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CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES
HOSPITAL CARE
TECHNICAL ADVISORY COMMITTEE MEETING

Via Videoconference
August 22, 2023
Commencing at 1:01 p.m.

Shana W. Spencer, RPR, CRR
Court Reporter

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APPEARANCES

BOARD MEMBERS:

Russ Ranallo, Chair

Elaine Younce

Lori Ritchey-Baldwin (not present)

Theresa Fite

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

2 CHAIRMAN RANALLO: So we can call
3 the meeting to order. I believe we have a --
4 we have a quorum. I know we've got -- I
5 don't see Lori yet, but I know we've got
6 Elaine and Theresa. And I know we've had --
7 Danny has retired, and I know KHA is looking
8 for a replacement there. So we've got a
9 quorum.

10 Minutes from last meeting. Anybody have
11 any changes or additions?

12 (No response.)

13 CHAIRMAN RANALLO: If not, can I
14 have a motion to approve?

15 MS. YOUNCE: Russ, this is --

16 MS. FITE: Motion.

17 MS. YOUNCE: Oh, sorry.

18 MS. BICKERS: Theresa, can I have
19 you turn your camera on while we vote,
20 please?

21 MS. FITE: So I'm traveling down
22 the road.

23 MS. BICKERS: Just while we vote.
24 I apologize. It's for the Open Meeting Laws.
25 Or if you're going to be at a point where you

1 might be able to stop shortly, we can do that
2 in a moment. I'm sorry.

3 MS. FITE: I'm trying. Give me one
4 second.

5 MS. BICKERS: Oh, and the
6 commissioner is joining, so that gives us a
7 second. Thank you. I'm so sorry.

8 CHAIRMAN RANALLO: There she is.
9 All right. All in favor?

10 (Aye.)

11 CHAIRMAN RANALLO: Okay. Thank
12 you.

13 All right. And old business. I want to
14 move B, Sepsis 2 versus Sepsis 3, up to the
15 top.

16 MS. BICKERS: And the commissioner
17 did join us.

18 CHAIRMAN RANALLO: Okay. Welcome,
19 Commissioner.

20 COMMISSIONER LEE: Hi. How are
21 you? Good to be here.

22 CHAIRMAN RANALLO: Good. Good to
23 see you. How are you?

24 COMMISSIONER LEE: Good. I just
25 wanted to pop in really quick. We're on the

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sepsis now. Sorry I was a couple minutes late.

Talking about the sepsis, you know, we have received a lot of feedback. We've received some comments. We've had a lot of conversations about this. And we see now that it's going to be -- it's a lot more complicated than just moving from Sepsis 2 to Sepsis 3 overnight. So what we have decided, we -- we believe that we need to move toward Sepsis 3. However, we're not going to do that until January of 2025.

One of the reasons for that is definitely due to, you know, discussions with the Kentucky Hospital Association and some of the -- their concerns related to movement and their quality measures tied to the Hospital Reimbursement Improvement Program.

And we think that before we do move to Sepsis 3, maybe, you know, the beginning of 2024, we need to have some bigger conversations about exactly what that looks like when we move to Sepsis 3. I think there's a little bit more discussion that needs to be had maybe between the medical

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directors and this -- this body here, the Technical Advisory Committee, as -- so we move forward in a way that is appropriate with Sepsis 3.

I think there's a little bit more discussion that needs to be had maybe around some of the clinicals related to Sepsis 3. We do believe that we want to move towards Sepsis 3 but think it needs to take a little bit more time to get there.

So -- so just wanted to fill you all in on that and give an update on the decision that was made and see if you have any questions that I can assist you with.

CHAIRMAN RANALLO: I don't right now. I appreciate you listening to us, and I appreciate the delay so that we can -- we can have discussions and do it in a methodical way, so everybody is on the same page.

COMMISSIONER LEE: Yes. That's exactly our thoughts, too. And I, again, think it's going to be just a little bit more involved for moving from Sepsis 2 to Sepsis 3. And we want to make sure that we have, you know, systems in place and want to

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make sure that everybody is -- is on the same page with the requirements going forward.

But, again, it'll be January 1st of 2025, so I think something that we need to keep on the radar for the Hospital TAC so that we can start having those conversations, you know, maybe, you know, mid-2024 so that we're all ready -- so we're ready for that January 1st start date in 2025.

CHAIRMAN RANALLO: That sounds like a plan to me. I -- we can definitely put that on the agenda and have -- like I said, we're always available for any discussions that -- and meetings that you guys want to have. And we appreciate -- again, appreciate you listening to us and appreciate the update.

Do the TAC members have any questions? Elaine? Theresa?

MS. YOUNCE: Nothing for me. Just thank you, Commissioner. We appreciate it.

COMMISSIONER LEE: Thank you all. We really appreciate everything you're doing for our Medicaid members. I think most of you know that I always say that the Medicaid

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program was created for our members, but we can't take care of our members without our providers.

