

ALABAMA MEDICAID AGENCY

Medical Care Advisory Committee

MINUTES

March 14, 2019

Present

Commissioner Stephanie McGee Azar
Jeff Arrington
Kim Boswell
Kim Black
Conitha King
Lisa Alford
Barry Cambron
Jim Carnes
Melanie Cleveland
Sarah Parker
Gretel Felton
Geron Gadd
Kathy Hall
Scott Harris
Nate Horsley
Beth Huckabee
Stephanie Lindsay

Katrina Magdon
Robert Moon, MD
Drew Nelson
Kelli Newman
Flake Oakley
Ozenia Patterson
Marsha Raulerson, MD
Danny Rush, DMD
Annie Smith
Johnathan Sorter, Pharm. D
Jean Stone
Ginger Wettingfeld
Kelly Walters
Presley Redman
Rachel Muro
Christy DeGraffenried
Marie Dean

Call to Order/ Opening Remarks at 2:00pm:

Commissioner Stephanie McGee Azar welcomed everyone to the MCAC meeting and opened with introductions. She began by sharing that for FY20 Medicaid requested \$715m at the recent Budget Hearing, \$40m less than FY19. Without the aid of BP dollars and the ability to carry forward revenue from FY19's budget, Medicaid's real budget need is \$821m; a budget number that the Commissioner keeps the Legislators aware of.

Alabama Coordinated Health Networks (ACHNs)

Dr. Robert Moon began by sharing that Medicaid is moving toward the Alabama Coordinated Health Networks (ACHN). A statewide tier coordination program set up to provide a single care coordination delivery system combining Health Homes, Maternity Program and Plan First provided by regional Primary Care Case Management Entities (PCCM-Es); with other Medicaid programs being included in the future. A Request for Proposal (RFP) was released a few months ago and Dr. Moon was happy to share that Medicaid has received at least one response in each of the seven regions, and multiple RFPs in some areas. All of the RFPs are being reviewed and awards will be posted by April 17th. After the awards are made, Medicaid will be

working with the organizations that were awarded to ensure that they are ready to go live October 1, 2019. During the first month, all activities will be light to give time for the care coordinators to assimilate and be prepared to go full strength in November. In preparation for this, we are currently doing public outreach to educate recipients on how the new ACHN will work and how it will affect their healthcare. During the month of January Medicaid conducted outreach presentations to inform and educate Primary Care providers in eight different cities across Alabama. In April, Managed Care staff will visit four locations across the state delivering presentations to Deliverly Healthcare Providers. There was a short discussion concerning how many Medicaid recipients are currently receiving care coordination services and how the new ACHN eligibility qualifiers will in effect, open up more opportunity for care.

Beneficiary Services Eligibility Update

Gretel Felton provided the new *Medicaid Income Limits for 2019* and a *State-Specific Medicaid MAGI and CHIP application processing Time Data* chart. The chart showed that MAGI and CHIP applications are to be processed within seven days and that Alabama was successful in achieving this process 80% to 100% of the time. There was some questions/discussion about when eligibility would begin after an application had been approved. The Auburn-Opelika District Office will be moving to a new location in May. In conjunction with other agencies such as DHR, Dept. of Labor and the 211 System and Early Headstart, Medicaid continues to work closely on project planning with CMS for the Community Engagement Waiver (Work Requirement). Due to the complexity of this waiver, it is unclear at this time when the waiver will be approved or denied. The next item covered was the decommissioning of the AMES System and transitioning into the CARES system. Currently both systems are being utilized but in the very near future all eligibility programs will be housed in CARES making it more efficient to locate a recipient's coverage information. During the transition period, Medicaid will be utilizing *Medicaid Eligibility Linking Initiative* (MELI) as a tool to locate individuals who are transitioning out of one program and becoming active/eligible in another program (which would change their Medicaid number). Providers and recipients will be properly notified when pre-existing Medicaid numbers are changed into the new format (530#).

Program Administration

Ginger Wettingfeld stated that ICN has been live since October 1, 2018 and is going well. ICN has done some great work with claims information and identifying individuals that would benefit from Medical Case Management. Recipients have been pleased. Citizens Advisory Committee is active and meeting with no current issues. The one difficult part has been the data related to the MMIS and eligibility. This is a new program and we are working through the data challenges.

