Medicaid Managed Care Advisory Review Panel (MMCARP)

(Approved 12/21/2023)
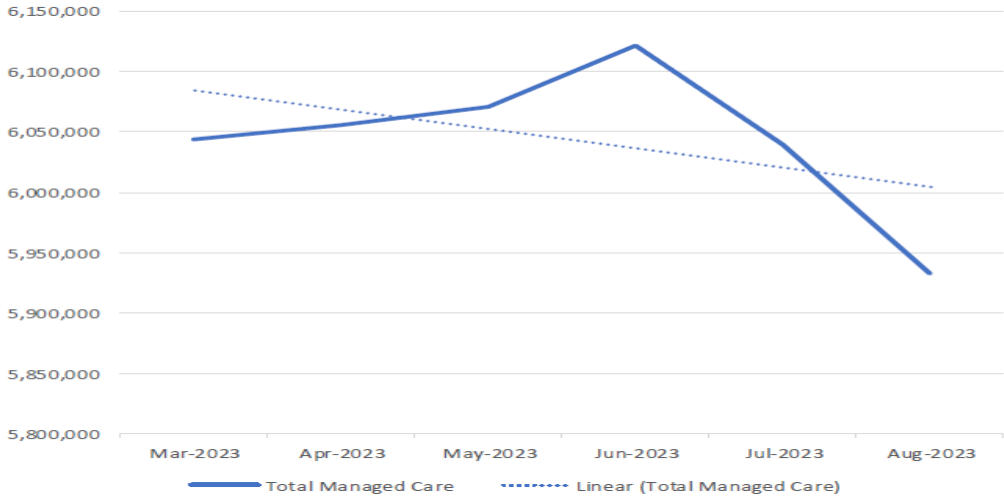
September 21st, 2023
Videoconference
11:00 AM to 1:00 PM
Meeting Minutes

Panel Members: Frederick Cohen, *Chair*; Kathryn Haslanger (excused absent); Elisabeth Benjamin; Sheila Nelson; Neil Heyman; Joel Landau (*absent*); Jay Silverman; Amber Decker; Frederick Riccardi (*left early at 11:55am*); Ricardo Rivera-Cardona; Delores Fraser McFadden (*excused absent*).

NYS DOH Staff: Susan Montgomery; Patricia Sheppard; Dianne Kiernan; Gayle Emrich; Krysten Bissaillon; Jennifer Sim.

Presenters/Guests: Susan Montgomery, New York State Department of Health (DOH); Gayle Emrich (DOH).

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Agenda Items	Discussion	Action Items
Discussion and review of 6-15-2023 minutes	Due to not having a quorum, the panel could not consider approval of the June 15th minutes or election of a MMCARP Vice Chair.	Action: Amber Decker asked if there was a consumer facing document that covers everything that has changed when the Covid-19 public health emergency (PHE) ended? DOH Response: Such a document does not exist, but the February 2023 Special Edition Medicaid Update covers guidance pertaining to telehealth services after the Covid-19 PHE.
Mainstream Medicaid Managed Care Program Update	**Susan Montgomery (NYSDOH), reported the following:** **Member Enrollment Statistics** **Total Medicaid Managed Care Enrollment** | Months	Total Medicaid Managed Care
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Mar-2023	6,044,117
Apr-2023	6,055,675
May-2023	6,071,028
Jun-2023	6,120,954
Jul-2023	6,039,482
Aug-2023	5,932,385		

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Mainstream Medicaid Managed Care Program Update	**Mainstream Enrollment** *IB Dual numbers are included in the Mainstream totals **HARP Enrollment** *IB Dual numbers are included I the HARP totals	

Mainstream Enrollment

*IB Dual numbers are included in the Mainstream totals

Months	Mainstream
Mar-2023	5,553,463
Apr-2023	5,560,871
May-2023	5,573,316
Jun-2023	5,619,869
Jul-2023	5,537,110
Aug-2023	5,429,472

Month	IB Duals*
Mar-2023	26,468
Apr-2023	26,992
May-2023	27,347
Jun-2023	30,276
Jul-2023	31,025
Aug-2023	29,051

HARP Enrollment

*IB Dual numbers are included I the HARP totals

Months	HARP
Mar-2023	166,347
Apr-2023	167,481
May-2023	167,225
Jun-2023	168,053
Jul-2023	166,868
Aug-2023	164,231

Months	IB Dual*
Mar-2023	1,424
Apr-2023	1,458
May-2023	1,566
Jun-2023	1,701
Jul-2023	1,719
Aug-2023	1,556

