

MARYLAND MEDICAID ADVISORY COMMITTEE

DATE: Thursday, May 25, 2023
TIME: 1:00 - 3:00 p.m.
LOCATION: GoToWebinar

MMAC meetings will continue to be held through GoToWebinar only.

Please register for MMAC Meeting on May 25, 2023, 1:00 p.m. EST at:

<https://attendee.gotowebinar.com/register/8194586921687632912>

After registering, you will receive a confirmation email containing information about joining the webinar.

Those who would like to make public comment should email Ms. Sharon Neely at, sharon.neely@maryland.gov or use the question feature to submit questions to the host.

AGENDA

- I. Departmental Report
- II. Healthy Babies Equity Act
- III. HealthChoice Evaluation
- IV. Waiver, State Plan and Regulations Changes
- V. Public Comments
- VI. Adjournment

Next Meeting: Thursday, June 22, 2023, 1:00 – 3:00 p.m.

Staff Contact: Ms. Sharon Neely
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**MARYLAND MEDICAID ADVISORY COMMITTEE
MINUTES**

April 27, 2023

MEMBERS PRESENT:

Ms. Shannon Hall
Ms. Nicole McCann
Mr. William Webb
Ms. Nora Hoban
Ms. Stephanie Scharpf
Adeteju Ogunrinde, M.D.
Mr. Kenneth Garove
Rachel Dodge, M.D.
Winifred Booker, D.D.S
Mr. Ben Steffen
Mr. Floyd Hartley
Ms. Marie McLendon
Ms. Jessica Dickerson
Ms. Diane McComb
Theodora Balis. M.D.

MEMBERS ABSENT:

The Hon. Matthew Morgan
The Hon. J.B. Jennings
Kathryn Fiddler, DNP
Mr. Paul Miller
Ms. Erin Dorrien
The Hon. Antonio Hayes
Ms. Vickie Walters

Maryland Medicaid Advisory Committee

April 27, 2023

Call to Order and Approval of Minutes

Ms. Nicole McCann, Chair, called to order the meeting of the Maryland Medicaid Advisory Committee (MMAC) at 1:05 p.m. Committee members approved the minutes from the March 27, 2023, meeting as written.

Departmental Report and COVID-19 Updates

Ms. Tricia Roddy, Deputy Medicaid Director, provided the Committee with a combined Departmental report and Public Health Emergency (PHE) unwinding update.

Ms. Roddy announced the Department has a new Deputy Secretary for Health Care Finance and Medicaid Director, Dr. Ryan Moran. Dr. Moran has been on the job for a couple of weeks and is looking forward to attending the next MMAC meeting to introduce himself and meet the members.

The Department has officially started the PHE unwinding with redeterminations. The first redetermination notices and packages were sent out at the beginning of the month and the first closures will start at the end of May. As a reminder, Maryland will be taking the full twelve months to complete the redetermination process. As you will recall, the Department and the MCOs have worked together to engage marketing firm GKV to assist us with our outreach and activities around redetermination to make sure we are getting the appropriate messages out to Medicaid enrollees. We are making sure that all individuals that are still eligible for Medicaid remain enrolled in the program.

A few months ago, GKV presented on “check in campaign” and now they have come back this month to show some of the videos, radio, bus, and television ads.

One of the items in one of the bills that passed this legislative session requires the Department to implement a program called Collaborative Care. The Department has been operating a small pilot program for a few years, but the bill requires us to go statewide. This is a service that Medicare covers, and we would be mirroring the billing rules of the Medicare policies and rates when we go for implementation. We are also applying for a Substance Abuse and Mental Health Services Administration (SAMHSA) grant. There is an opportunity to receive approximately \$2 million for up to five years. Those monies cannot go towards services but will go towards infrastructure, training, and reporting capabilities. As we work through this grant and this service, our goal is to make sure that the policies developed are consistent across multiple payers. The grant is due at the end of this month. The start date for this program is October 1, 2023.

Total enrollment for the month of April is 1,790,935 individuals.

Medicaid Check-In Campaign

Ms. Alyssa Brown provided the Committee with several updates on previously discussed initiatives and pre-launch campaign activities.

Mr. Andrew Robinson, Senior Vice President, GKV, provided an update on the statewide comprehensive marketing campaign related to the redetermination effort (see attached presentation).

Legislative Update

Mr. Chris Coats, Health Policy Analyst, Office of Innovation, Research and Development, informed the Committee that the legislative session concluded on Monday, April 10, 2023. This year we ended up tracking 162 bills total. One half of those crossed over before the crossover deadline in March. Not all of those bills ended up passing, but that is a large percentage of bills to have crossed over.

