHS
April Grady, DHCF
Belina Zhang
Bill Hanna, DHCF
Brion Elliot, DHCF
Cavella Bishop, DHCF
Christine Dagostino
Charisse Vickerie
Christine DeAngelis
Claudia Schlosberg, Castle Hill Consulting

GUESTS CONTINUED

Colleen Sonosky, DHCF
Craig Umstead
DaShawn Groves, DHCF
DeJa Love, DHCF
Deniz Soyer, DHCF
Drena Lopez Duran
Eric Colchamiro
Erin Holve, DHCF
Elizabeth Garrison, DHCF
Eugene Simms, DHCF
Felecia Stovall, DHCF
Fernando Casto Gomez
Garlinda Bryant, DHS
George Aloth
Heather Stowe, DACL
Ieisha Gray, DHCF
Jennifer Ragins
Joseph Cullinan, Community Connections
Judith Levy, DC Coalition on Long Term Care
Karen Finn
Karyn Wills
Karina Wagnerman, DHCF
Kelly-Ann Daniels, DHCF
Kerda DeHaan, DHCF
Kerri Kerr
Lauren Jones, DHCF
Lauren Ratner, DC Health
Lawrence Williams, DHCF
Leslie Lyles Smith, MedStar
Lisa Truitt, DHCF
Lorena Ortiz, DHCF
Lucy Ohiosikha, DHCF
Lynda Kelly, DHCF
Maria Alva, Georgetown University
Marlaina Bowens, DHCF
Mark Fracasso
Mia Olsen
Michelle Rivera
Melanie Williamson, DHCF

Monique Willard, DHCF
Nathaniel Curry, DHCF
Nikhil Holla, CareFirst
Nina Jolani, DHCF
Onari Jackson
Pam Riley, DHCF
Patricia Quinn, DCPCA
Rachel McLaughlin

Rita Torkzadeh, DHCF
Rohnda Roberts
Sahar Takshi, AARP
Sherri Giorgio, Gilead
Stephanie Taylor, HSCSN
Tina Petrus

I. Call to Order

The meeting was called to order at 5:32 pm by Mr. LeVota, MCAC Chair.

II. Approval of the Minutes

Mr. Palmer moved and Ms. Smith seconded approval of the October 28, 2020 minutes. The minutes were approved without objection.

III. Senior Deputy Director/Medicaid Director Report

a. Public Health Emergency Update

Dr. Pamela Riley, DHCF Medical Director, presented on the COVID-19 vaccination plan. Dr. Riley represents DHCF on the DC Health Scientific Advisory Committee. DHCF has been working to make sure it can provide coverage for vaccine administration which is its most fundamental role as well as to the extent possible utilizing its communication and outreach channels to really reach the high risk population that DHCF serves to ensure that they are getting the vaccine messaging as well as and hopefully helping to encourage them to be willing to get the vaccine once it is more widely available. *(The presentation is available on DHCF's Website on the MCAC webpage. The presentation is located under the December 2020 MCAC Meeting Agenda and Materials link.)*

Danielle Lewis-Wright, Associate Director for the Division of Eligibility Policy, presented on the CMS Families First Coronavirus Response Act (FFCRA) Interim Final Rule with Comment (IFC). Melisa Byrd, Medicaid Director, added that states were given notice of the rule and then, within just a few days the rule was issued and so DHCF is working towards becoming compliant. The first steps are to understand what the intent and what the requirements of the rule are, and then to work with colleagues at the Department of Human Services to develop a work plan for how to implement and come into compliance with the rule. The purpose of today's presentation is to share the information to make everyone aware of the rule. *(The presentation is available on DHCF's Website on the MCAC webpage. The presentation is located under the December 2020 MCAC Meeting Agenda and Materials link.)*

Ms. Jackson asked when the federal legislation takes effect and when will individuals expect notices to be sent. Ms. Lewis-Wright stated that the federal legislation was published on December 2nd. On a call with CMS, CMS stated that they understand that it will take time for states to plan and implement these changes and so the effective date is upon our implementation date. DHCF has not determined a final date as of yet.

Ms. Aida Fitzgerald asked if DHCF will be submitting comments on the IFC. Ms. Alice Weiss stated that DHCF only on occasion submits comments to federal rules because of our limited resources and has on occasion contributed to other organizations comments and certainly welcome any input from District stakeholders on behalf of the District Medicaid beneficiaries.

DHCF does not have any immediate plans at this time to submit comments and given the timeframe from the point of promulgation it is not clear whether DHCF still have an opportunity to submit comments.