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Mainstream Medicaid Managed Care Program Update	**HIV SNP Enrollment** | Months	HIV-SNP | |---|---| | Mar-2023 | 16,455 | | Apr-2023 | 16,590 | | May-2023 | 16,535 | | Jun-2023 | 16,700 | | Jul-2023 | 16,683 | | Aug-2023 | 16,608 | *****Panel member questions for the member enrollment and PHE unwind presentation request***** • Elisabeth Benjamin asked, if we continue with percentage decline since June or July (disenrolled) where will we be relative to baseline (i.e., Jan 2020)- are we on track to go below Medicaid enrollment level or will we land a little higher? • Fred Cohen asked if the decrease in enrollment will affect the budget? Will there be a surplus? • Sheila Neilson added that the presentation should include those that may not have kept Medicaid coverage but went to EP, CHP, or other qualified health plan. • Ricardo Rivera-Cardona asked what is the percentage of people that were evaluated and did not qualify for the program? Of those that lost eligibility, can we show data on those that are still eligible vs those that did not return their redetermination paperwork? *****end discussion*****	Action: Several panel members requested a member enrollment and PHE unwind presentation for the December MMCARP meeting. See specific panel member requests under "Discussion." DOH Response: The Department will provide a presentation at the December MMCARP meeting. Panel members are also encouraged to visit the PHE Unwind Dashboard: New York State Public Health Emergency Unwind Dashboard | NY State of Health.

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Mainstream Medicaid Managed Care Program Update	**Active Expansion Reviews and New Applications** These following two (2) Plan expansions and four (4) MCO transactions have been received or remain under review since the June update. **Active Expansion Reviews** • **HIP/Emblem:** submitted a service area expansion application for Essential Plan (EP) for Dutchess, Orange, Putnam and Rockland counties. The application is currently under review with BMCFO and DFS. • **Excellus Health Plan:** submitted an application to expand their Medicaid and HARP lines of business into the counties of Cattaraugus, Cayuga, Chenango, Cortland, Delaware, Fulton, Genesee, Madison, Montgomery, Oswego, Schuyler, Tompkins, and Wyoming. Plan resubmitted their proposed provider network 4/17/23 and validation activities are underway in addition to reviews being performed by state partners. **New Applications** • **Partner's Health Plan (PHP):** has been conditionally certified as an Article 44 mainstream HMO in NYS. • **Hamaspik Inc.**: has applied to be certified as an Article 44 mainstream HMO in NYS. • **Excellus:** IB-Dual application remains under review for Monroe, Ontario, Livingston, Seneca, Wayne, Yates, Broome, Herkimer, Oneida, Onondaga, Otsego, Erie, and Orleans counties. • **MVP:** IB-Dual application remains under review for Albany, Columbia, Dutchess, Greene, Orange, Rensselaer, Rockland, Saratoga, Schenectady, Sullivan, Ulster, and Westchester counties. **Provider Enrollment Update** Average Number of New Applications Received Weekly *(1) Four month average prior to commencement of Section 5005(b)(2)*	

