Alaska MEDICAL CARE ADVISORY COMMITTEE (MCAC) MEETING Monday, September 13, 2021 3:30 p.m. – 5:00 p.m.

MINUTES September 13, 2021

INTRODUCTIONS:

Tawnya Adams, Regional Operations Manager; Sherri Hinshaw, CEO of Volunteers of America of Alaska; Victoria Kildal, Behavioral Health Director Kodiak Area Native Association; Matthew Hirschfeld, MD/PhD, Director-Maternal Child Health, Provider Physician Alaska Native Medical Center/Licensed Physician; Katrina Wilson, Nursing Facility Administrator Yukon-Kuskokwim Health Corporation; Dane Lenaker, DMD, MPH, Dentist, SEARHC Medical Clinic; Jeanie Monk, Senior Vice President, Alaska State Hospital and Nursing Home Association; Mary Middleton, Executive Director Stone Soup Group; Susan Wheeler, Pharmacist, Provider/Licensed Pharmacist; and Renee Gayhart, Division Director, Health Care Services.

Members not present:

Robert Rang, CEO/Administrator Providence – Seward Medical Care Center; and Philip Hofstetter, Au. D, CEO – Petersburg Medical Center, Hospital Administrator.

Guests and members of the public:

Tony Newman, Deputy Director, Division of Senior and Disabilities Services; Dr. Julius "Pepper" Goslin, Medicaid Medical Director; Derek Moris; Steve Gallagher; and Michael Baldwin.

3:30 - 3:35pm

Introductions:

- Call to Order
- Roll Call
- Minutes from May 10, 2021, Approved
- Introduction of new member Sherri Hinshaw

3:35 - 3:40pm

MCAC focus – Jeannie Monk

- Updates on the Medicaid Program clinical enrollment financial
- Medicaid Telehealth
 - Department provide information on the trends being seen and what the plans are for telehealth for Medicaid recipients.
- Status of Medicaid Telehealth workgroup
 - o group has not met recently.
- Update on the reimbursement of genetics
 - status is it is in the process. Recommendations were submitted to the Commissioner's office and Operations are at the stage of implementing the process.
- Dental
 - Regulations were put out for public comment, comments were received, and it is with the Lieutenant Governor being reviewed.
- Clinical oversight from Dr. Goslin on Medicaid
 - o Increase in enrollment.

3:40 - 3:55pm

Update from Subcommittees and work groups:

- John Lee Director of Senior and Disability Services
 - o Request that the Community Choices and Advisory Council become a subgroup under the MCAC.
 - Senior and Disability Services continue to recruit members of the disability community to serve on the Inclusive Community Choices Advisory Committee. It is anticipated that members of the disability community who wish to participate be established by the end of the year and the first meeting will occur the first quarter of the year FY22.
 - MCAC members that volunteered to be part of the committee are Mary and Katrina.
- Pediatric Subspecialty Group– Matthew Hirschfeld
 - Group of folks that meet under the All-Alaska Pediatric Partnership that look at how to do pediatric subspeciality care for kids with complex medical needs and complex services in a way that is sustainable.
 - All-Alaska Pediatric Partnership received a grant from the Rasmus Foundation, from the Mental Health Trust and Premiere BlueCross to look into pediatric subspecialty care, which led to a consultant to be hired. The two organization have decided to take this on have been Providence and Alaska Native Medical Center. MOU is currently being developed between the two organizations that both will sign to jointly to run Pediatric Subspecialty for the state.
- Chiropractic Wellness Group Matthew Hirschfeld
 - Status unknown.

MCAC Member Input:

- Katrina (Nursing Home Administrator):
 - O Discussions have been on the pandemic and its impact on staffing. New federal mandate states that all health care workers need to be vaccinated to work in a long-term facility. A lot of facilities throughout the state are suffering by not having enough staff. Job abandonment is an issue when working in remote locations.
 - Medicaid concerns are cost of care and making sure elders don't lose Medicaid coverage, as well as keep the virus out of the facility.
- Dane (Provider/Dentist/Licensed Dentist):
 - Urban centers are not having much of an issue in dental beyond the restrictions that they have already implemented. Most dental teams have already been vaccinated.
 - There are some communities that are not getting travel and have declined accepting a dental provider or have shut down in general. In general, there are no dental facility that is back up to running pre-covid.
- Susan (Provider/Licensed Pharmacist):
 - Continued support for pharmacist to receive payment for services that they
 provide. Facilities are asking assistance from the MCAC group on getting a status
 of a Bill that was introduced at Legislation and how pharmacist can operate
 during COVID.
- Sherri and Victoria (Provider Behavioral Health):
 - 1115 starting up there have been a lot of claim processing issues. The intention of the change in the 1115 was to invest more in prevention and early intervention but it also allowed for adult substance use disorder residential providers to bill when they were historically unable to. A lot of providers are concerned about the 4 walls provision of the location being limited which hampers a lot of community based or prevention type work being done. Providers want to keep telehealth as an option as it's a great way to connect with families who may have had transportation issues. Providers also concerned about the QAP (Qualified Addition Professional) certification and the timeline to bill as it's a new requirement for the 1115.
 - o Covid has increased the demand for mental health services especially in youth and adult section. Time is 42:17 minutes

- Tawnya (Provider/Pharmacy & Home Medical Equipment Provider):
 - o There are currently 3 DME providers when there used to have been 11. The issue is reimbursement, paperwork and getting paid. Shipping to rural areas is also an issue. It is difficult to get product to a client and get reimbursement on shipping.
- Matthew (Provider Physician Alaska Native Medical Center/Licensed Physician):
 - O RSV for the first time in over a year in the state. It's a virus that causes significant respiratory illness in babies. Our RSV season typically starts in late November and runs through May. Due to the lockdown, there was no season last year and the baby's have not developed an immune to it. There is a medication called synergist that Medicaid started to administer to babies that are high risk get a shot.
- Mary (Non-Governmental/Social Services Agency):
 - Oconcerns going back to school and seeing a regression in learning because children were not able to obtain the support they needed. Families are happy with getting access to telehealth.
- Jeannie (Private/Non-Recipient Citizen):
 - Hospitals are transitioning to a new payment system that are through a DRG system, which will only go into effect with the big hospitals. It is expected to be in effect next July.
- Renee (Health & Social Services HCS Director):
 - Paid almost 85 million dollars in telehealth Medicaid claims. We have 630 providers of which 460 of those providers are new to Telehealth. The largest providers tend to be the tribal health organizations and some of the FQHC's. The trend line keeps trending up as people are not traveling and hospital beds are filling up.

4:45 – 4:55pm

Public Comments

• Michael Baldwin – Inquiring about Medicaid Dashboard Report and link.

4:55 - 5:00pm

• Meeting adjourned.

Future meetings:

Monday, Dec. 13, 2021,

3:30-5:00pm