



Medicaid Advisory Committee

Meeting Minutes

Wednesday, August 23, 2023

Indiana Government Center South and Zoom

Members attending in person:

Ms. Serrilla Blackmon, Sen. Jean Breaux, Rep. Ed Clere, Ms. Terry Cole (co-chair), Ms. Danielle Coulter, Ms. Elizabeth Eichhorn, Rep. Rita Fleming, Ms. Zoe Frantz, Mr. Rodney King, Sen. Jean Leising, Dr. Daniel Rusyniak, Rep. Robin Shackelford, Ms. Cora Steinmetz (Co-chair), Ms. Kimberly Williams, and Sen. Shelli Yoder. Mr. Marty Wood represented Ms. Blaire Hadley.

Members attending virtually: this information was not captured in Zoom due to technical difficulties.

I. Call to Order

Terry Cole, Co-Chair, called the meeting to order at 10:26 a.m. following technical difficulties, and asked all members joining in Zoom to enter their names and affiliations in the chat.

II. Approval of May 2023 Minutes

Ms. Cole invited a motion to approve the May 2023 meeting minutes. Rep. Rita Fleming moved to approve. Ms. Zoe Frantz seconded and the minutes were approved with no changes.

III. MAC Updates

Ms. Cora Steinmetz introduced herself as Indiana's new Medicaid Director and extended thanks to Allison Taylor for her years of service in the role. The final 2023 meeting will be November 29 at 10 a.m. in a hybrid form and proposed dates for the 2024 meetings will be presented.

IV. Rules

Ms. Steinmetz introduced Ms. Amanda DeRoss, FSSA staff attorney, to present several rules. Ms. DeRoss gave a brief overview of each rule and where it is in the promulgation process.

The Postpartum Rule (LSA 23-366) amends 405 IAC 10-4-6(c) to extend the postpartum coverage under Medicaid from 60 days to 12 months. A public hearing was held on August 7, 2023. The final rule was adopted by the Secretary on August 17, and the final rule was submitted to the Office of Attorney General for review and approval on August 21. Once the Office of the Attorney General reviews and approves the rule, it will be submitted to the Governor's Office for review. Ms. DeRoss invited questions. There were none.

The Electronic Prescription Signatures Rule (LSA 23-367) amends 405 IAC 5-24-8 to clarify language to include electronic signatures. The public hearing was held on August 21, 2023. The final rule was submitted to the FSSA Secretary for final review and adoption by the end of this week. The rule will then be submitted to the Office of the Attorney General. Ms. DeRoss invited questions. There were none.



V. FSSA Updates

1. *Managed Care Entities health equity initiatives – Mr. Marty Wood, President, Insurance Institute of Indiana and representatives from managed care entities*

Marty Wood introduced staff from Indiana’ managed care entities responsible for health equity initiatives—Anthem: Darryl Lockett; CareSource: Lakeisha Zakery; MHS: Dr. Shara Wesley; MDwise: Anye Carson; and UnitedHealthcare: JaNell Kendall.

Indiana’s MCEs connect and collaborate frequently and share best practices to ensure community members have access to the resources they need to achieve optimal health and wellbeing. The group presented information regarding the MCE’s efforts to address social determinants of health in alignment with FSSA’s overall mission “to compassionately serve our diverse community of Hoosiers by dismantling long-standing, persistent inequity through deliberate human services system improvement.”

The MCEs participate in a monthly collaborative meeting with FSSA’s Office of Healthy Opportunities (OHO) to discuss efforts around four pillars: community engagement, policy and program design, workforce development and accountability/evidence. Recently, each MCE submitted their first health equity plans capturing each MCE’s efforts related to health equity as well as their progress or path forward toward achieving organizational goals. Each plan covered three foundational areas: assessment of member needs and barriers, identification of current and future health equity programs and goals, and accountability and evaluation measures.

Each health equity officer then provided highlights of their plan’s existing programs around social drivers/determinants of health, immunizations, asthma, maternal and child health and diabetes, and assured MAC members they are committed to leveraging data, examining issues, processes and programs, and providing thorough staff training to ensure all Medicaid members receive equitable care.

Discussion

Rep. Shackelford asked whether MAC members could receive copies of the health equity plans and progress toward goals, if cultural competency training for providers is part of this initiative, and whether provider reimbursement is tied to health equity outcomes. Ms. Steinmetz indicated FSSA could provide more information about the plans and their progress. All MCEs responded affirmatively to cultural competency training. Ms. Steinmetz responded that currently reimbursement is not tied to health equity outcomes, but that is something FSSA can take back for consideration.

Senator Leising, Rep. Fleming and Sen. Breaux asked questions around maternal mortality/morbidity and contraception availability and education. The Indiana Pregnancy Promise Program will be invited to present at a future MAC meeting and Hoosiers Families First Fund and

pharmacists prescribed contraceptives bill and SPA. The state does reimburse for long-acting reversible contraceptive implants.