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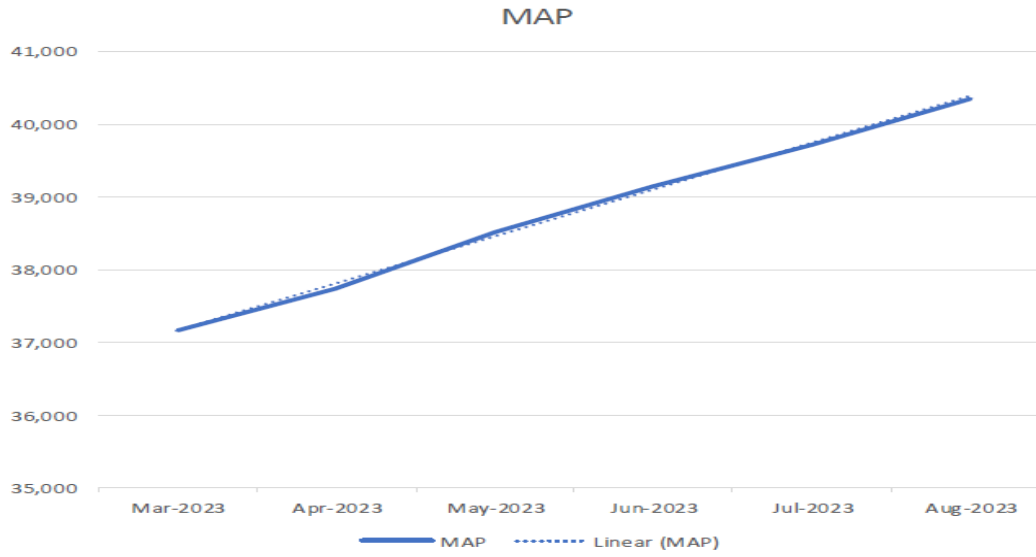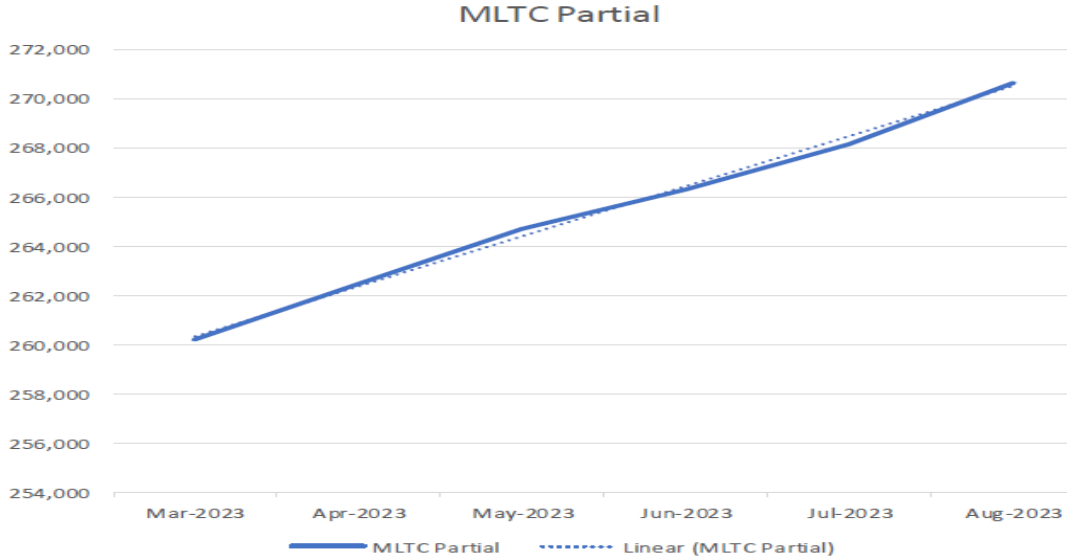
Agenda Items	Discussion	Action Items

Mainstream Medicaid Managed Care Program Update	**New Benefits/Populations & Benefit Changes**
	
	New York State Medicaid Coverage of Hepatitis and Syphilis Screening
	
	New York State Medicaid Coverage of Hepatitis and Syphilis Screening
	Effective immediately, for both fee-for-service and Medicaid Managed Care, NYS hepatitis C and syphilis screening tests will align with 2023 amendments to New York State (NYS) Public Health Law (PHL) §2171(1)(2), NYS PHL §2500-L, and NYS PHL §2308(1).
	
	Hepatitis C Screening
	Hepatitis C Testing Law is extended to 2030 (previously 2026) to align with the *New York State Hepatitis C Elimination Plan*. The *New York State Hepatitis C Elimination Plan* can be found on the NYS Department of Health (DOH) "New York State Hepatitis C Elimination" web page.
	NYS PHL §2171(1)(2) requires a hepatitis C screening be offered to individuals eighteen years of age and older (or younger than eighteen years of age, if there is evidence or indication of risk activity). NYS PHL §2500-L requires practitioners to order a hepatitis C virus (HCV) screening test for ALL pregnant persons.
	
	Syphilis Screening for Pregnant Individuals
	NYS PHL §2308(1) requires practitioners to order a syphilis screening test for pregnant individuals during their third trimester of pregnancy, in addition to testing at the time of their first exam, and again at delivery.
	➢ More information can be found in the July 2023 Medicaid Update: New York State Medicaid Update - June 2023 Volume 39 - Number 12 (ny.gov)
	
	COVID-19 Update
	
	➢ The New York State Department of Health has updated the coverage policy and billing guidance document regarding New York State Medicaid's reimbursement policy for the administration of COVID-19 vaccines: COVID-19 Guidance for Medicaid Providers (ny.gov)
	➢ Additional guidance can be found on the COVID-19 Guidance for Medicaid Providers (ny.gov) webpage, which is updated regularly.
	➢ Announced July 18th via press release, the New York State Department of Health has established a Public Health Emergency Dashboard as well as the NYS Medicaid Data and Reports webpage:
	  ➢ New York State Public Health Emergency Unwind Dashboard
		NY State of Health
		  ➢ Data and Reports (ny.gov)	

