



**Medicaid and Exchange Advisory Committee (MEAC)  
Meeting Minutes for February 26, 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
	Alicia Cooper	✓	Jennifer Rotblatt	✓	Max Croneberger
✓	Sven Lindholm		Amy Coonradt		Stacy DeSisto
✓	Stephanie Barrett	✓	Alex McCracken		

**SOV/Other Attendees:**

	Megan Tierney-Ward		Betty Morse		Monica Ogelby
✓	Pat Jones		Wendy Trafton		Faith Skerrit
	Susan Aranoff		Juliet Domb		Michael Miller
✓	Timothy McSherry	✓	Rebecca Copans	✓	Scott Cerreta
	Vicki Jessup		Tom Perkins		

Topic & Presenter	Discussion	Action
Meeting Materials	Posted to <a href="https://dvha.vermont.gov/advisory-boards/medicaid-">https://dvha.vermont.gov/advisory-boards/medicaid-</a>	

	<a href="#">and-exchange-advisory-committee/agendas-and-materials</a> 2.26.24_MEAC_Agenda.pdf MEAC_PPT_2.26.24.pdf	
<b>1. Call to Order</b>  Mary Kate Mohlman & Sharon Henault, Co-Chairs	Meeting was convened at 10:04 AM.	
<b>2. Roll Call</b> <b>Establish Quorum</b> <b>Approve Minutes</b>  Jennifer Rotblatt, Administrative Services Coordinator	Introduction of new member Cory Gustafson who was appointed this month.  <b>Motion:</b> Approve the January 22, 2024 meeting minutes as presented.  Minutes approved.	<b>Motion:</b> Dale Hackett <b>Second:</b> Devon Green <b>Abstain:</b> Kirsten Murphy <b>Minutes Approved</b>
<b>3. AHEAD Model Q&amp;A</b>  Pat Jones, Interim Director of Health Care Reform	<ul style="list-style-type: none"> <li>• A question was raised regarding the hospital global budget and whether this might result in denied care and whether there are protections in place for this.</li> <li>• Pat explained that a goal of the AHEAD Model is to provide necessary care, and to also look at ways to provide care in the best possible setting for Vermonters. The Federal government, who proposed this model, says their hope is for increased investments in primary care through additional funding for Medicare members for primary care as well as holding states accountable for increasing investment in primary care.</li> <li>• There is a real focus in this model on health equity. They are willing to pay more for improvements in disparities in health care.</li> <li>• Monitoring is important to ensure that access remains. The idea is that it provides predictability for hospitals in using their resources.</li> <li>• The application deadline for early adopter states is March 18<sup>th</sup> and it is a competitive process. No more than 8 states or regions of states will be selected to participate in the Model initially. The selections will be announced in May/June 2024.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Vermont has a history of health care reform and this could bring additional Federal funding to ensure adequate resources.</li> <li>• Pat noted that there is no option to extend our current Model after 2025.</li> <li>• The application is high-level, focusing on the capacity for using the AHEAD Model.</li> <li>• AHS wants to make sure this makes sense for Vermont and that there is enough Federal funding.</li> <li>• Federal Medicaid will be focused on developing a Medicaid version of the hospital global budget. This must be in place by the end of 2026.</li> <li>• An individual's coverage will continue to be determined by their insurance plan. The same processes that are in place now regarding denial of care will remain in place.</li> <li>• The monitoring program is important in the AHEAD Model. An eye will be kept on the utilization of services. Input will be sought from consumers.</li> <li>• Vermont is a rapidly aging state. This Model does adjust payments for hospitals recognizing demographics. They will be looking at measures for disparities. For Vermont, we will have to consider measures that are broad enough for the population.</li> </ul>	
<p><b>4.FY25 Budget Presentation</b></p> <p>Stephanie Barrett, Finance Director</p>	<ul style="list-style-type: none"> <li>• Stephanie presented a budget timeline and noted that the current step is in the Feb-May legislative session.</li> <li>• She presented caseload estimates for FY25 which shows the overall picture for adults and children, pharmacy, and premium assistance in DVHA's budget. Last year's estimate was 202,000 members but consensus has lowered to be 196,000 for the current FY24.</li> <li>• After presenting overviews of cost Per Member Per Month (PMPM) estimates, Stephanie stated that budget estimates are generally steady; individual cases can create a skew in small caseload areas.</li> </ul>	

