

|   |   |                                  |
|---|---|----------------------------------|
| Meeting Title: Title XIX Advisory Committee |   |                                  |
| Minutes                                     | Meeting Date: 11/3/17   | Meeting Time: 8:30 am – 12:00 pm |
| Meeting Location:                           | Courtyard Marriott Seattle - Federal Way<br>31910 Gateway Center Blvd. South, Federal Way, WA 98003 |                                  |
| Meeting Called By:                          | Claudia St. Clair, Chair  |                                  |
| Minutes:                                    | Catherine Georg   Meetings may be recorded for transcription <a href="#">RCW 9.73.040 (3)</a>       |                                  |

Title XIX Advisory Committee Online: <https://www.hca.wa.gov/about-hca/apple-health-medicaid/medicaid-title-xix-advisory-committee>

## Attendees:

| Members:                            |                              |                                     |  |                                     |                              |
|-------------------------------------|------------------------------|-------------------------------------|--|-------------------------------------|------------------------------|
| <input checked="" type="checkbox"/> | Gil, Sylvia                  | <input type="checkbox"/>            | Riskedahl, Dean                        | <input type="checkbox"/>            |                              |
| <input type="checkbox"/>            | Hendrickson, Wes             | <input checked="" type="checkbox"/> | St. Clair, Claudia                     | <input type="checkbox"/>            |                              |
| <input type="checkbox"/>            | Lester, Litonya              | <input checked="" type="checkbox"/> | Tufte, Janice                          | <input type="checkbox"/>            |                              |
| <input type="checkbox"/>            | Milliren, Heather            | <input type="checkbox"/>            | Wilson, Aaron                          | <input type="checkbox"/>            |                              |
| <input checked="" type="checkbox"/> | Nardella, Maria              | <input checked="" type="checkbox"/> | Yorioka, Gerald 'Gerry'                | <input type="checkbox"/>            |                              |
| HCA Staff:                          |                              |                                     |  |                                     |                              |
| <input type="checkbox"/>            | Blondin, Amy                 | <input type="checkbox"/>            | Glenn, Kirsta                          | <input type="checkbox"/>            | Linke, Taylor                |
| <input type="checkbox"/>            | Brumbach, Jon                | <input type="checkbox"/>            | Johnson, Nathan                        | <input type="checkbox"/>            | McDermott, Lou               |
| <input checked="" type="checkbox"/> | Cody, Preston                | <input checked="" type="checkbox"/> | Kramer, Karin                          | <input type="checkbox"/>            | Moore, Cheryl                |
| <input type="checkbox"/>            | Ericson, Agnes               | <input type="checkbox"/>            | Lantz, Barbara                         | <input checked="" type="checkbox"/> | Provence, Marc               |
| <input type="checkbox"/>            | Fotinos, Charissa Dr.        | <input type="checkbox"/>            | Lessler, Dan Dr.                       | <input type="checkbox"/>            | Robbins, Alison              |
| <input checked="" type="checkbox"/> | Georg, Catherine             | <input checked="" type="checkbox"/> | Lindeblad, MaryAnne                    | <input type="checkbox"/>            | Wood, Mary                   |
| Guests:                             |                              |                                     |  |                                     |                              |
| <input type="checkbox"/>            | Barton, Megan                | <input type="checkbox"/>            | Lovell, Emily                          | <input type="checkbox"/>            | Robb, D                      |
| <input type="checkbox"/>            | Booth, Dan                   | <input type="checkbox"/>            | Marsalli, Bob                          | <input type="checkbox"/>            | Robbins, Kim                 |
| <input checked="" type="checkbox"/> | Busz, Andrew                 | <input type="checkbox"/>            | McAleenan, Mellani                     | <input type="checkbox"/>            | Sawyckyj, Kristina           |
| <input type="checkbox"/>            | Cavens, Phyllis Dr.          | <input type="checkbox"/>            | Nguyen, Huy Huyn                       | <input checked="" type="checkbox"/> | Suchoski, Amina              |
| <input type="checkbox"/>            | Ewart, Hugh                  | <input type="checkbox"/>            | Perna, Bob                             | <input type="checkbox"/>            | Trompeter, Thomas (validate) |
| <input type="checkbox"/>            | Gross, Daniel                | <input type="checkbox"/>            | Ramos, Joana                           | <input type="checkbox"/>            | Rogers, Emily                |
| New Members                         |                              |                                     |  |                                     |                              |
| <input checked="" type="checkbox"/> | Christian, Ann               | <input checked="" type="checkbox"/> | Hannemann, Barbara<br>(added 10/30/17) | <input type="checkbox"/>            | Saravia, Becky               |
| <input checked="" type="checkbox"/> | Delecki, Chris (new 11/3/17) | <input type="checkbox"/>            | Killpack, Bracken                      | <input type="checkbox"/>            | Seidel, Noah                 |
| <input type="checkbox"/>            | Holen, Ed                    | <input type="checkbox"/>            | Moss, Bill (removed 10/30/17)          | <input type="checkbox"/>            |                              |

