

2024 Virginia Medicaid

MEMBER ADVISORY COMMITTEE (MAC)



VIRGINIA'S MEDICAID PROGRAM





MEDICAID
MEMBER ADVISORY
COMMITTEE

General MAC Meeting

June 10, 2024


10:00 AM - 12:30 PM





Virginia Medicaid
Member Advisory Committee
(MAC) Meeting:
General Meeting

Monday, June 10, 2024



1

1

Accessibility Check-in Reminders: All Attendees

- Say your name each time you speak.
- Attendees are provided materials ahead of time and in an accessible format.
- Use a microphone to project your speech; if one is not available repeat questions when asked.
- Language access options provided upon request to include real time captioning.
- Spell acronyms and avoid or define terms, jargon, and idioms.
- Speak clearly; avoid speaking too fast, which is particularly helpful to individuals whose primary language is not the one in which you are speaking, sign language interpreters, and real time captioners.

2

Accessibility Check-in Reminders: Speakers

- Summarize major points.
- Avoid reading word-for-word text on presentation slides unless you are reading a quotation.
- Give background and contextual information.
- Display key terms and concepts visually.
- Describe visuals such as images, objects, infographics, diagrams, and more so that non-visual participants can understand the information being presented.
 - **Example:** "On the screen is a diagram which represents the process flow which starts with..."
- Offer outlines and other scaffolding tools: connecting your presentation information by building upon what participants may already know.
- Give attendees time to process information; pause between topics, and after you ask for questions.



3

3

Accessible, Inclusive Self-Introductions

Participants with vision take in a lot of information about the people and the environment around them. To offer context for all participants, visual and non-visual (people with blindness or low-vision, a brief description of yourself using a few sentences. At a minimum, include the following details:

- **Name**
- **Members** (the region and who you are representing on the MAC)
- **Organization and role**

You may also include your gender identity, your pronouns, your race or ethnicity, your skin color, hair color and style, whether you have facial hair, what clothing and jewelry you are wearing, and a short description of your background.

- **Member Example:**
 - My name is ___ from ___ region and I am representing _____. I am a black woman with curly black hair and round gold glasses wearing a red dress and snazzy black heels.
- **Speaker/Facilitator Example:**
 - My name is ___ with (*insert organization*) where I serve as the (*insert role*). I am a Hispanic male with wavy brown hair wearing a blue button-down shirt and khaki pants with a gold apple watch and navy-blue loafers.

If presenting virtually, you can include the background color or setting.

- **Example:**
 - My name is ___ from ___ region and I am representing _____. I am a black woman with curly black hair and round gold glasses. I'm wearing a red blouse. Behind me is a gray wall with several framed pictures, next to a bookshelf.



4

4

Table of Contents

1. Call to Order
2. Member Roll Call and Introductions
3. Minutes Approval 04.08.2024 MAC Meeting
4. Presentation: Navigating Transportation Benefits
5. Presentation: Dental Benefit Update & DentaQuest Partnership
Resources
6. Public Comment
7. Closing Remarks and Announcements
8. Adjournment



GENERAL MEETING AGENDA

June 10, 2024
10:00 AM - 12:30 PM

Presenter:

Natalie Pennywell

Outreach and Community Engagement Manager
Virginia Department of Medical Assistance Services



Virginia Medicaid Member Advisory Committee MAC MEETING AGENDA



June 10, 2024

Location: Virginia Department of Medical Assistance Services (DMAS), 600 E. Broad Street, Richmond, VA 23219

Access Link for WebEx Event	Phone Bridge for Audio ONLY	Access Code for Audio ONLY
https://covaconf.webex.com/covaconf/j.php?MTID=m93f9af7e5a39e6f0787b07de433cea2	Join by phone +1-517-466-2023 US Toll +1-866-692-4530 US Toll Free Access code: 242 002 63478	Webinar number: 2420 026 3478 Webinar password: XinFt3MnM65 (94638366 from phones and video systems)

The link to view live captions is as follows:


<https://www.streamtext.net/player?event=HamiltonRelayRCC-0610-VA4085>


Approximate Time

10:00 a.m.	Call to Order & Introductions <i>Call to Order</i> <i>Welcome by DMAS Executive Leadership, Committee Member, ELT, and Speaker Introductions</i>
10:15 a.m.	Vote on April 08, 2024 MAC Minutes
10:20 a.m.	Presentation – Navigating Transportation Benefits 15-minute presentation; 15-minute Q&A
10:50 a.m.	Presentation – Dental Benefit Update & DentaQuest Partnership Resources 30-minute presentation; 15-minute Q&A
11:35 p.m.	Public Comment *Those wishing to make a public comment must join via the WebEx link or In-person. Send a message to one of the hosts or place your full name and location in the comments to be recognized during this time. Each speaker will be granted only two (2) minutes to speak.
11:50 a.m.	Closing Remarks and Announcements
12:00 p.m.	Adjournment

NOTE: Reasonable accommodations for meeting presentations will be provided upon request for persons with disabilities and limited English proficiency. Please notify the **DMAS Civil Rights Coordinator** at (804) 482-7269, or at civilrightscoordinator@dmass.virginia.gov at least five (5) business days before the meeting to make arrangement.


Committee Contacts: Natalie Pennywell and Dorothy “Dot” Swann at mac@dmass.virginia.gov





AGENDA


Natalie Pennywell
 Outreach and Community Engagement Manager
 Department of Medical Assistance Services (DMAS)



5

Agenda

1. Call to Order
2. Member Roll Call and Introductions
3. Minutes Approval 04.08.2024 MAC Meeting
4. Presentation: Navigating Transportation Benefits
5. Presentation: Dental Benefit Update & DentaQuest Partnership Resources
6. Public Comment
7. Closing Remarks and Announcements
8. Adjournment



6

MEMBER ROLL CALL & INTRODUCTIONS

Presenter:

Natalie Pennywell

Outreach and Community Engagement Manager
Virginia Department of Medical Assistance Services



Welcome Remarks – DMAS Executive Leadership



Cheryl Roberts
Agency Director

Jeff Lunardi
Chief Deputy Director

Sarah Hatton
Deputy of Administration



7

7

7



MEMBER ROLL CALL AND INTRODUCTIONS

Natalie Pennywell
Outreach and Community Engagement Manager
Department of Medical Assistance Services (DMAS)



8

8

MAC Members

- JoAnn Croghan
- Jacqi Dix
- Mark Dixon (Virtual)
- Sydnee Evans (Virtual)
- Lorri Griffin
- Chiquita Hubbard
- Sheila Johnson
- Leah Leuschner (Virtual)
- Brian Marroquin
- Bryan Roaché (Virtual)
- Kyung Sook Jun

Introductions

- Meeting Facilitator(s)
- Executive Leadership Team Member(s)
- MAC Support Staff
- Speakers

Introduce yourself in the chat!

- Name
- Organization
- What's is your favorite summer activity and is it on your to do list for this summer?



9

MAC Member Roll Call

- JoAnn Croghan
- Jacqi Dix
- Mark Dixon (Virtual)
- Sydnee Evans (Virtual)
- Lorri Griffin
- Chiquita Hubbard
- Sheila Johnson
- Leah Leuschner (Virtual)
- Brian Marroquin
- Bryan Roaché (Virtual)
- Kyung Sook Jun

10

Introductions

- Meeting Facilitator(s)
- Executive Leadership Team Member(s)
- MAC Support Staff
- Speakers

11

Notes



12




MINUTES APPROVAL

Presenter:


Natalie Pennywell

Outreach and Community Engagement Manager
Virginia Department of Medical Assistance Services



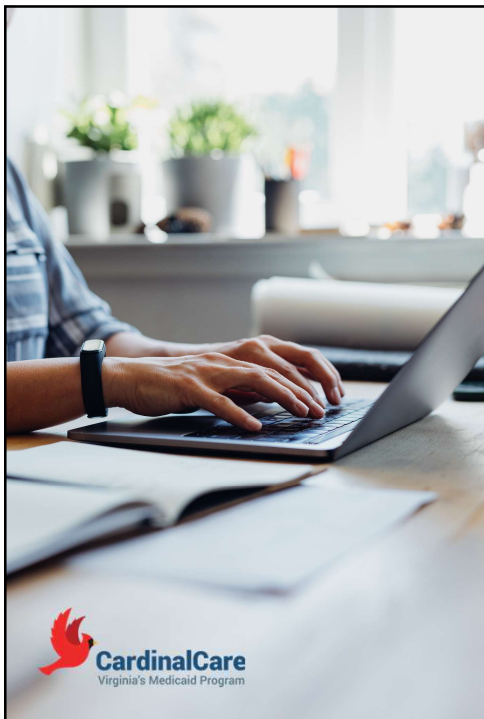
MINUTES APPROVAL

Natalie Pennywell
Outreach and Community Engagement Manager
Department of Medical Assistance Services (DMAS)




