



Children's Health
Insurance Program
Advisory Committee
of Virginia



MEETING MINUTES

Meeting Minutes June 1, 2023

A quorum of the full Committee attended the meeting virtually through Webex. The Webex link was also made available for members of the public to attend virtually.

The following CHIPAC members were present virtually:

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| • Sara Cariano (Chair) | Virginia Poverty Law Center |
| • Freddy Mejia (Vice Chair) | The Commonwealth Institute for Fiscal Analysis |
| • Shelby Gonzales | Center on Budget and Policy Priorities |
| • Emily Griffey | Voices for Virginia's Children |
| • Dr. Susan Brown | American Academy of Pediatrics, Virginia Chapter |
| • Michael Muse | Virginia League of Social Services Executives |
| • Emily Roller | Virginia Health Care Foundation |
| • Hanna Schweitzer | Dept. of Behavioral Health and Developmental Services |
| • Irma Blackwell | Virginia Department of Social Services |
| • Kelly Cannon | Virginia Hospital and Healthcare Association |
| • Ali Faruk | Families Forward Virginia |
| • Alexandra Javna | Virginia Department of Education |
| • Jennifer Macdonald | Virginia Department of Health |
| • Martha Crosby | Virginia Community Healthcare Association |

The following CHIPAC members sent a substitute:

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| • Jeff Lunardi | Joint Commission on Health Care |
| (Estella Obi-Tabot) | |

The following CHIPAC members were not present:

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| • Dr. Nathan Webb | Medical Society of Virginia |
| • Heidi Dix | Virginia Association of Health Plans |

- I. **Welcome** – Sara Cariano, CHIPAC Chair, called the meeting to order at 1:05 p.m. Cariano welcomed committee members and members of the public and explained that the meeting would be all-virtual.

Attendance was taken by roll call.

II. CHIPAC Business

- A. **Review and approval of minutes from March 2 meeting** – Committee members reviewed draft minutes from the March 2 meeting. Kelly Cannon, Virginia Hospital and Healthcare Association, made a motion to approve the minutes, Freddy Mejia, The Commonwealth Institute, seconded, and the Committee voted unanimously to approve the March 2 meeting minutes.
- B. **Membership items** – Cariano announced that Dr. Tegwyn Brickhouse, VCU Health/VCU School of Dentistry, is moving out of state and is stepping down from her position on the committee. Cariano stated that Dr. Brickhouse provided recommendations of potential members to join the committee. The Executive Subcommittee will review those nominations and discuss membership at their next meeting July 13 (all-virtual). She stated that CHIPAC members are encouraged to attend the Executive Subcommittee meeting if they would like to participate in the membership discussion.

III. Virginia Medicaid Unwinding Update

Jessica Anecchini, DMAS Senior Policy Advisor for Administration, provided an update on the process of unwinding from the federal public health emergency and redetermining Medicaid members' eligibility. Anecchini stated that from March 2020 to March 2023, Virginia Medicaid experienced an increase of over 630,000 enrollees, a 41% increase in enrollment. Enrollment growth has been fastest among non-elderly, non-disabled adults, and slower among children and aged, blind, and disabled (ABD) eligibility groups. Anecchini stated that DMAS is carefully monitoring churn and coverage losses during unwinding. Post continuous coverage, it is estimated that roughly 14% of the state's total Medicaid enrollees may lose coverage, and up to 4% of members may lose and regain coverage within one to six months of closure (churn). The national average for loss is around 20%.

Anecchini described DMAS preparations for resuming normal enrollment activities. She explained that DMAS executed a significant contract modification to expand the existing Cover Virginia operation to be able to handle the additional calls and renewal assistance associated with unwinding. The contract modification includes a redetermination call center and processing unit throughout the return to normal processes and new permanent units dedicated to pregnant women and application assisters. The expansion operations were successfully implemented on April 3, 2023. Anecchini explained that DMAS anticipates about one-third of cases will be automatically renewed and one-third will be handled by local departments of social services (LDSS), and the Cover Virginia vendor is expected to process the remaining

third of cases (420,000). The operation includes an existing Incarcerated Unit, responsible for completing renewals for over 30,000 incarcerated enrollees through exchanges with the Department of Corrections and state/local jails. Anecchini explained that the Cover Virginia vendor can assist DMAS with cases that do not require discretion, including many MAGI cases of families with children.