| Please Review & Bring  |   |
|------------------------|---|
| Please Review/discuss: | <input checked="" type="checkbox"/> Current agenda and minutes from 7/28/17 & 9/22/17 meeting<br><input checked="" type="checkbox"/> Please email any changes on the minutes to: <a href="mailto:catherine.georg@hca.wa.gov">catherine.georg@hca.wa.gov</a> |

| Allotted Time         | Agenda Items 11/3/17  | Lead                                | Decision Making Approach |
|-----------------------|---|-------------------------------------|--------------------------|
| 8:30-8:40<br>10 min   | 1. Meet & Greet   | All                                 |                          |
| 8:40-9:00<br>20 min   | 2. Call to Order<br>3. Introductions<br>4. Approval of Agenda - Action Items (Members Only)<br>5. Approval of Minutes - Action Items (Members Only)<br>6. Review Action Items | Claudia St.Clair                    | Informational            |
| 9:00-9:15<br>15 min   | 7. Open Enrollment Outreach Plan for 2018<br>( MaryAnne for Nelly Kinsella HBE)   | MaryAnne Lindeblad                  | Informational            |
| 9:15-9:30<br>15 min   | 8. Fully Integrated Managed Care & North Central Region 2018  | Karin Kramer<br>MaryAnne Lindeblad  | Informational            |
| 9:30-9:45<br>15 min   | 9. Medicaid Transformation Demonstration  | Marc Provence                       | Informational            |
| 9:45-10:00<br>15 min  | 10. Substance Abuse Disorder (SUD) Amendment  | Marc Provence<br>MaryAnne Lindeblad | Informational            |
| 10:00-10:15<br>15 min | 11. Mental Health Overview (Parity)   | Preston Cody                        | Informational            |
| 10:15-10:30<br>15 min | 12. Managed Care Contracts (Carve Out)  | Preston Cody                        | Informational            |
| 10:30-10:45<br>15 min | 13. Break   | All                                 |                          |
| 10:45-11:00<br>15 min | 14. Take Charge Extension (MaryAnne Lindeblad for Anaya Balter)   | MaryAnne Lindeblad                  | Informational            |
| 11:00-11:15<br>15 min | 15. Apple Health For Kids – CHIP Reauthorization Update   | MaryAnne Lindeblad                  | Informational            |
| 11:15-11:30<br>15 min | 16. Opioid Policy   | MaryAnne Lindeblad                  | Informational            |
| 11:30-11:40<br>10 min | 17. Behavioral Health Integration   | MaryAnne Lindeblad                  | Informational            |
| 11:40-11:50<br>10 min | 18. Potential Future Agenda Items   | All                                 | Discussion               |
| 11:50-12:00<br>10 min | 19. Q&A   | All                                 | Discussion               |
| 12:00                 | 20. Adjourn   | All                                 |                          |

| 2018 Dates         | Time          | Call or In-Person |  |
|--------------------|---------------|-------------------|--|
| January 19, 2018   | 8:30-9:30 am  | Conference Call   | Telephone                              |
| March 23, 2018     | 8:30-12:00 pm | In-Person         | Emerald Queen Conference Center - Fife |
| May 18, 2018       | 8:30-9:30 am  | Conference Call   | Telephone                              |
| July 27, 2018      | 8:30-12:00 pm | In-Person         | Emerald Queen Conference Center - Fife |
| September 21, 2018 | 8:30-9:30 am  | Conference Call   | Telephone                              |
| November 16, 2018  | 8:30-12:00 pm | In-Person         | Emerald Queen Conference Center - Fife |

| Action Items/Decisions |   |
|------------------------|---|
| Item                   |   |
| 1                      | Opioid Crisis; Possible future agenda item; Jails one of the places most people go through withdrawal; Don't receive Methadone; Don't know what that looks like, Dr. Fotinos could probably answer that question (Action)<br>CF – Future agenda item; Opioid crisis in conjunction with DSHS partners, etc. Add mortality rates [7/28/17] [Dr. Charissa Fotinos]<br>[Conflict 11/3/17 & 03/24/18; add to future in-person date] |
| 2.                     | As Director of Washington Association of Community and Migrant Health Centers (WACMHC), see if Bob Marsalli would come to a future meeting to discuss thoughts on Federally Qualified Health Centers (FQHCs)<br><a href="http://www.wacmhc.org/about-us/staff/item/19-bob-marsalli">http://www.wacmhc.org/about-us/staff/item/19-bob-marsalli</a> [Declined 11/3/17; add to future in-person date]                              |
| 3.                     | Public input in PDL list [MaryAnne Lindeblad]   |
| 4.                     | Preston Cody to share the Eligibility Caseload Project with the Managed Care Ops group. [Preston Cody]  |
| 5.                     | Provide and/or post Apple Health Mobile Application handout. [Karin Kramer & Cat Georg]   |
| 6.                     | Fully Integrated Managed Care: Bob Perna asked about status and timeline, if it was captured anywhere; MaryAnne indicated that once the intentions are laid out, we will put something together. [MaryAnne Lindeblad] [Future action item]  |
| 7.                     | Eligibility. Is there a mechanism where HCA could send something to last known primary care provider (PCP)? Check with operations folks to see if possible. [Preston Cody – lead]<br>Note: Kim Robbins states the PIP workgroup is working with MCO on add/drop list; let's see where that goes before launching another work group   |
| 8.                     | Washington Apple Health Quality Strategy. Is there an opportunity to stakeholder sessions (Sylvia Gil)? Could attend meeting to discuss; looking for opportunity to discuss with stakeholders; may be opportunities with managed care groups, etc.; Preston and Barb can get something together. [7/28/17] [Barb Lantz & Preston Cody]  |
| 9.                     | Get copy of FIMC Letter for North Central Region [11/03/17 assign]  |
| 10.                    | Address death certificate data inconsistencies; opioid overdose nationally counted as poisoning; AIDS noted as something else; data is not quantifiable; MaryAnne said was not aware there was an issue; perhaps we could work with DOH; see section on Medicaid Transformation Demonstration; determine next steps. [11/03/17 assign]  |
| 11.                    | Send copy of Governor's Directive/Executive Order regarding Behavioral Health Integration [11/03/17 Cat Georg]  |
| 12.                    | Send new staff announcements [11/03/17 Cat Georg]   |
| 13.                    | Regarding prison transition and continuity of care; overwhelmed with unnecessary detail; would be good to have summary; See if HCA/Department of Corrections workgroup has summary [11/03/17 Mary Wood]   |
| 14.                    | Correct 7/28/17 minutes; page 9 of 12; fourth bullet; remove since there is no recollection [11/03/17 Cat Georg]  |

