

MARYLAND MEDICAID ADVISORY COMMITTEE

DATE: Thursday, April 26, 2018

TIME: 1:00 - 3:00 p.m.

LOCATION: Department of Health and Mental Hygiene
201 W. Preston Street, Lobby Conference Room L-3
Baltimore, Maryland 21201

NOTE CHANGE IN MEETING LOCATION

AGENDA

- I. Departmental Report
- II. MD THINK
- III. ePrep Update
- IV. Legislative Wrap-Up
- V. Waiver, State Plan and Regulations Changes
- VI. Behavioral Health System Report
- VII. Public Comments
- VIII. Adjournment

**Date and Location of Next Meeting:
Thursday, May 24, 2018, 1:00 – 3:00 p.m.
Department of Health and Mental Hygiene
201 W. Preston Street, Lobby Conference Room L-3
Baltimore, Maryland 21201**

**Staff Contact: Ms. Carrol Barnes - (410) 767-5213
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Committee members are asked to contact staff if unable to attend

**MARYLAND MEDICAID ADVISORY COMMITTEE
MINUTES**

March 26, 2018

MEMBERS PRESENT:

Winifred Booker, D.D.S
Ms. Lesley Wallace
Ms. Susan Phelps
Ms. Shannon Hall
Ms. Grace Williams
Ms. Donna Fortson
Ms. Vickie Walters
Ms. Ann Rasenberger
Mr. Norbert Robinson
Mr. Kevin Lindamood
Travis Gayles, M.D.
The Hon. Shirley Nathan-Pulliam
The Hon. Joseline Peña-Melnyk
Mr. Vincent DeMarco
Rachel Dodge, M.D.
Ms. Nicolette Smith-Bligen
Ms. Michele Douglas

MEMBERS ABSENT:

Adeteju Ogunrinde, M.D
Ms. Carmel Roques
Mr. C. David Ward
The Hon. Joanne C. Benson
The Hon. Matthew Morgan
The Hon. Pat Young
Mr. Floyd Hartley
Ms. Christine Bailey
Judy Lapinski, Pharm.D
Mr. Ben Steffen
Ms. Kerry Lessard

Maryland Medicaid Advisory Committee

March 26, 2018

Call to Order and Approval of Minutes

Mr. Kevin Lindamood, Chair, called to order the meeting of the Maryland Medicaid Advisory Committee (MMAC) at 1:10 p.m. Committee members approved the minutes from the February 26, 2018 meeting as written. Ms. Louise Baucom attended the meeting for Delegate Matthew Morgan.

Departmental Report

Mr. Dennis Schrader, Medicaid Director, informed the Committee that the Department has been engaging in the early part of the annual rate setting process. The Hilltop Institute at UMBC helps the Department run that process and the rates then go to the Center for Medicare and Medicaid Services (CMS) for review and approval then they are put into regulation.

The Department has come to an agreement with the contractor who had the program to replace the Medicaid Management Information System (MMIS). The program was put together in 2009 but unfortunately the program did not work and the contract was cancelled. The good news is the Department was able to recover \$81 million from the contractor and we are currently in discussions with CMS on how that money will be distributed.

We are in the process of building what we believe is the future of the MMIS program transformation through the Medicaid Information Technology Architecture (MITA) 3.0. The CMS has had several of these unfortunate situations all over the country and they have gotten quite aggressive and have many lessons learned about how to implement this in the states. The Department is figuring out what the road map is for MITA 3.0 and how to implement it in a modular fashion. Our initial projections indicate it will probably take ten years. We have already started on some of the basic programs. The Department will provide a briefing on MITA 3.0 in the latter part of the year.

The Medicaid Director is on the steering committee for MD THINK, a human services platform that is being implemented in a modular fashion with the Department of Human Services as the lead. We are in the process of developing a request for proposal (RFP) for an independent verification and validation (IV&V) contractor for this program. The IV&V is the performance of an independent assessment of a project by a third party assessor who has no direct involvement with the development and the implementation of the project. The Department will give the Committee a briefing on MD THINK at the April meeting.

MMAC By-Laws Review

The Medicaid Director informed the Committee at the last meeting that he would be reviewing current Committee membership and by-laws. The Committee reviewed the Medicaid Advisory Committee by-laws and agreed to convene a sub-committee to review and update them.

