# STAR Kids Managed Care Advisory Committee APPROVED Meeting #33 ● Meeting Minutes Wednesday, March 3, 2021 9:30 a.m. – 1:10 p.m.

# **TEAMS Live Events Virtual Meeting**

#### Agenda Item 1: Welcome, introductions, and opening remarks

Ms. Elizabeth Tucker, Chair of the STAR Kids Managed Care Advisory Committee, called the 33<sup>rd</sup> meeting of the STAR Kids Managed Care Advisory Committee to order at 9:30 a.m.

Mr. John Chacón, Health and Human Services Commission (HHSC), Advisory Committee Coordination Office (ACCO), addressed logistical issues, conducted member roll call and announced the presence of a quorum.

Ms. Tucker, Chair, welcomed committee members and provided opening remarks. Ms. Tucker introduced Ms. Veronica G. Neville, Manager, HHSC and Ms. Heather Kuhlman, STAR Kids Specialist, HHSC, and recognized Mr. Eric Owens as the new ACCO Facilitator moving forward. Table 1 notes committee members' attendance at the meeting.

**Table 1:** STAR Kids Managed Care Advisory Committee member attendance at the March 3, 2021 meeting

MEMBER NAME	YES	NO	MEMBER NAME	YES	NO
Dr. Berhane, Rahel	X		Dr. Ostermaier, Kathryn MD	X	
Mr. Josh Britten	X		Mr. Pereida, Jose	Х	
Ms. Calleros, Rosalba	X		Mr. Smith, Blake	Х	
Ms. Carlton, Catherine	Х		Ms. Trahan, Angela	Х	
Ms. Carriker, Terri	Х		Ms. Tucker, Elizabeth	Х	
Ms. Hopkins, Tara	X		Ms. Shawnett Viani	Х	
Ms. Alice Martinez	Х		Ms. Beanca Williams	Х	
Dr. Medellin, Glen, MD	Х				
Mr. Mosquera, Ricardo	Х				

Yes: Indicates attended the meeting

No: Indicates did not attend the meeting

**Agenda Item 2: Approval of December 9, 2020 and January 6, 2021 meeting minutes** Ms. Elizabeth Tucker, Chair, referenced the drafts of the December 9, 2020 and January 6, 2021 meeting minutes and asked members if there were any changes. Ms. Tucker requested a motion to approve the December 9, 2020 and January 6, 2021 meeting minutes.

# Motion:

Dr. Glen Medellin made a motion to approve the December 9, 2020 and January 6, 2021 minutes as presented. Ms. Catherine Carlton seconded the motion. The motion passed by a unanimous roll call vote with fifteen approvals, no disapprovals, and no abstentions.

## Agenda Item 3: COVID-19 update

Ms. Michelle Erwin, Deputy Associate Commissioner for Policy and Program, HHSC, and Dr. Ryan Van Ramshorst, Chief Medical Director, Office of the Medical Director, HHSC, provided

a COVD-19 update impacting the STAR Kids program and referenced a PowerPoint titled "COVID-19 Update – Medicaid and CHIP Services March 2021." Highlights of update and committee member discussion included:

- Dr. Ryan Van Ramshorst shared epidemiology numbers, which can be found in detail on the Texas insight COVID updates provided twice a week.
- Ms. Michelle Erwin commented on the flexibilities that have been implemented. She stated current Medicaid and CHIP flexibilities supporting COVID-19 have been extended through March 31, 2021. Families First Coronavirus Response Act (FFCRA) Key Details of Interim Final Rule CMS-9912-IFC COVID-19 Response

