1
2 CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES
3 CHILDREN'S HEALTH
TECHNICAL ADVISORY COMMITTEE MEETING
4
****
5
6
7
8
9
10
11
12 Via Videoconference
September 13, 2023
13 Commencing at 2:03 p.m.
14
15
16
17
18
19
20
21
22
23 Shana W. Spencer, RPR, CRR
Court Reporter
24
25

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 **APPEARANCES**

2

3 **BOARD MEMBERS**:

4 Donna Grigsby, MD

5 Alicia Whatley

6 Mandy Heacock

7 Dr. Amanda Ashley

8 Courtney Smith, PhD

9 Cherie Dimar

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

1 P R O C E E D I N G S

2 CHAIR GRIGSBY: Okay. I guess I
3 could go ahead and welcome everyone who is
4 here. We do have a couple of new members,
5 and hopefully they will be joining us
6 shortly. And we would like to let them
7 introduce themselves.
8 But if you are here with one of the MCOs
9 or with DMS, if you could put your
10 information in the chat, so we know you're
11 here.
12 We do have a quorum, so we can vote on
13 the minutes from July the 12th. Do I have a
14 motion from one of the TAC members?
15 DR. SMITH: I motion approval of
16 the minutes.
17 CHAIR GRIGSBY: And do I have --
18 MS. DIMAR: I second.
19 MS. WHATLEY: I second.
20 CHAIR GRIGSBY: Thank you. All in
21 favor?
22 (Aye.)
23 CHAIR GRIGSBY: Okay. Any opposed?
24 (No response.)
25 CHAIR GRIGSBY: Okay. Very good.

1 MS. BICKERS: Donna, one of your
2 Mandys just joined. But it just says
3 "Mandy," so I don't know which one.
4 CHAIR GRIGSBY: Okay. Well,
5 hopefully, I would like -- let me go back to
6 the first item on the agenda, which is to
7 welcome our new members. I believe we have a
8 new member of the TAC who has joined us. So
9 if you could introduce yourself and the other
10 TAC members, we can also introduce ourselves
11 and talk briefly about our -- what
12 organizations we represent.
13 MS. BICKERS: Mandy, were you able
14 to get logged in?
15 CHAIR GRIGSBY: Mandy, are you
16 there? I see a Mandy. Is this --
17 UNIDENTIFIED SPEAKER: They're
18 wanting you to introduce yourself.
19 DR. ASHLEY: Are we on here? Okay.
20 Hello. Hi. This is Dr. Ashley.
21 CHAIR GRIGSBY: Welcome to the
22 Child's Health TAC. Can you tell us a little
23 bit about yourself?
24 DR. ASHLEY: Yes. Yes. So I'm a
25 pediatric dentist. I'm now in my 25th year

1 of practicing dentistry. I own -- I practice
2 here in South Central Kentucky, in Bowling
3 Green, Kentucky; Hopkinsville; and Glasgow.
4 We see at least 60 percent of our total
5 patients with Medicaid. And I feel like with
6 my background in public health from my 11
7 years in the Indian Health Service in Barrow,
8 Alaska, and with coming -- you know, working
9 day-to-day here on the ground in South
10 Central Kentucky, I might have a bit to offer
11 as a provider that sees a high -- a high
12 number of kids with Medicaid and just some of
13 the challenges that we face.
14 CHAIR GRIGSBY: Well, thank you so
15 much and welcome to the group.
16 DR. ASHLEY: Thank you.
17 CHAIR GRIGSBY: We are happy to
18 have you with us. I'm Donna Grigsby. I am
19 currently the chair of the Child Health TAC.
20 I am a pediatrician at UK, and I am
21 representing the Kentucky -- or the Kentucky
22 chapter of the American Academy of
23 Pediatrics.
24 DR. SMITH: Hi, Mandy. I'm
25 Courtney Smith, and I'm the co-chair of the

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 TAC. And I'm a clinical psychologist --
2 actually, a pediatric psychologist working at
3 the University of Louisville and Norton
4 Children's Hospital. I'm actually the solid
5 organ transplant psychologist, so I work
6 mostly in the hospital in the medical
7 clinics.
8 MS. DIMAR: And hi, Mandy. I'm
9 Cherie Dimar. I'm with the Kentucky Parent
10 Teacher Association. And we not only try to
11 help parents get more involved in the schools
12 and be in leadership positions in the schools
13 as parents but, also, we do a lot of advocacy
14 work around the areas of health and safety.
15 DR. ASHLEY: All right. Thank you.
16 DR. SMITH: I failed to say that I
17 represent Kentucky Psychological Association.
18 Sorry about that.
19 DR. ASHLEY: Thanks.
20 CHAIR GRIGSBY: And, Alicia, are
21 you here?
22 (No response.)
23 CHAIR GRIGSBY: I thought I saw
24 her.
25 MS. BICKERS: She was here a second

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 ago.

2 CHAIR GRIGSBY: Yeah. I thought

3 she was here.

4 MS. BICKERS: She's turned her

5 camera off. Maybe she had to step away

6 briefly.

7 CHAIR GRIGSBY: Oh, okay. Okay.

8 When she -- I'll keep my eye out, and when

9 she comes back, hopefully she can introduce

10 herself. But Alicia is with Kentucky -- oh,

11 there she is hopefully.

12 Alicia, can you hear us? We were just

13 introducing --

14 MS. WHATLEY: Hi. This is

15 Alicia -- can you hear me?

16 CHAIR GRIGSBY: Yes.

17 MS. WHATLEY: Maybe not. Can you

18 hear me? Sorry.

19 CHAIR GRIGSBY: Yes. Alicia, we --

20 is that you? We can hear you.

21 MS. WHATLEY: Okay. Yes. Awesome.

22 Sorry. I'm having some Internet issues, so I

23 had to switch over.

