



Michigan Department of  
Health & Human Services

RICK SNYDER, GOVERNOR  
NICK LYON, DIRECTOR

Michigan Department of Health and Human Services  
Medical Services Administration

**Medical Care Advisory Council**

Meeting Minutes

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**Date:** Wednesday, December 6, 2017

**Time:** 1:00 p.m. – 4:30 p.m.

**Where:** Michigan Public Health Institute (MPHI)  
2436 Woodlake Circle, Suite 380  
Okemos, MI 48864

**Attendees:** **Council Members:** Robin Reynolds, Eric Liu, Dan Thompson (for Loretta Bush), Kim Singh, Alison Hirschel, Emily Schwarzkopf, Michelle Best (for Amy Hundley), David LaLumia, Dianne Haas, Pam Lupo, Deb Brinson, Rod Auton, Barry Cargill, David Herbel, Warren White, Karlene Ketola, Amy Zaagman, Jeff Towns, April Stopczynski

**Staff:** Kathy Stiffler, Lynda Zeller, Erin Emerson, Brian Keisling, Dick Miles, Jackie Prokop, Pam Diebolt, Marie LaPres, Philip Bergquist, Phil Kurdunowicz

**Other Attendees:** Jeff Holm, Jane Pilditch

**Welcome, Introductions, Announcements**

Robin Reynolds opened the meeting and introductions were made. Kathy Stiffler announced that Chris Priest has stepped down from the role of State Medicaid Director, and that she has agreed to serve as acting director until a replacement is named.

**Federal Update**

**Children's Health Insurance Program (CHIP) Reauthorization**

Kathy Stiffler reported that CHIP expired on September 30, 2017, and has not yet been re-authorized by congress. While MDHHS staff are optimistic that the program will be renewed, Michigan currently has the resources to fund CHIP at the current Federal Matching Assistance Percentage (FMAP) rate through April or May 2018 if no action is taken. Robin Reynolds offered to draft a letter in support of renewing CHIP on behalf of the Medical Care Advisory Council (MCAC) to send to congress.

**Cost Sharing Reductions**

MDHHS staff discussed recent changes to cost sharing requirements for beneficiaries, noting that beginning in October 2017, cost sharing reduction (CSR) payments made by the federal government to qualified health plans on behalf of individuals with incomes between 100-250% of the federal poverty level (FPL) who receive health care coverage through the Marketplace were discontinued.

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### **Budget/Boilerplate Update**

#### **2019 Budget Update**

For details related to the FY 2019 budget, attendees were referred to the update provided by Farah Hanley at the August MCAC meeting, as documented in the meeting minutes. The minutes are available on the MDHHS website at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders) >> Policy, Letters & Forms >> Numbered Letters >> click "Medical Care Advisory Council (MCAC)" under Provider Liaison Meetings. Overall, the budget is expected to include funding to wrap up several initiatives advocated by Governor Snyder, as this will be the last budget for the current administration.

#### **2018 Supplemental**

Erin Emerson reported that the legislature is expected to pass a FY2018 supplemental appropriations bill before the winter recess.

### **Provider Enrollment Requirements**

MDHHS issued bulletin MSA 17-48 on December 1, 2017, which requires all providers with a National Provider Identifier (NPI) to enroll in the Community Health Automated Medicaid Processing System (CHAMPS) by March 1, 2018, per the requirements of the 21<sup>st</sup> Century Cures Act. The policy also requires prescribing providers to be enrolled in CHAMPS by May 1, 2018. Beginning May 1, 2018, all claims submitted for prescriptions ordered by non-enrolled providers will be denied. Enrollment of atypical providers (e.g., personal care services providers, volunteer Non-Emergency Medical Transportation [NEMT] providers, etc.) in CHAMPS is targeted for fall 2018.

In response to an inquiry, MDHHS staff and meeting attendees discussed implementing a system for pharmacies to request emergency overrides to fill prescriptions ordered by non-enrolled providers.

MDHHS has also issued proposed policy 1635-PE for public comment, which describes provider enrollment fitness criteria outlining federal and state felonies and misdemeanors that would prohibit a provider from participating in the State's Medicaid programs. The Department received many comments on the policy, and as a result, it will be revised and re-issued for public comment in early 2018.

### **Integrated Service Delivery (ISD)**

MDHHS is in the process of implementing a new universal caseload system known as ISD to provide a single portal for beneficiaries who receive services from multiple MDHHS programs. Implementation of ISD will include the use of a new all programs application that will allow individuals to apply for multiple MDHHS programs in a single application, revisions to the

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MI Bridges system to improve the user experience, and a new a central call center to assist applicants and beneficiaries. A pilot universal caseload system will be conducted in Gratiot and Shiawassee counties in late January 2018, with a phased rollout statewide to begin in summer 2018 that is projected to complete in mid-2019. While most beneficiaries who contact local MDHHS offices will be assisted through the new universal caseload system, MDHHS plans to exclude certain program enrollees from the system and allow those beneficiaries to maintain a relationship with a single caseworker in order to be better served. Local offices will also maintain the discretion to determine the best way to serve certain beneficiaries on an individual basis.