13

13



Notes



14

14

Medicaid Member Advisory Committee (MAC) Meeting
Department of Medical Assistance Services
Via WebEx Videoconferencing

April 8, 2024 Minutes

Committee Members	DMAS Staff
Present: In Person	DMAS Executive Leadership Team Members
JoAnn Croghan	Cheryl Roberts, Agency Director
Jacqi Dix	Jeff Lunardi, Chief Deputy Director
Lorri Griffin	Sarah Hatton, Deputy Director of Administration
Chiquita Hubbard	Ivory Banks, Chief of Staff
Sheila Johnson	Tammy Whitlock, Deputy Director for Complex Care Services
Brian Marroquin	John Kissel, Deputy Director for Technology
Bryan Roaché	Dr. Lisa Price Stevens, Chief Medical Officer
Kyung Sook Jun	
	Speaker(s)/Facilitators(s)
Present: Virtual	Sara Cariano, Director, Eligibility Policy and Outreach Division, DMAS
Mark Dixon	Melissa Terrell, Medical Assistance Program Consultant, Sr., VDSS
Leah Leuschner	Ashley Harrell, Senior Program Advisor, Behavioral Health Division, DMAS
	Christine Minnick, Child Welfare Program Specialist, DMAS
Absent	Adrienne Fegans, Deputy Director of Program Operations, DMAS
Sydnee Evans	
	DMAS Support Team Members
	Natalie Pennywell, Outreach and Community Engagement, Manager (meeting organizer and facilitator)
	Dorothy Swann, Outreach and Member Engagement Specialist (meeting organizer)
	Kristin Lough, Hearing Officer (minutes recorder)
	Jonathan Hendler, Visual Communications Designer (photographer)
	Rachel Lawrence, Strategic Initiatives Specialist (greeter and attendance support)
	Norman Gaines, AV Specialist (technology support)
	Sonya Scott, ITS Operations Analyst (technology support)
	Closed Caption

	Jesus A Perez, Civil Rights Compliance Specialist, DMAS
--	---

Attendance					
# of Committee Members	# of ELT Members	# of Speakers	#of Support Team Members	# of General Public	Total
10	8	5	6	42	71

Member Engagement Since Last Meeting				
# of Comments	# Inquiries	# Outstanding Inquiries	# Inquiries Closed	Total
5	29	0	29	34

Welcome and Call To Order

Natalie Pennywell called to order the meeting of the Medicaid Member Advisory Committee (MAC or Committee) at 10:05 a.m. on Monday, April 8, 2024, via WebEx online meeting platform. Ms. Pennywell went over an accessibility check-in to assist in accessibility for all listeners. She then introduced the DMAS Director, Cheryl Roberts.

Welcome

Welcome – Cheryl Roberts, Agency Director

Director Roberts greeted the Committee and thanked the Committee for their participation. She hoped that the members receive valid and reasonable information in the meetings and that the MAC members communicate back to DMAS, either in writing or by speaking at the meeting. Director Roberts reminded the MAC members that each represent about 166,000 Medicaid members, and that their participation is important.

Welcome – Jeff Lunardi, Chief Deputy Director

Deputy Director Lunardi greeted everyone and stated how important it is to make sure the policies in place work for the members.

Welcome – Sarah Hatton – Deputy of Administration

Deputy of Administration Hatton greeted the Committee and thanked the Committee for their participation in the MAC meeting. She explained that the members would have opportunities to help throughout the year, including the online application process.

Member Introduction

Ms. Pennywell asked members to introduce themselves, indicate where they are in Virginia, and who they represent on the MAC. The committee members, residing in different regional areas from around the state, introduced themselves and stated who they are representing. Director Roberts indicated gratitude for those members and expressed her experience about representing a child with long-term care needs.

Review and Vote to Approve Minutes from Meeting on November 13, 2023

Each of the MAC members were provided a copy of the November 13, 2023, meeting draft minutes, and the draft minutes were also posted on the Committee's webpage on DMAS' website, as well as on the Virginia Town Hall website.

MAC member Jacqi Dix made a motion to accept the draft minutes from the November 13, 2023, meeting. MAC member Lorri Griffin seconded the motion to accept the minutes. Ms. Pennywell offered the Committee the opportunity to provide objections or changes to the minutes. The Committee then voted to approve the minutes with a unanimous vote.

Presentation - Virginia Medicaid 12-Months Continuous Eligibility (CE) for Children

Sara Cariano – Director, Eligibility Policy and Outreach Division

Effective January 1, 2024, children in Medicaid and FAMIS will remain enrolled for a 12-month protected coverage period, regardless of changes in circumstance, including parental income increases. This will not apply for children who turn 19, move from the state, request termination of coverage, have eligibility approved incorrectly due to fraud or error, death, or for children whose Medicaid was approved with hospital presumptive eligibility (HPE) with a "reasonable opportunity period." Enrolled children cannot be moved to FAMIS during the period because it is considered a reduction of coverage.

Annual renewals are still required, but once children are approved after a renewal, a new 12-month CE period begins. Families must still report changes within 10 days of the changes occurring, which will make renewals easier. The CE period is not applicable to parents, so reporting changes allows workers to properly reevaluate the entire family timely. The intent of this additional coverage reduces churn, which

is losing coverage due to administrative issues rather than lack of eligibility, as well as reduces workload at the local departments of social services and reduces cost to providers.

Questions and Comments from Committee Members:

In response to a question about whether members had heard of the program and how they learned of changes within Medicaid, the following responses were received.

A member had heard of the program.

A member typically learns of changes from DMAS via emails. She indicated great appreciation for the program and asked why DMAS does not open the same opportunities for people with long-term care (LTC).

A member stated that he was not aware of this opportunity but learns most of the information about Medicaid through a newsletter from his local Department of Social Services. How much time do parents have to recertify and what are the steps for that?

Ms. Cariano answered that all the local Departments of Social Services are required to comply with the same rules. The eligibility period for adults is 12 months for most adults unless something changes, their coverage will continue. However, families must report changes within 10 days of the changes occur, like increased income, pregnancy, and others. Agencies attempt to review eligibility ex parte, which means not sending the big renewal packet in the mail and instead completing the review electronically. Members can renew on paper, online, or via a telephone call to Cover Virginia. Prior to ending coverage, the LDSS sends a notice informing people that their coverage will reduce or end along with appeal rights. Members also have 90 days after closure due to failure to provide a renewal application to reapply.

Ms. Pennywell thanked the participants and introduced Ms. Terrell.

Presentation – Role of Local Department of Social Services

Melissa Terrell – Medical Assistance Program Consultant, Sr., Virginia Department of Social Services

Ms. Terrell introduced Virginia Department of Social Services (VA DSS), which is in partnership with local departments of social services (LDSS) and the Community Action Partnership (VaCAP). Ms. Terrell indicated that the experiences in a specific LDSS may vary from other offices, but they are part of five regions of the state and held to the same policy throughout the state. Ms. Terrell noted that there are limitations with internet access and mail delays and walked members through alternative access through

www.dss.virginia.gov. The website includes contact information for each LDSS, press releases, and access to LDSS websites, if they exist.

LDSS reviews ongoing coverage and new applications for Medicaid and FAMIS. DMAS manages the Medicaid payments, cards, and more. LDSS will refer members with inappropriate coverage or payments to the DMAS Recipient Audit Unit (RAU) or, if they lose coverage, to the State Health Benefit Exchange. People can apply and renew online at Common Help www.commonhelp.virginia.gov. Individuals can receive a paper application mailed to them, which they can then mail, fax, or drop off to the LDSS. People can also call the Virginia Department of Social Services Enterprise Call Center at (855) 635-4370. Applicants can take photographs of verifications and email those pictures to workers, but they can also mail, fax, or drop off verifications during the application process. Ms. Terrell asked that members provide feedback of communication with a LDSS.

Responses from the Committee Members:

LDSS workers have told members that cannot email responses to them only to hear days later that they will accept electronic verification via email. Ms. Terrell stated that there should not be a LDSS without email access.

Is the system mobile friendly, are there apps or preferred browsers? Some of the helpful information mentioned by Ms. Terrell was not available on a phone browser. Ms. Terrell navigated through the webpage on her phone and noted that she also could not find some of the helpful links and would report it to the appropriate individuals after the meeting.

Some local nonprofit organizations could help applicants and members access Medicaid applications and benefits from Social Services. Do local agencies have lists of those organizations to help members? Ms. Terrell indicated that she encouraged local agencies to keep information about their locality for referrals for assistance, and that she would encourage creation and preservation of those lists again.

Are there rules against sending certain types of information? Members have received pushback from workers about receiving information that could violate HIPAA. Are there rules about emailing potential Protected Health Information (PHI) or for family members and representatives sending emails on behalf of the applicant or member? Ms. Terrell indicated there could be pushback from workers for fear of lack of encryption on incoming emails.