24 My name is Alicia Whatley. I'm with

25 Kentucky Youth Advocates, and so we work on a

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 lot of health policy as it relates to kids in
2 the state.
3 CHAIR GRIGSBY: All right. And
4 we'll keep our eye out. We have one more new
5 member who's taking Michael Flynn's place.
6 She may not have been able to join us today,
7 but we'll definitely keep an eye out.
8 So welcome to our new members, and thank
9 you to our not-so-new members for being here
10 today.
11 We have approved the minutes, so we're
12 going to move forward. I am always very
13 respectful of everyone's time. So we're
14 going to move to old business, which is the
15 DMS report on social determinants of health.
16 For those of you that were here last
17 month and for those of you that are new to
18 us, we actually had wonderful reports last
19 meeting, two months ago, from our MCOs about
20 all the services that they provide to
21 families, particularly those that are facing
22 homelessness.
23 And so DMS is going to give us a report
24 on kind of their resources for social
25 determinants of health. I'm not sure who is

1 speaking to us, but I'm going to be quiet
2 now.
3 MS. PARKER: Hello, Donna. This is
4 Angie Parker. I'm the Director of Quality
5 and Population Health, which part of the --
6 the social determinants of health, we have a
7 branch for that. But who will be speaking on
8 the topic, one social determinant of health
9 is the access to transportation, and that's
10 Rachel Roehrig. She'll be going over that
11 presentation.
12 CHAIR GRIGSBY: Okay. Thank you.
13 So, Rachel, would you like to start?
14 MS. BICKERS: And, Donna, just to
15 cut in really quick, it looks like our other
16 new member -- our other Mandy has joined.
17 CHAIR GRIGSBY: Oh, perfect. So
18 let's see. I'm -- I know. I'm trying to
19 look at the screen to find Mandy Heacock.
20 Mandy, the members of the TAC just introduced
21 ourselves. So if you would like to -- since
22 you're the newest member or one of the two
23 new members, would you like to introduce
24 yourself and tell us a little bit about
25 yourself?

1 MS. HEACOCK: Sure. Can you hear
2 me?
3 CHAIR GRIGSBY: Yes.
4 MS. HEACOCK: Okay. I'm Mandy
5 Heacock. I am a youth service center
6 coordinator in Frankfort at Bondurant Middle
7 School and Western Hills High School.
8 CHAIR GRIGSBY: Okay. And you're
9 representing the FRYSCKys, I believe; is that
10 correct?
11 MS. HEACOCK: Yes.
12 CHAIR GRIGSBY: Okay. Wonderful.
13 Well, welcome to the group.
14 Okay. Let me turn it back over to
15 Rachel.
16 MS. ROEHRIG: Thank you, Donna.
17 And good afternoon, everyone. Give me just a
18 minute, and I'm going to share my screen.
19 Okay. Can everyone see this all right?
20 All right. Good deal.
21 So we first presented this to the
22 Disparity TAC, and it was requested to be
23 reiterated here. So we were very happy to do
24 that. Our goal with this particular bit of
25 research was to combine all current

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 transportation options that are currently
2 available to Medicaid recipients and to have
3 that in one place so that we have a more
4 holistic understanding of what access to care
5 the families and the Medicaid members
6 currently have available.
7 So as we go through, we're going to
8 review transportation that's provided by the
9 State, different ones by the MCOs, by
10 community-based organizations, and through
11 public transportation services within a
12 targeted area. The area that we targeted for
13 this presentation is in Eastern Kentucky.
14 So why did we choose to look at Eastern
15 Kentucky specifically? We've identified 27
16 different counties whose population consists
17 of 50 percent more that make up the Medicaid
18 members compared to the population of that
19 county. So these counties are highlighted
20 here in yellow on the Kentucky map and are
21 predominantly in Eastern Kentucky.
22 Here we have a graph that shows the
23 enrollment in the targeted four areas or four
24 regions that are based on the identified
25 counties in Eastern Kentucky that is broken

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 down by the MCO enrollments for those
2 members. So the top MCOs for that targeted
3 area is WellCare that's shown in
4 green followed by Aetna that's shown in red.
5 Similar to our previous Kentucky map
6 showing the Eastern Kentucky area with the
7 highest Medicaid population compared to the
8 county population, this map also shows, with
9 the dark green areas in there, the worst
10 health outcomes across the state are also
11 mostly and predominantly located in Eastern
12 Kentucky.
13 So for these reasons, we're going to
14 take a closer look into what transportation
15 services are available to Medicaid members in
16 this specific area and the utilization of
17 those services that are taking place.
18 Here we have the three different
19 transportation options that are provided by
20 the State. So we have emergency ambulance
21 transportation services; nonemergency
22 ambulance transportation; and the most widely
23 known and used, nonemergency medical
24 transportation.
25 So it can get a little complex. So to

1 break down how it works for Kentucky, DMS
2 contracts with the transportation cabinet to
3 oversee all Medicaid transportation services.
4 The transportation cabinet oversees the human
5 service transportation delivery program
6 through which there are 16 regional brokers
7 that can either provide the transportation
8 services themselves or subcontract with other
9 transportation providers that are in their
10 specific area.
11 If a rider does not express a
12 preference, then the broker will select the
13 provider for them. And the transportation
14 type will depend on the transportation that
15 is accessible for the client and appropriate
16 to meet their medical condition and personal
17 capabilities while also being at the lowest
18 cost.
19 Transportation brokers are the only ones
20 who can schedule NEMT services. Their other
21 specific tasks are shown here broken down,
22 and they can utilize subcontractors to
23 provide the NEMT rides by taxi, sedan,
24 stretcher vehicle, public bus tickets or bus
25 passes, accessible vans, and private

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 automobile rides.
2 These are the details on how Medicaid
3 members can request those NEMT services in
4 general. So this is for you all to have to
5 review and refer back to as needed.
6 So we're going to take a closer look at
7 NEMT, and what we found is that trips are
8 continuing to rise, nearing pre-COVID levels.
9 Approximately 240,837 trips per month were
10 utilized by Medicaid members from July 1st,
11 2022, to February 28th, 2023.
12 So there's no caps on the number of
13 times a member can schedule a needed trip to
14 a service. Transportation is available in
15 all 120 counties. There is a 72-hour notice
16 that's required for scheduling, and
17 transportation after discharge from the
18 hospital can be requested during normal
19 operating hours without that prior notice.
20 All transportation services are ADA
21 compliant.
22 So DMS has proposed regulation changes
23 to help related to transportation that
24 includes removing the current restriction
25 that members currently have requesting NEMT

