



Michigan Department of Health and Human Services  
Medical Services Administration

## Medical Care Advisory Council

### Meeting Minutes

---

**Date:** Thursday, November 14, 2019

**Time:** 1:00 p.m. – 4:30 p.m.

**Where:** Michigan Public Health Institute  
2436 Woodlake Circle, Suite 380  
Okemos, MI 48864

**Attendees:** **Council Members:** Alison Hirschel, David LaLumia (for Marion Owen), Chris George (for Amy Hundley), Amy Zaagman, Amber Bellazaire, Melissa Samuel, Linda Vail, Warren White, Dawne Velianoff, Farah Jalloul, April Stopczynski, Tiffany Stone (for Dominick Pallone), Kim Singh, Lisa Dedden Cooper, Kristin Reese

**Staff:** Kate Massey, Kathy Stiffler, Erin Emerson, Brian Keisling, Brian Barrie, Jackie Prokop, Marie LaPres, Phil Kurdunowicz, Susan Kengas, Cindy Linn, Jennifer Schuette, Dawn Sweeney, Steven Prichard

**Other Attendees:** Randy Walainis, Chelena Bell

### **Welcome, Introductions, Announcements**

Alison Hirschel opened the meeting and introductions were made.

### **Public Health Administration – Statewide Needs Assessment**

In June 2019, the Michigan Department of Health and Human Services (MDHHS) Public Health Administration began the process of conducting a state health assessment with a goal of determining the following:

- How healthy are Michigan residents?
- What health conditions are causing Michigan residents the greatest challenges, what are the root causes of those conditions, what factors contribute to these causes?
- What resources currently exist to help address common health conditions among Michigan residents?

To conduct the state health assessment, the Public Health Administration will use the Mobilizing for Action through Planning and Partnerships (MAPP) framework as a guide. The MAPP framework consists of six phases: the state health assessment, which comprises phases one through four, and the state health improvement plan, which comprises phases five and six. MDHHS is working through the state health assessment portion of the MAPP framework, which includes planning and conducting a “visioning” meeting with various stakeholders. The department is currently in the process of conducting four assessments,

## **Medical Care Advisory Council**

Meeting Minutes

November 14, 2019

Page 2

which include: the state health status assessment, themes & strengths assessment, public health systems assessment, and forces of change assessment. Handouts were provided to meeting attendees to provide additional details about the MAPP framework, and information about this process will also be made available on the MDHHS website in the future.

### **Budget Update**

#### **Budget Process**

Susan Kangas, from the MDHHS Financial Operations Administration, provided an update on the FY 2021 budget development process. A budget development timeline handout was distributed to meeting attendees, and the document was discussed.

### **Healthy Michigan Plan (HMP)**

#### **Regional Forums and Webinars**

In October 2019, MDHHS began conducting regional forums throughout the State of Michigan to explain the new workforce engagement requirements for non-exempt HMP beneficiaries that will take effect on January 1, 2020. MDHHS has completed 14 regional forums to date, in addition to several webinars for providers and other stakeholder groups. MDHHS staff discussed the feedback that was received at the forums and during the webinars and reported that many of the comments were from individuals seeking clarification on the medically frail criteria and how to report an exemption, as well as the compliance review process. In addition, many providers sought clarification on how to bill and provide services on behalf of beneficiaries who may be noncompliant with the work requirements.

MDHHS staff also shared samples of printed materials that were developed for beneficiaries and community navigators to provide information on the work requirements and exemption criteria. Copies of the printed materials are available on the MDHHS website at [www.michigan.gov/healthymichiganplan](http://www.michigan.gov/healthymichiganplan) >> Changes Coming in 2020. MDHHS staff and meeting attendees continued to discuss the regional forums and supplemental printed materials at length, and the following issues were raised:

- In response to an inquiry, MDHHS staff confirmed that any time a beneficiary spends in training or continuing education to meet occupational licensing requirements counts toward compliance with workforce engagement requirements.
- MDHHS is partnering with community navigators and outreach coordinators to assist beneficiaries with reporting compliance with workforce engagement requirements or reporting an exemption. Meeting attendees shared that some community navigators and community outreach coordinators have expressed concern about their ability to handle the volume of beneficiaries who will seek assistance in this process. In response, MDHHS staff asked the Medical Care Advisory Council (MCAC) to submit ideas for which partnering organizations may be able to help find other willing individuals to enroll as community navigators.

## **Medical Care Advisory Council**

Meeting Minutes

November 14, 2019

Page 3

### **September and December Beneficiary Letters and Mailing**

In September 2019, MDHHS mailed letters to approximately 270,000 HMP beneficiaries who were identified as being subject to the workforce engagement requirements to provide information on how to report work or other activity, as well as the process for reporting an exemption if applicable. MDHHS also mailed letters to beneficiaries who had an exemption identified in the system. They received information on the work requirements but were informed that they were excused from having to report.

Following the September mailing, Governor Whitmer signed into law PA 50 of 2019, which allows an exemption from the reporting requirement if MDHHS is able to verify a beneficiary's compliance through other data available to the department. MDHHS staff expect that this change will result in approximately 60,000 HMP beneficiaries being excused from having to report work or other activities. In addition, the following groups of beneficiaries will be exempt from having to report:

- Approximately 20,000 beneficiaries who are currently incarcerated;
- Over 10,000 beneficiaries who returned an exemption attestation form following the September mailing; and
- Approximately 18,000 beneficiaries who will be chosen at random as part of a control group for participation in a study on the implementation of workforce engagement requirements that will compare the experiences of beneficiaries who are required to report 80 hours per month of work or other activities to those who are exempt from reporting.

