



**Michigan Department of Health and Human Services**  
Medical Services Administration

**Medical Care Advisory Council**

Meeting Minutes

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**Date:** Wednesday, February 26, 2020  
**Time:** 1:00 p.m. – 4:30 p.m.  
**Where:** Conference Call Only

**Attendees:** **Council Members:** Amber Bellazaire, Alan Bolter, Renee Edmondson (for Deb Brinson), Barry Cargill, Farah Jalloul, Jason Jorkasky, Mark Klammer, Jim Milanowski, Marion Owen, Dominick Pallone, Kristin Reese, Melissa Samuel, Robert Sheehan, April Stopczynski, Jeff Towns, Linda Vail, Dawne Velianoff, Warren White, Amy Zaagman, Rebecca Blake

**Staff:** Kate Massey, Brian Keisling, Jackie Prokop, Erin Emerson, Phil Kurdunowicz, Pam Diebolt, Chris George, Farah Hanley, Marie LaPres, Steven Prichard, Nicole Hudson, Lindsay Tyler, Katie Commey, Cindy Linn

**Other Attendees:** Linda Jordan, Salli Pung, Tiffany Stone, Randy Walainis, Pat Anderson

**Welcome, Introduction, Announcements**

Bill Mayer opened the meeting and introductions were made.

**Budget Update**

**FY21 Budget Update**

Farah Hanley provided an overview of the governor's Executive Budget recommendation for state fiscal year (FY) 2021. The total state budget for all departments is \$11 billion general fund (GF), which includes a \$5 billion GF appropriation for the Michigan Department of Health and Human Services (MDHHS). The total FY21 budget for MDHHS including all sources of revenue is \$27 billion. The GF allocation for MDHHS represents a \$392 million increase from FY20, of which 95% of this increase will be utilized to maintain current programs at existing levels. Requests for new investments included in the Executive Budget Recommendation include:

- \$18 million GF for Healthy Moms, Healthy Babies, Healthy Families initiative to increase qualifying income limit to 200% of the federal poverty level (FPL), increase home visiting access by more than 1,000, expand post-partum coverage from 60 days to 12 months, and expand access to behavioral health coverage.
- \$7.1 million GF to build statewide infrastructure for statewide determinants of health.
- \$3 million to support staffing for behavioral health redesign.
- \$5 million to support 63 staff across four state psychiatric hospitals.

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- \$5 million to support local community mental health services programs (CMHSPs).
- \$8.5 million for long-term-care support services and independent options counseling.
- \$3.1 million for a 25% rate increase for Medicaid Private Duty Nursing services.
- \$2.5 million for the Medicaid Transformation Office to explore policy initiatives designed to improve quality of care and achieve long-term cost savings.
- \$2 million for free dental oral health screenings for uninsured children entering Kindergarten.

In addition, several one-time investments were discussed, including:

- \$10 million for opioid crisis response.
- \$21 million for a 5-year MIDOCS initiative.
- \$10 million for a lead prevention fund.

Several proposed reductions totaling \$134 million were also included in the Executive Budget Recommendation. Ms. Hanley indicated that a list of specific reductions related to MDHHS programs can be distributed on request. In response to an attendee's concern regarding apparent budget cuts, Ms. Hanley clarified that the Governor's recommended funding levels for adult Home Help Services reflect anticipated spending levels based on projected caseload.

Bill Mayer suggested drafting a letter on behalf of the Medical Care Advisory Council (MCAC) to advocate for the governor's budget priorities. The proposed letter was discussed, and the members of the MCAC agreed to support the effort.

### **Healthy Michigan Plan (HMP)**

The governor submitted a request to the courts to pause the HMP work requirements, which has not been ruled on at this time. As a result, the work requirements for HMP beneficiaries remain in place as of February 26, 2020, and MDHHS staff requested assistance from attendees to encourage beneficiaries to report work or other qualifying activities. On March 10, 2020, MDHHS plans to run a report in the MI Bridges system to identify HMP beneficiaries subject to the work requirements who did not report work or other activities in the month of January. **NOTE:** Following the meeting, on March 4, 2020, MDHHS stopped implementation of work requirements pursuant to a court order from the United States District Court for the District of Columbia in *Young et al. v. Azar et al.*

### **Behavioral Health Integrations Update**

A PowerPoint Presentation titled "Michigan's Public Behavioral Health System: Proposed New Approach" was shared with attendees, and MDHHS staff and meeting attendees discussed the issue at length. Additional information about the future of integrated behavioral health and physical health care is also available on the MDHHS website at [www.michigan.gov/futureofbehavioralhealth](http://www.michigan.gov/futureofbehavioralhealth).

