IN RE: HOME HEALTH TECHNICAL ADVISORY COUNCIL

ZOOM MEETING

February 15, 2022
11:00 A.M.
All Participants Appeared Via Zoom or Telephonically

APPEARANCES
Annlyn Purdon
CHAIR

Susan Stewart
Evan Reinhardt
Marlene Reynolds
Teudis Perez
TAC MEMBERS PRESENT

CAPITAL CITY COURT REPORTING
TERRI H. PELOSI, COURT REPORTER
900 CHESTNUT DRIVE
FRANKFORT, KENTUCKY 40601
(502) 223-1118
APPEARANCES
(Continued)

Angie Parker
Judy Theriot
Lee Guice
Jonathan Scott
Pam Smith
Jennifer Dudinskie
Erin Bickers
Dawna Clark
DEPARTMENT FOR MEDICAID
SERVICES

(Court Reporter’s Note: At the request of DMS, all other participants appearing via Zoom or telephonically will not be listed under Appearances.)
AGENDA

1) Welcome and Introductions

2) Approval of Previous Minutes

3) New TAC Member

4) Recommendations
   a. HCBS FMAP Funding Plan
   b. Supplies Orders/Quantities
   c. Supply-Only Patients

5) Old Business

6) Adjourn
MS. BICKERS: I think we can go ahead and get started. Is the Chair on here? I do apologize. I’m still learning everybody.

MS. PURDON: I’m here.

MS. BICKERS: Okay. I’m Erin Bickers. Sharley is going to be retiring at the end of the month, so, I am stepping in to try to help run all the meetings. So, I look forward to getting to know everybody and working with everybody.

And if you’re ready, I will go ahead and get everything recording and we can start the meeting.

MS. PURDON: Good to meet you. Nice to have you here.

So, if we’re ready, we will go ahead and start. I guess we will start with a motion to approve the previous minutes. Which month was that?

MR. REINHARDT: They may have already been sorted through. Annlyn, this is just kind of a placeholder from the template for the meeting agenda. So, I’m not sure if we’ve had some of late since we cancelled the last couple.

COURT REPORTER: This is the court reporter.
MS. PURDON: What was our last meeting, October?

MR. REINHARDT: I think so.

COURT REPORTER: This is the court reporter. I’m not sure you have a quorum. Are there two members?

MR. REINHARDT: We have Annlyn and Susan and, then, Marlene, if you can just turn your camera on. Annlyn, Susan and, then, Marlene.

COURT REPORTER: I didn’t see her. I’m sorry.

MR. REINHARDT: Thanks, Marlene.

COURT REPORTER: Thank you.

MR. REINHARDT: You’re welcome.

MS. PURDON: I guess I did skip introductions. Do we need to go through all the members that are here?

MR. REINHARDT: Sure. We can do that real quick.

MS. PURDON: Do you want me to just go through and have everybody say their name and who they are with?

MR. REINHARDT: Sounds good.

MS. PURDON: I’ll start off.

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Annlyn Purdon, Hayswood Home Health.

MS. STEWART: Susan Stewart,
Appalachian Regional Health Care.

MS. REYNOLDS: Marlene
Reynolds, LHC Group.

MS. PURDON: And I don’t know. Do we have that on the agenda? Yeah, that comes later. All right. So, we do have a quorum but we think we’ve already approved all the minutes we have.

MR. REINHARDT: Yes.

MS. PURDON: All right. So, moving on to Number 3, we do have a new member of the TAC. The Association voted in Evan. So, welcome, Evan.

MR. REINHARDT: Thank you.

MS. PURDON: Moving on to Number 4, Recommendations, and I will turn (a) over to Evan.

MR. REINHARDT: This recommendation is related to the HCBS FMAP spending plan that DMS is in progress with putting together and submitting to CMS, and our recommendation would be for that plan to include home health services and private-duty services.

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The initial submission to CMS I think was just focused on waiver funding and services and we’ve had a couple of subsequent conversations about that, but we really wanted to formalize those programs being included, and it’s our suggestion and recommendation that those programs get included in the plan.

So, that’s really it. I’m happy to take any questions or move forward with a motion to approve that as a recommendation.

MS. STEWART: Second.

MR. REINHARDT: All right. A motion and a second. Annlyn, to your discretion, we can take a vote.

MS. PURDON: I’m sorry. Did we have a second?