Committee members gave the following suggestions:

1. Develop an onboarding process for new Committee members
2. Provide a mentor for new members
3. Have legislative representation on the by-laws review sub-committee
4. Have the functions and duties of the Committee look at the full Medicaid population rather than a concentration on managed care
5. Establish a role for the past chairperson
6. Place in the by-laws that there is an expectation that members participate in appropriate sub-committees and/or stakeholder groups in addition to the monthly meetings

Bill Review and Study

The Medicaid Director informed the Committee that there are several bills that require the Department to establish workgroups, taskforces or committees that are actually within the domain of the MMAC. The Department suggests rather than form individual groups, let the MMAC, through sub-committees, examine those issues and report back to the Department within the appropriate reporting deadline. This would make it easier for the Department, empower the Committee and it would help guide some of the policy framework the Committee would work on. The MMAC can also help with continuity over time and provide some focus.

Currently, the Department has two areas of interest that the MMAC could look at. The first is private duty nursing. We get questions about how much private duty nursing is delivered, how it is delivered, and where do you find the data. The Department will report that type of information to the MMAC and if there are questions regarding topics like access issues, quality of care, payment rates, the MMAC can convene a sub-group to look at those.

The other area of interest is non-emergency medical transport in rural areas. The Governor just put into his supplemental a \$500,000 grant to Garrett County to run a pilot. Garrett County put all transit into an on-demand system and anyone who needed a ride would call and pay a small fee. The problem is they were charging way too much for Medicaid riders. This pilot will give us information on basic issues of rural non-emergency medical transport.

Committee members expressed concern with how the Department will ensure, when looking at specific issues, the experts with knowledge on those issues are at the table from the community or from wherever the issues comes from. Committee members recommended that a sub-committee can be one or two MMAC members and expertise is brought in to discuss that particular topic. In order to cover the large number of areas that Medicaid is, the Department can recruit and convene stakeholder groups outside of the Committee to discuss specific issues and

assign one or two MMAC members as a liaison to that stakeholder group. That Committee member/s will then report back to the larger MMAC membership.

Committee members brought up Hepatitis-C as a huge Medicaid issue that needs to be addressed sooner than later.

Legislative Update

Mr. Chris Coats, Health Policy Analyst, informed the Committee that we are at the end of March and on the other side of crossover which means there are two weeks left to the session. The focus today will be on the legislation that is actually still in play, made it to crossover and is moving along (see attached chart). This was a very busy session with close to 200 bills to track this year. By the next MMAC meeting, everything will be sorted out and a wrap-up of all the bills that passed and what we need to implement going forward will be discussed.

Dental Update

Ms. Alyssa Brown, Deputy Director, Planning Administration, gave the Committee a brief update regarding recent data the Department has compiled regarding dental utilization in our program. These are highlights of a larger dental chart book that the Department has prepared that will be distributed to the Committee at a later date (see attached presentation).

Waiver, State Plan and Regulation Changes

Ms. Susan Tucker, Executive Director, Office of Health Services, gave the Committee the highlights of regulations, state plan amendments and waivers.

The Department was approved for a state plan amendment on tobacco cessation for pregnant women. Please note tobacco cessation counseling is covered for all groups on Medicaid so this is a confirmation of existing policy. The Department submitted a state plan amendment to increase reimbursement for Applied Behavioral Analysis (ABA) services. Hopefully this will allow more registered behavior technicians to participate in the ABA program for children with Autism. We also changed rules to allow billing for treatment planning during the month and to allow remote supervision for this home-based service.

We will be adding coverage for adult hearing aids and cochlear implants. This will be implemented this July 1, 2018

Behavioral Health System Report

Ms. Cynthia Petion and Mr. Frank Dyson of the Behavioral Health Administration (BHA), gave the Committee a brief update on the COMAR 10.63 licensing efforts. The BHA is in the process of having all eligible community behavioral providers licensed and accredited. Originally, 368 substance related treatment providers were certified under COMAR 10.47, and 288 mental health providers were approved under COMAR 10.21. As of March 23rd, 2018, 576 community-based behavioral providers have applied for accreditation to Maryland Department of Health approved Accreditation Organizations. Licensure applications under COMAR 10.63 have been submitted for 577 providers. (This includes some applications for services for which providers are able to

obtain licensure without a requirement for accreditation, such as DUI Education). To date, 271 providers have completed the COMAR 10.63 licensure process, with a total of 505 sites licensed.

Public Comments

Pattie Archeletta , Parents Place of Maryland, gave public comments on their State of the State report.

Adjournment

Mr. Lindamood adjourned the meeting at 3:00 p.m.