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### **Social Determinants of Health**

MDHHS staff provided an overview of an initiative by the Department to address social determinants of health among Medicaid beneficiaries, with an emphasis on food and housing assistance. While the exact focus of the Department's strategy to address social determinants of health is subject to evolve based on feedback received throughout the process, the initiative is based on three guiding pillars:

- realigning policies, programs and resources to improve equity and address community-directed needs;
- reduce barriers to economic mobility; and
- support robust community continuums of care.

Each of the three pillars were discussed at length. In response to a request for additional information about the MDHHS social determinants of health strategy and Community Health Innovation Regions (CHIRs), Kate Massey indicated that the Department is still evaluating the outcomes of the CHIR initiative, but will share the final evaluation report with the MCAC when it is complete.

### **Flint Waiver Renewal**

Erin Emerson shared that the current Waiver for People Impacted by Flint Water is set to expire on February 28, 2021, and that MDHHS is working to submit a renewal application to CMS to request a 10-year extension. While CMS typically requires that the renewal application be submitted at least one year in advance of the expiration of the current waiver, MDHHS has been granted a 60-day extension for the application deadline in order to allow sufficient time to receive public comment. As part of the public comment process, a public hearing was held in Flint on February 25, 2020 where generally positive feedback was received. MDHHS plans to continue to request renewal of the Flint Waiver until such a time as no individual meets the eligibility requirements. A copy of the Flint Waiver renewal application is available on the MDHHS website at [www.michigan.gov/mdhhs](http://www.michigan.gov/mdhhs) >> Inside MDHHS >> Budget & Finance >> Medicaid Waiver & State Plan Amendment Notification.

### **General Updates**

#### **MI Health Link**

Brian Barrie shared that the MI Health Link demonstration for individuals who are dually eligible for Medicare and Medicaid, is currently set to expire on December 31, 2020. MDHHS has submitted an application for renewal of MI Health Link to CMS, which includes requests for several program enhancements in the areas of enrollment, coordination of care, data collection and rate-setting, and administration and compliance. MDHHS staff are working to address comments received from CMS, and plan to begin outreach to MI Health Link stakeholders in March 2020 to share the results of discussions with CMS and solicit stakeholder input on potential changes to the demonstration extension application. In response to an inquiry, MDHHS staff clarified that the Department is not requesting a geographic expansion of the

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MI Health Link demonstration at this time. MDHHS staff and meeting attendees continued to discuss this issue at length.

### **Alternative Payment Models Handout**

MDHHS staff shared an update on the Department's work in moving Medicaid Health Plans (MHPs) away from Fee-for-Service (FFS) and towards Alternative Payment Models (APMs) in contracting with providers. This initiative has been in development since the revision of the MHP contracts beginning in 2016, with the overall goal of improving quality while reducing costs. A PowerPoint presentation with information on this project was distributed to meeting attendees, and the document was discussed.

### **Policy Updates**

A policy update handout was distributed and the following items were discussed:

- Proposed Policy 1927-BHDDA - §1915(i) State Plan Home and Community-Based Services
- Proposed Policy 1928-BHDDA - §1915(c) Renewal Applications for the Children's Waiver Program (CWP), the Habilitation Supports Waiver (HSW), and the Waiver for Children with Serious Emotional Disturbances (SEDW)

### **Future Agenda Items**

Bill Mayer invited meeting attendees to forward potential agenda items for discussion at the next scheduled MCAC meeting. In response, a meeting attendee requested that MDHHS explore options for presenting meeting materials electronically for those participating in the meeting remotely (i.e., WebX/Skype/Microsoft Teams). MDHHS staff indicated they would look into the issue.

In closing, Dr. Mayer provided a review of outstanding items that were discussed and in need of follow-up, including:

- Draft letter of support for the Executive Budget Recommendation on behalf of the MCAC;
- Sharing of supplemental materials on the Department's social determinants of health initiative as they become available;
- Request to share summary of progress made in establishing APMs in Michigan; and
- Continue to discuss potential for WebX/Skype/Microsoft Teams meetings.