#### **Members Discussed**

- Ms. Rosalba Calleros asked about the transition process for those that were older than age 21 but remained in STAR Kids because of the PHE. She requested that HHSC provide information about what can families expect and the timeline for individuals moving from STAR Kids to STAR+PLUS? Ms. Calleros also asked what the assessment would look like for those transitioning?
- Michelle Erwin Deputy Associate Commissioner for Policy and Program, HHSC, stated individuals who were not receiving private duty nursing, or the medically dependent children's programs will transition to Star+PLUS sooner. April 1st is when that transition is supposed to take place. Ms. Erwin indicated that the State still had all of the telehealth flexibilities in place for assessments and reassessments. The State would anticipate a definite conversation between the MCO and the family about what they're comfortable doing. HHSC is making sure the telehealth option is still available for our families in STAR Kids.
- Ms. Elizabeth Tucker, Chair, indicated that in previous presentations HHSC indicates
  that they will work with families if there are extenuating circumstances and are will
  work with MCOs, providers, and others to get them moved to the right program.
- Ms. Michelle Erwin responded saying that's correct. If a member hasn't finished the assessment it will still be finished and regardless of what happens the State is going to make sure members don't lose coverage.
- Ms. Catherine Carlton asked a question regarding a slide from another advisory committee about the allowances of telehealth through March 31<sup>st</sup> and if HHSC anticipates that changing given the Governor's announcement yesterday or is that staying intact.
- Michelle Erwin responded that she didn't expect that this extension that the State recently did through March 31st will change at all and HHSC will continue to examine what next month is going to look like.
- Ms. Elizabeth Tucker, Chair, asked Ms. Erwin if the extensions are based on the federal Public Health Emergency and Ms. Erwin responded they have been to some degree. HHSC for the most part has been looking at this on a month-to-month basis and we look to the federal public emergency in making our decision, but we also have not been one for one following them.

- Dr. Ricardo Mosquera asked a question about the vaccination of the caregivers of children with medical complexity and are other centers doing this for children with medical complexity or do we have to wait until the ones here are scheduled.
- Ms. Michelle Erwin stated that Dr. Van Ramshorst would be the best person to answer that question and informed Dr. Mosquera that she would get back with him.
- Dr. Rahel Berhane mentioned that in addition to the month to month review of what
  things are allowed virtually versus in person, would it be possible for HHSC to
  actually look at some of the lessons over the last year about what functions can
  effectively be offered in person versus virtual no matter the status of the pandemic.
  There have been quite a lot of lessons about how certain functions are actually more
  efficiently done virtually.
- Ms. Michelle Erwin commented that is also part of what HHSC is doing and looking at what makes the most sense what is clinically appropriate.

# Agenda Item 4: STAR Kids/Medically Dependent Children Program (MDCP) legislative updates

Ms. Michelle Erwin, Deputy Associate Commissioner for Policy and Program, HHSC, briefed the committee on STAR Kids/MDCP legislative updates, including but not limited to relevant provisions in SB 1207, Rider 32 and HB 4533 and referenced a PowerPoint titled "STAR Kids Advisory Committee Legislative Update". Highlights of update and committee member discussion included:

#### **Topics covered included:**

- STAR Kids and MDCP
  - Service Delivery regarding HB4533 and SB1207
- SB 1207 Coordination Of benefits
  - Statute-Gov't Code 533.038
  - Policy Guidance regarding Background; Third Party Liability / Recovery; Deductibles, Copayments, Coinsurance; Billing Scenarios Examples; Prior Authorizations; Ordering, Referring, Prescribing Provider; Evidence of non-coverage; Single Case Agreement and Network Adequacy; Specialty Provider; and Resources.
- Autism Services Rider 32

#### **Members Discussed**

- Mr. Josh Britten asked are there any HHSC board or HHSC service that overlooks private insurance sector and what they should cover.
- Ms. Michelle Erwin stated yes, health commercial insurance is overseen by the Texas
  Department of Insurance and so that agency would be in the best position to maybe
  answer some of these questions. In addition, HHSC has a relationship with them and
  she would ask if they have a contact or who she might be able to direct someone like
  Mr. Britten to speak with if that would be helpful.
- Ms. Tucker, Chair, stated that HHSC has provided the committee with the draft Uniform Managed Medicaid Managed Care policy on Coordination of Benefits and if

- members wanted to share their comments that she would coordinate the submission. Members can either send their comments to her or via the subcommittees.
- Ms. Catherine Carlton mentioned that UMCM chapter about coordination of benefits is very complicated and that this presentation was helpful to hear it explained. She stated that she would be happy to combine comments from subcommittee or send individually.
- Ms. Erwin stated if the committee needed another day or two to get through the content of the Uniform Managed Care policy, she would do that. If more time is needed to just let her know.
- Ms. Tucker, Chair, offered that the committee could submit joint comments as a committee by Friday and submit the following Monday.