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 services in which they cannot have a vehicle
2 in their own household in order to be NEMT
3 eligible. A vehicle cannot be in the
4 individual's name unless there is a doctor's
5 note stating that they can't operate the
6 vehicle or a mechanic's note saying that it's
7 no longer in operation.
8 There's also a proposal to allow parents
9 or guardians of minors to request a two-week
10 exemption for the child for a
11 Medicaid-covered service trip with their
12 parent or guardian as they have the same
13 ownership status as their custodial parent or
14 guardian.
15 Transportation providers will no longer
16 be able to self-refer members. And upon
17 approval of the 1115 waiver, NEMT will also
18 be provided for methadone treatment services.
19 Additional NEMT data is that for fiscal year
20 2022, there were 2,385,922 trips provided for
21 Medicaid members.
22 Urgent care transportation is available
23 24/7 including holidays. Urgent care is
24 defined as an episodic situation in which
25 there's not a threat to life or limb, but the

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 recipient needs to be seen within 12 hours in
2 order to avoid the onset of an emergency
3 medical condition. So this does not include
4 an emergency trip that is to be addressed by
5 qualified emergency services. Transportation
6 to the emergency room is not covered through
7 NEMT unless there is an order for a direct
8 hospital admit through the emergency room.
9 Of importance is for those that need to
10 bring a child or other individual to their
11 appointment, it is 100 percent up to the
12 transportation provider that's actually
13 providing that transportation service to the
14 client directly to provide the transportation
15 without charging them for the child or
16 individual. It depends on a lot of different
17 factors but mainly the availability of seats
18 and if the other seats have been purchased by
19 other members that need to get to their
20 appointments.
21 Vehicles used in the program consist of
22 revenue-producing seats. So for the
23 transportation provider, it's up to them if
24 they will allow a member to bring someone
25 else without charging them. Usually, this is

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 not an issue. The way that it works is the
2 member is put in contact with the
3 transportation provider directly by the
4 transportation broker. So that way, the two
5 of them can work out those logistics.
6 Medicaid doesn't have the authority to
7 make that decision. Only the transportation
8 provider has that ability. And most
9 subcontractors do allow members to bring
10 child in most circumstances.
11 So now shifting to the MCO world. MCOs
12 can provide additional assistance for their
13 members through value-added benefits. A
14 value-added benefit is defined as any benefit
15 or service that's offered by the MCO with
16 that benefit or service -- or when that
17 benefit or service is not a covered benefit
18 per the state plan. So these benefits are
19 additional, and they're subject to change
20 annually as determined by each specific MCO.
21 So breaking down these value-added
22 benefits for 2022 by MCO, we have Aetna
23 Better Health of Kentucky that offered two
24 transportation value-added benefits, one
25 called enhanced transportation. That was for

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 going to job interviews, training, going to
2 the grocery store, community health services.
3 And there were five members that utilized
4 this service in those 27 identified counties
5 in the year 2022.
6 The second value-added benefit is called
7 family transportation, and that's for members
8 enrolled in their Maternity Matters program
9 that can receive transportation provided for
10 the family including a car seat for children.
11 However, there was zero members in those 27
12 identified counties that utilized that
13 service. Both value-added benefits are
14 limited to ten round trips per year.
15 For WellCare for 2022, they did not have
16 any current transportation value-added
17 benefits. What they are able to do is make
18 referrals to Kentucky's NEMT program through
19 their Community Connections help line. The
20 referrals include general transportation
21 support and medical transportation support.
22 We found that 52 members utilized the
23 general transportation services offered by
24 WellCare in those 27 counties. In 2022,
25 there was 52 members. There was 83 members

1 that utilized the specific medical
2 transportation value-added benefit or
3 referral in 2022 for those targeted counties.
4 And the highest number of referrals to the
5 NEMT program was -- through WellCare was
6 Floyd and Perry County.
7 UnitedHealthcare doesn't currently have
8 any transportation value-added benefits.
9 They offer nonemergency stretcher
10 transportation as their value-added benefit
11 and -- which it's not provided through NEMT
12 transportation brokers. And there were zero
13 members that utilized that resource in 2022
14 within those 27 counties.
15 Anthem offered one transportation
16 value-added benefit in the form of a
17 50-dollar gas card, bus pass, or Uber card.
18 And that's for all members that are age 18
19 and over that completed a health risk
20 assessment within the first 6 months of the
21 year and a wellness check within 12 months.
22 They could obtain this benefit on a quarterly
23 basis with a max allowance of $200 per
24 member.
25 With the highest utilization thus far,

1 658 members utilized this value-added benefit
2 in those 27 counties in year 2022. The top
3 counties of utilization was Whitley, Knox,
4 and McCreary. And the gas card, bus pass, or
5 Uber card has increased for 2023 on a
6 biannual basis to $100.
7 Passport by Molina Healthcare offers two
8 transportation value-added benefits, one in
9 the form of a 50-dollar gas card, bus pass,
10 or Uber card. Similar to Anthem, however,
11 the qualification in order to get that
12 value-added benefit is a bit different. This
13 is only for members that are already engaged
14 in supportive services through case
15 management. So they have been identified as
16 needing a higher level of care, higher level
17 of need for those case management services.
18 There were 40 members that utilized this
19 value-added benefit in those 27 counties in
20 2022 with the top counties being Whitley
21 again, Knox, and Johnson.
22 The second value-added benefit that
23 Passport provided is a reimbursement program
24 for lodging, meals, and transportation to
25 medical appointments. Dependent on

1 enrollment in case management, similar to the
2 first value-added benefit, and there's other
3 stipulated limitations.
4 Nineteen members utilized the
5 reimbursement value-added benefit in 2022
6 with the top counties being Bell, Magoffin,
7 and, again, Whitley.
8 Humana Healthy Horizons does not
9 currently offer any transportation
10 value-added benefits. Instead, similar to
11 United, their care managers make referrals to
12 Kentucky's NEMT program for their members.
13 And they provide follow-up with the member to
14 confirm the transportation scheduling was
15 complete, that they have any follow-up visits
16 scheduled and taken care of on that end.
17 There was a total of 36 referrals made
18 in those 27 counties using this approach in
19 2022 with the highest number of referrals
20 being in Lawrence County.
21 Of note, Humana also has two pilot
22 programs that include maternity
23 transportation in Louisville and a Buss Pass
24 Pilot program to members receiving care at
25 Seven Counties Services.