MDHHS is working to send a follow-up letter in December to HMP beneficiaries who do not currently meet an exception based on MDHHS records with information on the work requirements and the process for reporting compliance or an exemption, as applicable.

### **48-Month Cumulative Enrollment Changes – Delayed until October 1, 2020**

Beginning October 1, 2020, beneficiaries who have been enrolled in HMP for 48 cumulative months and have incomes above 100 percent of the federal poverty level (FPL) will be required to engage in a healthy behavior and contribute 5 percent of their income toward cost-sharing as a condition of continued enrollment.

### **HMP Operations and Process Questions**

MDHHS staff and meeting attendees continued to discuss the process for outreach to HMP beneficiaries. One meeting attendee suggested that the department work with local public libraries to distribute materials related to HMP work requirements to beneficiaries who use library resources to report compliance. MDHHS staff also offered to make informational materials available to other partnering organizations for individual printing and distribution.

## Medical Care Advisory Council

Meeting Minutes

November 14, 2019

Page 4

### Flint Waiver Renewal

MDHHS is continuing work to submit an application to extend the Waiver for Individuals Impacted by Flint Water to the Centers for Medicare & Medicaid Services (CMS). The waiver expanded Medicaid eligibility to include children up to the age of 21 and pregnant women who lived, received childcare, or education at an address served by the Flint water system with incomes up to 400 percent FPL. The current waiver expires in February 2021, and the renewal application must be submitted to CMS by February 2020 for the program to continue. As an update to the discussion at the previous MCAC meeting in August 2019, Erin Emerson indicated that the department is continuing to consider changes to the targeted case management benefit for individuals impacted by Flint water to allow for a limited telemedicine component. MDHHS is also planning to conduct a regional forum in Flint in January 2020 to discuss the waiver extension application. The department will continue to seek renewal of the waiver until such a time as no individual meets the eligibility requirements.

### MI Health Link

Currently, the MI Health Link demonstration for individuals who are dually eligible for Medicare and Medicaid is set to expire on December 31, 2020. MDHHS has submitted a letter of intent to seek a five-year extension of the demonstration to CMS and is now working to incorporate stakeholder feedback for program enhancements into the extension application that will be submitted at a later date.

### Long-Term Care Updates

Brian Barrie provided updates on the following projects administered by the Bureau of Long-Term Care Services & Support:

- MDHHS is working with the MI Choice waiver agencies to fill an additional 1,000 openings in the MI Choice waiver program, as well as administering a five percent rate increase to providers of MI Choice waiver services. In response to an inquiry, Mr. Barrie indicated that the department works with an independent accounting firm annually to ensure actuarial soundness of provider reimbursement rates prior to submission to CMS. **NOTE:** Following the meeting, a decision was made by MDHHS leadership not to pursue these changes to the MI Choice Waiver program at this time.
- The Auditor General's office is working with department staff to conduct a performance audit of the Home Help program.
- MDHHS is in the early stages of planning for implementation of a managed long-term services and supports (LTSS) program, beginning with identifying opportunities for process improvement in the current service delivery system, and exploring the establishment of independent options counseling. The department also conducted a stakeholder meeting on September 5, 2019 and began an LTSS feasibility study on October 1, 2019, as required by the legislature. Another stakeholder meeting to discuss the implementation of managed LTSS will take place on December 4, 2019,

## **Medical Care Advisory Council**

Meeting Minutes

November 14, 2019

Page 5

with an additional meeting to be held in February 2020.

- MDHHS submitted a Request for Information (RFI) for the implementation of an Electronic Visit Verification (EVV) system for personal care services providers and received responses from several potential vendors nationwide. The department is reviewing the responses and has submitted a request to extend the deadline for compliance with the 21<sup>st</sup> Century Cures act to January 1, 2021 in order to allow for additional time to establish an EVV system.
- The department is working in conjunction with several caregiver programs with funding from the Michigan Health Endowment Fund to develop “caregiving maps” for individuals receiving personal care services. The project, known as We All Care, seeks to map out the full network of individuals who assist in providing direct care services to a beneficiary, including friends and relatives who provide unpaid services. The goal of this mapping project is to identify individuals who are part of a beneficiary’s “informal” network of caregivers who can be contacted to assist the beneficiary if the regular caregiver is unavailable.

### **Asset Test Change**

MDHHS staff from the Economic Stability Administration shared that the asset limit for individuals to receive food and cash assistance will be increased to \$15,000 effective December 1, 2019. The department announced an increase in the asset limit with the goal of allowing beneficiaries to save money for other needs such as house repairs without losing eligibility for benefits. In addition, the department will no longer be required to verify that beneficiaries receiving food assistance own only one vehicle and will accept beneficiary self-attestation regarding compliance with asset limits. There are no changes to the income limit for benefits eligibility, which will continue to require verification.

### **Policy Updates**

A policy bulletin handout was distributed, and the following items were discussed:

- Bulletin MSA 19-26 – Caring 4 Students (C4S) Program
- Proposed Policy 1926-HMP – Healthy Michigan Plan Updates
- Proposed Policy 1931-Eligibility – Medicaid Lock-Out
- Proposed Policy 1936-Pharmacy – Medicaid Health Plan Pharmacy Drug Coverage Transition

### **Future Agenda Items**

Alison Hirschel invited meeting attendees to share ideas for future agenda items.

**The meeting was adjourned at 3:00 p.m.**