| Future Agenda Items / In-Person [3/23/18] |  |
|---|--|
| Item                                      |  |
| 1.  | Opioid Crisis [Dr. Fotinos] [11/3/17 or later] Opioid Crisis; Possible future agenda item; Jails one of the places most people go through withdrawal; Don't receive Methadone; Don't know what that looks like, Dr. Fotinos could probably answer that question (Action) CF – Future agenda item; Opioid crisis in conjunction with DSHS partners, etc. [Dr. Charissa Fotinos] [conflict 11/03/17 & 3/23/18; add to future in person date] |
| 2.  | As Director of Washington Association of Community and Migrant Health Centers (WACMHC), see if Bob Marsalli would come to a future meeting to discuss thoughts on Federally Qualified Health Centers (FQHCs) <a href="http://www.wacmhc.org/about-us/staff/item/19-bob-marsalli">http://www.wacmhc.org/about-us/staff/item/19-bob-marsalli</a> [declined 11/03/17; check on future in-person]  |
| 3.  | Website Accessibility Project [Vanessa Schuler, Communications]<br>[Requires in-person participation/presentation; carry over to after first of year per MAL 10/16/17]   |
| 4.  | Accountable Communities of Health (ACH) Examples [Chase Napier]<br>[Chase Napier on Annual Leave 11/03/17; carry over to 2018 in person date] [10/31/17]   |
| 5.  | Preferred Drug List Update [11/03/17 CQCT assign]  |
| 6.  | Managed Care Contract Carve Outs [11/03/17 Preston Cody; quarterly in-person through end of year]  |
| 7.  | Behavioral Health; licensing; arrange for someone from DBHR [11/03/17 assign Dennis Malmer]  |
| 8.  | Suboxone; licensing modification in prescribing; looking for clear snapshot; how do make it more available without physician; need Dr. Fotinos [11/03/19 CQCT; Dr. Fotinos in DC 3/23/18; define next steps]   |

| Future Agenda Items / Conference Call [05/18/18] |  |
|--|--|
| Item   |  |
| 1.   | Clinical Data Repository (CDR) [Dylan Oxford] [carry over to 2018; pending notable updates] [10/31/17] |
| 2.   | 1115 Waiver & FIMC Update [Marc Provence] [11/03/17- Carry over; Marc out of office 01/19/18]          |
| 3.   |  |
| 4.   |  |
| 5.   |  |

Recorded Declines for 11/3/17:






Balter, Anaya  
Fotinos, Charissa  
Henrickson, Wes  
Lessler, Dan

Marsalli, Bob  
Milliren, Heather  
Moss, Bill  
Perna, Bob

Oxford, Dylan  
Riskedahl, Dean  
Schuffenhauer,  
Annette

Slettvet, Todd  
Trompter, Tom

## MINUTES:


|                            |  |   |               |
|----------------------------|--|---|---------------|
| 8:30-8:40<br><i>10 min</i> | 1. Meet & Greet  | All   |               |
| 8:40-9:00<br><i>20 min</i> | 2. Call to Order<br>3. Introductions<br>4. Approval of Agenda - Action Items (Members Only)<br>5. Approval of Minutes - Action Items (Members Only)<br>6. Review Action Items  | Claudia St. Clair   | Informational |
|                            | <ul style="list-style-type: none"> <li>7/28/17 approved with change to page 9 of 12, fourth bullet</li> <li>9/22 approved; no changes</li> <li>11/03/17 Action Items reviewed; no changes</li> </ul>   |   |               |
| 9:00-9:15<br><i>15 min</i> | 7. Open Enrollment Outreach Plan for 2018<br>( MaryAnne Lindeblad for Nelly Kinsella – Health Benefit Exchange)  | MaryAnne Lindeblad  | Informational |
|                            | <ul style="list-style-type: none"> <li>On behalf of the Health Benefit Exchange, this segment is more informational, as open enrollment started on Wednesday</li> <li>With concerns related to what is happening with the Affordable Care Act (ACA), there have been great efforts to get out into the community</li> <li>Karin Kramer: National platform closes in December; state of Washington has extended theirs to January</li> <li>For Washington, get covered by December for January 2018 coverage; if wait, then will not be effective until February</li> <li>Janice Tufte: Seeing a lot of communications on social media like Face Book, and so on.</li> <li>We are in full court press; there are six assistance centers and staff are working very hard to help maintain coverage folks have today and address questions.</li> </ul> <p><a href="https://www.wahbexchange.org/wp-content/uploads/2016/12/HBE_ACG_171101_OE5_Comms_AllCmte_171101.pdf">https://www.wahbexchange.org/wp-content/uploads/2016/12/HBE_ACG_171101_OE5_Comms_AllCmte_171101.pdf</a></p> | <br>HBE_ACG_171101_OE5_Comms_AllCmte_17<br><br>OE5_Comms_Overview.pdf   |               |
| 9:15-9:30<br><i>15 min</i> | 8. Fully Integrated Managed Care & North Central Region 2018   | Karin Kramer<br>MaryAnne Lindeblad  | Informational |
|                            | <ul style="list-style-type: none"> <li>Brief overview of handouts to include a dis-enrollment letter for Douglas, Chelan and Grant counties</li> <li>This was posted online and shared with stakeholders; we have updated the Apple Health client web page</li> <li>Communication plan includes, but is not limited to, media post(s), news release(s), public service announcement(s), which should be released mid-December, if approved</li> <li>It is important to keep clients advised how to make changes; getting information out early and often</li> <li>Clients need to make their decision(s) by December 28, 2017</li> </ul>   | <br>19-0001 917 FIMC North Central BHO Le<br><br>19-066 1017 Changes are coming.pdf<br><br>19-0005 1017 Things to know about chang |               |

|                     |   |               |               |
|---------------------|---|---------------|---------------|
|                     | <ul style="list-style-type: none"> <li>• Continuity of coverage clause in plan will help track data and understand movement of clients better</li> <li>• Looking at what a regions can support; it may not make sense to have five; we will be vetting policy in next few weeks</li> <li>• Janice Tufte: What percent has been connected to community health plan (CHP) clinic?</li> <li>• Preston Cody: About ten thousand individuals that will be affected by clinic not being covered; we want to get people to the right spot</li> <li>• Sylvia Gil: Wondering about proactive messaging?</li> <li>• Karin Kramer: The first letter sent in October explains the issue, while providing the original 90 day notice; there will also be another that will include options and the ways they are changing</li> <li>• Janice Tufte: The online pop-ups were very thorough in explaining renewal, etc.</li> <li>• Get copy of next letter (action – Cat Georg)</li> <li>• Plan change notice will get mailed around November 20, 2017, before cut off; it will be mailed in a regular ProviderOne envelope</li> </ul>  |               |               |
| 9:30-9:45<br>15 min | 9. Medicaid Transformation Demonstration  | Marc Provence | Informational |
|                     | <ul style="list-style-type: none"> <li>• Accountable Communities of Health (ACH) project plans describe action items; they are a selection of project plans; working with communities to determine what plans look like</li> <li>• Reminder this is not a grant; but a contract with federal government</li> <li>• Lower projection for year one; met with ACHs, letting them know that if they needed to make changes to their plan, they can make changes up until January 2018</li> <li>• November plans will be assessed by an independent assessor</li> <li>• There is a numeric scoring process; had a webinar last week</li> <li>• Evaluates organizational readiness, with assessment of projects; providing percentages and total score</li> <li>• ACHs will not be allowed to add to their plans, however there are federal rules under which they are allowed to drop a project once we get beyond the initial stage</li> <li>• We will remain in constant communication over the course of the project to avoid surprises, giving the ability to make course corrections, etc.</li> <li>• Ann Christian: Will reduced funding be carried forward?</li> <li>• Marc Provence: We are still making projections; designated state health programs do not receive a federal match; made projections 2 years ago; have not seen the return we anticipated yet; remaining years to be seen</li> <li>• Ann Christian: Will there be future years to add?</li> <li>• Marc Provence: We were able to narrow to eight project areas, we really don't anticipate making additions</li> <li>• Gerry Yorioka: Why would each ACH not select eight?</li> </ul> |               |               |