# **Agenda Item 5: ACE Kids Act Presentation**

Ms. Dana Danaher, Senior Director of Quality & Safety, Children's Hospital of Texas, Dr. Rahel Berhane, Seton-Ascension Hospital and committee member, Ms. Hannah Mehta, community member, and an HHSC executive leadership member, presented on some topics germane to their respective organizations regarding how this legislation may affect its delivery of services to the STAR Kids population and referenced a handout titled "Summary: Advancing Care for Exceptional Kids Act (Public Law No. 116-16)". Highlights of the presentation and committee member discussion included:

#### **Topics covered included:**

- Dana Danaher led facilitated discussion focused on the meaning of what is ACE Kids from a federal perspective. Act was signed into law on April 18<sup>th</sup> of 2019.
- Ms. Hannah Mehta made comments regarding the new law addressed existing challenges that were identified by families and physicians facing children with medically complex conditions.
- Rahel Berhane commented to have come sort of policy is a positive thing. Services
  cross state borders across rare condition are best treated at centers of excellence.
  Looking forward to legislative guidance from Texas to support and encourage
  participation.

#### **Members Discussed**

Ms. Danaher commented there is a lot of knowledge and experience in this space. She stated that if you look down the road for how well care and standardization will be developed, Texas would benefit from the developmental stages since we have a high volume of people in the state.

Dr. Rahel Berhane stated that Texas has some of the most advanced medical homes in our state. She stated that there has been a lot of experimentation about what the best model, so Texas can definitely benefit from informing what the standardization should look like.

Ms. Hannah Mehta stated that families have to be involved in this process and in what the process would look like.

Dr. Ricardo Mosquera made a comment regarding which definition would be used to describe children with medical complexity. He stated that he would participate and share data with medical complexities and wanted to know who to contact.

**Agenda Item 6: Long-term services and supports MDCP utilization review update** Ms. Sylvia Salvato, Director II, HHSC, provided the update and referenced a PowerPoint titled "FY 20 MDCP Utilization Review". Highlights of the updated and committee member discussion included:

# **Topics covered included:**

- FY 2020 MDCP Utilization Review
- Review Process
- Review Standards
- Standard 1 Conduct of Assessment 99.61%
- Standard 2 Assessment Driven Service Planning -80.5%
- Standard 3A Timeliness of Assessments 95.27%
- Standard 3B Follow-Up 67.95%
- Standard 4A Service Delivery Patterns
- Standard 4B Provision of Attendant and Other Services
- Standard 5 Member Experience 99.02%
- Member Interviews
- FY 21 MDCP Review

#### **Members Discussed:**

Committee member stated data demonstrated the tremendous medical fragility of the population.

Ms. Elizabeth Tucker, Chair, commented on ISP transition planning that's happening for children in MDCP and asked if HHSC is gathering information to make sure transition planning is the ISP and that families are satisfied with the information around transition. Ms. Salvato responded that wasn't an area of focus but was open to feedback about things that maybe should have been looked at. Ms. Salvato also stated that if committee could provide questions that she would provide feedback.

Ms. Terri Carriker commented that with surveys our needs are met eventually but sometimes it takes a lot of work and stress to get there and that is never reflected in the survey information.

Dr. Rahel Berhane stated great effort but it's very hard to get to the question that gets to the outcomes that truly matter to families. Committee member made a comment that it would be good to assess all the different providers as to how this program is working.

Ms. Salvato stated that HHSCs focus is to see if members are getting what is needed and whether the MCOs are following the contractual guidelines.