Dr. Kelli Newman discussed the cumulative opioid edits to be implemented later this spring.

Melanie Cleveland, shared information concerning various publications located on the Medicaid website, Annual Report (FY2017) and the Provider Insider. These resources provide valuable information for both recipients and providers. Additionally, a video presentation is posted on Medicaid's website which covers all of the PCPs meetings that were held in January in all seven regions of the state.

Adjournment

There being no further business to come before the Committee, the meeting was adjourned at 3:20 pm.



Stephanie McGee Azar
Commissioner




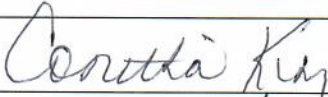

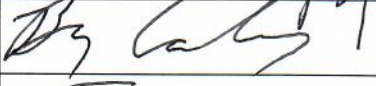

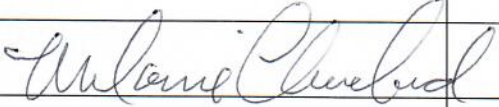



Kim Black
Recording Secretary

MEDICAL CARE ADVISORY COMMITTEE (MCAC)

Commissioner's Board Room

March 14, 2019

<u>MEMBER</u>	<u>REPRESENTATIVE</u> <u>(If Member Is Absent)</u>	<u>EMAIL ADDRESS</u>
Stephanie Azar, Commissioner		
Jeff Arrington	participated by phone	
Lynn Beshear		
Kim Black		
William R. Blythe, MD		
Stephanie R. Bryan		
Nancy Buckner		conitha.king@dhs.alabama.gov
Jane Elizabeth Burdeshaw		Isnatford@rehab.alabama.gov
Barry Cambron		
Jim Carnes		jiu@alarise.org
Beverly Churchwell		
Melanie Cleveland		AMA
Anne-Laura Cook, MD		
Todd Cotton		
LaTonda Cunningham		
Cynthia Dobyne		
Gretel Felton		

<u>MEMBER</u>	<u>REPRESENTATIVE</u> <u>(If Member Is Absent)</u>	<u>EMAIL ADDRESS</u>
Mary Finch	Sharon Parker	
Nina Ford, MD		
Geron Gadd	M Geron Gadd	maggadd@adap.va.edu
Kathy Hall	SH	
Scott Harris	SH	Scott.harris@ ^{adpk.} state.al.us
Nate Horsley		nhorsley@web.mc.edu
Danne Howard		
Beth Huckabee	Beth Huckabee	
Jerri Jackson		
Mark Jackson		
Louise Jones		
Bob Kurtts		
Linda Lackey		
Linda Lee		
Sylisa Lee-Jackson		
Stephanie Lindsay	SL	
Roosevelt McCorvey, MD		
Paul McWhorter		
Katrina Magdon	Katrina C Magdon	kmagdon@anha.org
Carolyn Miller		

Lynn Bestear will be sending Kim Buswell in her stead

Linda Lee will not be able to come

<u>MEMBER</u>	<u>REPRESENTATIVE</u> (If Member Is Absent)	<u>EMAIL ADDRESS</u>
Robert Moon, MD	<i>RM</i>	
Drew Nelson	<i>[Signature]</i>	
Kelli Newman	<i>[Signature]</i>	
Flake Oakley	<i>[Signature]</i> <i>Flake</i>	
Sharon Parker		
Ozenia Patterson	<i>[Signature]</i>	
Marsha Raulerson, MD	<i>Marsha Raulerson</i>	mraulerson@aap.net
Timikel Robinson		
Danny Rush, DMD	<i>[Signature]</i>	AMFA
Annie Smith	<i>Annie Smith</i>	
Johnathan Sorter, Pharm.D.	<i>[Signature]</i>	jkSorter@gmail.com
Jean Stone	<i>Jean Stone</i> ADSS	Jean.Stone@adss.alabama.gov
Mason Tanaka		
Hope Upshaw		
Veronica Wagner		
Ginger Wettingfeld	<i>Ginger Wettingfeld</i>	
John Ziegler		
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Christy deGraffenried	ANHA	Christy@anha.org
Marie Dean		

MEDICAL CARE ADVISORY COMMITTEE MEETING

March 14, 2019

Medicaid Boardroom

2:00 P.M.

