

Call to Order

This meeting is being held virtually due to the Coronavirus (COVID-19) concerns.

Meeting called to order by De Freedman. The date was Aug 24th, 2021 at 5:36 pm. The address of the meeting was Virtual, no physical address.

Welcome and Introductions

- Attendance in Person: None This meeting was virtual only due to COVID-19 concerns
- Attendance by Google Meets unless noted: Diedra (De) Freedman, Pat Thundercloud (by Phone), Bernadine Henderson, Cynthia Macluskie, Brad Doyle,
- Absent: Julie Heineking,
- Public in Attendance: None
- Arizona Department of Administration (ADOA): Larry Allen (not present)
- Healthcare Plan Liaison: Janet Holtz, Jeff Nathe (Mercy Care) Karen Kramer, Laurie Ganzermiller, Amy Pawlowski (UHCCP)
- DDD staff: Jeffrey Yamamoto (DDD IOC Liaison), Dalmen Dore, (interim Program Manager DW)
- The Committee, DDD, United Healthcare and Mercy Care introduced themselves.
- The IOC make up in attendance: **De Freedman** is a former Lawyer, **Pat Thundercloud** is a former Physician's Assistant, **Bernadine Henderson** is a former School Teacher and a current Foster Parent, **Cynthia Macluskie** is the Vice President of the Greater Autism Society of AZ. **Brad Doyle** is a Parent and Advocate. All these members have children who have services with DDD

Call to Public

De Freedman: Called for public to announce themselves. **There was no public in attendance during this meeting.**

DDD Staff Updates

There may have been question(s) and vote(s) taken during this section and those are listed in the "Discussion and Voting on Request for DDD" section of these minutes.

Jeffrey Yamamoto informed the committee that Leah Gibbs is unable to update the committee.

Jeffrey Yamamoto gave the numbers of the DDD updates.



- 45,910 members being served by DDD
 - 40,878 members are living in their own home/family home
 - o 5,032 members are living in licensed facilities
- 3,084 members tested positive for COVID-19
 - 0 1,929 residing in their own/family home
 - o 1,155 residing in licensed facilities
- 75 Member deaths attributed to COVID-19 (31 lived in a family/own home & 44 lived in licensed facilities),
- Tracking weekly counts
- Currently there are 50% of the available members who can receive the vaccine has been vaccinated.

Jeffrey Yamamoto informed for Leah Gibbs: She wanted to also inform the committee through Jeffrey Yamamoto (DDD Liaison) that DDD has been in discussions on the matter brought up by Amy Rose (PRC) and De Freedman (Chair) in an email exchange. Leah wanted to inform the committee that the DDD leadership is reviewing policies and Article 9 revisions for member rights.

De Freedman asked for motion and vote in this matter. This is brought up in the Article 9 portion of the minutes.

Dalmen Dore informed the committee that the next District Program Manager will be selected in September sometime. They are missing an Assistant Program Manager in Avondale due to a promotion. There are 3 supervisor positions now open in the District.

Cynthia Macluskie asked if the District is training the support coordinators about how to access the HPs? And the new Person-Centered Planning form is replacing the current ISP is taking 3-4 hours to complete.

Dalmen Dore answered that training is happening and have contact information for the HP liaisons. The Person-Centered Plan is taking approx. 3 hrs. to begin with and later it will be easier to fulfill due to being electronic.

Cynthia Macluskie stated she was informed that non-verbal DDD members have been told by DDD that they are not eligible for Behavior Health Services.

Dalmen Dore answered that this is not the case and she would like to know where that information is coming from. DDD does not limit which members may apply for Behavior Health.

Cynthia Macluskie asked if an Augmentative Communication Device is damaged doe the support coordinators know who and how to refer the member to the HPs?

Dalmen Dore stated that the Support Coordinators do have that information. It is a part of the Person-Centered Plan.



De Freedman asked if the Person-Centered Plan will be included in the Behavior Plan (BP) for PRC review and does the Program Manager expect that all documents are consistent and reflect the same information in that BP.

Dalmen Dore agreed that all the information should be consistent and that she will talk with Mary DeCarlo on the inclusiveness of the new Person-Centered Plan in the BP.

Bernadine Henderson informed the committee that she had read many Incident Reports (IRs) that group homes were out of compliance. Will pay rate increase for direct care workers.

Dalmen Dore answered that she hopes that the new increase will help but it's an individual and group home responsibility. Both support coordination and quality improvement groups are trying to keep up with those repeating violations.