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Auto-Assignment Report	**Gayle Emrich (NYSDOH) and panel members discussed the August 2023 Medicaid Managed Care Auto Assignment Report.** ***DOH Response*** Please note that on the Auto Assignment Report the "New Enrollees" column for "All Managed Care" reflects three (3) months of rolling data. Therefore, the "New Enrollees" for each month would have been 3,000+ for each month. Erie County is one of the largest, most populated counties in New York State as well. Gayle looked back at previous auto assignment reports and found that the amount of "New Enrollees" for Erie County remained consistently right around 10,000 using the three (3) months of rolling data. ***End***	<u>Action</u>: Fred Cohen asked Gayle to look at Erie County to determine whether the numbers are unusually high. <u>DOH Response</u>: Provided under "Discussion."
Managed Long Term Care (MLTC) Program Update	**Susan Montgomery (DOH), reported the following:** **Managed Long Term Care Enrollment** **FIDA-IDD Enrollment** FIDA-IDD | Months	FIDA-IDD
Mar-2023	1,714
Apr-2023	1,710
May-2023	1,720
Jun-2023	1,724
Jul-2023	1,733
Aug-2023	1,728		

FIDA-IDD

Months	FIDA-IDD
Mar-2023	1,714
Apr-2023	1,710
May-2023	1,720
Jun-2023	1,724
Jul-2023	1,733
Aug-2023	1,728

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Agenda Items	Discussion	Action Items
Managed Long Term Care (MLTC) Program Update	**MAP Enrollment** **MLTC Partial Enrollment**	

MAP Enrollment

Months	MAP
Mar-2023	37,165
Apr-2023	37,743
May-2023	38,510
Jun-2023	39,150
Jul-2023	39,724
Aug-2023	40,348

MLTC Partial Enrollment

Months	MLTC Partial
Mar-2023	260,207
Apr-2023	262,478
May-2023	264,715
Jun-2023	266,332
Jul-2023	268,156
Aug-2023	270,635

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Managed Long Term Care (MLTC) Program Update	**PACE Enrollment** PACE | Months	PACE
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Mar-2023	8,766
Apr-2023	8,802
May-2023	9,007
Jun-2023	9,126
Jul-2023	9,208
Aug-2023	9,363 | **MLTC Reforms** **MLTC Reforms – Article VII- HMH Part I** Per the approved 2023-2024 NYS Budget, Article VII, HMH Part I, three MTLC Reform requirements were announced: 1) DOH is authorized to extend the MLTC Partial Capitation (MLTCP) moratorium until 2027. No new MLTCP applications will be accepted. 2) DOH will initiate MLTCP Performance Standards. To participate in MLTCP, plans will be required to meet the following criteria by January 1, 2024: • Plans must have a D-SNP 3 STARs or higher • Not categorized as a 'poor performer' by CMS or have an excessive volume of NYS penalties or Statements of Deficiency • Plans must commit to enhanced network adequacy criteria • Quality improvement • Accessibility and geographic distribution of providers, considering the needs of persons with disabilities and the rural, suburban, urban settings • Demonstrate cultural and language competency • Ability to enroll across the continuum of care • VBP readiness	

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Agenda Items	Discussion	Action Items

Managed Long Term Care (MLTC) Program Update	**MLTC Reforms- Article VII- HMH Part I continued. D-SNP requirement**
	3) MTLCP must meet the legislative standard requiring a submission of a CY2024 Medicare D-SNP bid to CMS for January 1, 2024.
	• For MLTCP that do not meet this D-SNP requirement, transition planning is required.
	• The Department encourages merger and acquisition activity among these plans and has been in discussions with the impacted plans.
	• For MLTCP who intend to cease operations of their MLTCP product effective January 1, 2024, or sooner, DOH provided instructions on both withdrawal planning and merger/acquisition transition plan submission expectations which are due October 1, 2023.
	• MLTCPs must comply with MLTC Policy 17.02 with 120 days of continued service-authorized coverage for impacted members.
	• To date the following transactions, have or, are occurring:
	    • Extended MLTC merged with Hamaspik 8/1/2023
	    • Montefiore merging with RiverSpring/ElderServe 12/31/2023
	    • Fallon Health Weinberg is withdrawing 12/31/2023
	
	MLTC Social Adult Day Care HCBS Heightened Scrutiny Public Comment Period
	MLTC SADC Heightened Scrutiny Public Comment Period Open Until 9/30/2023
	As part of the Home and Community Based Services (HCBS) Final Rule Compliance verification of MLTC Social Adult Day Care (SADC) sites, the 52 SADC sites identified as requiring a Heightened Scrutiny (HS) review are in a 30-day public comment period that started on August 30, 2023, ending September 30, 2023. Required submission of the evidence packets to the Centers for Medicare and Medicaid Services (CMS) is planned for October 2023.
	