Ms. Aida Fitzgerald asked if DHCF plans to remove vision and dental coverage as allowable under the rule. Ms. Weiss stated there are any immediate plans to make any service level changes and DHCF's goal with respect to the public health emergency, pursuant to the mayor's direction is to preserve access to services to the greatest extent feasible during the public health emergencies. Ms. Byrd added that there are many other states that may have vision, or dental services is optional for some population and the rule may focus on those states in particular. Vision and dental are part of the basic Medicaid package in DC and removing the benefits is certainly not under consideration at this time.

Mr. Joe Weissfeld asked for some examples of triggering events that would result in someone transitioning to an eligibility group with lesser benefits. Ms. Weiss replied that the triggering events are the same as those that exist under the normal Medicaid change in circumstances sort of review. This could include changes in age, income, household composition, whether someone is eligible for another source of coverage like Medicare, for example, and level of care assessments for the home and community based services in the long term care programs. The only changes DHCF is required to make are those that do not result in a loss of Medicaid coverage.

Ms. Suzanne Jackson asked that since DHCF told everyone that they would not face changes until the end of the emergency plus 60 days if that be part of DHCF's submission to designing the implementation plan. Ms. Weiss stated that it's important to understand that when DHCF put out guidance, suggesting that it would preserve coverage to the greatest extent feasible during the public health emergency, pursuant to District requirements and the Mayor's Directive, DHCF also provided a specific notice to beneficiaries upon renewing their coverage that any coverage extensions are dependent on federal guidance and additional direction around the public health emergency and that reassessment might be needed. In this case CMS is directing all Medicaid agencies to ensure they are restarting appropriate determinations of eligibility and DHCF does not have much flexibility.

Ms. Suzanne Jackson asked if the triggering events include events occurring before the effective date of the federal legislation. Ms. Lewis-Wright shared that based on a call with CMS that all actions from a change in circumstance will apply prospectively based on date of implementation.

Mr. Weissfeld asked if DHCF is regularly doing redeterminations during the PHE. Ms. Weiss replied that, DHCF has been extending coverage for individuals during the public health emergency and not requiring a verification of eligibility, except to the extent that it entails a level of care assessment for long term care services and the citizenship and immigration components are the only items where self-attestation is not allowed at enrollment.

Ms. Byrd shared that DHCF is still in the analysis phase and trying to understand the impact and how to operationalize. There are weekly CMS calls and the recordings of those calls are available on coronavirus section of Medicaid.gov. Additionally, if members think about the beneficiaries that they work closely with, or individuals that they represent and have additional questions about potential impact, or how implementation will work to please contact Ms. Danielle Lewis-Wright or Ms. Alice Weiss.

b. Managed Care Transition

Melisa Byrd, Medicaid Director, presented on the transition to managed care. Ms. Byrd addressed the article in the Washington Post about the Contract Appeals Board (CAB) ruling, supporting the protest that was filed earlier in the year specific to the managed care contracts. The CAB decision directs the District to reevaluate offers in the competitive range, and to reevaluate those proposals. If an existing awardee is determined to no longer be one of the three highest rated offers, then the District cannot elect the option year. The option year is the contract year that would begin October 1, 2021 for that awardee. DHCF is continuing to work with the Office Contracts and Procurement (OCP) and will do so until the procurement is complete. The procurement is considered an open procurement until it is finalized.

(The presentation is available on DHCF's Website on the MCAC webpage. The presentation is located under the December 2020 MCAC Meeting Agenda and Materials link.)

c. Behavioral Health Update

Melisa Byrd, Medicaid Director, presented on Behavioral Health Integration. Ms. Deja Love and Ms. Elizabeth Garrison, project managers from the Health Care Reform and Innovation Administration, presented on the Integrated Care Technical Assistance opportunity.

(The presentation is available on DHCF's Website on the MCAC webpage. The presentation is located under the December 2020 MCAC Meeting Agenda and Materials link.)

d. Enrollment Snapshot

April Grady, Associate Director, Division of Analytics and Policy Research, provided an update on enrollment. *(Enrollment reports are available on the DHCF Website on the MCAC webpage.)*

IV. Subcommittee Reports

a. Long Term Services and Supports

No report. Next meeting in January

b. Eligibility & Enrollment

Mark LeVota provided a brief report on behalf of Mr. Scharf. The committee met in November and received an update on the FFCRA rule and an update on DCAS. Next meeting in January.

c. Access

Robert Hay provided the report. The meeting focused on perinatal health resources. The discussion did address accessing behavioral health services for pregnant women. Mr. Hay noted there are a lot of resources in both the private and public sector and making sure that all DC residents have access to the services.

d. Health Care Re-Design

No report.

V. New Business

No new business.

VI. Opportunity for Public Comment

No public comments.

VII. Announcements

No announcements.

VIII. Adjournment

Mr. LeVota adjourned the meeting at 6:43 pm.

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