



**Medicaid and Exchange Advisory Committee (MEAC)
Meeting Minutes for April 22, 2024**

Board Members Present:

	Neil Allen	✓	Jessa Barnard		Kelly Dougherty
✓	Lisa Draper	✓	Mike Fisher	✓	Devon Green
✓	Cory Gustafson	✓	Dale Hackett	✓	Rebecca Heintz
✓	Sharon Henault		Jessica Jacobs	✓	Joan Lavoie
✓	Mary Kate Mohlman	✓	Kirsten Murphy	✓	Wendy Rogers
	Laurel Sanborn	✓	Stacy Weinberger		

DVHA Staff Present:

	Zachary Goss	✓	Adaline Strumolo	✓	Sandi Hoffman
✓	Alex McCracken	✓	Jennifer Rotblatt		Alicia Cooper
✓	Sven Lindholm	✓	Ashley Berliner	✓	Christine Ryan
	Stephanie Barrett	✓	Max Croneberger		

SOV/Other Attendees:

✓	Monica Ogelby		Megan Tierney-Ward		Betty Morse
	Pat Jones	✓	Nicole DiStasio	✓	Tim Walker
	Susan Aranoff	✓	Kathy Walker		Michael Miller
	Timothy McSherry		Rebecca Copans	✓	Scott Cerreta
	Vicki Jessup		Tom Perkins	✓	Wilda White

Topic & Presenter	Discussion	Action
Meeting Materials	Posted to https://dvha.vermont.gov/advisory-boards/medicaid-	

	and-exchange-advisory-committee/agendas-and-materials 4.22.24-MEAC-Agenda.pdf MEAC-PPT-4.22.24.pdf	
1. Call to Order Mary Kate Mohlman & Sharon Henault, Co-Chairs	Meeting was convened at 10:03 AM.	
2. Roll Call Establish Quorum Approve Minutes Jennifer Rotblatt, Administrative Services Coordinator	Motion: Approve the March 25, 2024 meeting minutes as presented. Minutes approved.	Motion: Lisa Draper Second: Dale Hackett Abstain: Wendy Rogers, Rebecca Heintz Minutes Approved
3. Global Commitment Waiver Open Forum Ashley Berliner, Healthcare Policy Director	<ul style="list-style-type: none"> • Time was provided for public comment on the Global Commitment Demonstration Waiver. • Kirsten Murphy commented that the Vermont Developmental Disabilities Council is impressed by the amendments on the waiver, particularly on the expansion for housing for the homeless. She stated that 18 months ago, the Developmental Disabilities Councils across the country were asked by federal agencies to proactively engage with the home and community-based services population. • Discussion ensued on the corrective action plans and the communication around work being done on them. The request was made for the state of Vermont to ensure that beneficiaries can see the corrective action plans and follow the timeline. 	
4. Weight Loss Drug Coverage Christine Ryan, Director of Clinical Operations	<ul style="list-style-type: none"> • Christine Ryan explained that an internal work group was assembled to best understand weight loss medications for Vermont, with a focus on developing a cost-benefit analysis of treatment options. The purpose of the team in this matter is to identify fiscally responsible best practices for treating obesity. 	

- The goal is to pave the way for personalized, sustainable solutions in obesity management.
- The team is currently evaluating national data on obesity costs and examining the prevalence of obesity. The team is also determining the financial impact of obesity on the state of Vermont, of currently covered treatment options, and implications of providing coverage for currently non-covered treatments.
- Data was provided regarding obesity and overweight percentages for Vermont by year and the costs incurred. Obese individuals had a 42% increase in medical costs.
- The team is identifying currently covered treatments for obesity, including Department of Health programs, as well as identifying what is not currently covered in regard to medications and assistance with lifestyle changes. The costs and benefits of the latter are currently being evaluated.
- DVHA currently supports coverage for weight loss medications in a clinically appropriate and fiscally responsible manner.
- A question about DVHA's approach was brought up, as well as requests for a progress update.
- The Vermont Medical Society has some physicians who are very passionate about this issue. Members feel it is important to think about it in an equity light. Commercial payers cover many current medications while Medicaid doesn't. These are not cosmetic medications, and we must consider medications and lifestyle interventions together.
- It is important that we create a foundation for looking at these costs specific to Vermont. We are looking at both obese and overweight individuals. There will be a more comprehensive document for weight loss medication and lifestyle interventions that reflects the status of Vermont Medicaid.
- Kirsten brought up that this is a significant problem for the disability community, encouraging an approach using an equity

	<p>lens. When thinking about the infrastructure around lifestyle changes, consider access to that for people with disabilities.</p> <ul style="list-style-type: none"> • Work is being put in on all variables, including cost changes and generic drugs. 	
<p>5. Co-Chair Role and Nominations</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> • Discussion on the chair roles and what the barriers are for members to volunteer for it. • No nominations were made. The chairs will follow-up with individual outreach. 	
<p>6. MEAC Budget Letter Subcommittee</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> • A call was made for individuals to join the MEAC Budget Recommendation Letter Subcommittee. Kirsten Murphy, Dale Hackett, Devon Green, Jessa Barnard, Mike Fisher, and Sharon Henault volunteered to join. 	
<p>7. Medicaid Renewal Status Update</p> <p>Adaline Strumolo, Acting Commissioner</p>	<ul style="list-style-type: none"> • Addie stated that the unwind period is wrapping up. Operations that will stay in place after it finishes include the newly implemented communication channels (special envelopes, texting, emails, robocalls). The special notice stuffer will stay in the Renewal form, especially for MABD. We will overhaul the website to reflect the post-unwind period and are currently going through a comprehensive review of our notices. • Addie noted that a new set of dashboards is being developed including an ongoing renewals dashboard based on the Unwind dashboards. • MEAC member stated that the DVHA website should be reviewed for accessibility. • Discussion on utilizing community partnerships to help people update their address. Suggestion made to create postcards that members could complete at their provider or other community service office. 	<p>Medicaid Renewals Restart Department of Vermont Health Access</p> <p>Renewal Dashboards Department of Vermont Health Access</p>
<p>8. Commissioner's Office Update</p>	<ul style="list-style-type: none"> • Regarding the Change Healthcare issue, most pharmacy functionality is back online and claims are being paid. Recoupment 	

<p>Adaline Strumolo, Acting Commissioner</p>	<p>is also ongoing for advance payments during the outage. However, the non-pharmacy restoration timeframe is different. This is the last week that advance payments are being offered to non-pharmacy providers.</p> <ul style="list-style-type: none"> • The Dr. Dynasaur premium invoicing suspension is continuing. DVHA suggested legislative language to confirm there will be no outstanding balances when premium invoicing is reinstated. • The Medicaid Policy Unit is now in the central office of AHS and DVHA will continue to work with them. Some policy positions remain at DVHA, specifically those who work on eligibility. 	
<p>9. Public Comment</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> • None. 	
<p>10. Final Committee Discussion</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> • A request was made to review transportation, legislative outcomes, and a presentation on the upcoming budget. 	<p>MEAC member application: Advisory Committee Members Department of Vermont Health Access</p>
<p>11. Adjourn</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<p>Meeting adjourned at 11:51 PM</p> <p>Next meeting May 20, 2024.</p>	