A G E N D A

Opening Remarks: *Commissioner Stephanie McGee Azar*

Alabama Coordinated Health Network (ACHN) Update – *Dr. Robert Moon*

Beneficiary Services Eligibility Update – *Gretel Felton*

Program Administration

ICN Update – *Ginger Wettingfeld*

Pharmacy Update – *Kelli Newman*

Communication Update – *Melanie Cleveland*

Open Forum

Closing Remarks

Medicaid Income Limits for 2019

To qualify for Medicaid through SSI the income limit for an aged, blind or disabled individual cannot exceed \$791 per month or \$1,177 for a couple. In addition, resource limits apply. For an individual the resources cannot exceed \$2,000 per month or \$3,000 per month for a couple. Some examples of resources are: cash, money in checking and savings accounts, loans, promissory notes, stocks, bonds, time deposits (certificates of deposit, annuities, etc), mutual funds, mineral and timber rights, real estate, etc. Individuals must apply with the Social Security Administration for the SSI (Supplemental Security Income) Program.

Nursing Home (Institutionalized) Medicaid:

The Medicaid income limit for individuals eligible for the Nursing Home (institutional) program is \$2,313 per month. The resource limit is \$2,000 as of the first day of the month.

Home and Community Based Waivers:

The income limits for these waivers are as follows:

Elderly and Disabled Waiver is \$2,313 per month.

Independent Living Waiver is \$2,313 per month.

Persons with Intellectual Disabilities Waiver is \$2,313 per month

Technology Assisted Waiver for Adults is \$2,313 per month.

The resource limit for these waivers is \$2,000 per month.

Medicare Savings Programs:

QMB or Qualified Medicare Beneficiary (effective 02/2019):

Income cannot exceed \$1,061 per month for an individual.

Income cannot exceed \$1,430 per month for a couple.

SLMB or Specified Low Income Medicare Beneficiary (effective 02/2019):

Income cannot exceed \$1,269 per month for an individual.

Income cannot exceed \$1,711 per month for a couple.

QI-1 or Qualified Individual (effective 02/2019):

Income cannot exceed \$1,426 per month for an individual.

Income cannot exceed \$1,923 per month for a couple.

NOTE: The resource limits do not apply for these Medicare savings programs. If both spouses are on Medicare, their combined income cannot exceed the couple income limit. If only one spouse has Medicare, then the Medicare spouse who is applying can have income of no more than the individual limit and the income of both spouses combined can be no more than the couple limit.

Modified Adjusted Gross Income (MAGI) (effective 2/2019)

Plan First/Pregnant Women/Children (Ages 0-18):

Income after deductions cannot exceed \$1,520 per month for a family of 1

Income after deductions cannot exceed \$2,058 per month for a family of 2

Income after deductions cannot exceed \$2,596 per month for a family of 3

Income after deductions cannot exceed \$3,133 per month for a family of 4

Parent and Caretaker Relatives:

Income after deductions cannot exceed \$188 per month for a family of 1

Income after deductions cannot exceed \$254 per month for a family of 2

Income after deductions cannot exceed \$320 per month for a family of 3

Income after deductions cannot exceed \$387 per month for a family of 4

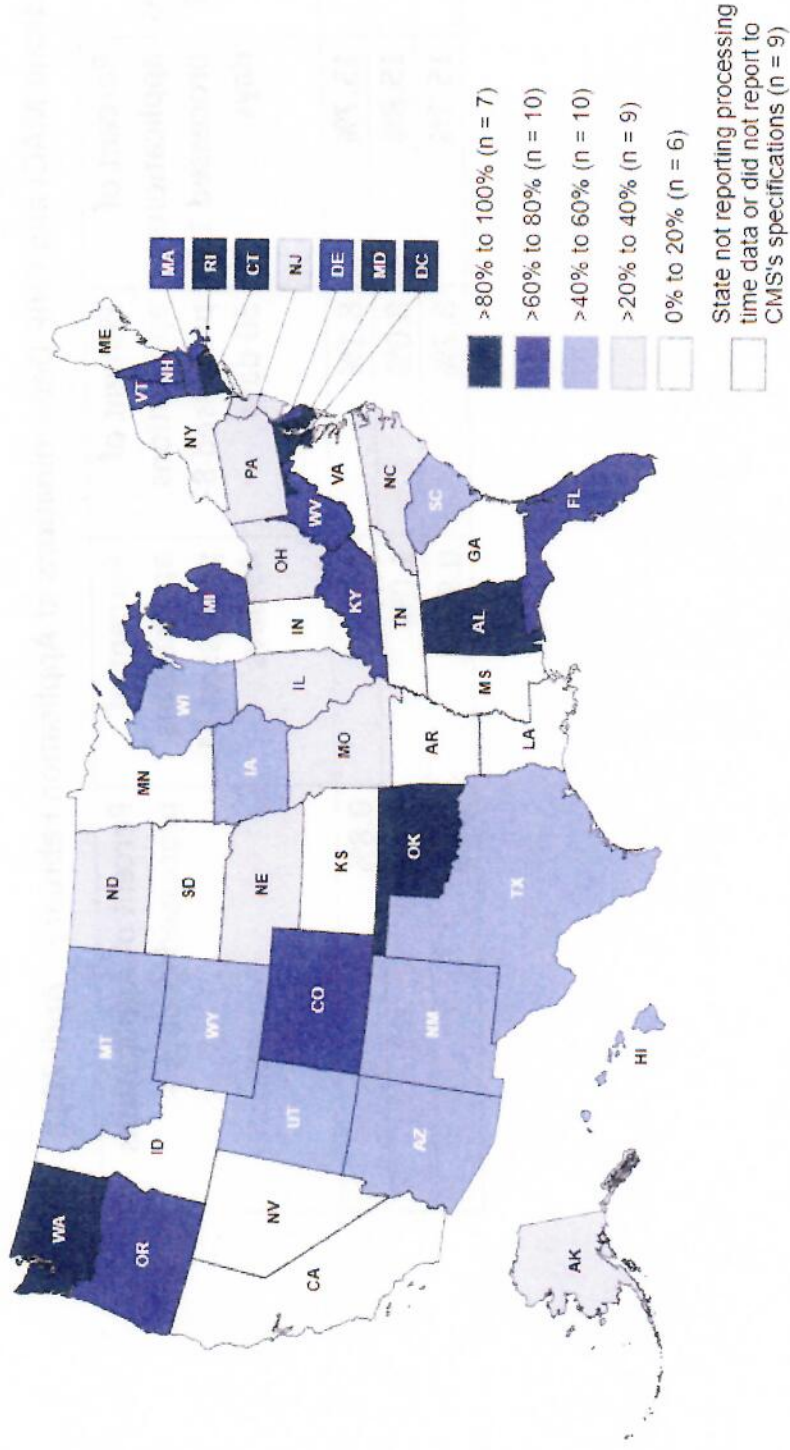
(Please see the eligibility requirements for Pregnant Women, Plan First, Children and Parents and Other Caretaker Relatives programs (formerly SOBRA and MLIF) Pregnant Women/Children/Parents and Caretaker Relatives) handout for family sizes over 4.)

***NOTE: The amount above is based on the 146% Federal Poverty Level (The amount includes the 5% FPL disregard)**

IV. State-Specific Medicaid MAGI and CHIP Application Processing Time Data

Although variation in processing times exist across states, among the 42 states that reported Medicaid MAGI and CHIP application processing time data for the February through April 2018 period, states conducted nearly 47 percent of MAGI determinations at applications in less than seven days. Further, in 17 states, more than 60 percent of MAGI determinations conducted for this period were made in under seven days.

Chart. Percent of Medicaid MAGI and CHIP Applications Processed within 7 days, by State, for February – April 2018²



States that did not report data or data that aligned with CMS's specifications include: AR, CA, ID, LA, MN, NV, NY, SD, TN.

² Based on data from the 42 states that reported Medicaid MAGI and CHIP application processing time data for February – April 2018.

Alabama Medicaid MAGI and CHIP Determinations at Application February – April 2018

Percent of determinations processed <24 hours	Percent of applications processed 1-7 days	Percent of applications processed 8-30 days	Percent of applications processed 31-45 days	Percent of Applications processed 45 days +
74.4%	15.7%	8.1%	1.0%	0.8%
74.8%	15.8%	8.0%	1.0%	0.5%
75.0%	15.3%	8.2%	0.8%	0.7%