|  |  |  |  |
|--|--|--|--|
|  | <ul style="list-style-type: none"> <li>• Marc Provence: Allocation of funds is also determined on number the of Medicaid beneficiaries, community engagement, and capacity; may decide it may not be able to achieve transformation; priorities or resources may be different than another</li> <li>• Physical Behavioral Health Integration and Opioids were the state's choice</li> <li>• May be able to bring changes forward to the list; federal government may be receptive; they favor intergovernmental transfers</li> <li>• Not anticipating the opportunity to add a bunch of Designated State Health Programs (DSHP) programs</li> <li>• MaryAnne Lindeblad: It is an almost guarantee that Washington will be the last to receive funding; we may be able to do some swap outs, but reality is that DSHP is going away (5 states using DHSP); will not be a future opportunity</li> <li>• Long term services and support (in Phase II); 166 clients in process, being able to take advantage of long term support (care givers)</li> <li>• Marc Provence: Columbia Legal services on our web site, offers a Q&amp;A to providers; there is also an upcoming webinar November 7 or 8</li> <li>• Foundational Community supports, are still waiting for approval for protocol by CMS; waiting for agreement from office of general council; Judith Cash (has CMS waiver oversight)</li> <li>• Engaged Amerigroup as third party administrators; making sure network is ready when benefits become available</li> <li>• Received evaluation protocol from CMS; will be able to move forward to have new assessor, separate (contractor) to assess overall demonstration for remaining four years</li> <li>• Working on Tribal protocol; which would set forth the way we work with tribes; currently engaged in how brought forward; have some indications that some tribes may move forward independently; most have been working together, but may have one or two ACHs</li> <li>• Gerry Yorioka: In the planning process (due mid Jan); should result in the same sense that there is a portfolio of projects to benefit Native Americans</li> <li>• TPA- funding – provider portal through which participating ACHs receive funds through portal as they complete projects</li> <li>• Janice Tuft: Are the assessors internal? Evaluators?</li> <li>• Myers and Stauffer began as auditing firm; starting November 15, will begin evaluations; they have been working with multiple states on similar waivers; will solicit 2018 contract for overall evaluator</li> <li>• Finical executor PCG, Public Consulting Group</li> <li>• Sylvia Gil: Will there be an overall roll-up?</li> <li>• Marc Provence: Encouraging ACHs to think of their projects as interrelated, not as silos; the way projects are designed, expect</li> </ul> |  |  |
|--|--|--|--|

|                      |  |                                     |               |
|----------------------|--|-------------------------------------|---------------|
|                      | <p>number of providers to be engaged in multiple projects; they have a lot in common and will be looking for commonalities</p> <ul style="list-style-type: none"> <li>• Sylvia Gil: Since rolling up all this work, what differences will we see?</li> <li>• Marc Provence: We did have a project toolkit template; expect to see progress that is consistent with AIM; want to develop organically, but have guardrails to keep within certain parameters; will be regular learning collaboratives (ACHs); ultimately if we are going to introduce into the Medicaid program, there needs to be commonalities; cannot be asking for completely different things to happen in other parts of the state</li> <li>• Sylvia Gil: To what extent do we have mechanism to roll it up over time (consistent metrics)?</li> <li>• Marc Provence: Portfolios will be out on our website</li> <li>• Gerry Yorioka: State requires data and death certificates; there is data inconsistency; is there a way this process could set parameters for death certificate problem?</li> <li>• Marc Provence: Did not know that was an issue</li> <li>• Janice Tuft: Opioid deaths nationally counted as poisoning; HIV/AIDS is noted as something else; data is not quantifiable</li> <li>• MaryAnne Lindeblad: Maybe it is something we could work with DOH on <b>(determine next steps)</b></li> </ul> |                                     |               |
| 9:45-10:00<br>15 min | 10. Substance Abuse Disorder (SUD) Amendment   | Marc Provence<br>MaryAnne Lindeblad | Informational |
|                      | <ul style="list-style-type: none"> <li>• Medicaid rule lets Medicaid pay for services instituted mental disease; if between 21-65 cannot have these institution services paid by Medicaid</li> <li>• CMS is beginning to figure out that folks need services paid for beyond 15 days; maybe they don't need 2 years, but 90 days (in this age bracket)</li> <li>• Need to find a way to revise and find way to pay for more treatment; 15 days chosen because most people treated (nationally) in less than 15 days</li> <li>• There is supposed to be a method to stream-line SUD services; perhaps more rapid ability to get approval; get federally matched</li> <li>• For now, we pay full state share; target is July 1; CMS has approved other state SUD waivers; we will submit for MH waiver</li> <li>• Ann Christian: In addition to an age exclusion, there's size (facility) exclusions; more than 15 beds; less than state institution; evidence is for shorter lengths of stay, reentry to community (goal 30 bed facilities)?</li> <li>• They are continuing to encourage states to submit waivers; ask why do have to submit waiver; would need congress to change the law; from congressional budget perspective, a waiver is quicker</li> </ul>   |                                     |               |