1 At the very end of this presentation in
2 the appendices, there is a much more thorough
3 breakdown of this information for you all to
4 look at when you have additional time. This
5 is a much higher-level overview.
6 So here we have the community-based
7 organization of Community Action Agencies and
8 what transportation services they provide.
9 They include mobility service, door-to-door
10 service, and curb-to-curb service. The
11 transportation they provide can be used for
12 employment purposes, medical appointments,
13 pharmacy, education, shopping, or just to
14 visit someone. They do need a 24-hour notice
15 to schedule that.
16 And below here, this 800 number and the
17 *capky.org* has a lot of additional information
18 for individuals and residents that may want
19 to go that route if they don't qualify for
20 NEMT.
21 There's also public transportation;
22 right? And that's for all individuals. The
23 targeted counties' transportation providers
24 are listed here to have contact information
25 for those particular counties and regions.

1 So we've discussed the issue with access
2 to transportation and the different things
3 that are available to the public and to
4 Medicaid members. So to summarize,
5 transportation assistance is available by the
6 state, MCOs, community-based organizations,
7 and through public transportation, all of
8 which are ADA compliant.
9 Additional transportation support is
10 needed in the Eastern Kentucky area where our
11 identified counties that consist of 50
12 percent or more of residents being Medicaid
13 members can be focused on.
14 We did find in this research that the
15 highest utilization in these areas of
16 transportation services is in Whitley County,
17 Floyd, Knox, and Bell County.
18 NEMT is the largest used transportation
19 service for Medicaid members currently. And
20 here, this is a clickable link where it has
21 NEMT workbook that has a lot of good
22 information on the ins and outs of the NEMT
23 process and breaking down at a very
24 understandable level how they all connect and
25 how that works.

1 We also found that the top value-added
2 benefit for transportation used by members in
3 2022 in our area was the 50-dollar gas card,
4 bus pass, or Uber card that had limited
5 eligibility requirements in order to receive
6 it.
7 The great news is, is that there are
8 opportunities to increase access to
9 transportation for our members. We can
10 continue and we will continue to evaluate
11 ways to improve transportation and access to
12 care for underserved communities.
13 MCOs can and have began evaluating their
14 value-added benefits related to
15 transportation; member and provider education
16 on how to connect with the local
17 community-based organizations like Community
18 Action and public transportation options if
19 the member does not qualify for NEMT
20 services; can improve communication regarding
21 the NEMT process to members and to update
22 that NEMT regulation.
23 Now, again, located at the end here,
24 this appendices has a lot of really good
25 information that breaks down how exactly can

1 members access these value-added benefits at
2 the MCO level and additional information for
3 NEMT broker listings. So I definitely would
4 recommend going through that. It's got a lot
5 of good information as well.
6 So with that, I'll be happy to take any
7 questions, comments, concerns.
8 CHAIR GRIGSBY: Thank you. Any
9 questions or comments by members or by the
10 MCOs, for that matter?
11 (No response.)
12 CHAIR GRIGSBY: I did have a couple
13 of questions myself.
14 MS. ROEHRIG: Sure.
15 CHAIR GRIGSBY: One is that I know
16 that a sticking point for some families is
17 that they have a car. Even if there's a car
18 that is -- and so can you explain a little
19 bit more about the change in the regulation
20 with the car?
21 Because I know sometimes our families
22 run into problems with: We have a car, but
23 Dad has to go to work, or Mom has to go to
24 work. And we don't have a second car to get
25 the child to appointments.

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 So can you comment on that a little bit?
2 MS. ROEHRIG: I can, but Justin
3 Dearinger would be even better. He's in
4 charge of that proposal.
5 So I wonder -- Justin, are you on the
6 call by chance?
7 MS. BICKERS: He's not.
8 MS. ROEHRIG: Ah. Okay.
9 MS. BICKERS: I was looking to see
10 if maybe Jonathan was on for regulation
11 questions, but I don't see him either.
12 MS. ROEHRIG: Oh, goodness. Okay.
13 Well, we can certainly get a more thorough
14 answer when Justin is able to join. But we
15 do recognize that that is a restriction
16 holding people back from scheduling and being
17 eligible for NEMT, and that's why it's part
18 of that proposal so -- with removing that
19 restriction.
20 So that way, once -- if and when this is
21 approved, if they have a vehicle in the home
22 that's in their name, that should no longer
23 be an issue as long as there is a doctor's
24 note stating they can't operate it or a
25 mechanic's note saying that it's not

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 operational.

2 CHAIR GRIGSBY: Okay. So -- but

3 they still have to have a note -- right? --

4 that says the vehicle isn't operational. So

5 it really isn't going to help with the issue

6 if you have a car and somebody has to go to

7 work; right?

8 MS. ROEHRIG: Well, no, not

9 necessarily. So the first proposal being to

10 remove the current restriction. So right

11 now, that's the restriction that you're

12 talking about, and we are wanting that

13 completely removed.

14 However, say that there is -- some

15 people have a lot of vehicles, you know, left

16 on their property. It's not working anymore,

17 but it is potentially a resource. So the

18 idea is to say that even though this vehicle

19 is in this person's name, we have a

20 mechanic's note saying that it's no longer

21 operational. So we're not going to consider

22 this in the eligibility determination.