Ms. Hatton stated that Cover Virginia has a separate email inbox that can accept the information coming in, but that Cover Virginia will not respond to the recipient because of PHI and HIPAA protection. Ms. Hatton agreed to send that information to the members.

Is Adoption Assistance coverage available to members after 18? What happens when she becomes an adult for Medicaid? Ms. Terrell referred the member to her Adoption Assistance Case Manager. Ms.

Cariano indicated that the parent's income may count as the member becomes an adult. One of the biggest pieces for those individuals is to obtain a Social Security disability approval if possible.

Case workers do not return calls and members do not receive mail approvals or denials, including online responses when renewals are completed online. Case workers have voicemail messages that say do not leave more than one message, I will return your call, but the calls are not returned. Members are expected to return timely, but those responses are not reciprocated.

Presentation – Addiction and Recovery Treatment Services (ARTS) 1115 Waiver Renewal

Ashley Harrell – Senior Program Advisor, Behavioral Health Division
Christine Minnick – Child Welfare Program Specialist

Ms. Harrell explained that a demonstration waiver, 1115, allows DMAS to use federal Medicaid dollars for certain benefits. It was initially approved for the Governor's Access Plan (GAP), and 1115 waivers are typically approved for five years. This waiver, which expires December 31, 2024, approved benefits for substance use disorders, former foster care youth who aged out, and high needs support benefits. The General Assembly did not provide funding support for the high needs support benefit.

Ms. Minnick noted that individuals who turn 18 while in foster care in any state will continue receiving Medicaid coverage up to age 26. Through the waiver, DMAS hopes to help prevent homelessness, incarceration, and substance abuse, as well as continuing to enroll those individuals in Medicaid automatically after aging out of coverage.

Ms. Harrell introduced the ARTS program, including opioid addiction and substance use disorders programs. ARTS includes managed care which allows coordination between physical healthcare and behavioral health. Individuals aged 21 and over will receive care in facilities with 16 or more beds for treating behavioral health issues. Individuals can be seen in an acute care setting or an inpatient setting. This is beneficial for crisis and overdose events. This also allows DMAS to implement evidence-based criteria.

Overdoses increased substantially between late 2019 and 2022, which has peaked around 108,000 fatalities, which is a 64% increase in Virginia between December 2019 and 2021. Fatal drug overdoses have been the leading method of unnatural death since 2013 in Virginia, and fentanyl has been the driving force behind overdoses. Ms. Harrell walked members through increasing care for recovery over the past few years.

Questions raised by Committee Members included:

Under Project BRAVO, for members 11 to 18, can you speak to the supply of providers and needs? What is DMAS doing about it? Ms. Whitlock answered that DMAS is aware there are not sufficient licensed providers, but the Governor's Right Help Right Now plan is working to drive new providers and education for those individuals.

DMAS needs to address having sufficient workforce. Programs are available through high school prior to college, and we should continue to encourage those individuals to pursue those career opportunities earlier and with more support.

A member has a friend who owns a behavioral health clinic and that friend struggles with hiring mostly because of the restrictions becoming licensed. The clinic owner is not reimbursed if those individuals are unlicensed, and that friend is struggling to keep the clinic open due to the costs of paying workers with insurance restrictions.

Can DMAS speak with stakeholders and design a specific program to help those who may want to get in the mental health field? This program could provide support for management, payment, billing, and continuation of practice. Ms. Harrell stated that DMAS works with providers to assist with billing, but acknowledged how complex management process can be.

Ms. Harrell asked members what they saw as the biggest challenges for former foster care youth and individuals with substance use disorders.

Presentation – Cardinal Care Resources and Transportation Process Review

Adrienne Tyler Fegans – Deputy of Programs and Operations

Ms. Fegans introduced Cardinal Care, the new name for the Virginia Medicaid program. DMAS has put out for bid a contract for the five DMAS health plans as part of the process. DMAS will change the communication and style of communication for members. DMAS will still send out letters but will include additional communication styles like social media. Ms. Fegans asked for help from the MAC members to help her review the letters for accessibility and understanding for the members. There will be member Town Halls and Ms. Fegans would like MAC members to appear at the Town Halls if possible. Ms. Fegans asked that MAC members provide comment on the logo options available in her presentation. She also asked for participants in a national group that will meet twice about Medicaid non-emergency transportation.

Questions raised by Committee Members included:

Are caregivers eligible for the transportation advisory group? Yes.

Public Comment

Chiquita Hubbard thanked the MAC for the opportunity to present. She mentioned that families are often caregivers and asked about the political process of approving a bill regarding caregivers.

Kyung Sook Jun provided public comment.

Jacqi Dix noted that there are benefits for individuals under 21 and over 21. There are benefits for those under age 21, and her daughter is age 21, but cognitively is not. Ms. Dix encourages waiver services that are serving individuals with developmental delays.

Brian Marroquin indicated that there are several providers on the MCO Provider Directories, but when you research those providers, many of them are in the same practice. This is misleading and can become problematic. Many specialty doctors do not accept Medicaid.

Adjournment

Ms. Pennywell thanked the Committee for joining, and she stated that DMAS will evaluate the MAC member questions and comments to create agenda topics for future meetings.

Ms. Pennywell thanked members for their participation and adjourned the meeting at 12:33 p.m.

Navigating Transportation Benefits

Presenter:

Aaron Moore

Manager, Transportation Management Services Unit
Virginia Department of Medical Assistance Services






Navigating Transportation Benefits

Aaron Moore
Manager, Transportation Management Services Unit
Virginia Department of Social Services



15

15



DMAS Fee-For-Service (FFS) and MCO NEMT Programs

Medicaid Member Advisory Committee (MAC) Meeting
June 10, 2024



16

16

Virginia Medicaid

Virginia Medicaid Overview

The Virginia Department of Medical Assistance Services (DMAS) plays an essential role in the Commonwealth's health care system by offering coverage to nearly 2 million Virginians.



1 in 4 Virginians receive life-saving coverage through Virginia Medicaid



More than 800,000 children in Virginia are covered by Medicaid



More than 90% of members receive coverage through managed care



2



17

Virginia Medicaid

Who Do We Cover?

Medicaid is available to Virginians who meet specific income thresholds and other eligibility criteria



Source: April 1, 2024 DMAS Enrollment Dashboard - <https://www.dmas.virginia.gov/data/medicaid-famis-enrollment/>

3



18

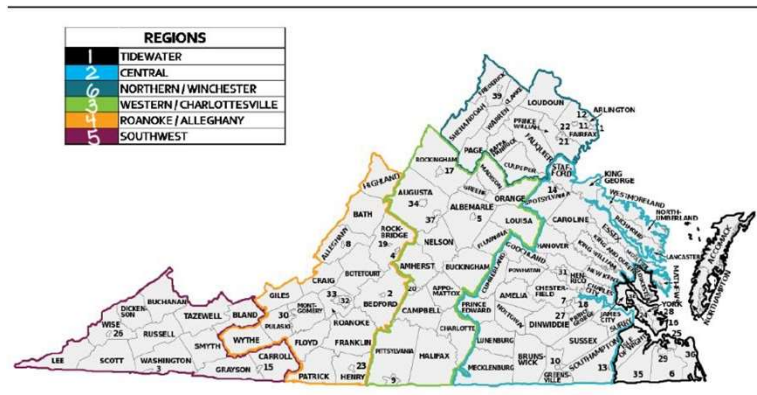
Transportation Management Services Unit (TMSU) Staff and Structure

- TMSU Manager (Aaron Moore)
- TMSU Supervisor/Field Monitor Supervisor (Joey Miller)
- Fee For Service NEMT Contract Manager (Nicki Taylor)
- Contract Monitor (Vacant)
- Senior Program Support Technician (Charlotte Bennett)
- Field Monitors (Listed by Region on the next slide)



TMSU Field Monitors

- **Chuck Halman Region 1**
- **Tina Davis Region 2**
- **David Hafey Regions 3,4,5**
- **Dee Dee Jones Region 6**



Audience Survey – Break for Questions

- **Does anyone have any questions regarding the Virginia Medicaid overview?**

- **Are there any questions regarding the structure, staffing or nature of the Transportation Management Service Unit (TMSU)?**

21

DMAS NEMT Introduction

- **Non-Emergency Medical Transportation (NEMT)**
 - a. NEMT is Medicaid benefit for the majority of Fee For Service (FFS) and Managed Care Organization (MCO) Members to a non-emergency Medicaid-covered service
 - b. MCO NEMT Programs have additional transportation to non-traditional Medicaid locations (i.e. grocery store, place of worship, DMV, barber/beauty saloon, library, Gov Office)
- **The FFS and Five MCOs have a contracted NEMT Broker**
 - a. Brokers can and do have several contracts (i.e. ModivCare)
 - b. Therefore Virginia has Six Statewide NEMT Programs.
- **NEMT is not for emergency transportation. Members must dial 911 for emergency services**
- **NEMT Programs may have variations to the information and services provided**
- **All NEMT Transportation services must be preauthorized and paid for by the broker**
 - a. NEMT Brokers find providers to transport Medicaid Members
 - b. Members do not have the right to choose their provider however, they can recommend a provider