Anecchini described DMAS' ongoing outreach and education efforts, including mailings to 1.1 million households; radio, television, and social media campaigns; and dedicated pages across three websites. DMAS developed four stakeholder toolkits, 18 outreach templates, 60 provider memos, and has fostered public engagement through speaking events and eight public town halls to nearly 1,000 different stakeholder groups. Anecchini stated that a Return to Normal Operations Summit was held on March 8, 2023 for over 300 stakeholders in partnership with the Virginia Department of Social Services (VDSS), Virginia Association of Health Plans (VAHP), Virginia Poverty Law Center (VPLC), Virginia Health Care Foundation (VHCF), and the State Corporation Commission (SCC).

Anecchini described local agency planning and partner collaboration that has occurred in preparation for unwinding. She stated that VDSS and DMAS developed a plan to prepare local agency staff to be able to complete the Medicaid unwinding work that includes training and informational sessions, workgroups, and additional federal waivers. Anecchini explained that system updates were made to increase the number of successful “no touch” actions at application, change, and renewal to promote consistency, reduce local worker burden, and allow a stronger focus on high-risk populations which require manual processing. She explained that DMAS has made the necessary changes to meet additional federal reporting requirements that will allow closer monitoring of progress throughout the unwinding period.

Anecchini stated that DMAS and VDSS held training and information sessions, including developing an eLearning that refreshed local agency staff on renewal processing. Over 3,000 local agency staff have completed this training. The agencies have also held subject matter expert-led webinars that focus on Q&A with local agency staff to assist in preparing them for the work. Over 2,000 local agency staff have attended these webinars and this series concluded in April 2023.

Anecchini stated that DMAS executed an agreement with the six health plans to solidify plans for four rounds of targeted member outreach across all modalities. She explained that new data-sharing processes were also implemented to include addresses, closures, and closure reason. She stated that DMAS is also collaborating with the State Corporation Commission to ensure the smooth transition of individuals no longer eligible for coverage to other health coverage through referrals to the new Virginia Insurance Marketplace beginning in November 2023.

Anecchini stated that non-procedural terminations, for people determined ineligible, began April 30, and procedural closures—those that occur because information was not returned and DMAS was unable to determine a person's eligibility—began May 31. Anecchini explained that DMAS has been conducting outreach to make sure people understand that they don't have to go through a full reapplication but can return

requested paperwork to have their eligibility redetermined, and to encourage members who lose coverage for administrative reasons to complete the needed paperwork. Anecchini directed the committee to additional resources available on the DMAS website, including the renewal status dashboard, which can be found on the DMAS site under the Data tab. This dashboard tracks progress toward redetermining Virginia's Medicaid population on a monthly basis. The dashboard can be found at <https://www.dmas.virginia.gov/data/return-to-normal-enrollment/eligibility-redetermination-tracker/>. Anecchini explained that this dashboard is currently refreshed every month on or around the 8th of the month.

Cariano asked whether DMAS has data on the number of closures that occurred on May 31. Anecchini stated that the first round of data will be available on the 5th of the month. Emily Roller, Virginia Health Care Foundation, asked what type of outreach members should expect from local departments of social services. Anecchini explained that in accordance with the federal Consolidated Appropriations Act, outreach across additional communications modalities is being conducted proactively, prior to receiving returned mail, and agencies are working to contact members via phone and email. She explained that it should be a best practice for eligibility workers to review the returned mail and make sure there were no typos in the address used, as well as to follow up if any forwarding address is provided on the returned mail. Irma Blackwell, Virginia Department of Social Services, stated that VDSS has advised staff if there is an e-mail or telephone number on record and mail has been returned, that the worker should attempt to get in touch with the household using all available information on file.

Anecchini reported that 115,260 households (200,604 members) had files run through the ex parte process in May. Out of those, 29,493 households (52,438 members) successfully renewed during the automated ex parte process, a 25.6% success rate. Anecchini stated that 66,677 households were mailed a renewal packet on May 22, and those packets are due back in mid-to-late June.