23 CHAIR GRIGSBY: Okay.

24 MS. ROEHRIG: Yes.

25 CHAIR GRIGSBY: Okay. Thank you.

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 MS. ROEHRIG: Yeah. So good
2 changes coming.
3 CHAIR GRIGSBY: And clearly I was
4 confused. Yeah. Okay.
5 MS. ROEHRIG: I probably didn't
6 articulate that right, so I apologize.
7 CHAIR GRIGSBY: And is there a
8 restriction on if it's -- if the visit is for
9 a child, we know they have to have a parent.
10 Because you were talking about parents having
11 appointments and bringing children. Is there
12 a limit? Can a child have both parents? Can
13 a child have one parent? Is there any
14 restriction on that currently?
15 MS. ROEHRIG: I can definitely take
16 that back and verify with Office of
17 Transportation since they're over that. But
18 I would suspect that it would be very similar
19 to that with the -- bringing the child and
20 the transportation provider, if they have the
21 seats available because it's charged by each
22 seat.
23 But let me make sure and get back to you
24 from the Office of Transportation. So that
25 way, we get an official answer.

1 CHAIR GRIGSBY: Because I would
2 think you would have to -- you know, a child
3 can't bring themselves, I mean, can't come by
4 themselves.
5 MS. ROEHRIG: Right.
6 CHAIR GRIGSBY: So I feel like you
7 would -- it would have to be two purchased
8 seats for a -- at least for a child's visit.
9 MS. ROEHRIG: Yes. The question is
10 about both parents. I'm not sure about the
11 both parents. But yes, of course, a guardian
12 or parent would -- at least one, yes.
13 CHAIR GRIGSBY: Okay.
14 MS. WHATLEY: Donna, this is Alicia
15 Whatley. I also had a question there.
16 Can you all hear me now?
17 CHAIR GRIGSBY: Yes.
18 MS. WHATLEY: Okay. Perfect. So
19 I'm having Internet issues today.
20 Kind of in the same vein there, we've
21 had some folks report to us difficulty with
22 using the transportation when the appointment
23 is for a child who's covered and the parent
24 is using transportation to bring that child.
25 But they also have siblings that the parent,

1 you know, needs to bring with them because
2 they don't have child care for siblings.
3 So just -- I just want to raise that as
4 another barrier for families that have more
5 than one child in the home, and the parent
6 doesn't have the ability to leave another
7 child behind and needs to bring multiple
8 children to the same appointment.
9 MS. ROEHRIG: Absolutely. And
10 that's a wonderful point. I'll definitely
11 take that back to them at Office of
12 Transportation. It is usually at the
13 discretion of the individual transportation
14 provider and how they do that. But, again,
15 let me get you an official answer because
16 those are great questions.
17 DR. THERIOT: Hi, Alicia.
18 That's -- this is Dr. Theriot. That's
19 exactly what I was going to say.
20 And sometimes when the appointment is
21 booked, there are no other passengers. But
22 then by the time the driver comes to pick up
23 the family, there are other passengers. And
24 so, you know, kind of at the last minute, you
25 can't fit your other kids in the car because

1 there's other people in there. And, you
2 know, without a warning, the mom can't -- you
3 know, can't benefit from -- from the ride.
4 So I think it is dependent upon the --
5 not the broker but the provider itself. But,
6 you know, things change, and nothing is
7 guaranteed. And that's part of the problem,
8 at least for the pediatric population.
9 CHAIR GRIGSBY: Anything else from
10 anyone? Those are excellent. Thank you for
11 bringing those up.
12 MS. WHATLEY: Donna, I just have
13 one more question. This is Alicia again, and
14 I apologize if this was mentioned. But do
15 the transportation providers have car seats
16 and other safety devices available for
17 families that maybe don't have a car, so they
18 don't have that with them?
19 MS. ROEHRIG: Yes, they do. The
20 transportation providers have that equipment
21 in order to provide anyone that needs ADA
22 compliance or to bring a child. So they do
23 have that available. But with the provider
24 agreeing to everything that we're talking
25 about, not quite sure on that. So I'll

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 definitely take that into account when asking
2 Office of Transportation.
3 MS. WHATLEY: Thank you.
4 CHAIR GRIGSBY: I also noticed that
5 when you were talking about the value-added
6 benefit for Anthem subscribers, that it said
7 over 18. This is a value for subscribers or
8 for members over 18.
9 So is there nothing available for
10 children?
11 MS. ROEHRIG: Not specifically. It
12 is -- and Anthem -- if someone from Anthem is
13 on here, you're more than welcome to come
14 into the conversation.
15 But no, each value-added benefit has its
16 own requirement and eligibility. And so for
17 theirs particularly, it would have to be for
18 those age 18 and older in order to qualify to
19 get that Uber card or bus pass, gas card.
20 CHAIR GRIGSBY: Which may work if
21 everyone in the family is a member but not
22 helpful to children if it's not available.
23 MS. ROEHRIG: Absolutely.
24 CHAIR GRIGSBY: If the family is
25 not covered; right?

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 MS. ROEHRIG: And, see, that's
2 really good points to bring up right now
3 because a lot of MCOs are re-evaluating their
4 value-added benefit program and seeing how to
5 make them better. So that's definitely
6 something I hope all MCOs take on board as
7 well.
8 CHAIR GRIGSBY: Okay. Any other
9 comments from members? Any other questions?
10 Any other comments from the MCOs?
11 (No response.)
12 CHAIR GRIGSBY: So perhaps we can
13 keep this under old business for our meeting
14 in November, to follow up on some of these
15 questions that we've put forth today.
16 MS. ROEHRIG: Sounds good.
17 CHAIR GRIGSBY: Okay. Thank you.
18 MS. ROEHRIG: Thank you, everyone.
19 CHAIR GRIGSBY: Without any further
20 questions or comments, I don't have anything
21 under new business unless someone wants to
22 bring up anything at this point.
23 (No response.)
24 CHAIR GRIGSBY: Okay. Moving
25 forward to the future topic discussions.