MR. REINHARDT: Yes. Susan made a second.

MS. PURDON: Good. Thank you. Ready for a vote. All in favor? Motion carries.

So, now, does that just go to the MAC? Is that how that progresses?

MR. REINHARDT: Yes. I think we include a written formal recommendation to the MAC and present that at the next MAC meeting which I
think is March 24th.

MS. PURDON: So, we write that and, then, Susan takes it to the MAC? Is that how that goes?

MR. REINHARDT: Yes.

MS. STEWART: Or Evan present, either one.

MR. REINHARDT: Any member of the TAC can take the recommendations, discuss the previous meeting, take the recommendations and put them before the MAC that, then, formally presents recommendations to DMS and the Cabinet.

MS. PURDON: Okay.

MS. STEWART: And those meetings are virtual, Annlyn, if you ever want to join one.

MS. PURDON: Okay.

MS. GUICE: This is Lee Guice from Medicaid. I just want to bring this one point up. The recommendation has to be the same as it - you have to create the wording that you’re going to take now.

So, if what Evan said. Evan, if you have that written down, it’s been read into the minutes. So, if that’s the wording that you
want, that’s the wording that you need to take.

MR. REINHARDT: The official recommendation is just to include home health and private-duty services in the HCBS FMAP Plan from DMS.

MS. GUICE: Okay. Great.

MR. REINHARDT: It’s pretty straightforward on that one.

MS. GUICE: Good. Thanks.

MS. PURDON: All right. I guess we’re ready for (b).

MR. REINHARDT: Sure. I’ll do this one.

MS. PURDON: Sounds good.

MR. REINHARDT: And, then, Susan, if you want to add any color, but the recommendation here is pretty straightforward again. Those that have been around the Home Health TAC for the last year or two, we’ve talked through the supplies orders and quantities’ issues with the MCOs.

So, at this point, just for the sake of a level playing field and transparency, our recommendation would be that any supplies orders, order requirements or quantity requirements
that MCOs have be published and be available to
providers in a publication, and secondarily, that we
would also recommend to DMS that those orders and
quantities be the same across MCOs. So, you don’t
have to go to one MCO and have “x” be the supply
quantity requirement and then to the next one and
it’s “x” plus ten.

So, our recommendation is that
supplies orders/quantities’ requirements be
transparent and published and available for
providers to view and that MCOs be encouraged to
move towards having the same requirements across
each MCO.

MS. PURDON: I think, Susan,
did you say something but your mute was on?

MS. STEWART: Yes. I said
that’s for all supplies. That’s one of the hurdles
we had historically is when we would get a list, it
wouldn’t be comprehensive. So, it needs to be every
supply that they cover, not just a small piece of
that pie.

MS. PURDON: And it also needs
to include their modifiers because I think they like
to come up with their own creative list of modifiers
that nobody understands.
MR. REINHARDT: All right. If there is no other discussion, I’ll send it back to you, Annlyn, for a second.

So, I will make the motion that this be included as a recommendation and then, for a second and, then, a vote.

MS. STEWART: Second.

MS. PURDON: All in favor, say aye. Motion carries.

MR. PEREZ: Good morning. I apologize for coming in a little bit late. What was this that you guys are recommending, if you guys don’t mind?

MR. REINHARDT: Sure, Teudis. We were just on the supplies orders and quantities’ topic.

So, I put the recommendation forward that those orders and quantities and requirements be made public and transparent in terms of providers being able to know what the requirements are to order supplies, all supplies, and that DMS encourage MCOs to move towards having the same requirements across each MCO. So, they wouldn’t have one requirement for one MCO and a different one for a second.
MR. PEREZ: That would be great.

MS. PURDON: All right. So, I believe we’re on to (c). Do you want to take that away, too, Evan?

MR. REINHARDT: Sure. So, we’ve had some discussion amongst our association on this and I think where we are is that we would like to make a recommendation that for supply-only patients – and I believe this is for – remind me the term, the specific term, Susan. What specific supplies is this again, Annlyn?

MS. PURDON: Incontinence.

MR. REINHARDT: Incontinence, yes. So, for that patient type that typically is supply only for incontinent supplies, that DMS look at moving that to the DME fee schedule or payment side of things with an ability for home health agencies that remain in that space, for them to be able to do it but for that to be something in terms of the program and reimbursement would be moved from the home health side of things to the DME side of things.