Brad Doyle informed Dalmen that he had done the Person-Centered Plan with his son and it lasted for the 3 hours but only if the parent/guardian is prepared as well as the support coordinator. Please inform the support coordinators to prepare the parent/guardians on all the documentations needed and that they can always break up the time for session if needed.

Bernadine Henderson asked if residential placement allowed to restrict members who only have Covid-19 vaccinations?

Dalmen Dore replied that she did not know and would have to follow up with that.

ADOA Update

Larry Allen sent an update the committee via the Chair and Liaison because he was unable to attend the meeting.

- 1. Annual Report is due at the end of this month.
- 2. New badges for your committee members are being processed and will be sent to all committee members who have an expired badge now, they are being sent through the mail.
- 3. Committee guidelines have been approved. Once signed they will be sent back to you and I will post a copy on the website.

De Freedman asked for motion and vote concerning the annual report.

Health Plans (HP) presentations

There may have been question(s) and vote(s) taken during this section and those are listed in the "Discussion and Voting on Request for DDD" section of these minutes.



Kerry Murphy (from United Health Care) presented the following PowerPoint.



UnitedHealthcare DualComplete®ONE (HMOD-SNP) H0321-004-000

Arizona: Apache*, Coconino*, Gila, Maricopa, Mohave*, Navajo*, PiYaavapai*

*IndicatesavailableDual products limitedo Long-Term Care (LTC)



Arizona DSNP

Process To Apply

Eligibility Requirements

- Medicare Part A & Part B
- Full Medicaid
- Lives in Service Area
 Keeps Medicaid benefits & Medicare rights

Stakeholder Participation

- Social Worker
- Family Member
- Responsible Party/Power of Attorney (POA)
- Others

Doctors and Prescriptions

- Provider Network
- Prescription Drug Formulary
- Pharmacy Network

Plan Benefits

- All Covered Medical \$0 Copay
- \$4000 Comprehensive Dental
- \$275 OTC Catalog Per Qtr.
- \$25-\$50 Healthy Food Per Mo.
- No Cost Rx Coverage
- \$200 Eyewear Credit
- \$0 Copay Chiro/Acupuncture 12 Visits Each
- \$2500 Hearing Aid Allowance
- 42 Moms Meals (After First Hospital Discharge)
- Personal ER Response System
- Transportation (36 One Way Trips)
- \$0 Copay Virtual Medical & Mental Health Visits
- Navigator Services
- HouseCalls
- 24/7 Nurse line





Election Periods

Eligible beneficiaries will have the opportunity to use their Dual Special Election Period **once per calendar quarter during the 1** st **nine months of the year** to enroll in a new plan or disenroll from their current plan.

- Q1 Used for 2/1, 3/1 or 4/1 effective dates
- Q2 Used for 5/1, 6/1 or 7/1 effective dates
- Q3 Used for 8/1, 9/1 or 10/1 effective dates

Other Election Periods

- Annual Election Period runs 10/15-12/7 effective date 1/1
- Open Enrollment Period runs 1/1-3/31 effective dates 2/1, 3/1 and 4/1
- Acute circumstances or life changes such as gaining AHCCCS eligibility, moving into the service area and moving out of an institution will also generate a Special Election Period

Seamless Enrollment

- Only occurs when a current AHCCCS member ages into Medicare
- Members are notified and can opt out before coverage goes into effect



Contact Information

Kerry Murphy, Sales Director – Northern AZ/Phoenix Email: <u>kerry.murphy@uhc.com</u> Phone: 818-481-0790



Jeff Nathe (from Mercy Care) presented the following PowerPoint.



Mercy Care Advantage (MCA)

- Began in 2006
- MCA is an HMO SNP with a Medicare contract and a contract with the Arizona Medicaid program (AHCCCS)
- · Available to anyone who has both Medical Assistance from the State and Medicare
- Members must receive covered benefits and services from MCA network providers
- Average age of MCA member is lower than a typical Medicare Advantage plan member

Proprietary and Confidential

mercy care

Eligibility Requirements

To enroll in MCA, individuals must receive Medicaid from the State of Arizona; have Medicare Parts A and B; and reside in the following service areas:

- <u>AHCCCS Complete Care (ACC)</u> must reside in Maricopa, Pinal or Gila Counties
- ALTCS must reside in Maricopa, Pinal, Gila, or Pima Counties
- DDD must reside in any County in the State of Arizona
- Must continue to pay Medicare Part B premium (most duæligibles qualify to have the State pay their Part B premium)

3

2

Proprietary and Confidential





Benefits for 2021

MCA Additional Benefits

- OTC Items
- Chiropractic (routine)
- Transportation to Supplemental Benefits
- Vision

4

5

Proprietary and Confidential



Benefits for 2021

MCA Additional Benefits (cont.)