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 Some things that we've brought up in the past
2 were obesity, juvenile justice issues,
3 bullying, and immunization updates.
4 Anyone want to comment on any of those
5 topics or recommend that that be the topic
6 for next meeting? Or if there are any other
7 topics that folks feel like we need to
8 discuss at our November meeting.
9 MS. ROEHRIG: Hey, Donna. This is
10 Rachel Roehrig again. Just to put that out
11 there for everyone on the TAC, we are now
12 currently working on a homelessness research
13 project. So if that's something that the TAC
14 wants to see, we'll be happy to present that
15 if desired.
16 CHAIR GRIGSBY: That would be very
17 helpful. That was the topic of our last
18 meeting, and the MCOs talked about the
19 various resources that they have for members.
20 But yes, if there's -- if there's additional
21 information that's available, that -- I would
22 very much appreciate that.
23 MS. ROEHRIG: Absolutely.
24 CHAIR GRIGSBY: Okay.
25 MS. BICKERS: Rachel, my apologies.

1 What did you say that was? The homeless --
2 did you say that was a pilot program?
3 MS. ROEHRIG: It's a homeless
4 research project --
5 MS. BICKERS: Research.
6 MS. ROEHRIG: -- for -- yeah, for
7 the state of Kentucky.
8 MS. BICKERS: Thank you. I'm
9 trying to do my follow-up notes for you guys.
10 MS. ROEHRIG: Perfect. You're
11 good.
12 DR. SMITH: Are there any other
13 areas of social determinants of health that
14 DMS is working on right now, or that one is
15 it right now?
16 MS. ROEHRIG: Angie, I'm not sure
17 if you want to speak to that. I know on the
18 research end, for research and analytics,
19 transportation. And we're still working on,
20 okay, now that we have this data and we have
21 input from it, where can we go from here?
22 How can we make it better?
23 And so the next viewpoint would be for
24 homelessness. So we're taking our time to
25 thoroughly go through each one, but that's

1 where we are on that currently.
2 CHAIR GRIGSBY: Okay.
3 DR. SMITH: Thanks.
4 MS. PARKER: Yes. There's a lot of
5 different variables that we're looking at for
6 equity and social determinants of health, so
7 it's an ever-arching project actually so --
8 you know, in trying to address race and
9 ethnicity issues as it relates to health care
10 as well. So there will be a lot more to
11 share in the maybe not-so-near future but
12 hopefully in the future.
13 CHAIR GRIGSBY: So it sounds like
14 for next meeting, we can talk a little bit
15 more about the homelessness research project
16 and then have some follow-up in old business
17 for additional questions that we raised for
18 transportation issues.
19 And it sounds like in the future, we're
20 going to have a lot of discussions about what
21 we're learning about social determinants of
22 health and how we're addressing that.
23 Any other thoughts about future topics
24 or any information we need on these topics
25 from either the MCOs or from DMS for next

1 meeting? It sounds like maybe we'll have a
2 lot of information on the homelessness
3 project.
4 MS. PARKER: We may or may not.
5 This is a new project we're starting, so we
6 can't guarantee that it'll be ready for the
7 next meeting.
8 CHAIR GRIGSBY: Okay.
9 DR. SMITH: I may be speaking a
10 little out of turn. I know that the COVID
11 vaccine was just approved, and I don't know
12 if that's interesting to anybody as far as
13 whether that will be provided or paid for.
14 I'm assuming it would be by -- if families
15 wanted to get that for their children.
16 Was it recommended for six months and up
17 or --
18 CHAIR GRIGSBY: Yes.
19 DR. SMITH: I know it's still
20 waiting to be released, but I don't know if
21 we wanted an update on that at any point or
22 if that's curious for anyone else. I just
23 know that we've sure got a lot of it going
24 on -- a lot of COVID right here in the clinic
25 where I work right now. So it seems like

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 it's alive and well.
2 CHAIR GRIGSBY: Okay. Yes.
3 That --
4 MS. BICKERS: We have -- oh.
5 CHAIR GRIGSBY: -- may be something
6 to add and then I think Dr. James has his
7 hand up.
8 DR. JAMES: Yes. Immunizations is
9 on the list. And just with the whole
10 category of immunizations that are on the
11 listing that are being incentivized for
12 health plans is: How do we create a
13 collaboration? We know that we're going to
14 have issues as far as those children under
15 age eight who may need two flu shots in the
16 same season to start the process and how we
17 capture that.
18 The issue of HPV immunizations. This is
19 going to be a collaborative effort that we
20 all have to be engaged in so that -- as a
21 pediatrician who sees patients on weekends
22 but in a health plan during the week, I
23 recognize that this is a complex issue. And
24 it's difficult to get parents engaged. But
25 I'd love to be a part of whatever you have to

1 do on there.

2 CHAIR GRIGSBY: Okay. So --

3 MR. OWEN: Yeah. I'm sorry.

4 Stuart Owen with WellCare, and I was thinking

5 the same thing. This is such a critical

6 issue, the immunizations with children. If

7 there's somehow -- I don't know. All of us,

8 maybe we could brainstorm a little bit or --

9 you know, the challenges. I know there

10 are -- you know, I think because of COVID

11 vaccine misinformation perhaps, that has

12 spilled over in, like, flu immunizations and

13 others.

14 And just -- you know, there are

15 different challenges. But I don't know if

16 there's some way -- you know like Dr. James

17 was talking about -- where we can collaborate

18 or brainstorm, you know, especially, you

19 know, with all of us because we're whatever,

20 relevant stakeholders. But on that, how we

21 can improve immunization, particularly for

22 children.

23 CHAIR GRIGSBY: Perhaps -- I know

24 there's data out there about vaccine

25 hesitancy and our vaccination rates and how

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 COVID -- you know, the concern about the
2 virus itself kept a lot of families out of
3 health care for a period of time.
4 Dr. Theriot, is that something that --
5 is that some information that would be easy
6 to share with the group so that we could have
7 further discussions about how to incentivize
8 or -- I assume you all have that information.
9 DR. THERIOT: About the rates of
10 COVID vaccine or flu vaccine or all vaccines?
11 CHAIR GRIGSBY: Yeah. Just the
12 overall -- I know that there was pretty
13 significant concern that because families
14 stopped coming to the doctors' offices for a
15 while around COVID because of their concern
16 about exposure, that our immunization rates
17 fell off pretty significantly throughout the
18 country, not just in Kentucky.
19 Do we know kind of where we are relative
20 to -- you know, I assume that we're moving
21 back up, but I probably shouldn't assume
22 that.
23 DR. THERIOT: We're not moving --
24 we're not back to where we were, but we can
25 get that information together for you for the

1 next meeting.

