

MINUTES
MEDICAL SERVICES FUND ADVISORY COUNCIL
(MSFAC)
TC Energy Conference Room
March 29, 2024

Members and Alternates Present or Online

Cindy Beane, Commissioner, Bureau for Medical Services (BMS)
Representative
Sarah Young, Deputy Commissioner, BMS (alternate)
Debra Boyd, WV Primary Care Association (alternate)
Richard Bradford, Consumer Representative
Melanie Dempsey, WV Hospital Association Representative
Dr. Tracy Hendershot, WV Academy of Family Physicians Representative
Dr. Lisa Costello, WV State Medical Association Representative
Gerry Stover, WV Academy of Family Physicians Representative
Dr. Hallie Mason, Dental Representative
Dr. Carol Buffington, Dental (alternate)
Todd Jones, WV Healthcare Association Representative
Martin Wright, WV Healthcare Association (alternate)
Christopher Rawlings, Hospice Council of West Virginia (alternate)
Mark Drennan, WV Behavioral Health Provider Association (alternate)
Brad Story, WV Behavioral Health Provider Association Representative

Bureau for Medical Services Employees Present

Margaret Brown
Riley J. Romeo
Dr. Hyla Harvey
Jennifer Myers

Department of Human Services Employees Present

Dr. Cynthia Persily, Cabinet Secretary
Cammie Chapman, Deputy Secretary

West Virginia State Government Employees Present or Online

Eric Tarr, WV Legislature
Cindy Dellinger, WV Legislature
Jeremiah Samples, WV Legislature

Interested Parties Present

Benita Whitman, Legal Aid
Michelle Petty, CommuniCare
Jeff Wiseman, The Health Plan
Phil Shimer, TSG Solutions

Welcome and Opening Remarks:

- Commissioner Cynthia Beane began the meeting requesting all MSFAC members, who attended in person, to introduce themselves and their organization.
- She then opened the meeting and announced that she will be assuming multiple roles as Council Chair Sherri Ferrell and BMS Chief Finance Officer Mandy Carpenter could not attend the meeting due to illness.
- Commissioner Beane adjusted the agenda and began the State Plan Amendment Update.

State Plan Amendment (SPA) Update:

- Riley J. Romeo presented the following SPAs:
 - SPA 24-0005, Dental Benefits, was passed.
 - 90-day Prescription Fill was approved.
 - Due to technical difficulties, SPA presentations were put on hold. During that time, Commissioner Beane announced that the West Virginia Medicaid Health Homes program would be terminated due to budget constraints effective July 1, 2024. The program's providers have been informed and letters to members will be mailed in April. West Virginia Medicaid has requested that all managed care organizations engage their Health Homes programs. Technical difficulties were fixed, meeting resumed.
 - Health Homes Program Withdraw was passed.
 - SPA 24-0004, Payments for Medical and Remedial Care Services: Methods and Standards for Determining Payment Rates for Non-State-Owned Nursing Facilities was passed. Commissioner Beane thanked the nursing facilities representatives for their input on the SPA. She furthered stated that it will improve the quality of care in nursing homes using a value-based strategy.
 - SPA 24-0002, Child Residential Intensive Treatment was passed.

Commissioner Update:

- Commissioner Beane presented Meeting Minutes from the previous MSFAC meeting; Meeting Minutes were passed.
- She also announced the future MSFAC meeting dates for the rest of the year, regardless of if there is a SPA or not, Beane wants everyone to be aware of what is going on with the Medicaid Agency.
- Beane presented the following Legislation Session Updates:
 - Senate Bill 820 passed which is a study of the cost to offer Day-One MCO Enrollment, includes good quality metrics with substance use disorders (SUD) providers and managed care organizations (MCOs).
 - House Bill 4933 was passed which increased Dental Services spend once every two years to \$2000 (SPA-24-0005).
 - Hospital Association House Bill 5107 was passed.
 - Beane hopes that Senate Bill 805 will be resurrected in the next session which asked Residential SUD Providers to require accreditation.
 - Beane announced that the MCO Tax Bill did not make it to session which would help with the Medicaid budget deficit.
 - The Bill regarding interest in overpayments also did not make it to session. If a provider owes West Virginia Medicaid money, Medicaid currently cannot charge interest, no penalty on how slow they can repay.
 - Federal Regulation regarding the MSFAC membership was changed which will require a change in state legislation as well.
- Commissioner Beane is looking at ways to cost-effective savings due to a deficit in the West Virginia Medicaid budget.

Policy and Operations Update:

- Deputy Commissioner of Policy and Operations, Sarah Young, provided the following updates on the Public Health Emergency (PHE) Unwinding:
 - In March 2020, the West Virginia Medicaid population was around 504,000, at the height in March 2023, there were 665,000. Currently, the enrollment is 572,000. Next month will be the 12th month of the PHE Unwinding period.
 - Deputy Commissioner Young discussed the planning of the PHE Unwinding and all communication outreach to members.

- West Virginia Medicaid was selected by the Executive Office of the President of the United States Digital Services for an income verification project. West Virginia Medicaid was one of eight agencies recommended by the Centers for Medicare and Medicaid Services (CMS).
- The Enterprise Data Solution (Data Warehouse) has gone “live.” CMS has certified the system which raises the match from 50/50 to 75/25.
- As of March 2023, the following policies were updated:
 - *Chapter 518, Pharmacy Services*
 - *Chapter 519.18, Tobacco Cessation*
 - *Chapter 525, Vision Services*
 - *Chapter 529, Laboratory Services*
 - *Chapter 501, Aged and Disabled Waiver*
 - *Chapter 519.20, Wound Care*
 - *Chapter 519.16, Surgical Services*
 - *New Appendices were added to Chapter 519.17, Telehealth Services:*
 - *Appendix A, Medicaid Telehealth Standard Codes*
 - *Appendix B, Public Health Emergency Medicaid Telehealth Services Flexibilities*
 - *Chapter 512, Traumatic Brain Injury Waiver*
 - *Chapter 539, Local Health Departments*
 - *Chapter 513, Intellectual Developmental/Disabilities Waiver*
- Deputy Commissioner Young announced the 2024 Spring Provider Workshops dates and times and information regarding the event.
- She also addressed update questions.

Plan Management Update:

- Commissioner Beane provided the following plan management update:
 - Highmark is preparing to become the fourth West Virginia Medicaid MCO and are currently going through their Readiness Review. The goal is for Highmark to begin to accept members in July 2024, but it may be delayed as it depends on the Readiness Review results.
 - West Virginia Medicaid is working on the Quality Management Strategy for all MCOs.

Finance Update:

- Commissioner Beane provided the following finance update:
 - Costs are coming down due to the PHE Unwinding and decrease in Medicaid membership.
 - In managed care, enrollment is down which is either attributed to PHE Unwinding, moved to the Children's Health Insurance Program (CHIP where enrollment has increased) or have gone to the insurance Marketplace.
 - Comparing state fiscal year (SFY) 2023 to SFY 2024, increase in taxes, decrease in federal funding.
 - Commissioner Beane hopes that the Special Session will bring full funding to the West Virginia Medicaid program.

Public Comment:

- There were no public comments. Meeting was adjourned.

Minutes submitted by:
Margaret Y. Brown
Bureau for Medical Services