MDHHS staff and meeting attendees discussed at length the ways in which ISD is expected to improve efficiency in resolving customers' needs.

### **Medicaid Managed Care**

#### **Healthy Kids Dental Bid Update**

MDHHS has completed the process for selecting new vendors to provide services under the ***Healthy Kids Dental*** program, and has awarded statewide contracts to Blue Cross Blue Shield of Michigan, which will work with DentaQuest to provide dental benefits, and Delta Dental. While MDHHS initially planned to begin the new contract on April 1, 2018, the start date was delayed until October 1, 2018 to allow additional time to implement systems changes. Beginning October 1, 2018, ***Healthy Kids Dental*** enrollees will have the opportunity to choose their dental plan, though MDHHS is working to implement a process for auto-assigning beneficiaries who do not make a choice.

#### **Member Transportation Survey**

MDHHS worked with the Michigan State University Institute for Health Policy to conduct a survey of both users and non-users of Medicaid transportation services. The survey process has been completed, and a final report was distributed to the MCAC via email prior to the meeting. Kathy Stiffler provided an overview of the report, and invited attendees to continue to examine the document and contact her with questions as necessary.

#### **Dental Services for Pregnant Women**

Ms. Stiffler reported that MDHHS has obtained funding to provide dental coverage through the health plans for pregnant women enrolled in Medicaid, and that the Department is working to develop a process for identifying Medicaid beneficiaries who are pregnant. MDHHS staff and meeting attendees discussed the issue at length.

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### **Healthy Michigan Plan**

#### **Healthy MI Waiver Renewal Update**

Since the previous MCAC meeting held on August 30, 2017, MDHHS released the Healthy Michigan Plan Section 1115 Demonstration Waiver extension application for public comment, and conducted a public hearing to discuss the application. Few comments were received during this process, and MDHHS is currently seeking final approval from Governor Snyder for the waiver renewal application. While the current waiver expires on December 31, 2018, the renewal application must be submitted to CMS by December 31, 2017.

#### **Transition to Marketplace for Healthy Michigan Plan Members**

Under the terms of the second waiver for the Healthy Michigan Plan beginning April 1, 2018, individuals who have been enrolled in the Healthy Michigan Plan for more than 12 months, have incomes above 100% of the federal poverty level, do not meet the criteria for “medically frail” and choose not to engage in a healthy behavior must leave the Healthy Michigan Plan and receive insurance coverage from the Marketplace. MDHHS has identified approximately 14,000 current Healthy Michigan Plan enrollees who meet the criteria to transition to the Marketplace, and will begin sending notices to these individuals in February 2018. The February notice will include a reminder that the beneficiary may still complete a Health Risk Assessment (HRA) or Medically Frail form and submit documentation to MDHHS by April 1, 2018 to remain enrolled in the Healthy Michigan Plan. The Department is also in the process of sending a letter to all Healthy Michigan Plan beneficiaries to inform them of this change, and has conducted a webinar to share information with providers about this process, as well. Additional information about the implementation of the Healthy Michigan Plan second waiver is available on the MDHHS website at [www.michigan.gov/healthymichiganplan](http://www.michigan.gov/healthymichiganplan) >> Healthy Michigan Plan Second Waiver Operational Protocols.

### **Behavioral Health Updates**

Lynda Zeller provided an overview of the current priorities for the Behavioral Health and Developmental Disabilities Administration (BHDDA), which include:

- Improving access to inpatient psychiatric care close to home;
- Increasing diversion efforts to address the prevalence of individuals with mental health/substance use disorders who are among the jail and prison population in Michigan;
- Working to increase cultural and linguistic competencies within the BHDDA system, particularly concerning enabling greater access to services for tribal members and individuals who are deaf or blind; and
- Early intervention for childhood trauma victims.