22

Types of NEMT Service

- **Ambulatory (Taxi, TNC, Volunteer Driver)**
Members are able to get in and out of the vehicle independently. Common vehicles used for ambulatory service are minivans and sedans.
- **Wheelchair Van**
Members that are unable to safely transfer from the wheelchair into a vehicle will be transported in their wheelchair. All wheelchairs will be safely secured in the vehicle for all transports.
- **Van-Stretcher**
Members that need to be transported on a stretcher but do not require medical care or monitoring will be transported on a van-stretcher vehicle.
- **Stretcher (Non-Emergency Ambulance)**
Members that need to be transported on a stretcher and require medical care and monitoring will be transported on an ambulance.
- **Gas Reimbursement**
Members, family, friends can receive gas reimbursement to Medicaid Services
- **Bus Tickets**
Members living on a bus line can receive bus tickets to ride the bus to their Medicaid Service

23

Audience Survey – Break for Questions

- **Does anyone have any questions regarding the Virginia Medicaid NEMT program overview?**
- **Are there any questions regarding the types of services included in the Virginia NEMT programs?**

24

Virginia Commonwealth NEMT Programs

- DMAS Serves 2.16 Million Medicaid Members
 - Includes 729,446 Medicaid Expansion Members
- ID/D Waiver NEMT Services
 - FFS NEMT transports to their waived services
 - Community Living (CL) waiver - 11,571 Members
 - Building Independence (BI) Waiver - 307 Members
 - Family and Individual Support (FIS) - 4,156 Members
 - MCO NEMT Programs transport ID/D Members to their acute care
- DMAS has Six NEMT Programs
 - FFS NEMT Program serves an Average Population of 128,532
 - Five Managed Care Organizations (MCO)
 - Each MCO has their own NEMT Program
 - FFS/MCO Contracted Transportation Brokers may have multiple NEMT Contracts
 - Transporting Multiple contracts with the same provider network

NEMT Program Consistency

- Collaboration, Cooperation, Communication
- EQUALS – Consistency among all six NEMT Programs
 - FFS, CCC Plus and Medallion 4.0 NEMT Contractual Requirements
 - Member Transport Requirements
 - Driver Requirements
 - Provider Requirements
 - Reporting
 - DOJ Requirements
- The DMAS Transportation Management Services Unit (TMSU) works to balance Broker Corporate requirements with DMAS required changes for safe, reliable, on time transportation

NEMT Brokers

- A NEMT Broker is a company who contracts with DMAS or a MCO who coordinates all aspects of NEMT services. Transportation brokers are required to preauthorize NEMT services by taking reservations, assign trips, provide customer service and pay for NEMT services.
- Transportation Brokers are committed to providing excellent customer service. They achieve this by fulfilling the following responsibilities:
 - Broker may provide internet access for requests for transportation services
 - All Brokers provide toll-free telephone access for requests for NEMT services
 - All Brokers provide 24-hour toll-free access to services for urgent trips on holidays, weekends and after business hours
 - Brokers take reservations up to five business days in advance
 - Schedule "URGENT" trips need for less than three or five-day notice (i.e. urgent doctor appt, hospital discharge, Member wakes up sick & doctor wants to see Member same-day)
 - All Brokers verify Member's Medicaid eligibility
 - Brokers can verify the Member's appointment is for a Medicaid-covered service
 - Brokers will use the most appropriate and cost-effective type of transportation
 - All Brokers respond to transportation inquiries and requests in a timely manner
 - All Brokers provide necessary interpreter services for telephonic communication
 - All Brokers document, research and respond to complaints in a timely manner
 - All Brokers provide adequate notice to Members of delays, alternative schedules or alternate pick-up arrangements.

27

Data and Software

- FFS NEMT Trip Digitization
 - 100% of NEMT Providers and Volunteer Drivers have trip digitization (GPS tracked vehicles and electronic billing)
- NEMT Encounter Data
 - Encounter data requirements are the same for FFS and MCO contracts.
 - Includes Emergency Air, Emergency and Non-Emergency Ground Ambulance and all NEMT Services
 - Ability to collect trip data for each Member
 - On-time performance – scheduled & actual drop-off times
 - Facility locations
 - Number of trip legs and trip type to include all data (i.e. name of provider, number of miles, amount paid, transportation HCPCS Codes)

28

Transportation Information Management Software (TIMS)

- Optimized Automated Scheduling
 - Include automated provider manifest download, billing & GPS tracking
 - Automated suggested trip assignment based on quality, price, and distance
 - Ability to access hospital discharge software to streamline hospital discharges
- Member Information Management
- Transportation Network Management & Support
- Reporting –including adhoc reports when requested
- Import, Export, Collect Data and Files
 - Submit encounter data
 - Stores data for accurate reporting of support efficiencies in monitoring contract
 - Imports eligibility file(s)
- Provide HIPAA compliant web-based electronic portal for Members and Facilities to access (i.e. Transportation.DMAS.Virginia.gov)
- Member Apps – make reservations, cancel trips, ability track vehicle location by GPS



29

Audience Survey – Break for Questions

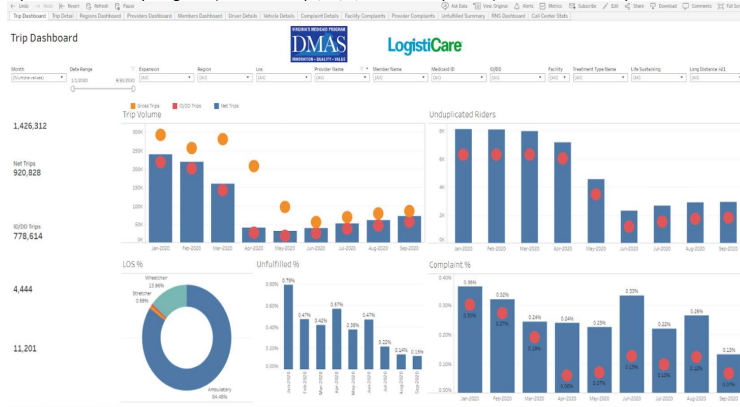
- **Does anyone have any questions regarding the technology being utilized in relation to the trips delivered in association with the FFS NEMT Program?**
- **Are there any other items that need clarification?**

30

DMAS Access to all FFS NEMT Program Information

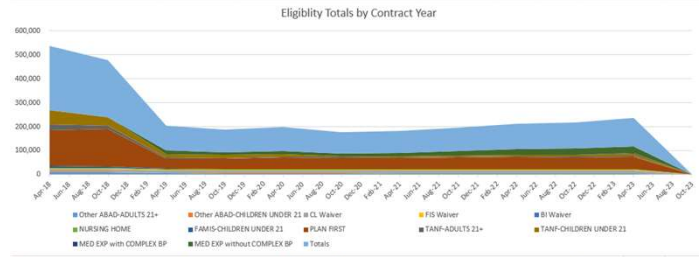
- DMAS FFS NEMT Program Information – ModivCare’s Tableau

- Inquiries by Date Range, Region, Level of Service, Provider Name, Member ID, Treatment Type, Life-Sustaining Trips, Long Distance, Facility Trip information, Complaints, Info by Member, Transport Information by Program (i.e. All FFS Trips, ID/D, Medicaid Expansion) – Gross and Net Trip Totals



DMAS FFS NEMT Program Metrics

Eligibility Totals by Contract Year (six-month intervals)	Apr-18	Oct-18	Apr-19	Oct-19	Apr-20	Oct-20	Apr-21	Oct-21	Apr-22	Oct-22	Apr-23	Oct-23
Waiver/Eligibility Type												
Other ABAD-ADULTS 21+	9,847	9,100	5,162	4,499	4,367	3,083	3,281	3,328	3,518	3,510	3,395	3,395
Other ABAD-CHILDREN UNDER 21	2,291	2,374	1,562	1,560	1,501	2,229	1,300	1,264	1,244	1,223	1,213	1,213
CL Waiver	11,109	11,206	11,139	11,268	11,431	11,490	11,590	11,564	11,513	11,558	11,571	11,571
FS Waiver	1,517	1,649	1,895	2,071	2,654	2,849	3,281	3,433	3,467	3,939	4,156	4,156
BI Waiver	248	2,068	281	298	317	316	327	328	315	308	307	307
NURSING HOME	3,321	2,915	2,307	2,141	2,258	1,798	1,748	1,698	1,687	1,753	1,813	1,813
FAMS-CHILDREN UNDER 21	6,953	4,813	1,991	1,593	1,238	718	474	607	774	758	660	660
PLAN FIRST	149,789	157,352	41,643	42,587	46,578	45,693	46,441	48,141	50,275	49,450	50,800	50,800
TANF-ADULTS 21+	23,995	13,680	4,296	3,576	3,801	6,305	1,975	2,969	3,139	3,099	2,858	2,858
TANF-CHILDREN UNDER 21	60,355	36,094	13,486	12,019	10,541	1,304	5,322	6,242	6,292	6,476	11,780	11,780
MED EXP with COMPLEX BP	0	0	13,155	762	954	663	724	842	920	1,044	1,097	1,097
MED EXP without COMPLEX BP	0	0	16,721	11,520	13,214	11,632	14,421	17,406	23,253	25,592	29,034	29,034
Totals	269,425	239,451	101,648	93,894	98,854	88,080	90,884	97,822	106,397	108,710	118,684	118,684



* The most recent eligibility totals are available through September of 23. These will be updated through October once those totals are available.