|                       |   |   |               |
|-----------------------|---|---|---------------|
|                       | <ul style="list-style-type: none"> <li>• Janice Tufte: Alcohol is still the number one substance abuse issue; that is in the waiver right?</li> <li>• MaryAnne Lindeblad: It is not limited to opioids; thinking broadly</li> <li>• Ann Christian: There is a clinical shift in long term treatment; not necessarily effective; bringing MC into picture; what are the other intensive community supports; success is when you get to go home; residential treatment stays on average per person is seven, which is a good parallel</li> <li>• Business model is different from 20 years ago</li> <li>• Any more questions/comments?</li> <li>• Marc Provence: Current 1115 waiver amendment is in progress; anticipating having something out for public comment mid-December; filing January or February</li> </ul>   |   |               |
| 10:00-10:15<br>15 min | 11. Mental Health Overview (Parity)   | Preston Cody  | Informational |
|                       | <ul style="list-style-type: none"> <li>• In March 2016, CMS issued the Mental Health (MH) Parity and Addiction Equity Act, requiring state to ensure limitations are no more restrictive than those under medical/surgical benefits</li> <li>• States must ensure certain availability of information requirements are met</li> <li>• Michelle Alger has been our primary lead for waiver from a technical perspective</li> <li>• In 2014, the state passed a new law (SB 6312) that required all regions of the state to adopt a new integrated approach to physical and behavioral health services; it outlines a six-year system transformation process that will: <ul style="list-style-type: none"> <li>• Move provision of SUD services to BHOs</li> <li>• Require managed care contracts to ensure integrated service delivery between primary care and behavioral health settings</li> <li>• Direct HCA and DSHS to jointly establish common Regional Service Areas for behavioral and physical health care purchasing</li> </ul> </li> <li>• <b>Add copy of report to minutes</b></li> <li>• Report and analysis was a big lift; there is no way we could have completed analysis without ACHs, BHOs</li> <li>• Every time there is a change to benefits, we must ensure parity of benefits</li> <li>• There has been a lot of intense work; did learn how Delaware and 10 other states are documenting; making sure our stakeholdering and collaboration casts a wide net; included DBHR and OIC</li> <li>• Gerry Yorioka: Does the goal of Parity have a definition of disability?</li> <li>• Preston Cody: No; only doing comparative analysis, not talking about disability</li> <li>• MaryAnne Lindeblad: It was a challenge to stay on task</li> </ul> |  <p>Final Washington State Parity Analysis 2</p> |               |

|                       |   |              |               |
|-----------------------|---|--------------|---------------|
|                       | <ul style="list-style-type: none"> <li>• Preston Cody: It's a federal requirement to complete the analysis; some states chose not to do it</li> <li>• When we compare later, we can bring info back to the group</li> </ul>   |              |               |
| 10:15-10:30<br>15 min | 12. Managed Care Contracts (Carve Out)  | Preston Cody | Informational |
|                       | <ul style="list-style-type: none"> <li>• Last meeting we briefly mentioned the process of carve out services that are not included in managed care plans; there are a couple of categories; services that are paid for by DSHS, including Hep C and high cost drugs</li> <li>• There is a long list of services and exclusions</li> <li>• There is always going to be a choice of fee for service and managed care plans; we annually review to see if carve out services are appropriate</li> <li>• We reach out to partners, and don't make decisions without having conversations about how managed care would manage services</li> <li>• We would like to take information to this committee, and have it help advise us on what the decisions should be (on exclusions); some big ones that need additional review; January 19 next date move NECs in</li> <li>• We don't know how many people need HEP C treatment, and need protocols to apply consistency; Pharmacy has put together protocols for the right drugs, and right geno- type, for a standard approach</li> <li>• Have to look population risk across the health plans</li> <li>• Certain types of HEP C aren't treatable by all the new drugs on the market; treatment isn't going to work without managing the person</li> <li>• Standing agenda item each quarter – through end of year(?) did I have that right – (talk about carve outs, next in person meeting) takes a long time to amend a contract</li> <li>• Janice Tufte: I hear about drugs where folks are being treated with one drug, then it's not paid for</li> <li>• There are requirements about prescribing; there is a process for approval for those prescriptions</li> <li>• Sylvia Gil: Perhaps Claudia may be able to speak to it? Hear about this nationally; hear more about commercial plan following Medicaid coverage; they are in flux</li> <li>• <b>Future agenda Preferred Drug list</b> – starts in January and will be phased in by July; promotes continuity of care if moving between one plan to another; 13 drug classes, with more being added in July; lists will be posted; working on how drugs will be staged</li> <li>• Janice Tufte: If people know ahead of time, it may be helpful</li> <li>• MaryAnne Lindeblad: Physicians can make exception requests</li> <li>• Sylvia Gil: Wondering if can be more of a discussion where can be part of the process of building out</li> <li>• Preston Cody: If there is any amount or type of discretion, this would be a good venue to vet those things</li> </ul> |              |               |