	<ul style="list-style-type: none"> <li>• A psychiatric residential facility for treating youth was discussed and it was noted that DVHA is the payer for that. DVHA is helping the Department of Mental Health (DMH) and Department of Children and Families (DCF) who are responsible for the programmatic piece.</li> <li>• There is a one-time budget expenditure for the Global Payment Pilot which will include early test cases for the 4 to 5 hospitals that will participate.</li> <li>• Stephanie made the caveat that the impact of the redeterminations make the projection of caseloads and PMPM estimates particularly challenging for this current budget cycle. All budget estimates are imperfect, but the margin of error and ensuing budgetary risk is higher than usual.</li> </ul>	
<p><b>5. Medicaid Renewal Status Update</b></p> <p>Adaline Strumolo, Acting Commissioner</p>	<ul style="list-style-type: none"> <li>• The Vermont Medicaid Renewal Dashboards, which are updated each month, were discussed.</li> <li>• There was conversation on the duration of the unwind period. Vermont asked for an extra month to initiate renewals and 3 months to process them due to the flooding last year. It has been determined that another month isn't needed to initiate renewals, and the entire population should be initiated by the end of March. DVHA is seeking clarity on how CMS will represent the duration of the unwind period.</li> <li>• The flexibilities that were previously announced such as using data from 3SquaresVT and the postal service for renewals, will stay in place through the end of the year. DVHA plans to share a comprehensive list regarding this for the next update.</li> <li>• Mike Fisher asked whether there should be a policy discussion regarding the asset test. The current Medicaid for the Aged, Blind, and Disabled (MABD) asset test waiver is specific to renewals and changes of circumstance.</li> </ul>	<p><b>Medicaid Renewals Restart:</b>  <a href="https://dvha.vermont.gov/unwinding">https://dvha.vermont.gov/unwinding</a></p> <p><b>Medicaid Renewal Dashboards</b>  <a href="https://dvha.vermont.gov/unwinding/renewal-dashboard">https://dvha.vermont.gov/unwinding/renewal-dashboard</a></p>

<p><b>6. Commissioner's Office Update</b></p> <p>Adaline Strumolo, Acting Commissioner</p>	<ul style="list-style-type: none"> <li>• We are experiencing a situation with pharmacy benefit manager (PBM) currently, as they had a cyber security issue last week. They responded by cutting off networks to clients. This has led to a disruption in pharmacy claims processing and pharmacy support in Medicaid programs. We have had several communications about this, and we are working with pharmacies across the state. We have workarounds in place while systems are compromised. We are confident that our systems are not compromised on the state's side. We also did workarounds on getting payments out. We do not have a concrete timeline for when this will be resolved.</li> <li>• Please let us know if there are issues getting prescriptions filled.</li> <li>• Legislative work is ongoing. The expansion bill discussed last time has turned into a series of analyses.</li> <li>• DVHA is following benefit mandate bills. These bills have an effective date for 2025; however, the plan design process has finished for 2025, so passed mandates may shift to 2026.</li> <li>• Work was also done with the treasury department on the Baby Bonds bill.</li> </ul>	
<p><b>7. Future Agenda Items Discussion</b></p> <p>Mary Kate Mohlman &amp; Sharon Henault, Co-Chairs</p>	<p>Kirsten</p> <ul style="list-style-type: none"> <li>• Proposed CMS-Medicaid Rule, once CMS has reviewed the received comments.</li> </ul> <p>Sharon</p> <ul style="list-style-type: none"> <li>• Home-Based Community Services (HBCS)</li> <li>• Transportation (NEMT)</li> <li>• Durable Medical Equipment</li> </ul> <p>Dale</p> <ul style="list-style-type: none"> <li>• Medication access changes made last year and as proposed in legislature this year.</li> <li>• Medicaid-Medicare Dual Members</li> </ul> <p>Mike</p> <ul style="list-style-type: none"> <li>• Exchange: Green Mountain Care Board passed an update to their guidance on silver-loading which is going to have substantial</li> </ul>	

	<p>positive impacts on costs.</p> <ul style="list-style-type: none"> <li>• DURB and CURB introduction</li> <li>• 1115 waiver for choices for care <ul style="list-style-type: none"> <li>○ Potential service issue because they are up against agencies with structure whereas individuals on flexible choices are their own employers.</li> <li>○ Review if it a cost savings, as looked at for the original 1115 waiver, and has it reduced the members in nursing homes.</li> <li>○ It was noted there was a DAIL report that covered this.</li> </ul> </li> </ul> <p>Jessa</p> <ul style="list-style-type: none"> <li>• Follow up on access to other services as outlined in the MEAC budget letter submitted to DVHA Nov 2023.</li> </ul>	
<p><b>8. Public Comment</b></p> <p>Mary Kate Mohlman &amp; Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> <li>• None.</li> </ul>	
<p><b>9. Final Committee Discussion</b></p> <p>Mary Kate Mohlman &amp; Sharon Henault, Co-Chairs</p>	<ul style="list-style-type: none"> <li>• Reminder of upcoming co-chair position to serve with Sharon beginning in July. Interest and questions can be directed to co-chairs or DVHA.</li> <li>• Open member positions, please share the member application to anyone who could be a good fit.</li> </ul>	<p><b>MEAC member application:</b>  <a href="https://dvha.vermont.gov/advisory-boards/medicaid-and-exchange-advisory-committee/advisory-committee-members">https://dvha.vermont.gov/advisory-boards/medicaid-and-exchange-advisory-committee/advisory-committee-members</a></p>
<p><b>10. Adjourn</b></p> <p>Mary Kate Mohlman &amp; Sharon Henault, Co-Chairs</p>	<p>Meeting adjourned at 11:57 PM</p> <p>Next meeting March 27, 2024.</p>	