DMAS FFS NEMT Program Metrics



DMAS FFS NEMT Program Metrics

Trip Counts	Contract Year 2021	Contract Year 2022	Contract Year 2023
Gross Trips	1,178,504	2,008,634	2,520,937
Net Trips	732,833	1,573,957	2,050,657
Unduplicated Riders	7,845	9,214	10,208
Average Trips per Member	93	171	188
Average Trips per Week	1.8	3.29	3.61



Audience Survey – Break for Questions

- Are there any questions regarding the Metrics covered on the previous slides?
- Are there any other items that need clarification?

35

Questions

Send Questions to TMSU email: transportation@dmass.virginia.gov

DMAS web site: <http://www.dmas.virginia.gov>

FFS web site: <http://transportation@dmass.virginia.gov>

Presenter: Aaron Moore

aaron.moore@DMAS.Virginia.gov



Aaron Moore



36



Dental Benefit Update & DentaQuest Partnership Resources

Presenter:

Justin Gist

Dental Program Manager

Virginia Department of Medical Assistance Services

Tim Whited

VA SFC Outreach Coordinator

DentaQuest




Dental Benefit Update & DentaQuest Partnership Resources

Justin Gist
Dental Program Manager
Virginia Department of Medical Assistance Services

Tim Whited
VA SFC Outreach Coordinator
DentaQuest




37

37


Virginia Medicaid

SMILES FOR CHILDREN DENTAL PROGRAM

June 2024



Justin Gist, Dental Program Manager, DMAS
Tim Whited, VA SFC Outreach Coordinator, DentaQuest



38

38

TODAY'S ROADMAP

Future
Where are we headed?

Present
Where are we?

Past
Where have we been?

 CardinalCare
Virginia's Medicaid Program

39

39

WHERE HAVE WE BEEN?

Smiles For ChildrenSM
Improving Dental Care for Children and Adults

 CardinalCare
Virginia's Medicaid Program

40

40

HISTORY OF THE SMILES FOR CHILDREN PROGRAM

- ❑ In **2005**, Virginia's ***Smiles For Children*** program was established to improve access to high quality dental services for children enrolled in Medicaid.
- ❑ In **2015**, Virginia's ***Smiles For Children*** program expanded coverage for pregnant members enrolled in Medicaid.
- ❑ In **2021**, Virginia's ***Smiles For Children*** program expanded coverage for adult members enrolled in Medicaid.



41

OVERVIEW

What is *Smiles for Children*?

Smiles For Children is Virginia's Medicaid, FAMIS, or FAMIS Plus dental program. Members enrolled in ***Smiles For Children***, 20 years of age and younger, receive comprehensive dental benefits. Comprehensive dental benefits are also provided to pregnant adult women enrolled in Medicaid, FAMIS MOMS, and Adult Medicaid members over age 21.

Enrollment

There is no special enrollment or ***Smiles For Children*** dental card. The member may use the Cardinal Care plastic ID card or Managed Care Organization (MCO) member ID card for all dental care. ***Smiles For Children*** will only pay for dental services while the member is enrolled in Medicaid. If coverage ends, the member will receive a letter indicating their benefits have ended. The program will not pay for any dental services after the end date on the letter. The member will have to pay for any services received after the end date on the letter.

Who is DentaQuest?

DentaQuest works with the Virginia Department of Medical Assistance Services (DMAS) to ensure the dental plan runs well. DentaQuest will work with members to ensure they get the necessary dental care.

42

BENEFITS

Members under 21

Smiles For Children members under age 21 are covered for all medically necessary dental services and orthodontic (braces) procedures provided by a participating dentist. Some of the other services that are available to children include fluoride treatment (every six months), sealants, cleanings (every six months), space maintainers, extractions (tooth pulling), anesthesia, crowns (some caps), braces (if approved), root canal treatments, x-rays (when necessary), fillings, and oral disease services.

Members 21 and over

Smiles For Children members 21 and over are covered for all medically necessary dental services procedures provided by a participating dentist. Some of the other services that are available to adults include x-rays and examinations (when necessary), cleanings (every six months), fillings, extractions (tooth pulling), root canal treatments, gum related treatment, dentures, and oral disease services.

Pregnant Members

Prenatal dental care is safe, effective, and necessary! And it's covered through Virginia Medicaid. Pregnant members who are 21 years old and older in Medicaid or FAMIS can get dental benefits. These dental benefits will be available through the **Smiles For Children** program. Benefits include cleanings, exams, fillings, and crowns. Root canals, x-rays, and anesthesia are also covered. Braces are not covered. These benefits will stop 12th months after the end of pregnancy.



BENEFIT OVERVIEW

1	2	3	4
Children (0-20) <ul style="list-style-type: none"> • COE/POE • X Rays • Cleanings • Fluoride • Sealants • Space maintainer • Anesthesia • Extractions • Braces • Restorative 	Pregnant Members <ul style="list-style-type: none"> • X-rays • Exams • Cleanings • Fillings • RCT • Gum related treatment • Crowns, bridges, partials • Dentures • Extractions • Braces NOT covered 	Adult Prior to 7/1/22 <ul style="list-style-type: none"> • Limited Exams • Medically necessary extractions and associated diagnostic services 	*Adult Post 7/1/22 <ul style="list-style-type: none"> • X-rays and examinations • Cleanings • Fillings • Root canals • Gum related treatment • Tooth extractions and other oral surgeries • Other appropriate general services such as anesthesia



DMAS MISSION STATEMENT

- Improving the health and well-being of Virginians through **access** to **high quality** health care coverage.



WHERE ARE WE?



Smiles For ChildrenSM
Improving Dental Care for Children and Adults

A Healthy Body Starts With A Healthy Mouth

IMPACTS BEYOND THE MOUTH

Growing evidence connects a healthy mouth with a healthy body. Here are some examples showing why oral health is about much more than a smile.

High Blood Pressure

- Putting off dental care during early adulthood is linked to an increased risk of having high blood pressure.¹
- Patients with gum disease are less likely to keep their blood pressure under control with medication than are those with good oral health.²

Diabetes

- Untreated gum disease makes it harder for people with diabetes to manage their blood glucose levels.³
- Diabetes raises the risk of developing gum disease by 86%.⁴

Obesity

- Brushing teeth no more than once per day was linked with development of obesity.⁵
- Frequent consumption of sugar-sweetened drinks raises the risk of both obesity⁶ and tooth decay among children⁷ and adults.⁸

Dementia

- Having 10 years of chronic gum disease (periodontitis) was associated with a higher risk of developing Alzheimer's disease.⁹
- Researchers report that uncontrolled periodontal disease "could trigger or exacerbate" the neuroinflammatory phenomenon seen in Alzheimer's disease.¹⁰

Respiratory Health

- Research shows that improving oral hygiene among medically fragile seniors can reduce the death rate from aspiration pneumonia.¹¹
- Patients with ventilator-associated pneumonia (VAP) who engaged in regular toothbrushing spent significantly less time on mechanical ventilation than other VAP patients.¹²
- Improving veterans' oral hygiene reduced the incidence of hospital-acquired pneumonia (HAP) by 92%, preventing about 136 HAP cases and saving 24 lives.¹³

Adverse Birth Outcomes

- Gum disease among pregnant women is associated with preterm births, low birthweight babies and preeclampsia, a pregnancy complication that can cause organ damage and can be fatal.¹⁴