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|                       | <ul style="list-style-type: none"> <li>• Gerry Yorioka: Is there on going to be monitoring of the appeals process?</li> <li>• Preston Cody: Managed Care Organizations (MCOs) submit to HCA; work with MCOs on compliance issues; not public, a lot of client information; something we monitor and talk about frequently internally, is how do we conduct a fee for service populations (report) APCD</li> <li>• MAL- The challenge outside of this, is in duals and tribes; working on ways to have more information and service access</li> </ul>  |  |               |
| 10:30-10:45<br>15 min | 13. Break 10:10-10:30   | All  |               |
| 10:45-11:00<br>15 min | 14. Take Charge Extension (MaryAnne Lindeblad for Anaya Balter)   | MaryAnne Lindeblad   | Informational |
|                       | <ul style="list-style-type: none"> <li>• Talking points (see attached)</li> <li>• HCA is submitting extension request for waiver to CMS</li> <li>• Waiver has been in play for a number of years</li> <li>• This is a 5 year renewal</li> <li>• MaryAnne provided description of program (see attachment)</li> <li>• Through Dec 2022; expires Dec 2017</li> <li>• Unlimited family planning</li> <li>• Used to have 50k people on the waiver; single, without children; now in about the 300K</li> <li>• Really no change in what we are already doing</li> <li>• We document any questions and submit to CMS</li> <li>• No written comments through normal posting process; no one showed up</li> <li>• Letters of support AC OBG and NW Lives</li> <li>• Does anyone want to comment or have any questions?</li> </ul> <p>Q: Gerry Yorioka: Not otherwise Medicaid, does it include non-citizens?</p> <p>A: MaryAnne Lindeblad: Does not include non-citizens; they have contraceptives services in other ways</p> <p>Q: Janice Tufte: How do they find people?</p> <p>A: MaryAnne Lindeblad: Typically through clinics, etc., and through a variety of different services.</p> <p>Q: Janice Tufte: Are men are covered too?</p> <p>A: MaryAnne Lindeblad: Yes, includes a full array of services.</p> <p>Q: Gerry Yorioka: Does Medicaid have non-citizen childbirth coverage?</p> <p>A: MaryAnne Lindeblad: We have a way to pay for prenatal through CHIP dollars, delivery is covered with state only money.</p> <p>Q: AB: What about emergency non-citizen coverage?</p> <p>A: MaryAnne Lindeblad: We bill out to AEM (Alien Medical Programs).</p> | <br>WaiverPublicMeeting<br>Script-Nov3.docx<br><br>WSR 17-20-066.pdf |               |

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|                       | MaryAnne Lindeblad: If there are no further comments or questions, we will formally close this portion of meeting, thank you. [Segment End: 11:00 am   Meeting End: 12:00 pm]  |                    |               |
| 11:00-11:15<br>15 min | 14. Apple Health For Kids – CHIP Reauthorization Update  | MaryAnne Lindeblad | Informational |
|                       | <ul style="list-style-type: none"> <li>• House passed yesterday; will be problematic in Senate; especially the cost offsets; will go to more in depth discussions</li> <li>• Washington ran out of money in September; we have been reimbursed for September, will get October and November in December; there is probably enough money for Washington to collect through January</li> <li>• We will have to be prepared to terminate services if not funded; affects approximately 15,700 kids in this</li> <li>• There's legislation on the books that requires coverage up to 205%; as able up to 312%</li> <li>• Looks like we will be reimbursed month to month at this time</li> <li>• We will keep you informed as get more information</li> <li>• Don't have a lot of detail in off-sets</li> <li>• Don't want to scare families by notifying too soon, but cannot wait too long</li> <li>• There is also a systems issue (MMIS &amp; Eligibility; the first time we would even flip a switch would be February, and we just won't be ready</li> <li>• If you share information, please be careful about who and how share; we are reluctant to scare families</li> <li>• Sylvia Gil: The absence of information is, in general an instability; not suggesting a letter; what about something on website saying what is happening in our state?</li> <li>• MaryAnne Lindeblad: Let me think about that; we want to be cautious; things are changing quickly</li> <li>• In just about every article, it states there is bipartisan support and will get passed</li> <li>• We will thoughtfully reevaluate, drafting a letter; we will have some notice; services won't get shut off tomorrow</li> <li>• Will assess people and circumstances; trying to get people appointed to the Exchange or qualified health plan</li> <li>• Andrew Busz: Question in terms of timing and open enrollment; would they have an opportunity?</li> <li>• They would lose eligibility under special circumstances; don't have to wait for open enrollment if lost credible coverage</li> <li>• People may not even know they are on CHIP</li> <li>• Maria Nardella: There is so much to be worried about</li> <li>• MaryAnne Lindeblad: If reauthorized, cost offsets continue to be an issue; there will continue to be dialogue; if have questions or issues drop MaryAnne or Preston a line</li> </ul> |                    |               |

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| 11:15-11:30<br>15 min  | 15. Opioid Policy | MaryAnne Lindeblad   | Informational |
| <ul style="list-style-type: none"> <li>• There is a new Opioid Policy effective November 1; want to make you aware of short and long term</li> <li>• Prevention approach, it's more desirable to eliminate the number of opioids through prescriptions; 80% of teens start heroin because they've already had prescriptions for opioids</li> <li>• There has been work done by Washington Health Alliance (WHA) and Bree Collaborative (handouts), information to provider community and others promoting prevention</li> <li>• We want to drive the trend down, instead of growing it; the number of opioid deaths keeps going up</li> <li>• Q: Where does WA sit in comparison to other states?</li> <li>• MaryAnne Lindeblad: Prescription related deaths have come down</li> <li>• Q: What about death certificates; numbers have allegedly come down, but are they reflected accurately?</li> <li>• MaryAnne Lindeblad: We will be monitoring</li> <li>• On November 1, will be watching closely; don't want to create undue situations, so have protocols in place; we have a team watching for unintended consequences</li> <li>• Looking at other ways to treat pain; how that aligns with treatment to exclude opioids (see handout); prevention and intervention strategies</li> <li>• Gerry Yorioka: Wanting to get a snapshot; but it's a moving target; prescribed sources vs. illicit sources; law enforcement has some insight on this; the diversion exists; can appreciate the dynamics of prescribing and if final executive order comes out (NJ Christie)</li> <li>• MaryAnne Lindeblad: I haven't seen it</li> <li>• Other side of this is the take backs; how people get rid of their prescriptions (selling for street value); think will continue to have more conversations on this and the full spectrum of prevention, treatment, support</li> <li>• Janice Tufte: Issue with number of visits (benefits); 24 visits and an annual assessment</li> <li>• Difference in that it's designed to treat a condition, opposed to multiple conditions, etc.</li> <li>• Gerry Yorioka: Has anyone done a follow up on closure of Seattle Pain Clinic?</li> <li>• MaryAnne Lindeblad: It has been handled more out of Doctors Lessler and Fotinos' shop</li> <li>• Emily: Think it's important from a person with a disability, that has a condition that will not be 'fixed; glad to hear that it's a consideration that some persons won't/don't make progress or rehabilitate</li> </ul> |                   | <br>WHA-Bree-Opioid-Provider-Fact-Sheet.pdf<br><br><br>WHA-Bree-Opioid-Consumer-Fact-Sheet.pdf<br><br><br>opioid-policy.pdf |               |