Sen. Yoder asked whether the health equity officers are supported by their plans and FSSA to do this work. All replied affirmatively and indicated Indiana is setting itself apart from other states with its intentionality regarding health equity. Rep. Clere expressed appreciation and asked for clarification about health equity related to Medicaid enrollment and asked whether disenrollments for procedural reasons are being tracked. Ms. Steinmetz indicated return to normal operations would be addressed next and invited the MCE partners to remain online to address questions.

2. ***Return to normal operations update – Nonis Spinner, OMPP Director of Eligibility and Member Services and Michele Holtkamp, FSSA Director of Strategic Communications and Public Affairs***

Ms. Spinner demonstrated FSSA's return to normal operations webpage (<https://www.in.gov/medicaid/members/member-resources/How-a-return-to-normal-will-impact-some-Indiana-Medicaid-members/>), including hot button links to reports and dashboards. Ms. Spinner reported Indiana has seen improvements in its renewal percentage since April. In July, 149,331 members were due for redetermination—52% were successfully renewed/retained in Medicaid or CHIP, 3% were determined ineligible, 19% were terminated for procedural reasons and 26% were in process at the end of their renewal month and retaining coverage while under review. Of the 19% terminated for procedural reasons, 2% provided incomplete information, 6% appeared to be ineligible based on last known information and did not respond to FSSA communications and the remaining 11% did not respond to any FSSA communications. Ms. Spinner presented demographics for July's procedural disenrollments by program, age group, ethnicity and race. At a high level, nondisabled adults in HIP are primarily the population losing coverage. FSSA has undertaken additional communication efforts to reach ineligible parents whose children may still be eligible requesting parents complete and submit information.

Ms. Holtkamp reported FSSA's outreach and communication efforts are as strong as ever to reach as many members as possible, including leveraging community partnerships with hospitals, MCEs, nursing facilities, food banks, pharmacies, mental health clinics, schools, advocacy groups and many others. FSSA meets weekly/bi-weekly or monthly with the Indiana Hospital Association, Covering Kids and Families, the Minority Health Coalition, Hoosier Action, the Indiana Justice Project and the Indiana Primary Health Care Association. FSSA has placed information in Work One centers and community colleges around the state and has also provided it to emergency responders, providers in child welfare cases, local health departments, First Steps providers, the Indiana Rural Health Association, Indiana Medical Association, and the Affiliated Service Providers of Indiana. Radio, TV and social media advertising in multiple languages is occurring in every county. Consistent, simple and direct messaging to members also includes a postcard, letter, redetermination packet, text messages, phone call and email. Soon, materials with QR codes will be available for those who may

have lost coverage to provide next steps. There are several videos available on the FSSA website, and some providers have used these videos in their waiting areas.

Discussion

Senator Breaux asked whether FSSA staff can conduct home visits. Ms. Holtkamp responded that FSSA relies on community partners to do that. Rep. Fleming asked when women in post-partum are losing coverage. Ms. Spinner replied they are due for renewal after the 12-month post-partum period. Sen. Breaux and Rep. Clere asked about tracking the breakdown of disenrollments. This information can be found at: <https://www.in.gov/medicaid/members/member-resources/How-a-return-to-normal-will-impact-some-Indiana-Medicaid-members/medicaid-renewals-and-outcomes-dashboard/>. Rep. Clere asked whether FSSA is seeing disproportionate disenrollment. Ms. Spinner responded FSSA is monitoring disenrollments closely and has not seen anomalies. Rep. Clere asked for an update regarding HIP 2.0 retroactivity. Ms. Steinmetz and Ms. Spinner responded that the FSSA's Office of General Counsel has been consulted and confirmed the HIP 2.0 language is in Indiana Code and cannot be waived. Rep. Clere indicated stakeholder organizations have consulted with attorneys who do not concur with FSSA's interpretation. Ms. Steinmetz indicated a willingness to have a conversation regarding the interpretation. Rep. Clere asked that FSSA revisit HIP 2.0 retroactivity due to the issue of disenrollment of HIP members.

Rep. Shackelford asked how FSSA is outreaching to HIP population, whether HHS has guidelines/requirements for how FSSA reaches that population, and whether there is flexibility. Ms. Spinner replied Indiana has been sending text messages, DFR has conducted outbound calls and emails. The text directs people to the FSSA website and the receipt rate was more than 85% in the first few months. Ms. Holtkamp indicated FSSA would review and present the percentages with the MAC. There are no special HHS guidelines/requirements for the HIP population; the requirements are the same for all populations. Ms. Steinmetz indicated FSSA will continue these outreach efforts throughout the renewal/redetermination process. Sen. Breaux asked if FSSA is incentivizing MCEs and providers to do more outreach. Ms. Spinner replied FSSA and the MCEs and provider community want the same outcomes; however there are no direct financial incentives tied to the redetermination work.

VI. Comments

Ms. Steinmetz indicated that due to time constraints the rate matrix presentation will be moved to the November 29 meeting and thanked MAC members for their understanding. Ms. Cole asked about the status of the state-by-state analysis of Medicaid reimbursement required by the state legislature (HEA 1004). Ms. Leonard replied FSSA can provide IHA an update.

VII. Next meeting

The final meeting of 2023 will be November 29 from 10 a.m. – noon in a hybrid format. With no further business to conduct, the meeting adjourned at 12:04 p.m.