So, I think that’s a pretty standard practice in other states. Kentucky was
pretty unique in that regard that it was housed, that particular program was housed in the home health program or benefit.

So, we’d like home health agencies, if they’re so inclined to continue to serve those patients, but for DME to be able to take over the lion’s share there.

So, the specific recommendation would be for incontinent supply-only patients to now have their reimbursement in the DME program and to allow home health agencies, if they’re interested, to continue to serve those patients.

MS. STEWART: To put that in perspective for the DMS people on the call, right now in Eastern Kentucky, there’s not a home health agency that really does supply-only.

So, patients are really going without right now because it’s not covered under the DME fee schedule.

MS. GUICE: Susan, are you saying that – Lee Guice again. Sorry. Are you saying that there are home health agencies in Eastern Kentucky who are refusing to service supply-only patients?
MS. STEWART: I wouldn’t say the word refused. I would say that’s not a thing that they offer.

MS. GUICE: Okay. They don’t offer the service. Did they used to offer the service? Did they offer that service in prior years and have just determined that it’s not – I don’t know – not financially reasonable for them to engage in it?

MS. STEWART: Well, I mean, it’s a multi-facet thing. It’s storage and ordering and receiving it. Patients want this one today and the next time or they want a different one.

The margin is minimal for the headache involved.

MS. GUICE: Okay.

MS. STEWART: I mean, we have very few supply-only patients and we used to have a large volume but storage became an issue and patients changed their minds about what they want and you get stuck with large boxes of stuff, but I think that it has – patients are going without here because they can’t get it through the DME providers, and I’m a DME provider as well.

So, I’m not saying if it gets
moved over there that it would be any - I would
immediately start doing it because I would again
have to weigh margins versus costs.

MS. GUICE: Okay. Thank you
for that kind of back story. Appreciate it.

MS. STEWART: You’re welcome.

MR. REINHARDT: And, Lee,
that’s consistent feedback across the membership.
The issue they run into is a family might want a
specific brand of a diaper, for example, that the
agency doesn’t have under contract or doesn’t have
readily available. So, then, they’ve got to go try
and chase down that brand.

So, there’s just some
administrative and oversight issues that add to the
cost of administering the benefit and the result is
that thin margin that exists just sort of disappears
in it. It becomes a loss liter, for lack of a
better term.

MS. GUICE: I think that’s kind
of interesting because I’m not sure that in many
other areas of health care that the families or the
patients get to decide what it is that they want
brand-wise.

So, that’s why I was very
interested in that piece of information. That’s
something I’m not used to.

MS. STEWART: Lee, they can go
to a doctor and tell the doctor I want you to write
an order for XYZ and we have to try to find XYZ.

MS. GUICE: Okay. Okay. I
appreciate the information. Thank you.

MS. PURDON: And I think on our
end, it’s just that we don’t do supplies, and DME’s,
that’s just what they do for a living. So, it’s
just hard for us to get it ordered, get it there on
time, figure out and we’ve tried it every way.
We’ve had it ordered, shipped here in bulk and,
them, had patients pick it up here. We tried
sending out our aides and delivering it to them.
We’ve had it drop-shipped to the house. I’ve had
that it got rained on, the dog ate it.

It’s such a headache, and I
just feel like DME’s, this is what they do for a
living and they can probably do it way better than
what I do because I do home health way better than
what I do supplies.

MR. PEREZ: On the other hand,
we do have a large supply-only program and we now
and then we do encounter some of those issues as
well, but we are doing pretty well as far as
providing those services.

    So, as I say, every agency is
different but we are not having as many issues as
other agencies providing a supply-only in our area
and that’s why we want to remain providing those
services.

MS. GUICE: Mr. Perez, what’s
the name of your agency?

MR. PEREZ: Green River
District Home Health. We are based out of our local
Health Department.

    MS. GUICE: Thank you.

MS. STEWART: And, Lee, I’ll
just comment. Teudis has a benefit that some of us
don’t have which is cost-based reimbursement.

    MR. PEREZ: That is true. We
do cost settle analogy as well. That helps a lot.

    MS. GUICE: Yes, it always
does.

    MR. REINHARDT: All right. So,
we need to take a motion and a second and, then, get
a vote on that. I’ll make a motion on the supply-
only recommendation.

    MS. STEWART: I’ll second.
MS. PURDON: All in favor?