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### **Section 298 Update**

The Michigan legislature directed MDHHS to develop up to three pilots and one demonstration model to test publicly integrated physical health and behavioral health services. The three pilots will test the financial integration for these services at the payer level, while the demonstration model (which will take place in Kent County) will test service integration. MDHHS has worked with MPHI since August 2017 to develop the structure of the pilots based on the legislative requirement and the recommendations of the Stakeholder 298 workgroup, in addition to holding meetings throughout the State of Michigan to gather stakeholder input on the pilot development process. As required by law, a report was submitted to the legislature on November 20, 2017 to show the timelines for implementation of the pilots, barriers to implementation and proposed solutions. The report, along with additional information related to the Section 298 Initiative, is available on the MDHHS website at [www.michigan.gov/stakeholder298](http://www.michigan.gov/stakeholder298). MDHHS is now working to issue a Request for Information (RFI) to select the pilot sites, which is planned for release in mid-December 2017. If more than three responses are received, the Department may need to initiate a competitive bid process for those sites interested in participating in the pilot. MDHHS plans begin operating the pilot and demonstration sites by July 1, 2018.

The demonstration model for the Stakeholder 298 Initiative will maintain the current funding mechanism in which physical health services are funded through the Medicaid Health Plans and behavioral health services are funded through the Prepaid Inpatient Health Plans (PIHPs). The demonstration will be established in Kent County through Network180 (the Community Mental Health Services Program [CMHSP] in Kent County) in partnership with any willing MHPs. The partnership is working on a project plan, which must be approved by the Department, and targeting implementation on July 1, 2018. MDHHS has selected the University of Michigan to conduct an evaluation of up to three pilot sites and the demonstration sites, and up to four comparison sites. This will include a baseline survey for each site, as well as a final survey at the conclusion of the pilot and demonstration.

In addition, MDHHS is also working to implement the 76 policy recommendations proposed by the Stakeholder 298 workgroup and will report back to stakeholders in early 2018 with a plan for moving forward with the recommendations.

### **Section 1115 Waiver Update**

Erin Emerson reported that the Section 1115 Waiver request to provide all behavioral health services under a single waiver authority is pending approval, and that CMS has requested to conduct weekly calls with the Department beginning in January 2018 to discuss the waiver.

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### **Long Term Care Updates**

Dick Miles provided several updates related to Long Term Care, which include:

- In July 2016, MDHHS submitted a Section 1115 Demonstration Waiver to provide necessary services and supports to persons suffering qualifying brain injuries who, but for the provision of these services, would otherwise be served in an institutional setting. The Brain Injury Waiver (BIW) is still pending approval by CMS, as it contains language related to housing services and supports that is similar to the Behavioral Health Section 1115 Demonstration waiver, which is currently under consideration, as well.
- On October 23, 2017, MDHHS implemented the MiAIMS time and task system statewide for billing encounters by home help and adult protective services providers.
- Proposed Policy 1723-HH, which will allow travel time payment to home help providers for shopping and laundry services, has been issued for public comment. MDHHS is also working to issue a policy to clarify portions of bulletin MSA 15-13, regarding Home Help Agency Provider Standards.
- The MI Choice Waiver currently expires on September 30, 2018, and MDHHS is in the process of holding meetings to solicit stakeholder involvement in the waiver renewal process. Information about upcoming stakeholder meetings and the waiver renewal process is available on the MDHHS website at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders) >> MI Choice.
- The Department is continuing to work toward resolving ongoing issues related to the Level of Care Determination (LOCD) process.
- Over 39,000 people are now enrolled in the MI Health Link demonstration program for individuals who are dually eligible for Medicare and Medicaid, and Mr. Miles reported that enrollment has stabilized. The demonstration is currently authorized through 2020.
- MDHHS issued bulletin MSA 17-42 on November 27, 2017, which discusses a new Medicaid Provider Manual Chapter for Home and Community Based Services. MSA 17-42 was issued concurrently for public comment review, and interested parties may submit comments until January 1, 2018.
- As required by the 21<sup>st</sup> Century Cures Act, MDHHS is currently in the process of developing an Electronic Visit Verification (EVV) system to track the services provided by personal care providers, as well as the location and time. The EVV system must be implemented by January 2019.

### **Managed Long Term Care Services and Supports**

Public Act 107 of 2017 (the fiscal year 2018 Appropriations Act) directed the Department to "explore the implementation of a managed care long-term support service" by July 1, 2018. Since the previous MCAC meeting held on August 30, 2017, MDHHS has received funding from the Health Endowment Fund that will allow the Department to partner with contracted entities to continue to take the required steps to explore the many potential options for moving to a managed long term care system. Currently, two elements of Michigan's \$2.6 billion long term care programs (State Plan Personal Care and many nursing facility beneficiaries) have no

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system for managed care in place. MDHHS plans to begin the first phase of the stakeholder engagement process in December 2017, which will consist of conducting focus groups and interviews with stakeholders.

### **Policy Updates**

A policy bulletin handout was distributed, and several items were discussed.

### **MCAC Leadership**

Robin Reynolds announced that she will be stepping down as chair of the MCAC at the end of 2017, and Emily Schwarzkopf was nominated and confirmed as the new chairperson.

**4:30 – Adjourn**