Dr. Van Ramshorst commented that he recognized that the utilization review footprint in STAR Kids is relatively new and is open to improving the process. Commented on need and necessity on transitions of care.

#### Agenda Item 7: Network adequacy and durable medical equipment

Mr. Josh Britten, Committee Member, and Ms. Terri Carriker, Committee Member, led discussion regarding DME and complex rehabilitative technology and their relationship to

network adequacy and referenced a handout titled "Texas Traditional Complex Rehabilitation (CRT) Technology Supplier Location Map". Highlights of the discussion included:

- Mr. Josh Britten's stated that as a DME supplier is a complex definition. Mr. Britten reviewed and explained supplier inconsistencies using the Texas Traditional Complex rehabilitation (CRT) Technology Supplier Location Map.
- Ms. Terri Carriker commented that she had seen on the online parent board an
  increasing number of posts from families that were really struggling to keep DME
  providers. Parents reported that the MCO websites showed up to 20 providers that
  they are contracted with, but, there were only one or two that were in business and
  active with the MCO.
- Ms. Elizabeth Tucker, Chair, commented that the STAR Kids SAI & Medical Necessity/IDD Carve In (SK SAI) subcommittee focus on strong recommendations that could be put forward based on the data and the gaps that currently exist to ensure members get DME they need..
- Ms. Catherine Carlton stated she would appreciate Mr. Josh Britten's feedback and would make sure to keep him informed.

**Agenda Item 8: Non-emergency Medical transportation moving to managed care** Ms. Naomi Carroll, Program Specialist VI, HHSC, led discussion regarding this transition and relevant issues to the STAR Kids population and referenced a PowerPoint titled "Medical Transportation in Texas". Highlights of discussion included:

#### **Topics covered included:**

# Background

- HB 1576 require Medicaid managed care organizations (MCOs) to provide all nonemergency medical transportation (NEMT) services for Medicaid managed care members.
- For Medicaid beneficiaries in fee for service (FFS), HHSC is expanding its FFS service delivery model statewide.

# Member Impacts

- For dates of service on and after June 1, 2021, Medicaid managed care members will request NEMT Services from their MCOs.
- Members will see greater flexibility in requesting transportation services for certain trips requested within less than 48 hours.

#### **Members Discussed**

• Dr. Glen Medellin made comments regarding transportation authorizations. He asked a question regarding if they would be transitioning over to MCOs or will they have to be reauthorized starting June 1. He asked what is the transition process between the old authorizations and the new ones? Ms. Naomi Carroll responded that services are only authorized 30 days in advance and requiring MCOs to honor any existing authorization that are in place up to 90 day or work with member to determine best course of action.

- Ms. Terri Carriker asked if there is a process to incorporate stakeholder input to the transition process. Ms. Carroll responded that HHSC is developing rules that will give avenue to provide stakeholder feedback.
- Ms. Rosalba Calleros made comments on the gas reimbursement and if a child will be required to be enrolled with the state to be able to claim the reimbursement or just go straight to the MCOs to claim the reimbursement. Ms. Carroll responded that HHSC is not planning to be requiring that after the transition and that there will still be a process for drivers to make sure they get the reimbursement.

# **Agenda Item 9: Public Comment**

Mr. John Chacon, ACCO Facilitator, HHSC, read the public comment announcement and opened the meeting to public comment. Highlights of public comment were as follows:

Adrienne Trigg, Mother and Apple Homecare Medical Supply representative, commented that it had been stated that the MCOs have increased medical Network adequacy and so with that information and would really like to know where the data is on that because what was said and heard and substantially different. Ms. Trigg stated that it is the beneficiary who had the greatest burden that accessed this care. Ms. Trigg stated that there were so many layers that the parents went through to access what their doctors and therapists prescribed or suggested. When the families finally found a suitable provider that worked with their child need, they went ahead and filed with these providers at will without cause or without any measured outcomes.