SOURCES

1. Deshpande, M. et al. (2017) Oral health status and longitudinal cardiovascular risk in a national sample of young adults. *Journal of the American Dental Association*, 148(10), 899-906.
2. Hargrett-Keane, M. et al. (2014) Periodontal Disease and Blood Pressure Control among US Hypertensive Adults: Results from the National Health and Nutrition Examination Survey 2009 to 2010. *Hypertension*, 2010, 55(5), 1078-1083. Muller, J. Oral Hygiene Reduces the Mortality from Aspiration Pneumonia in Frail Elders. *Journal of Dental Research*, 2017, 96(1), 102-107.
3. Prochazka, P.M., Rosen, S.M. Hemorrhoids and diabetes. *British Dental Journal*, 2016, 121(7), 404. Teyssie, P.H. et al. Effect of periodontal treatment on glycemic control of diabetic patients: a systematic review and meta-analysis. *Diabetes Care*, 2010, 33(10), 2023-2027.
4. Baranowski, M.J. et al. Diabetes in dental practice: review of literature. *Journal of Education Health and Sport*, 2016, 6(2), 216-219.
5. Parkala, M. et al. (2020) Longitudinal associations of toothbrushing with obesity and hypertension. *Journal of Epidemiology*, 27(10), 705-710.
6. Luger, M. et al. Sugar-Sweetened Beverages and Weight Gain in Children and Adults: A Systematic Review from 2010 to 2016 and a Comparison with Previous Studies. *Obesity Facts*, 2017, 9(3), 476-489.
7. Smith-Bay, V. et al. The negative impact of sugar-sweetened beverages on children's health: an update of the literature. *BMC Obesity*, 2018, 5(1), 50.
8. Baranowski, M. et al. Sugar-sweetened beverage and dental caries in adults: a 4-year prospective study. *Journal of Dentistry*, 2014, 42(5), 560-568.
9. Chen, C. et al. (2017) Association between chronic periodontitis and the risk of Alzheimer's disease: a retrospective, population-based, twin-family study. *Alzheimer's Research & Therapy*, 9(1), 16.
10. Davies, P. et al. Periodontitis and Alzheimer's Disease: A Possible Connection between Oral Chronic Inflammatory Condition and Neuroinflammation Processes in Aging. *Neuroscience*, 2017, 343, 1207-1217.
11. Muller, J. Oral Hygiene Reduces the Mortality from Aspiration Pneumonia in Frail Elders. *Journal of Dental Research*, 2016, 95(1), 102-107.
12. de Lencastre, V. et al. Impact of oral hygiene involving toothbrushing versus chlorhexidine in the prevention of ventilator-associated pneumonia: a randomized study. *BMC Infectious Diseases*, 2017, 17(1), 173-179.
13. Moore, S., Baker, D. (2018) Reducing missed oral care opportunities to prevent non-ventilator-associated hospital pneumonia in the Department of Veterans Affairs. *Applied Nursing Research*, 2018, 44, 48-53.
14. Qureshi, A. et al. Periodontal Disease and Pregnancy Outcomes: Overview of Systematic Reviews. *Journal of Dental Research Clinical and Translational Research*, 2016, 95(1), 10-21.

ADULT DENTAL

Effective Date
July 1, 2021

New Population
Over 1 million new members

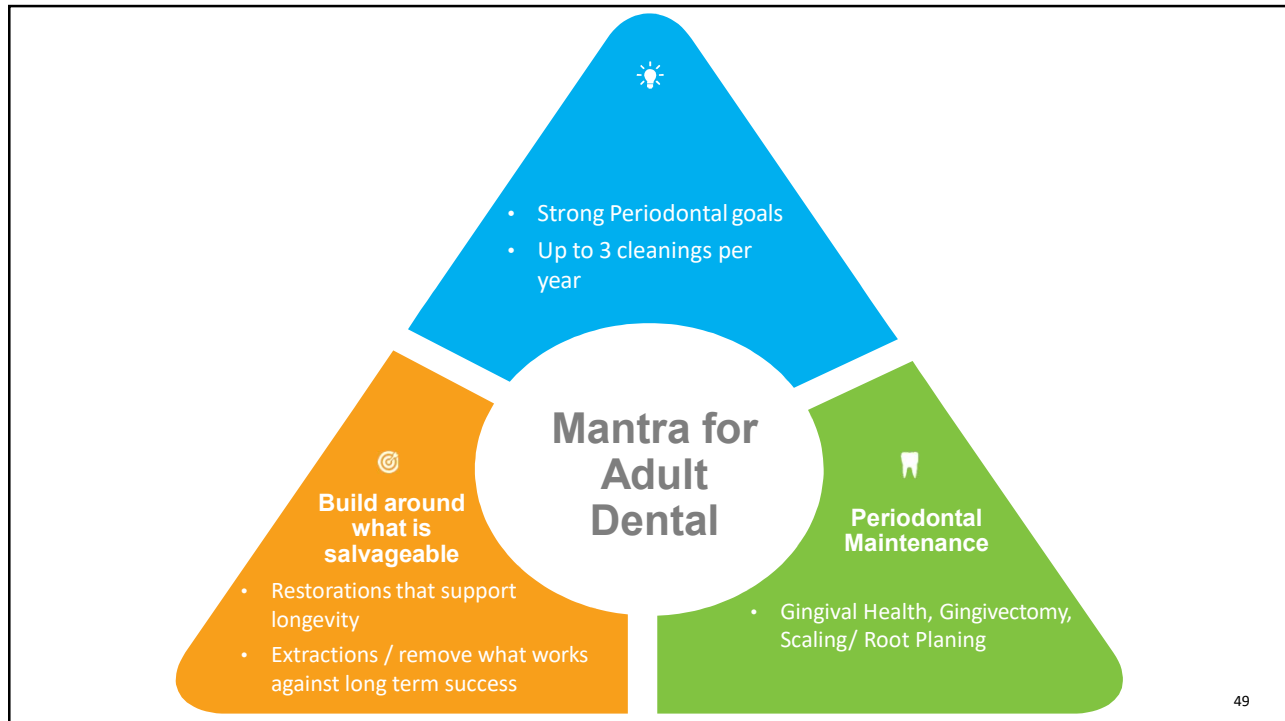
Benefit Model
Comprehensive benefits based on a preventive, restorative model

Strategic Partnership
Work with key partners to assist with delivery of new services and provider recruitment

Adult Benefit Goals:

- Prevention and Education
- Build around what is salvageable
- Periodontal Maintenance
- Innovative Strategies to Improve Utilization and access to care through Member, Provider, and Stakeholder Outreach