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| 11:30-11:40<br>10 min | 16. Behavioral Health Integration  | MaryAnne Lindeblad | Informational |
|                       | <ul style="list-style-type: none"> <li>• MaryAnne Lindeblad: Plan level; Legislative mandate to be integrated by 2020; have a phased approach (mid, full, 2018, 2020)</li> <li>• Five regions to come in at fully integrated in Jan King, Pierce, North Sound, Greater Columbia, Spokane over 70% of the Medicaid pop by 2019 will be integrated</li> <li>• Each region has an interest in doing things differently; some things that didn't pass last session; ran out of time for content; allowing for transition year</li> <li>• Three regions interested in transition year; getting together with BHOs to see what doing</li> <li>• May be certain services where these would be ASOs that want to maintain some of the services and state only services, mental health county money</li> <li>• In order to be a transition county, have to be interested in the BHO, connections beacon; there is a letter out about what transition year means</li> <li>• It was not just taking all the BHO services and dropping them; 202 there is no BHO – there will be BH-ASO</li> <li>• There is a litany of services developed over time; this doesn't mean counties won't continue to do what they're doing (customer service); access to care standards go away</li> <li>• It is going to be somewhat of a challenge; it was an agreement struck to address BHO concerns; data conscious; there cannot be an administrative layer; in 2020 the transition is over</li> <li>• Gerry Yorioka: What is the cards for the mental health professional?</li> <li>• Ann Christian: There are only two regions in the state that do that; it's a legal role; cost of those systems at provider level are lower than county crisis services</li> <li>• MaryAnne Lindeblad: ASOs will provide emergency services</li> <li>• There will be milestones for quarters, phased approach</li> <li>• A directive on Behavioral Health Integration came out this morning; it's on the Governor's website right now; there will be administrative integration;</li> <li>• Oversight will move to HCA July 1, 2018; it was a surprise to us, the bill during session was not voted into law</li> <li>• Legislature should formalize directive; staff will be notified on the November 1, 2017 who will be moved to HCA</li> <li>• There will be internal adjustments on how we will make this work; we are excited to have cohesive work; having people in the same building with the same issues will be exceedingly helpful</li> </ul> |                    |               |

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|                       | <p><b>Staff Announcements:</b></p> <ul style="list-style-type: none"> <li>• <b>Sue Birch</b> has been appointed our new director; she will be joining us Jan 1, 2018 from Colorado; she has a nursing degree, and master's in business administration; Google her, there's lots of information</li> <li>• <b>Mich'I Needham</b>, started on the First as chief policy officer</li> <li>• <b>Megan Atkinson</b>, will start as Chief Financial Officer on November 16; she comes from DOT</li> </ul> <p>Action: Cat Georg send announcements, Governor' Directive/EXO regarding BHI</p> <p><b>Miscellaneous:</b></p> <ul style="list-style-type: none"> <li>• Gerry Yorioka: Question on <b>prison transition</b> and <b>continuity of care</b>; overwhelmed with unnecessary detail; would be good to have summary</li> <li>• MaryAnne Lindeblad: We have an active workgroup with Department of Corrections; we will look for a summary</li> <li>• Janice Tufte: <b>Hearing aids</b>; the FDA has opened the window on hearing amplifiers; with the dementia crisis, hearing loss is one of the issues that leads to deeper dive in dementia</li> <li>• MaryAnne Lindeblad: Cut comes up almost every year; Medicaid covers a lot, but not everything; covers for kids up to 21; would like to see it covered</li> </ul> |     |            |
| 11:40-11:50<br>10 min | 17. Potential Future Agenda Items   | All | Discussion |
|                       | <ul style="list-style-type: none"> <li>• Noted in applicable section above</li> </ul>   |     |            |
| 11:50-12:00<br>10 min | 18. Q&A   | All | Discussion |
|                       | <ul style="list-style-type: none"> <li>• Noted in applicable section above</li> </ul>   |     |            |
| 12:00                 | 19. Adjourn   | All |            |