Ms. Tucker, Chair, stated the recommendations were approved by the committee and were a part of the record in the January meeting. She stated that a couple of things that were explicit in our recommendations and that we need to put forward with the ACE Kids Act and the DME pieces. She recognized the work that was put into the recommendations that the committee made in January and thanked Ms. Trigg for her thoughtful comments.

Tammy Wolven, Parent of special needs child, provided oral testimony regarding DME company access to care through HB 1207. Commented that MCO providers refused to honor HB1207 when no other provider within the MCO network can provide service or that no other MCO is available to the member due to their service area. Ms. Wolven referred to the Medicaid service area map that was implemented with the STAR Kids rollout in 2016. DME companies are of critical importance providing lifesaving equipment and supplies to medically fragile children. Commented that trusting relationships had to be maintained and continued with current DME. Ms. Wolven also stated that it is important that the health and well-being of these medically complex children that cannot do without required supplies this relationship needs to be maintained and protected under HB 1207 for out of network status.

Ms. Tucker, Chair, thanked Ms. Wolven for her insights and recommendations.

Hannah Mehta, Parent and Protect Texas Fragile Kids representative, stated that she was very pleased to hear that HHSC is working on a model 5 alternative models of care as directed in legislation. Commented on CDS implementation she agreed with many of the comments that were made based on what we are hearing and seeing from our families. There is a lot of confusion and mixed messages regarding that CDS direction particularly from the MCOs. Commented on SB 1207 as currently drafted, the proposed rule does not meet legislative intent, nor did it incorporate the extensive stakeholder feedback that been ongoing over the past two years stated she would be more than happy to provide the committee with a Copy of PTSQ written comment testimony and with a copy of the

legislative letter addressing major concerns associated with this proposed rule. Asked HHSC about the comments regarding the other network commercial providers receiving rap coverage. Encouraged HHSC to effectively develop a more effective model for the Ace kids act Expressed concerns about HB 6076 continuity of care

Ms. Michelle Erwin stated she wanted to follow up with Hannah Mehta after the meeting.

**Linda Litzinger, Texas Parent to Parent,** Commented, while you are training people in a webinar about using an ambulance versus non-emergency transportation, it should be made clear for children who are in their wheelchair when they ride which way, they will be going for non-emergency transport. DME suppliers can be very overworked and stressed they will come out and measure you and it might be 8 weeks before they followed up with you and usually the order isn't correct. Large corporations have incentive to move to Texas an offer wonderful insurance. When the child reaches age 21, those kids are grandfathered in for life because of that great insurance. HHSC limits benefits to children that don't have this insurance. Please Consider the kids that are aging into the next level of life for STAR Plus.

Agenda Item 10: Review of Action Items and agenda items for future meeting Ms. Elizabeth Tucker, Chair, stated that the next regular meeting is scheduled for Wednesday, June 9, 2021. Action items and agenda topics included:

#### **Topics covered included:**

- Ms. Tucker asked committee members to please get comments to her by Friday,
   March 5, 2021 so the committee can get them to HHSC by Monday, March 8,2021.
- Dr. Berhane stated that the Health Homes subcommittee would be working with a larger group of individuals on developing some next STEPs on ACE Kids Act, including some of the things that were recommended by the individuals that spoke today.
- Ms. Catherine Carlton stated that the SK-SAI subcommittee will convene and will be working further on Durable Medical Equipment specialty providers and network adequacy to bring forward in the June meeting.
- Ms. Elizabeth Tucker, Chair, stated that recommendations about key things that can be incorporated into the utilization review for the next rendition of the MDCP survey. She stated to possibly add mental health needs of youth as an agenda item for next meeting.

# Agenda Item 11: Adjourn and thank you

Ms. Elizabeth Tucker, Chair, thanked committee members, staff, and public members for joining today's meeting. There being no further business, the meeting was adjourned by Ms. Tucker at 1:10 pm.

Below is the link to the archived video of the March 3, 2021 STAR Kids Managed Care Advisory Committee (SKMCAC) that will be available for viewing approx. two years from date meeting was posted on website and based on the HHSC records retention schedule.

STAR Kids Managed Care Advisory Committee