48

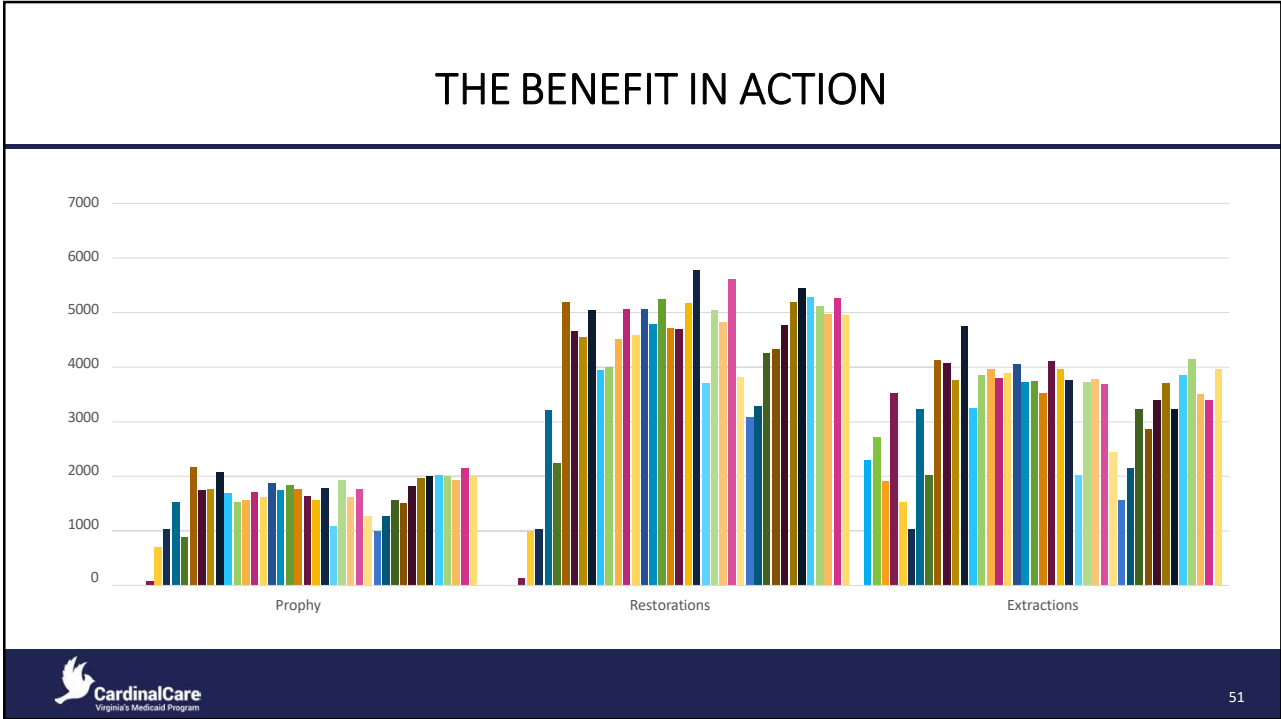


49

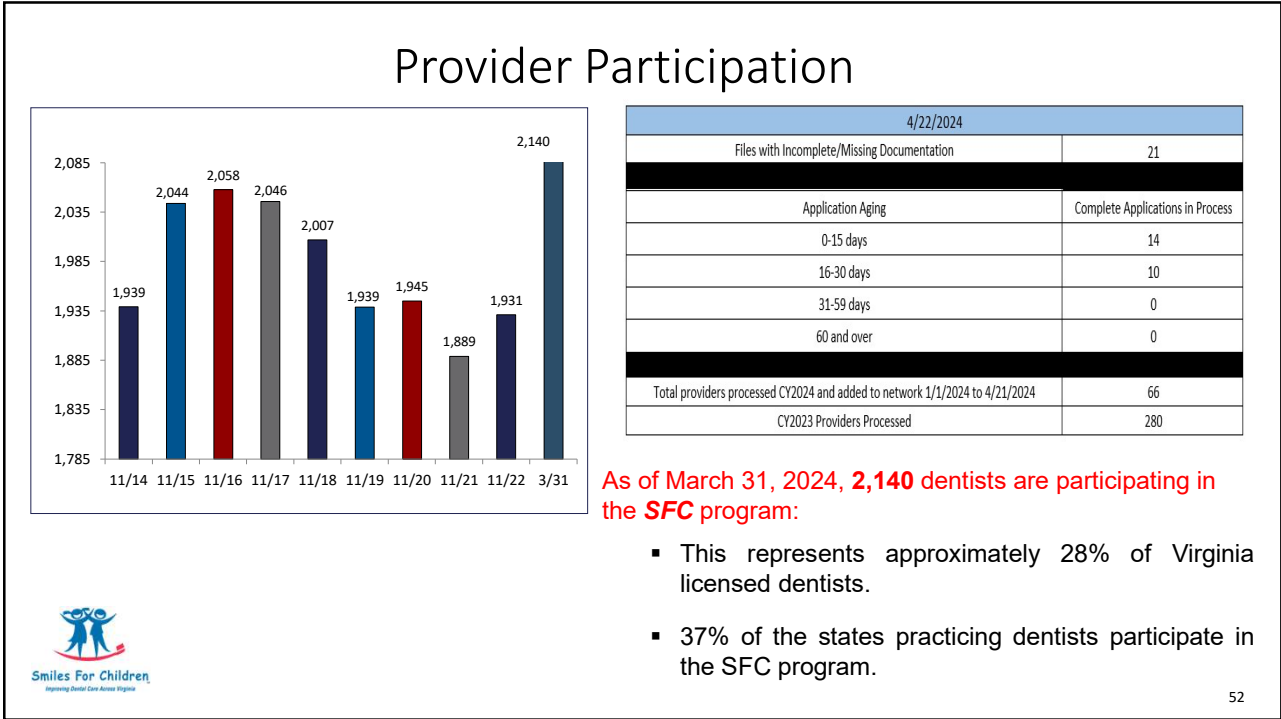
THE BENEFIT IN ACTION

- ❑ **567,751** adult members have received a dental service of any kind.
- ❑ **271,678** adult members have received a dental cleaning
- ❑ **240,323** adult members have received a **comprehensive** evaluation.
- ❑ **756,283** Adult members have received restorative services.
- ❑ What's even better?

50



51



52

HOW ARE WE ENGAGING MEMBERS & STAKEHOLDERS?



Smiles For Children
Improving Dental Care for Children and Adults

53

OUTREACH AND COMMUNITY ENGAGEMENT

• Outreach Plan

- **DentaQuest** has focused outreach strategies throughout the entire Commonwealth.
 - Our Programs are designed to educate our members and community partners.
 - Increased utilization of the dental benefit is a key measure used to evaluate the success of our outreach activities.

• Programs

- New Member Welcome Program
- Smiling Stork Program
- Broken Appointment Program
- Emergency Dental Redirect Program
- Chronic Conditions Program

• Community Engagement

- VA **Smiles For Children** Outreach Coordinators serve on multiple Community Coalitions throughout the Commonwealth.
- VA **Smiles For Children** Outreach Coordinators have hosted/attended over **145 events** (Jan 2024 – April 2024) to include: State and Regional Conferences, presentations to community partners/Medicaid members and meetings with Community Stakeholders.

54

The screenshot shows the DentaQuest website interface. At the top, there is a navigation bar with the DentaQuest logo (a Sun Life company) and menu items: Members, Providers, Solutions, Who We Serve, About, and News & Resources. A search bar contains the text 'Find a dentist' and a 'Login' button. Below the navigation is a large banner with the text 'WELCOME, MEMBERS' and 'Let's get started.' To the right of the text is a photograph of a smiling family (a man, a woman, and a child). In the center of the banner is a white search form with three dropdown menus: 'Confirm your state to begin:' (set to Virginia), 'Select the type of insurance:', and 'Choose a plan:'. Below the form are buttons for 'Find a dentist' and 'View plan information', and a link 'Are you a vision member? Learn more →'. The footer of the page includes the CardinalCare logo and the text 'Virginia's Medicaid Program'.

55

MEMBER SERVICES

DentaQuest
Smiles For Children
Attention: Complaints & Appeals
PO Box 2906
Milwaukee, WI 53201-2906

Toll-Free: (888) 912-3456
TTY/TDD: (800) 466-7566

Monday-Friday
8 AM – 6 PM EST

www.DentaQuest.com

Appointment Assistance Scheduling	After-Hours Assistance
Dental Provider Suggestions	Requesting an appeal
Dental Emergency Appointment Assistance	Filing a Complaint (Grievance)

56

MEMBER RESOURCES

- **Member Accessible Resources**

Members can visit [DentaQuest.com](https://www.dentaquest.com) to access the [Member Handbook](#) and use the [Find A Dentist Tool](#)

- **Preventistry Central**

[Preventistry Central](#) is a one-stop-shop for prevention-focused best practices and education to encourage a lifetime of good oral health. You'll also find industry news, articles from thought leaders and information on trends shaping dental benefits, insurance and care. *Preventistry Pulse Newsletter*. Sign up for the newsletter [here](#).

- **Member Feedback**

Members can provide feedback through the *Semi-Annual Member Survey*.

Members can file a Complaint & Grievance by calling Member Services at 1-888-912-3456



57

57

WHERE ARE WE GOING?



Smiles For Children™

Improving Dental Care for Children and Adults



58

58

PROGRAM ENHANCEMENTS

- ❑ **Effective January 1, 2024**, the Department of Medical Assistance Services dental program enacted the following changes:
 - ❑ Extend the age limitation for children receiving fluoride varnish from non-dental providers from "through age 3" to "through age 5";
 - ❑ Remove the current limitation on the number of times a dentist can bill the behavioral management code when treating adults with disabilities;
 - ❑ **Provide payment for crowns for patients who received root canal therapy prior to becoming a Medicaid beneficiary;**
 - ❑ Provide reimbursement for pre-treatment evaluations performed by dentists treating patients requiring deep sedation or general anesthesia to mirror the Centers for Medicare and Medicaid Services (CMS) guidelines.



CardinalCare Smiles

Improving Dental Care in Virginia for Children and Adults

Rebranding



A fun and interactive way to introduce oral health to early learners



Taking good care of your mouth, teeth and gums does more than help you have a bright smile. It also helps keep you healthy and reduces your risk for many diseases.

To protect both your oral health and your overall health, practice good oral hygiene. Follow these habits to keep your mouth - and your body - in top-top shape.

- Brush your teeth at least twice a day using fluoride toothpaste
- Floss daily
- Eat healthy diet
- See the dentist every 6 months



Cardinal Care Smiles provides dental benefits to adults enrolled in Medicaid.

Dental coverage for adults on full-benefit Medicaid covered groups (those on medical and health, prevention and restoration).

These services will include the following:

- Cleanings
- Fillings
- Root canals
- Non-surgical treatment
- Dentures
- Tooth extractions and other oral surgeries, and
- Other appropriate general services with an exception.

How can adults use Cardinal Care Smiles? When you call to make an appointment, be sure to tell the dental office that you are a Cardinal Care Smiles member. Remember to write down the date and time of the appointment!

On the day of the appointment, be sure to bring your Medicaid card. It's either State of Virginia or its own Medicaid card. The dental office will see the card of either card to check that you are still eligible for the program. If you're going to a new dental office, call the old dental office and your dental records to the new dental office.



Oral health matters. Taking care of your teeth, eating healthy foods and practicing other good health behaviors is important for you and your baby.