	What does it mean for a SADC site to require HS review?
	SADC sites are identified for HS if they are presumed to have the qualities of an institution. CMS utilizes three categories to define the qualities of an institution:
	• <u>Prong 1</u>: Setting is in a publicly or privately operated facility that provides inpatient institutional treatment.
	• <u>Prong 2</u>: Setting is in a building on the grounds of, or adjacent to, a public institution.
	• <u>Prong 3</u>: Setting has the effect of isolating individuals from the broader community.
	
	What will CMS do with the HS SADC sites DOH submits?
	CMS, based on evidence submitted by the State, will investigate to confirm DOH's findings that the SADC site is not institutional and does have the qualities of a home and community-based setting.
	Resources
	➢ Full Announcement
	➢ NYS SADC Heightened Scrutiny Submission	

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Managed Long Term Care (MLTC) Program Update	Public Comment Submission For individuals with limited online access who require special accommodation to access paper copies, please call (518) 474-6965. Prior to finalizing the proposed Heightened Scrutiny evidence packets, the BMLTC will consider all written and verbal comments received, amending determinations of compliance, and conducting further remediation activities as needed. Written comments will be accepted by email at HCBSSADCSiteAssessments@health.ny.gov, please indicate "Public Comment" in the subject line, or by mail at: ATTN: Paul Pfeiffer OHIP DHPCO 1CP-1623 New York State Department of Health Albany, NY 12237 Please direct all questions to: HCBSSADCSiteAssessments@health.ny.gov. **Active MLTC Expansion Review and New Applications** **Active MLTC MAP Expansions Reviews, New PACE and MAP Applications, MLTC plan Mergers and Withdrawals**	Action: Neil Heyman asked when the SPA will be approved for 7.5% increased nursing home rates? DOH Response: DOH provided Neil with the following response: The nursing facility rates published 10/6/23 and effective 4/1/23 reflect an increase to the operating rates of 6.5%. The increase took effect in cycle #2408 with a release date of 11/1/23. SPA #23-42 has been submitted to CMS for the full 7.5% and DOH continues to work with CMS toward approval of the SPA. Upon CMS approval, DOH will process the remaining 1% increase to the operating rates retroactive to 4/1/23.

Active MAP Service Area Expansions Under Review
- Centers Plan for Healthy Living - MAP expansion for 1+3 additional counties
- Village Care MAX - MAP expansion for 3 additional counties

New MAP Applications Under Review
- (Including Behavioral Care in readiness reviews in process)
- Aetna - MAP application for 1 county.
- Excellus - MAP application for 13 counties
- iCircle - MAP application for 14 counties
- MVP - MAP application for 13 counties
- VNA/Nascentia - MAP & Article 44 application for 15 counties
- UHC - signed MAP contract pends for 6 counties

Withdrawals - MLTC and MAP Plan
- Fallon Health Weinberg withdrawing from Partial Capitation 12/31/23
- AgeWell MAP withdrawing from MAP 12/31/23

PACE Applications and/or Expansions Under Review
- CitiPace/CenterLight/Kinship – acquisition and new PACE and Article 44 applications under review
- Hudson Headwaters- new PACE application under DOH and CMS review
- Lucida – Notice to Intent to file PACE application
- RiverSpring/Riseboro- new PACE and Article 44 applications under review
- Community PACE/Urban Health Plan – new PACE application under review
- WelBHEalth – new PACE application under DOH and CMS review

Mergers - MLTC Partial Capitation Plans
- Hamaspik acquired Extended MLTC Partial 8/1/23
- RiverSpring/ElderServe acquiring Montefiore Diamond Care Partial Capitation line of business 12/31/23

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Agenda Items	Discussion	Action Items
Managed Long Term Care (MLTC) Program Update	**New York Independent Assessor Program Updates** **New York Independent Assessor Program Volume** Over 90% of consumers completed the assessment process in less than 14 days in May, June and July. In August, this figure was 99%. 	Action: Elisabeth Benjamin asked on behalf of Kathryn Haslanger if the Department could provide NYIAP performance data on the mode of assessment (virtual vs in-person)? They also asked if it's possible to have denial rates for virtual vs in-person and appeal rates? DOH Response: The Department will provide data at the December MMCARP meeting.

