



**Medicaid and Exchange Advisory Committee (MEAC)
Meeting Minutes for July 24, 2023**

Board Members Present:

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

DVHA Staff Present:

✓	Zachary Goss	✓	Andrea DeLaBruere	✓	Adaline Strumolo
✓	Sandi Hoffman	✓	Jennifer Rotblatt		Max Croneberger
✓	Sven Lindholm	✓	Ginger Irish	✓	Katie Moino
✓	Stephanie Barrett	✓	Daniel Fay	✓	Brittany Richardson

SOV/Other Attendees:

✓	Megan Tierney-Ward		Betty Morse		Nicole DiStasio
	Dillon Burns	✓	Keith Brunner		Vicki Jessup
	Susan Aranoff		Wren Lansky		Rebecca Copans
	Anders Aughey		Kathy Walker		Sara Teachout
✓	Angela Smith-Dieng	✓	Jaime Rainville		Mark Humowiecki
	Timothy McSherry		Riz Carthins	✓	Scott Cerreta

Topic & Presenter	Discussion	Action
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Meeting Materials	<p>Posted to https://dvha.vermont.gov/advisory-boards/medicaid-and-exchange-advisory-committee/agendas-and-materials</p> <p>MEAC_Agenda_7.24.23.pdf MEAC_PPT_7.24.23.pdf</p>	
<p>1. Call to Order</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<p>Meeting was convened at 10:03 AM by Mary Kate Mohlman.</p>	
<p>2. Roll Call Establish Quorum Approve Minutes</p> <p>Zack Goss, Health Care Training and Communication Manager</p>	<p>Zack introduced new MEAC members – Neil Allen, Wendy Rogers, Stacy Weinberger, as well as Laurel Sanborn who was unable to attend today.</p> <p>Roll Call was completed by Zack Goss.</p> <p>June 24, 2023 Meeting Minutes were approved as written.</p>	<p>Motion to approve: Mike Seconded: Jason Abstain: Mike, Joan Approved</p>
<p>3. DAIL Age Strong Vermont Plan</p> <p>Angela Smith-Dieng, Adult Services Division Director, Disabilities, Aging, and Independent Living (DAIL)</p>	<ul style="list-style-type: none"> • Angela introduced Age Strong VT which comprises Vermont’s work to develop a multisector plan on aging (MPA). • This originated with the Older Vermonter Act (Act 156) passed in September 2020. She noted that ageism is negatively impacting VT’s population and an MPA can help drive cultural change. • A 2023 Vermonter poll showed that 64% responded NO when asked if Vermont has the resources to address the needs of the older population as it continues to increase. When asked how important it is for Vermont’s elected officials to prioritize and invest in an MPS, 81% said very or somewhat important. • Since the passing of Act 156, DAIL has done the following. <ul style="list-style-type: none"> ○ Spring 2021: Submitted a process proposal for the development of the plan to legislature. ○ Summer 2021: Researched other state’s processes and plans and analyzed resource needs. 	<p>Age Strong VT Steering Committee: https://dail.vermont.gov/sites/dail/files/documents/VAPAW_Advisory_Committee_Member_List_10-21-21.pdf</p> <p>Contact: agestrongvt@vermont.gov</p>

	<ul style="list-style-type: none"> ○ Fall 2021: Established an advisory committee including older adults and caregivers. ○ Spring 2022: Hired a .5FTE project coordinator and .5FTE public health data analyst. ○ Spring 2022 – Winter 2023: Conducted a baseline assessment through a survey, listening sessions, expert presentations, and data gathering. ○ Ongoing coordination with regional MPA planning effort in one county; example for others ○ 2022-2023: Participated in a 10-state MPA learning collaborative ○ Developed strategic communications – branding, promotion, polling ○ Working groups drafted objectives and strategies within 8 principle areas. ● Health and Wellness Principle: <ul style="list-style-type: none"> ○ Older Vermonters should have the opportunity to receive, without discrimination, optimal physical, dental, mental, emotional, and spiritual health through the end of their lives. Holistic options for health, exercise, counseling, and good nutrition should be both affordable and accessible. Access to coordinated, competent, and high-quality care should be provided at all levels and in all settings. ● Objectives <ol style="list-style-type: none"> 1. By 2033, increase physical activity among older adults age 65 and older to meet or exceed the Healthy Vermonters goal. 2. By 2033, reduce household food insecurity and hunger to 5% (from 9% in 2020). 3. By 2033, reduce to 117 per 100,000 Vermont adults age 65 and older the fall-related death rate (from 156 per 100,000 in 2020). 	
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	<p>4. By 2033, decrease to 11% (from 13% in 2021) adults age 70 and older who have 4 or more comorbidities.</p> <p>5. By 2033, decrease to 21 (from 26.4 in 2021) the rate of suicide deaths per 100,000 male Vermonters age 65 and older.</p> <ul style="list-style-type: none"> • Steering Committee is drafting the full plan this summer using subcommittees' work and Advisory Committee feedback and engaging with state leadership to prepare for public launch event in the fall. • They will continue to gather input/feedback, including development of an evaluation plan with measurable outcomes. • Plan will be launched and implemented in 2024. • This plan is the first of its kind in Vermont and will be a long-term value add for the state by: <ul style="list-style-type: none"> ○ Expanding and strengthening partnerships across government, business, community ○ Leveraging existing resources to meet key goals ○ Equity to be considered across all strategies ○ Communicating in a whole new way about aging – energy, opportunity, possibility – addressing ageism, increasing public awareness/education • Discussions ensued. • Angela stated that she would welcome MEAC's feedback at the draft stage, as well as now as the draft is being made to reach out with any feedback. 	
<p>4.FY24 Budget</p> <p>Stephanie Barrett, Chief Financial Officer</p>	<ul style="list-style-type: none"> • Stephanie explained that an appropriation is a law that provides an agency spending authority and that appropriations are definite in amount, fund, use, time, etc. • She explained that there are constraints and challenges to the budget process such as the Governor's priorities and federal requirements. 	