- Dental
 - Comprehensive
 - $\circ\,$ Preventative and Diagnostic
- Hearing Aids
- Podiatry
- MDLive (Telehealth Provider)
- Mom's Meals

Proprietary and Confidential



The following questions and comments were made after the presentations.



Cynthia Macluskie asked the following question and were responded by United and/or Mercy Care Health Plan Representatives. Q= Question, AU= Answer United, AM= Answer Mercy Care, AB=Answer Both.

- Q: Are the Health Care Plans dual plans going to include the Phoenix Children's Hospital (PCH) and Dr. Frey (sp)?
- AB: United and MC has reached out to the entities, but their Networks has been unable to secure a contract with them. Cynthia informed United/MC that PCH have said that they will not work with any Dual eligibility plans.
- Q: Is there any plans to bring this up to the legislature as Cynthia believes this is discriminatory to the Down and Autism members needing their support?
- AU: United will forward the concerns to their leadership.
- Q: Speech Pathologist are rumored to being paid \$8.00/hr. and DDD is refusing to pay. Are the Health Plans going to do something about this?
- AU: informed Cynthia that she cannot discuss rates in a public meeting also with a competitor on the phone. United is unaware that DDD has that response of denial for Speech Therapy. Billing for programs covered by Medicare as primary will not trickle down to Medicaid/ Arizona Health Care Cost Containment System (AHCCCS).
- Q: ABA services are not covered by Medicare nor is there a code. Is it just not covered?
- AU: It may be billed through the Dual provider in the Medicaid side/ the UHCCP plan would pick that up if DDD doesn't. That's where the code would be found.
- Q: B-12 shots are not covered in the Medicare but is it the same as ABA services?
- AU: Yes, it is.
- Q: Can the Medicaid side, just bill PCH and Dr. Frey since it's not being picked up on the Medicare side?
- AU: No, because there is coverage in the Medicare providers, and they would only pick up in-network providers. The secondary provider (Medicaid) would refuse, since PCH and Dr. Frey are outside of network. The member would have to pick them up themselves.
- Q: Regarding the free meal program for discharged patients, can specific dietary requests be made for those meals? (diabetic, Keto, vegan, allergies)
- AU: Yes, they can accommodate for dietary needs.
- Q: Diapers and incontinence products are covered in the plans but can wipes be included in the plan also?
- AU: The incontinence products and wipes are on the OTC catalog. The wipe situation with diapers can be taken care of with the Over the Counter (OTC) purchases. They could be possibly covered on the medical side by being a DME. Follow up will done.
- Q: The HP have been not as proactive when members are dealing with the law enforcement. Can the plans reach out to the different agencies to do training on how to properly deal with DDD members in the community? Is there a difference in how the plans address if the member is addressed with law enforcement?



- AB: There is no difference whether the members are part of the dual plan or not. The Plans both have a Justice Coordinator who should be the point of contact for both plans. The different Law enforcement agencies have differing degrees of relationships with the HPs. United says they will bring this concern of better reach out to the law enforcement agencies to their leadership. United will also bring to their Justice Coordinator giving information to the members and families about the Justice Coordinator and their roles.
- Q: For Behavior Health members, AHCCCS doesn't seem to have enough inpatient facilities. Being Dual enrolled is the options less limited to those members.
- AU: United stated that they do not believe that there are not any less options.
- Seamless Enrollment is not very seamless. Is there a better way to uncomplicate the system when dealing with members? Is there a point person who can help in assisting the member and families?
- AU: Yes, there are the Health Care Liaisons for both United and Mercy Care.
- Q: Is there a way that Mercy Care and United can communicate better with themselves on what benefits they provide?
- AU: Said she is familiar with the specifics Cynthia is talking about and will get with her after the meeting to discuss.
- Q: Are there different pharmacy networks for each HP?
- AB: In general, both plans accept the major pharmacies across the nation. However, in the CMDP for foster children and DDD only Walgreens is not available.
- Q: Dee Freedman wanted to know if Scottsdale Physicians Group was in the Mercy Care advantage program.
- AM: Jeff Nathe was unsure.
- Q: Cynthia asked if the HP would provide list of Justice Coordinators and those providers who do not participate with the AHCCCS plans in the dual system. She will send out written request later.
- AB: Will have to follow up later with both questions
- Q: Is PCH the only palliative care facility for children? If so, why can't others be used?
- AB: PCH is the only one.