2 CHAIR GRIGSBY: Okay.

3 DR. JAMES: I think that doing a

4 barrier analysis can help because part of it

5 is the parents' hesitancy. Part of it has to

6 do with EHRs.

7 I feel very good at least where -- at a

8 family health center, that when I'm seeing

9 children, there is something that even I can

10 handle really quickly to show what's there.

11 But I know not all EHRs will make it easy for

12 the physician to say this is what is needed.

13 There's staff time that's involved.

14 There's the participation in VFC or not. All

15 of these things are barriers that could be

16 listed and analyzed and if we could

17 collaboratively find ways around those

18 barriers.

19 DR. BROSHEARS: Dr. Broshears from

20 Anthem. I want to second everything

21 Dr. James just said and, you know, we'd be

22 also happy to collaborate with the other MCOs

23 and providers to try to solve this problem.

24 I agree. It's multifactorial, and we've kind

25 of got to get to the root of it and start

1 over with making patients and members trust
2 us again; that, you know, their providers and
3 insurance companies are doing the right
4 things in encouraging these vaccines.
5 CHAIR GRIGSBY: Okay. I see a
6 message down in the chat from Jessica Beal
7 about an early childhood vaccine task force.
8 Jessica, would you like to comment on that
9 or --
10 MS. BEAL: Well, I just -- you
11 know, I know Dr. Theriot can pull some lovely
12 things together, but there are other folks in
13 the commonwealth connected with the Cabinet
14 in other spaces that are actively working on
15 this. Some of the MCOs participate.
16 I know we've got a meeting tomorrow
17 specifically to talk about provider training
18 opportunities. So I just -- I guess -- not
19 that I don't want Dr. Theriot to have to pull
20 all that information together.
21 But I guess maybe knowing that there's
22 such an organization working on this, maybe
23 the TAC might like them to come and present
24 to the TAC since I don't think any of you --
25 I don't see any of you on those meetings

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 myself so...
2 CHAIR GRIGSBY: I think that would
3 be very helpful, to get as much information
4 as we can and what's going on out to kind of
5 address that. I'm looking back up.
6 DR. THERIOT: I think that's a good
7 idea because they probably have access to
8 more than just Medicaid information, if
9 you're interested in that, versus -- you
10 know, what we would get is Medicaid.
11 CHAIR GRIGSBY: Well, and I
12 think -- I think there is a comment here from
13 Matthew Walton that, you know, families get
14 vaccines in different places. I think the
15 state registry has been very helpful in
16 pulling all of that information together for
17 physicians -- or for providers so that we can
18 pull that into our records.
19 But I know certainly in Lexington, there
20 was a practice that was not entering vaccines
21 into the registry. And that practice closed,
22 and there's a huge concern that children who
23 had those vaccines, there's no documentation
24 anywhere that families can get their hands on
25 if they didn't already have it in their

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 hands.

2 So I don't know how widespread an issue

3 that is in terms of, you know, how many

4 practices throughout the state aren't using

5 the state vaccine registry, and maybe that's

6 information that we can either get from that

7 task force or from DMS.

8 DR. THERIOT: Yeah. I think that

9 would be something that the task force would

10 have, but it is a worry that people don't --

11 you know, we're not a mandated state. So we

12 have the registry, but it's only as good as,

13 you know, data going in.

14 So when you have a new kid, if they're

15 up to date, hallelujah, that's great. But if

16 they're not, you don't really know if they're

17 up to date or, you know, if they're not based

18 on what's in the registry. So I do -- I

19 personally think it would be great to have a

20 mandated registry so that we could trust it

21 better than we can now.

22 And I'm worried that a lot of people

23 don't take VFC. And especially with the new

24 RSV vaccine that's, what, $300, something

25 like that, a shot, that it's going to be a

1 problem getting that out there.
2 You know, the hospitals aren't part of
3 VFC. A lot of times, you would give that
4 dose in the hospital. So, you know, I do
5 think looking at the barriers to VFC would be
6 a big -- a big activity to take ahold of.
7 MS. BEAL: Dr. Grigsby, I know that
8 has been a hot topic with that task force in
9 particular, and they gave us a lovely map of
10 where there were real concerns in terms of
11 which counties are really lacking VFC
12 providers. I think that might be of interest
13 to you.
14 CHAIR GRIGSBY: Okay.
15 MS. BICKERS: And, Dr. Theriot,
16 this is Erin. Would you be able to point me
17 to a contact person for that task force, so I
18 can invite them to our next meeting?
19 DR. THERIOT: No. But maybe
20 Jessica can.
21 MS. BEAL: Yeah. I would -- yeah.
22 It would probably be Crystal Back.
23 MS. BICKERS: Okay. Thank you.
24 CHAIR GRIGSBY: Yeah. Thank you,
25 Erin. I was just going to ask that question:

1 Who do we need to reach out to for that
2 group? So thank you all. Thank you all for
3 your input.
4 It sounds like that perhaps the next
5 meeting, we really do want to focus on
6 immunization barriers and kind of brainstorm,
7 and we can certainly have some follow-up on
8 the transportation issues. But perhaps we
9 should give the homelessness research project
10 maybe a little more time to gather
11 information and perhaps move that one to
12 January.
13 DR. SMITH: That sounds good.
14 MS. PARKER: I just want to add
15 that I -- from a quality perspective, we are
16 working on improving immunization rates for
17 children as far as a value-based purchasing
18 program with the MCOs starting in 2024. So I
19 can do a high-level overview of that, if
20 you'd like, of what that looks like.
21 CHAIR GRIGSBY: Yes. That would
22 be -- that would be great. Thank you.
23 So it sounds like we have a very -- you
24 know, in talking through this, we have a very
25 robust amount of information that we can put