Independent Assessor requests by Sector

Month	Initial Assessment Requests	Community Health Assessment Completed	Practitioner Order Completed
May 2023	11,537	10,428	9,968
June 2023	11,023	10,110	9,869
July 2023	9,676	10,389	10,637
August 2023	11,488	12,298	12,129

Unique Count of Consumers Requesting Assessment					
Request Date	FFS	MAINSTREAM	HARP	SNP	TOTAL
May 2023	6,776	3,889	796	76	11,537
June 2023	6,510	3,691	742	80	11,023
July 2023	5,703	3,258	668	47	9,676
August 2023	6,844	3,790	796	58	11,488

| Public Comment | **Public Comment 1:** Lara Kassel, Medicaid Matters New York:

Noted that there are advocates on the line listening, but there are no public comments at this time. | |
| | **Motion Passed: Meeting adjourned at 12:28pm** | |

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ACRONYMS & INITIALISMS

ABA	Applied Behavior Analysis		IADL	Instrumental Activity of Daily Living
ADL	Activity of Daily Living		IB-Dual	Integrated Benefits for Dually Eligible Enrollees
ADM	Administrative Directive Memorandum		IPP	Independent Practitioner Panel
ARPA	American Rescue Plan Act		IRP	Independent Review Panel
BH	Behavioral Health		JAC	Joint Advisory Council
CBAA	Certified Behavior Analyst Assistant		LBA	Licensed Behavior Analyst
CBLTC	Community Based Long Term Care		LDSS	Local Department of Social Services
CBLTSS	Community Based Long Term Services and Supports		LGU	Local Government Unit
CBO	Community Based Organization		LHCSA	Licensed Home Care Services Agencies
CDC	Centers for Disease Control		LTNHS	Long Term Nursing Home Stay
CDPAP	Consumer Directed Personal Assistance Program		MARO	Metropolitan Area Regional Office
CDPAS	Consumer Directed Personal Assistance Services		MCO	Managed Care Organization
CFCO	Community First Choice Option		MLTC	Managed Long Term Care
CFEEC	Conflict-Free Evaluation and Enrollment Center		MMC	Medicaid Managed Care
CFTSS	Children and Family Treatment and Support Services		MMCARP	Medicaid Managed Care Advisory Review Panel
CHA	Community Health Assessment		MOU	Memorandum of Understanding
CHP	Child Health Plus		MRT	Medicaid Redesign Team
CMA	Care Management Agency		NHTD	Nursing Home Transition and Diversion Waiver
CMHA	Community Mental Health Assessment		NYC	New York City
DME	Durable Medical Equipment		NYIAP	New York Independent Assessor Program
DOH	Department of Health		NYSDOH	New York State Department of Health
DOL	Department of Labor		OASAS	Office of Alcoholism and Substance Abuse Services
D-SNP	Dual Eligible Special Needs Plans		OHIP	Office of Health Insurance Programs
EP	Essential Plan		OMH	Office of Mental Health
FAQ	Frequently Asked Questions		OMIG	Office of Medicaid Inspector General
FFS	Fee for Service		OTC	Over the Counter (Drug)
FI	Fiscal Intermediary		PACE	Program of All-Inclusive Care for the Elderly
FIDA	Fully Integrated Duals Advantage		PCS	Personal Care Services (Medicaid State Plan)
FIDA-IDD	Fully Integrated Duals Advantage-Individuals with Intellectual and Developmental Disabilities		PHIP	Population Health Improvement Program
			PNDS	Provider Network Data System
FLSA	Fair Labor Standards Act		POC	Plan of Care
FY	Fiscal Year		PPS	Performing Provider System
HARP	Health and Recovery Plan		RFP	Request for Proposals
HCBS	Home and Community Based Services		ROS	Rest of State
HERO	Health Equity Regional Organization		RPC	Regional Planning Consortium
HIV SNP	HIV Special Needs Plan		SBHC	School Based Health Center

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SCN	Social Care Needs	TCM	Targeted Case Management
SDHN	Social Determinants of Health Network	VBP	Value Based Payment
SSI	Supplemental Security Income	WIO	Workforce Investment Organizations
TBI	Traumatic Brain Injury		