When you look at the chart, you are looking for bills that say returned passed or passed enrolled. Some bills have already been signed into law. There are several bill signing dates since the General Assembly ended. One on the day after session and one on Monday, May 1, 2023. There are three additional bill signing dates in May on Wednesday, May 3, 2023, Monday, May 8, 2023, and Monday, May 15, 2023. All those bill signing dates will be held at 12 noon.

The budget bill, HB 200, passed on time as well as the Budget Reconciliation and Financing Act (BRFA) bill, HB 202. The only thing in the BRFA bill for Medicaid is the Medicaid deficit assessment reduction for FY 24.

Ms. Alyssa Brown, Director, Office of Innovation, Research and Development, highlighted several bills that have a direct impact on Medicaid and the delivery of services across the state (see attached bill chart).

Ms. Brown highlighted the following bills related to the budget:

SB 555 – there are some changes to the Fight for 15 Act around the mandatory wage increases. That bill also makes some changes to mandatory rate increases for long term support services (LTSS), behavioral health and Developmental Disabilities Administration (DDA) community providers. This is also something that was coming up in the Governor’s budget. We will see a 4 percent increase on July 1, 2023 for LTSS and DDA providers consistent with what was originally scheduled for FY 24 as well as a 3 percent rate increase for behavioral health providers. The increases that were originally slated for FY25 and FY26 have been expedited and will go into place January 1, 2024. That means our LTSS, behavioral health and DDA providers will all receive an 8 percent increase in January 2024 on top of the one issued in July 2023.

There is funding included in the Governor's budget for an additional dental rate increase. We have approximately \$20 million to allocate for rate increases in FY24. The Department will be convening discussions around how to direct that funding.

Ms. Brown highlighted the following bills that passed this session and have been or is expected to be signed into law:

SB474/HB 716 – we had some concerns with how this bill was drafted but those concerns were addressed with some of the amendments.

HB 279/SB 202 – the Department will be monitoring this bill.

HB 374/SB 565 – the Department will review this legislation to explore what those regulations will look like on the Department's side.

HB 382/SB 895 – this bill was amended to be switched to a study requirement. The report is due in October 2023.

SB 678/HB 1151 – there is some language in this bill regarding supervision requirements, namely that pharmacists do not need to be supervised by a physician to bill for services.

SB 255/HB 322 – there is language in the bill requiring a value-based purchasing pilot for case management services with an annual reporting requirement for the Department starting December 1, 2023.

SB 622/HB 1149 – amends SB 636 from last year.

HB 48/SB 101 – the go live date for statewide collaborative care coverage is October 1, 2023.

HB 283/SB 460 – Trans Health Equity Act – this bill has an annual reporting requirement that starts January 1, 2025.

HB 1146/SB 948 – report tied to the assessment is due December 1, 2023.

SB 26/HB 111 – the bill as passed allows the Department to seek first authority to use SNAP information for renewal purposes. This bill has a January 1, 2025 effective date. For our unwinding activities, the Department has obtained an E14 waiver authority from CMS to allow the use of SNAP data for renewal purposes during the unwinding for MAGI enrollees.

SB 231/HB 726 – we have seen similar legislation pass for other waivers in prior sessions.

SB 237/HB 290 – reports for dental provider participation and reimbursement for services provided by a community health worker are due December 1, 2024.

SB 362/HB 1249 – this is a change from the bill as originally drafted requiring the Department to cover these services right away, giving us time to ramp up, plan, and fully leverage the federal dollars available.

SB 534 – the Maryland Health Care Commission has presented to the MMAC on their initial report on some of the telehealth expansions that took place during COVID. We expect an additional report before the sunset date of June 30, 2025.

SB 581 – this pilot needs to target at least 500 adults at risk of an inpatient psychiatric admission or emergency department.

SB 582/HB 1148 – this bill has language very similar to SB 362 and SB 581 with respect to requirements for applying for funding for CCBHCs as well as the Value Based Purchasing Program requirement. In addition, it establishes a commission on behavioral health care treatment and access.

SB 805/HB 1217 – the Department's initial estimate for the cost of providing this service is more than \$600 billion per year.

SB 806 (not on the list) – reporting requirement due October 31, 2023, to price out and assess the potential impact of offering coverage to undocumented individuals who may not otherwise qualify for coverage.

Advance Directives

Ms. Nicole Majewski, Chief, Health Information Technology, Maryland Health Care Commission (MHCC), gave the Committee a history of advance directives in Maryland, the roll of MHCC and the requirement for making available the advance directive information sheet (see attached presentation).

Waiver, State Plan and Regulation Changes

Ms. Molly Marra, Director, Medicaid Provider Services, gave the Committee a status update on waivers, regulations, and state plan amendment changes (see attached handouts).

Public Comments

There were no public comments.

Adjournment

Ms. McCann adjourned the meeting at 2:20 p.m.