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 together before the next meeting and then
2 perhaps put off the homelessness research
3 project until our January 2024 meeting.
4 Any other comments or questions from the
5 group?
6 DR. BROSHEARS: Dr. Grigsby,
7 Dr. Broshears from Anthem. I want to go back
8 to your previous question. I didn't want to
9 answer regarding our pediatric benefits
10 regarding transportation without having the
11 right answer for sure.
12 But it appears that any member under the
13 age of 18 who is enrolled with either a case
14 manager or their member empowerment team can
15 be eligible for that benefit. But the
16 benefit does -- obviously, the gift card does
17 go to the parents, in the parents' name. But
18 they are available -- eligible.
19 CHAIR GRIGSBY: Wonderful. Thank
20 you. That's very helpful.
21 DR. BROSHEARS: And I can get you
22 those numbers if you would like them, how
23 many have received the benefit.
24 CHAIR GRIGSBY: Thank you.
25 All right. Anything else?

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 (No response.)
2 CHAIR GRIGSBY: So let's move to
3 any recommendations that this group wants to
4 take to the MAC.
5 (No response.)
6 CHAIR GRIGSBY: Anything we want --
7 or do we want to collect more information on
8 the transportation reform before we make any
9 recommendations to the MAC?
10 DR. SMITH: We can.
11 CHAIR GRIGSBY: Okay. And, Erin,
12 when is the next MAC meeting?
13 MS. BICKERS: The 27th. Oh, hold
14 on. 28th. My apologies. That Thursday, the
15 28th.
16 CHAIR GRIGSBY: Again, I keep
17 saying I'm going to block my clinic because
18 that's my regular clinic day. But I'm going
19 to have to anticipate blocking it for the
20 November MAC rather than for -- for the
21 September MAC.
22 Are there any members who could attend
23 the MAC on the 28th?
24 MS. WHATLEY: I have a conflict
25 that day. I can't attend.

1 CHAIR GRIGSBY: Okay. Thank you
2 for attending in the past for us, Alicia. I
3 know Dr. Smith and I both have clinic on
4 Thursdays, and certainly I can -- Erin, what
5 is the date of the November MAC?
6 MS. BICKERS: November -- oh, MAC
7 meeting, not your TAC meeting. My apologies.
8 It is the 30th of November, and that's the
9 last MAC meeting of the year.
10 CHAIR GRIGSBY: And that is on a
11 Thursday; correct?
12 MS. BICKERS: Yes, ma'am.
13 CHAIR GRIGSBY: Okay. I will see
14 if I can block my clinic for that. It's at
15 10:00? It's a morning --
16 MS. BICKERS: It's from 10:00 to
17 12:30. Yes, ma'am.
18 CHAIR GRIGSBY: Okay. If no one
19 else can be there on the 28th, that's fine.
20 I will try to get my clinic blocked
21 (inaudible).
22 Okay. Our next meeting is November the
23 8th from 2:00 to 4:00.
24 Is there anything else from any of the
25 members of the TAC or from anyone from the

SWORN TESTIMONY, PLLC
Lexington | Frankfort | Louisville
(859) 533-8961 | sworntestimonyky.com

1 MCOs or from DMS?

2 MS. ROEHRIG: Hey, Donna. Sorry.

3 This is Rachel Roehrig with DMS again. I

4 just want to make sure that we get all of

5 your questions addressed.

6 Did you have an additional question

7 regarding the NEMT regulation proposal? I

8 want to make sure we reach out to Justin to

9 get an answer if you still had outstanding

10 questions.

11 CHAIR GRIGSBY: I don't know that

12 there were any other questions other than the

13 ones we discussed. Did anyone -- I know we

14 talked about additional children, how many

15 parents are allowed. We sort of got the

16 answer about the car, removing the

17 requirement that the family couldn't have a

18 car in their name.

19 MS. ROEHRIG: Right. Okay.

20 All right. If anything else --

21 CHAIR GRIGSBY: Yeah. I think that

22 was --

23 MS. ROEHRIG: -- comes up, yeah,

24 just let me know.

25 CHAIR GRIGSBY: Okay. Thank you.

1 MS. ROEHRIG: Thank you.
2 CHAIR GRIGSBY: And can anyone else
3 remember anything else we discussed?
4 (No response.)
5 CHAIR GRIGSBY: Okay. Well, we've
6 gotten a lot of information, and we've done
7 it very efficiently today. So I think I'm --
8 we're going to be able to give the group the
9 gift of time.
10 If the members of the TAC can stay on,
11 but I do need a motion to adjourn.
12 DR. SMITH: I motion to adjourn.
13 CHAIR GRIGSBY: And a second?
14 MS. DIMAR: I second.
15 CHAIR GRIGSBY: Thank you. And all
16 in favor?
17 (Aye.)
18 CHAIR GRIGSBY: Okay. If the
19 members of the TAC could stay on, so we can
20 discuss -- I think we've set up next
21 month's -- or next meeting's agenda, but I
22 just want to double check.
23 And thank you all for all the great
24 information today and for the great
25 participation and for your ideas about future

1 topics. Thank you all for being here and for
2 being so helpful, and we will adjourn. Thank
3 you, guys. We will see you again at 2:00 on
4 November the 8th.
5 (Meeting concluded at 3:00 p.m.)
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

1 * * * * * * * * * * *

2 C E R T I F I C A T E

3

4 I, SHANA SPENCER, Certified

5 Realtime Reporter and Registered Professional

6 Reporter, do hereby certify that the foregoing

7 typewritten pages are a true and accurate transcript

8 of the proceedings to the best of my ability.

9

10 I further certify that I am not employed

11 by, related to, nor of counsel for any of the parties

12 herein, nor otherwise interested in the outcome of

13 this action.

14

15 Dated this 2nd day of October, 2023.

16

17

18 *__/s/ Shana W. Spencer_*

19 Shana Spencer, RPR, CRR

20

21

22

23

24

25