Alexandra Javna, Virginia Department of Education, shared an update about how VDOE and schools are working to conduct outreach and raise awareness among students and families during Medicaid unwinding. She explained that VDOE representatives have been participating in the DMAS Medicaid Ambassadors Task Force meetings, and in March, DMAS presented to the quarterly school Medicaid coordinators meeting to provide information about unwinding directly to school personnel. School personnel have been informed that outreach about unwinding is an administrative claimable activity for which they can receive reimbursement. School personnel have also been made aware that a reduction in Medicaid-enrolled students would lower the Medicaid penetration rate which factors into the formula for Medicaid reimbursement to schools. DOE has shared the Medicaid unwinding toolkit with partners and has worked to ensure that word gets out to schools and the families of enrolled students that it is essential for Medicaid enrollees to update their contact information on file. In addition, a communication will soon be sent to all division superintendents about unwinding and outreach efforts that schools can make.

IV. DMAS Language and Disability Access

Montserrat Serra, DMAS Civil Rights Coordinator, provided an update on DMAS language and disability access initiatives. Serra explained that DMAS is committed to serving the limited English-proficient (LEP) population and people with disabilities by ensuring meaningful access to Virginia Medicaid. Serra presented information about languages spoken by Medicaid enrollees. She stated that 5.57% of members (about 123,000 members) speak a primary language other than English. The most commonly spoken non-English language is Spanish, followed by Arabic, Vietnamese, Amharic, and Urdu.

Serra explained that in 2020 DMAS conducted a language and disability needs assessment to evaluate the language needs of the Virginia Medicaid population. Subsequently, DMAS developed a Language and Disability Access Plan, which is available publicly on the DMAS website. Projects include updating eligibility notices to be available in five non-English languages and to include a notice supplement with language taglines and a non-discrimination notice. DMAS also developed and implemented a Spanish language skills assessment for all DMAS bilingual staff that perform interpreting and translating functions at DMAS. In addition, DMAS has hired a digital accessibility officer to ensure all DMAS digital communications are 508 compliant per the Americans with Disabilities Act (ADA).

Serra stated that another initiative the agency carried out was drafting language access standards to be set forth in inter-agency agreements (IAGs) and memorandums of understanding (MOUs) with collaborating agencies. In 2022, DMAS also developed and implemented language and disability access related training, and linguistic and cultural competency training, for agency staff.

Serra explained that recently, DMAS launched a series of virtual forums on language and disability access. The first forum was held on May 15. The forums are webinars held twice a year and open to the public that help inform the community about how to meet the language and disability access needs of Medicaid members. Serra announced that the next forum will be held in December. More information can be found on the DMAS website at <https://www.dmas.virginia.gov/for-members/forum-on-language-and-disability-access/2023-meetings/>.

V. Partnership for Petersburg and Maternal-Child Health

Kim Moulden, Senior Operations Lead, DMAS Health Care Services Division, presented an update on the Partnership for Petersburg Initiative. Moulden explained that Partnership for Petersburg was launched by Governor Youngkin in August 2022 in response to pervasive negative outcomes experienced by Petersburg residents. This initiative is a collaborative effort across state agencies that spans education, public safety, health care, transportation, economic development, and community and faith-based engagement.

Moulden explained that Petersburg residents face significant health challenges, such as a life expectancy more than 12 years lower than that of the average Virginian and a child mortality rate 180% higher than the state as a whole. The majority of Petersburg

City residents (60%) have health coverage through either Medicaid or FAMIS, and most are covered by one of Medicaid's managed care plans. As of June 2023, an estimated 20,303 Petersburg residents were enrolled in Medicaid. Moulden explained that DMAS has been tasked with coming up with solutions to address these negative health outcomes. DMAS is working to increase utilization of pediatric, adult primary care, and maternity services for Petersburg Medicaid members through community partnerships, member engagement, and mobile clinics and events. In the area of maternal-child health, DMAS is working to increase members' timely access to prenatal and postpartum services. In addition, there is a school-based clinic at Petersburg High School called the Crimson Clinic, operated by Central Virginia Health Services, and DMAS is working with partners in the area to expand services provided through the clinic and to reach the families of enrolled children.

Moulden stated that, to date, DMAS, MCOs, DentaQuest, and Conexus have participated in over 100 community events and mobile clinics. The goal is to demonstrate the value of Medicaid managed care through monthly community outreach, ongoing provider support, targeted enhanced benefits, contributions such as food delivery, toothbrushes, cribs, and books, and meaningful charitable contributions that will benefit members and the City of Petersburg at large. Moulden explained that a major focus of efforts has been to establish a community presence and build trust in the health care system with residents in the Petersburg area.

