MAC Agenda

July 27, 2023

- 1. Call to order
- 2. Roll call
- 3. Approval of Minutes
- 4. Old Business
 - A. What is status of Anthem MCO?
 - B. Letter to the Governor regarding workforce study. Was letter sent?
 - C. Has UK Analytics completed their updated study of Kentucky's health care workforce? If so, what were the results?
 - D. Update on missed and canceled appointments: How is reporting going? Is there a common thread as to why patients are not showing up for appointments? (Update September 2023 Every 6 months)
 - E. PDS legislative rate increase Eric Wright
 - F. Who are Community Health Workers and how do they function? Report from DMS
 - G. Maternal /Child update (July 2023 and every 6 months)
- 5. Updates from Commissioner Lee
 - A. Update on unwinding Medicaid following end of the state of emergency.
- 6. MCO reports Each MCO will have 10-15 minutes to report.
 - A. Aetna & WellCare July 27
 - B. Anthem & United September 28
 - C. Humana & Passport November 30
- 7. Reports and Recommendations from TACs
 - Behavioral Health
 - Children's Health
 - Consumer Rights and Client Needs
 - Dental
 - ➤ EMS
 - Health Disparity
 - Home Health Care
 - Hospital Care
 - Intellectual and Developmental Disabilities

- Nursing Home
- Nursing Services
- Optometric Care
- Persons Returning to Society from Incarceration
- Pharmacy
- Physician Services
- Primary Care
- Therapy Services

- 8. MCOs report 98-99% adequacy compliance for services, but Kentucky's 3rd party quality contractor (IPRO) "secret shopper" reports only show 30 40% compliance. There is a concern that "adequacy compliance" does not address actual accessibility for services. The MAC requests a report from DMS at the September meeting addressing the discrepancy between the MCO report of compliance versus the IPRO report.
- 9. Physician locum tenens may bill under the absent physician's provider number using a modifier. The locum tenens physician is not required to be credentialed with Medicaid to do this. Many nurse practitioners and nurse midwives are establishing practices and require coverage for their practices when they are on vacation or absent due to illness. Medicaid regulations should be amended to afford APRNs the same opportunity as physician practice owners.
- 10. Are members who are dually-eligible for services (Medicaid and Medicare or Medicaid and a commercial insurer) going to be moved from MCO to FFS (fee for service)?
- 11. Other
- 12. Election of MAC chair, vice-chair and secretary
- 13. Adjourn