Motion carries.

Do we have any Old Business?

MR. REINHARDT: That one was on there, I think, as a place order. I think we’ve covered everything in terms of Old Business and the recommendations with the supplies. So, we should be good to go there.

MS. PURDON: Alright. Well, with nothing else, do we have a motion to adjourn?

MS. STEWART: Wait. Before we adjourn, at our next meeting, could we get some updates from the MCOs and from DMS on things that are happening in those realms?

We used to get that when we met in person and we’ve kind of lacked that since we’ve gone virtual.

MS. BICKERS: If you can email me that, I will work on trying to get a representative at your all’s next meeting.

MS. GUICE: If you put it on the agenda - I’m sorry, Erin - I didn’t mean to interrupt you. If you put that on the agenda and submit your agenda in a timely manner, then, that’s what Erin will make sure that she tries to - that
she sends that out and lets everybody know what kind of update you want, what your questions are and who you want to respond to them.

MS. STEWART: I wouldn’t say necessarily we have questions. It would just be them giving us updates on what’s happening in their — like, when we used to meet, you know, I can’t even tell you who is over some of the Departments now because we’ve not met in person for so long. We used to have those interactions on who replaced who and such as that.

I mean, I just want updates. It doesn’t necessarily mean we have questions, just tell us what’s going on.

MS. GUICE: Like I was just trying to say, you just need to put it on there if you have specific questions. If you don’t, then, just put DMS updates or MCO updates or whatever, but we kind of need to have some notice about what it is that you want.

And that notice, really, that’s what your agenda serves is the notice to Medicaid and to all of our MCO partners.

MS. STEWART: Got it. Thank you.
MS. BICKERS: Thank you, Lee.

MR. REINHARDT: Well, unless there’s any other discussion or questions, I’ll make the motion to adjourn.

MR. PEREZ: Second the motion.

MS. PURDON: Thank you, everybody, for your time.

MEETING ADJOURNED
HOME HEALTH TECHNICAL ADVISORY COMMITTEE
Frankfort, Kentucky
February 15, 2022 – 11:00 a.m. EST

TAC members in attendance via Zoom or telephonically: Annlyn Purdon, Susan Stewart, Evan Reinhardt, Marlene Reynolds and Teudis Perez.

Medicaid staff in attendance via Zoom or telephonically: Angie Parker, Judy Theriot, Lee Guice, Jonathan Scott, Pam Smith, Jennifer Dudinskie, Erin Bickers and Dawna Clark.

Managed Care Organizations (MCO) in attendance: At the request of DMS, MCO participants appearing via Zoom or telephonically will not be listed under Appearances.

Others in attendance: At the request of DMS, all other participants appearing via Zoom or telephonically will not be listed under Appearances.

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Welcome and Introductions: The meeting was called to order by Ms. Purdon and the TAC members introduced themselves. A quorum was present. Erin Bickers introduced herself and stated that she would be replacing Sharley Hughes as the liaison between DMS and the TAC. Her email address is erin.bickers@ky.gov.

Approval of Previous Minutes: All previous meeting minutes had previously been approved and there was no action needed.

New TAC member: Ms. Purdon introduced Evan Reinhardt as the newest TAC member who was appointed by the Kentucky Home Health Association.

Recommendations:
(a) HCBS FMAP Funding Plan: A motion was made, seconded and approved that the HCBS FMAP Funding Plan from DMS includes home health services and private-duty services.
(b) Supplies Orders/Quantities: A motion was made, seconded and approved that all supplies’ orders/quantities’ requirements be transparent and published and available for providers to review and that DMS encourage the MCOs to move towards having the same requirements across each MCO.
(c) Supply-Only Patients: A motion was made, seconded and approved that incontinent supply-only patients have their reimbursement in the DME program and to allow home health agencies, if interested, to continue to serve those patients.

The above recommendations will be presented by Susan Stewart to the Medicaid Advisory Council (MAC) held on March 24, 2022.

Old Business: There was no other Old Business. Ms. Stewart asked to get updates from DMS and the MCOs at the next meeting, and Ms. Guice asked that those requested updates be placed on the agenda in a timely manner in order to give DMS time to have appropriate staff at the meeting to respond.

Adjourn: The meeting was adjourned.

(Minutes were taped and transcribed by Terri Pelosi, court reporter, this 15th day of February, 2022.)