	<ul style="list-style-type: none"> • Budgets are proposed about a year before they are implemented and priorities/needs/regulations can change so mid-year BAA adjustments can be requested. • She presented the budget timeline which begins in July each year with the new revenue forecast progressing through departments, the Governor, and Legislature to the end of the fiscal year in June. • DVHA’s budget has two major components: <ul style="list-style-type: none"> ○ Administration: salaries & benefits, contracts, operations ○ Program: all other payments, primarily services across three budget bill sections: Global Commitment (GC), State-Only, and Non-Waiver. • Stephanie reviewed the major FY24 budget changes and FY25 Budget pressures. • Stephanie showed the average caseload for FY23 by major Medicaid eligibility groups and coverage. She explained that the gray line on the back of the slide represents the case load from 2010-2023. • Stephanie clarified that the federal match changes every federal fiscal year and DVHA accounts for it quarterly. • Question on the more expensive member groups which Stephanie noted also have a steady caseload. The adult primary group is where it is anticipated to see the biggest reduction in caseload with the Medicaid Renewal process. 	
<p>5. Medicaid Renewal Status Update</p> <p>Addie Strumolo, Deputy Commissioner</p>	<p>Addie started by explaining changes that were made due to the flooding. When the flood hit on July 10, DVHA took immediate steps to suspend Medicaid closures in July, giving members who were unable to respond to their renewal an extra month. Up to 6,000 could be affected by the pause.</p> <ul style="list-style-type: none"> • She noted that there is a process for anyone who discovers they don’t have Medicaid coverage at the point of care which allows them to be quickly reinstated. 	<p>Medicaid and the End of the COVID-19 Public Health Emergency webpage: https://dvha.vermont.gov/unwinding</p> <p>Medicaid Renewal Dashboard https://dvha.vermont.gov/unwi</p>

	<ul style="list-style-type: none"> • Addie shared the renewal dashboard which contains two renewal months of data. 13.1% of the Medicaid population have completed the renewal process. A cumulative overview is in process. • Addie presented a draft breakdown of the current enrollment status of those whose coverage ended May 31, 2023. Data was divided by members who were ineligible and members who did not respond to show how many have since re-enrolled in Medicaid, enrolled in a Qualified Health Plan (QHP), or have unknown coverage status. • A survey was launched to those who did not renew or contact Medicaid; however, it went out days before the flood and will be revisited. • A member asked how the survey was launched and Addie explained it was electronic, going out by email then a follow-up via text. • Zack explained that the survey has to be electronic to accurately gather the data which he noted can be a barrier to those taking it. • Discussion on ways to reach members whose coverage ended with this survey as well as to make sure they know where to go if they don't have coverage, including utilizing social media. 	nding/renewal-dashboard
<p>6. Commissioner's Office Update</p> <p>Andrea DeLaBruere, Commissioner Addie Strumolo, Deputy Commissioner</p>	<ul style="list-style-type: none"> • Commissioner noted that the agency will be taking a whole-agency approach to prioritize in collaboration with the governor's office for the FY25 budget recommendation. • In response to the flooding, DVHA has allowed pharmacies to override claims for early refills to address those whose medications may have been lost. • It was clarified that a prescription is still needed. 	

<p>7. Public Comment</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> • None. 	
<p>8. Final Committee Discussion</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> • Mary Kate noted that MEAC typically has drafted a letter for budget priorities and would like to bring together a sub-committee at September's meeting to draft a letter for committee approval. • Mike stated that he would be willing to discuss Medicare spending plan proposal for the committee at an upcoming meeting. • Sharon shared that the VT State Independent Living council has an emergency plan for people with disabilities that includes getting medication early which can be viewed on the website. 	<p>https://vermontsilc.org/news/accessible-emergency-preparedness-planner-psa/</p>
<p>9. Adjourn</p> <p>Mary Kate Mohlman & Sharon Henault, Co-Chairs</p>	<p>There is no August meeting. Next meeting is September 25, 2023.</p> <p>Meeting adjourned at 11:54 AM.</p>	