Brad Doyle had a couple of Questions:

- Q: If a provider does work and bills for a no longer existing code is the member still responsible for the billing? What is Balance Billing, and can it be used in this case?
- AU and De Freedman: Regardless of the work done, the billing portion of the HP can only try to bill for the billing code they receive. If the billing code doesn't exist or is retired, then a rejection of claim is sent. A provider must inform a patient if the procedure will not be covered by their insurance carrier. If not, an appeal or grievance can be made to both insurance and provider. The member may need to pay if grievance is overturned. On the balance billing, there is no balance billing for anything left over for the member.



Discussion on Article 9

There may have been question(s) and vote(s) taken during this section and those are listed in the "Discussion and Voting on Request for DDD" section of these minutes.

Bernadine Henderson informed the committee that she feels frustrated on the draft of the Article 9 rewrite. Not part of the new requirement for PRC is the omission of the Quality Improvement Dept attendance requirement. She feels that they can answer IR questions around that individual. This was struck down due to staffing levels.

De Freedman commented that she finds that the new proposed Article 9 is abhorrent and will cause problems with those it affects and those who must follow it. She referred to the email sent from Amy Rose (PRC Chair) concerning human rights of a member. She believes that there is a rights violation and that DDD must decide if members under the legal age have the same rights as adults? This issue was asked for a vote.

Bernadine Henderson also mentioned that Behavioral Homes do not have to follow Article 9. She finds that appalling. She is concerned for the way DDD members may be being treated in the future since she feels that Article 9 is so watered down now. Offered to share the unofficial draft proposal of Article 9 with the committee.

Discussion and Voting on Requests for DDD

There were 2 request/votes that were made during the meeting at various time and for various topics and those requests and their voting is listed below.

De Freedman proposed that the committee make motions and vote on the following items throughout the meeting.

1) Bernadine Henderson: Motioned to approve the annual report with corrections when it is completed

Cynthia Macluskie: Seconded the motion

The Motion Passes with all present members voting "Aye" and No "Nay" votes

2) Bernadine Henderson: Motioned that that DDD create a formal legal opinion and supporting documentation from DDD legal counsel on Amy Rose email.

Brad Doyle: Seconded the motion

The Motion Passes with all present members voting "Aye" and No "Nay" votes



DDD IOC Liaison Updates

There may have been question(s) and vote(s) taken during this section and those are listed in the "Discussion and Voting on Request for DDD" section of these minutes.

Jeffrey Yamamoto began by informing the committee that the July IRs have been loaded

Discussion of Membership for the IOC

There may have been question(s) and vote(s) taken during this section and those are listed in the "Discussion and Voting on Request for DDD" section of these minutes.

This was not Discussed

Discussion of Incident Reports (IR) & Behavior Plans (BP)

There may have been question(s) and vote(s) taken during this section and those are listed in the "Discussion and Voting on Request for DDD" section of these minutes.

Jeffrey Yamamoto: Discussion of Behavior Plans on the Shared Drive.

For July IRs, the Committee members have been given two months of incident reports in the Shared Drive. The reported IRs are listed below.

July 2021

Туре	Open	Closed
Accidental Injury	0	64
Consumer Missing	0	7
Deaths	4	3
Emergency Measures	2	1
Human Rights	3	4
Legal	0	3
Medication Errors	9	48
Neglect	21	46
Other Abuse	2	7
Other Behavior	2	357
Other Hospitalization, Unknown injury	2	192
Physical Abuse	6	9
Property Damage	1	1
Suicide	0	2
TOTALS	52	744



The IRs will be reviewed by the committee members.

Number of Questions for QIM: members of the committee will comment on incident reports directly and the liaison will send to QIM.

All PRC meetings are being attended by Bernadine Henderson and Pat Thundercloud.

Number of Behavior Plans turned in by IOC Members: 0

The Program Review Committee (PRC): None.

Adjournment

De Freedman adjourned the meeting at 7:43 pm

The next District West IOC meeting will be held on Tuesday Sept 28th, 2021 at 5:30 pm. Will be virtual meeting should COVID-19 concerns still be in effect.