And we really appreciate everything that you all do and this partnership and just look forward to future meetings where I can spend a little bit more time with you all in the meetings.

CHAIRMAN RANALLO: Thank you, Commissioner. I appreciate it. We appreciate you.

COMMISSIONER LEE: Thank you. I will be -- I'll be on for just a little bit. I'll turn my camera off, but I'll be here just to kind of listen a little bit and be here if you have any additional questions for me.

CHAIRMAN RANALLO: Okay. Thank you.

COMMISSIONER LEE: Thank you.

CHAIRMAN RANALLO: Okay.
All right. So that takes care of B.

A, I'd like to table. I'm still waiting for some input from some folks, from some -- from other hospitals on the policy and then I

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will bring that back next meeting.

New business, patient re-enrollment delays. So for the folks at DMS, we've gotten some reports through the hospital association and some other -- some hospitals that we're seeing delays with our re-enrollment process.

We've had multiple hospitals report, like, one- to two-hour time frames on the phone per patient to -- to work a re-enrollment. I know there's a lot of volume going on, and I know there's -- the resources are probably limited. But we wanted to kind of report what we're seeing and get any feedback that you guys may have for us.

COMMISSIONER LEE: Hi. This is Lisa. I'm not sure who's -- who else is on the phone from our policy folks, in particular with enrollment.

If you have -- I mean, I think one of my suggestions would be if you have someone in your facility that you know -- let's say that they've had a service that day and they're trying to get their eligibility redetermined.

1 And if they're having a really hard time, I
2 would recommend going the presumptive
3 eligibility route for the hospitals, and you
4 could get that individual -- that presumptive
5 eligibility that day and receive payment if
6 they had received a service in your -- in
7 your facility. And that might help give them
8 a little bit of time to get their actual
9 renewal back in place.

10 CHAIRMAN RANALLO: Okay. I --
11 yeah. And I didn't know if anybody had -- I
12 don't know how long it's taken for someone to
13 get re-enrolled. I know we did have feedback
14 that if there's an application in, they are
15 not --

16 COMMISSIONER LEE: Ineligible for
17 presumptive eligibility.

18 CHAIRMAN RANALLO: -- disenrolling
19 them; right? Is that the right term?

20 COMMISSIONER LEE: Yeah.

21 CHAIRMAN RANALLO: If there's an
22 application that's in and hasn't been
23 processed yet.

24 COMMISSIONER LEE: Yeah. We are --
25 if there's an application in, we -- and it

1 hasn't been processed, I don't believe that
2 we are disenrolling those individuals yet.

3 I do know that our eligibility workers
4 are seeing about a 40 percent increase in
5 their workload. If you do have somebody that
6 has an application pending, it seems like,
7 that's an emergency, you know, if you can
8 contact us, we'll see what we can do.

9 But we do know that the processing times
10 are taking a little bit longer due to the
11 unwinding process from the Public Health
12 Emergency.

13 CHAIRMAN RANALLO: Sure. Okay.
14 All right. Good suggestion on the
15 presumptive, on the PE for that day of
16 service. Appreciate that.

17 Elaine or Theresa, anything else?

18 MS. YOUNCE: No. That covers it
19 for me, Russ.

20 MS. FITE: Me as well.

21 CHAIRMAN RANALLO: Okay. Thank
22 you.

23 And then general discussion, other
24 items. We did have one question that came
25 up. Do we -- the 2022 HRIP quality

1 distribution, do we -- is there a timetable
2 on that yet? I know -- I know they're
3 gathering the data and looking at the -- and
4 analyzing all that.

5 Steve, do we have a time frame on that?
6 Do you know?

7 MR. BECHTEL: I believe we're
8 shooting for sometime in November. October,
9 November.

10 CHAIRMAN RANALLO: Okay. Is there
11 anything that you need from us?

12 MR. BECHTEL: Not at this time, I
13 don't. No.

14 CHAIRMAN RANALLO: Okay.
15 All right. Okay.

16 Any other items from the TAC members?

17 (No response.)

18 CHAIRMAN RANALLO: Okay. No
19 recommendations today.

20 I will represent and give an update at
21 the MAC meeting.

22 The next meeting is Halloween, October
23 31st, 2023. We'll do it by Zoom again.

24 And, Commissioner Lee, thank you for
25 joining us and thank you for the update on

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the sepsis. And thanks to the DMS folks for today. Short meeting today. I appreciate everybody, and we'll stand adjourned.

(Meeting concluded at 1:12 p.m.)

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C E R T I F I C A T E

I, SHANA SPENCER, Certified
Realtime Reporter and Registered Professional
Reporter, do hereby certify that the foregoing
typewritten pages are a true and accurate transcript
of the proceedings to the best of my ability.

I further certify that I am not employed
by, related to, nor of counsel for any of the parties
herein, nor otherwise interested in the outcome of
this action.

Dated this 28th day of August, 2023.

/s/ Shana W. Spencer

Shana Spencer, RPR, CRR