Moulden stated that DMAS is engaging providers, including maternity providers, in targeted conversations to better understand low utilization rates, including low prenatal and postpartum utilization rates. DMAS is connecting with provider stakeholders including the Virginia Hospital and Healthcare Association, Bon Secours Southside Regional Medical Center, Virginia Physicians for Women, and Central Virginia Health Services in targeted conversations about how to drive improvements in access and quality of care. Moulden explained that the managed care plans have made large investments in the Petersburg community through charitable contributions such as pop-up clinics, financial support of the Urban Baby Beginnings maternal health hub that was recently established in Petersburg, food bank and food delivery support, and donations of basic supplies for new mothers and infants.

Moulden also provided an update on the managed care reprocurement. She thanked CHIPAC members for their previous input on the procurement process and stated that stakeholder input was used to inform and shape the priorities and focus areas of the procurement. She stated that August 1 is the date currently set for the procurement to go live.

VI. New DMAS Resources for Legislators

Will Frank, DMAS Senior Advisor for Legislative Affairs, gave an overview of resources newly available on the DMAS website. The DMAS Legislative Office Resources page is in the "About Us" section of the DMAS website (direct link here: <https://www.dmas.virginia.gov/about-us/legislative-office-resources/>). Frank stated that DMAS has informed all 140 legislators, as well as key stakeholders, about this resource page. He explained that the page offers information that legislators can use

to help them in understanding Medicaid data related to their districts, providing resources to constituents, and explaining some of DMAS's key initiatives. The page includes a link to a portal for submitting constituent inquiries and input. There is also a section that includes one-pagers and information about DMAS initiatives and programs. Finally, Frank demonstrated the new dashboards on the website that provide Medicaid enrollment data by district based on the current legislative and congressional districts post-redistricting.

VII. Committee Discussion of Legislative and Policy Priorities

Cariano provided context for the committee's discussion of legislative and policy priorities. She explained that over the past year, committee members have expressed interest in more proactively shaping policies related to Medicaid and FAMIS children's coverage through recommendations to the DMAS Director and Secretary of Health and Human Resources. She stated that last year, committee members signed a letter providing recommendations for budget amendments related to children's coverage. Cariano explained that one option would be for the committee to submit such a letter again this year. She stated that this year is unusual because of the passage of the "skinny budget" in lieu of the usual negotiated budget, which has been delayed indefinitely. Cariano explained that the committee could potentially highlight proposed budget items from the pending Senate and House budgets related to CHIPAC's mission and send a letter in support of those items to the Secretary and DMAS Director. However, such a letter would likely need to be drafted and submitted very soon in order to have an impact. Cariano stated that the executive subcommittee has compiled a list of potential policy recommendations, but this list is long and prioritization among the items is needed. In addition, some ideas would need to be developed and more detail added.

Cariano stated that another approach for the committee would be to continue a robust discussion of potential policy ideas looking ahead to the upcoming year's General Assembly session, with any formal committee recommendations to be developed later in the year. Cariano reviewed highlights of the executive subcommittee's compiled list of potential policy recommendations, including creation of a state-funded program to expand access to health care coverage for uninsured children; increases in the income eligibility limits for the children's and pregnant women's coverage programs; maximizing opportunities to expand services to justice-involved youth allowable under new provisions of the federal Consolidated Appropriations Act; moving residential services for children and youth under managed care; merging the children's Medicaid and FAMIS programs to enable all children to receive EPSDT and non-emergency medical transportation (NEMT); and applying for a waiver similar to those recently approved in Oregon and Washington to enable multi-year continuous eligibility for children. After additional committee discussion of legislative and policy priorities, Cariano stated that the executive subcommittee would continue to review options at its upcoming meeting July 13.

VIII. Discussion of agenda items for September 7, 2023 CHIPAC Meeting

Cariano announced that the September 7, 2023 meeting will be an in-person meeting held at DMAS offices.

IX. Public Comment

Cariano invited public comment but none was made.

X. Closing

The meeting was adjourned at 3:19 p.m.