TAKE CARE OF YOUR TEETH DURING PREGNANCY

- Good oral health during pregnancy can reduce your risk for oral health and overall health. Good oral health during pregnancy can reduce your risk for oral health and overall health.
- Good oral health during pregnancy can reduce your risk for oral health and overall health.
- Good oral health during pregnancy can reduce your risk for oral health and overall health.

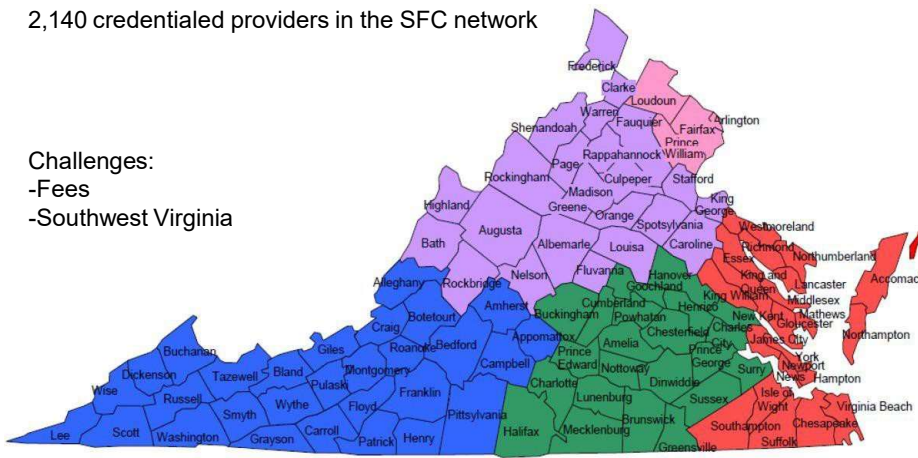
TAKE CARE OF YOUR TEETH DURING PREGNANCY

- Good oral health during pregnancy can reduce your risk for oral health and overall health.
- Good oral health during pregnancy can reduce your risk for oral health and overall health.
- Good oral health during pregnancy can reduce your risk for oral health and overall health.



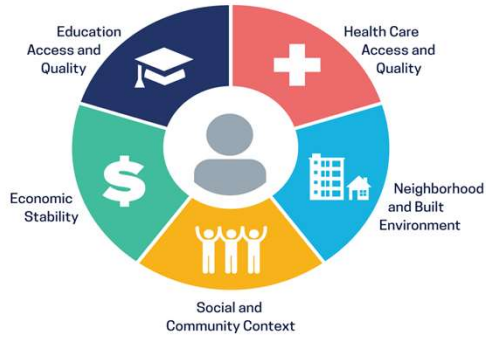
NETWORK ADEQUACY

- 2,140 credentialed providers in the SFC network
- Challenges:
 - Fees
 - Southwest Virginia



SOCIAL DETERMINANTS OF HEALTH

Social Determinants of Health



- 1. Economic Stability
- 2. Education Access and Quality
- 3. Health Care Access and Quality
- 4. Neighborhood and Built Environment
- 5. Social and Community Context

Goal

Social Determinants of Health
Copyright-Free

Healthy People 2030



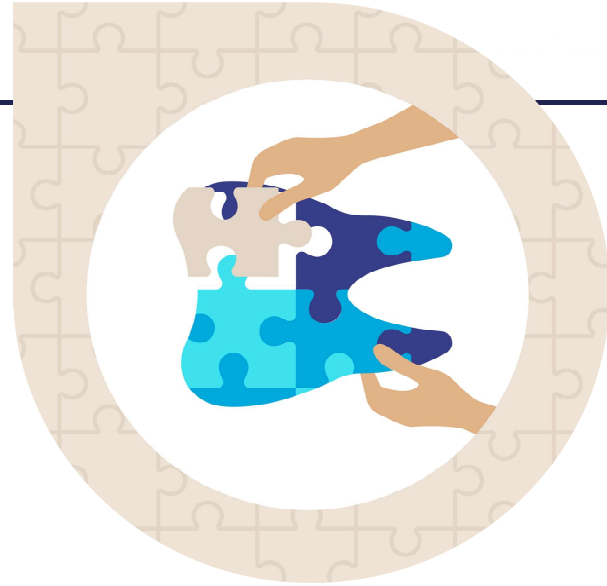
63



64

What Are Your Thoughts?

- What part(s) of the dental benefit have you or whomever you are representing truly enjoyed?
- What additional enhancements to the overall benefit for children and adults would you suggest we consider?
- How can we better the way you experience your dental benefit in the community?
- Is there anything else we need to consider regarding the Virginia Medicaid Dental Program?



65

Questions? Stay Connected!

- **DMAS Dental Program**
 - Justin Gist, Dental Program Manager
Justin.gist@dmas.virginia.gov
- **DentaQuest Community Outreach**
 - Tim Whited, VA SFC Outreach Coordinator
tim.whited@greatdentalplans.com
- **DentaQuest**
 - **Member Services:** 1 (888) 912-3456
 - **Website:** www.dentaquest.com



66

PUBLIC COMMENT



Public Comment – Open to the Public

- Public comment period is 15 minutes.
- Those wishing to make a public comment must join via the WebEx link or In-person.
- Send a message to one of the hosts or place your full name and location in the comments to be recognized during this time.
- Each speaker will be granted only 2 minutes to speak.

PUBLIC COMMENT



- Public comment period is 15 minutes.
- Those wishing to make a public comment must join via the WebEx link or in-person.
- Send a message to one of the hosts or place your full name and location in the comments to be recognized during this time.
- Each speaker will be granted only two (2) minutes to speak.



Notes



MAC AGENCY SUPPORT



MAC Agency Support

Name, Position, MAC Role

- Sandra Coffey (Sandi), EPO Administrative Assistant , Steering Committee Member
- Norman Gaines, AV Specialist, Technology Support
- Sarah Hatton, Deputy of Administration and Coverage, Ex-Officio Member; Co-Facilitator
- Jonathan Hendler, Visual Communications Designer, Photographer
- Rachel Lawrence, Strategic Initiatives Specialist, Greeter
- Kristin Lough, Hearing Officer, Minutes
- Natalie Pennywell, Outreach & Community Engagement Manager, Facilitator; Steering Committee
- Jesus Perez, Civil Rights Compliance Specialist, Closed Captioning
- Cheryl Roberts, Agency Director, Co-Facilitator
- Sonya Scott, ITS Operations Analyst, Technology Support
- Dorothy Swann, Outreach and Member Engagement Specialist, Steering Committee Member

DMAS Support Staff

<u>Name</u>	<u>Position</u>	<u>MAC Role</u>
<i>Sandra Coffey (Sandi)</i>	EPO Administrative Assistant	Steering Committee Member
<i>Sarah Hatton</i>	Deputy of Administration and Coverage	Ex-Officio Member; Co-Facilitator
<i>Kristin Lough</i>	Hearing Officer	Minutes
<i>Jonathan Hendler</i>	Visual Communications Designer	Greeter
<i>Rachel Lawrence</i>	Strategic Initiatives Specialist	Photographer
<i>Natalie Pennywell</i>	Outreach & Community Engagement Manager	Facilitator; Steering Committee
<i>Jesus Perez</i>	Civil Rights Compliance Specialist	Closed Captioning
<i>Cheryl Roberts</i>	Agency Director	Co-Facilitator
<i>Sonya Scott/Norman Gaines</i>	ITS Operations Analyst/AV Specialist	Technology Support
<i>Dorothy Swann (Dot)</i>	Outreach and Member Engagement Specialist	Steering Committee Member



Closing Remarks



Jeff Lunardi
Chief Deputy Director





Wrap-Up

Presenter:

Natalie Pennywell

Outreach and Community Engagement Manager
Virginia Department of Medical Assistance Services

2024 MEETING DATES



2024 Meeting Dates

- April 08, 2024
- June 10, 2024
- August 12, 2024
- October 21, 2024

2024 Meeting Location

- 600 E. Broad Street, Richmond, VA 23219
- In-Person w/ Virtual Option
 - Virtual information can be found on [Virginia Regulatory Town Hall](#)

2024 Meeting Time

- 10:00 AM - 12:30 PM

2024 Virginia Medicaid MAC Meetings

Dates

- ~~April 08, 2024~~
- ~~June 10, 2024~~
- August 12, 2024
- October 21, 2024

General MAC Meeting:

- 10:00 AM – 12:30 PM

Location:

- 600 E Broad Street,
Richmond, VA 23219
- In-Person w/ Virtual Option
 - Virtual information can be found on [Virginia Regulatory Town Hall](#)



71

71

Thank you! Do not hesitate to **Contact Us!**

Medicaid Member Advisory Committee (MAC)

Department of Medical Assistance Services (DMAS)

Commonwealth of Virginia

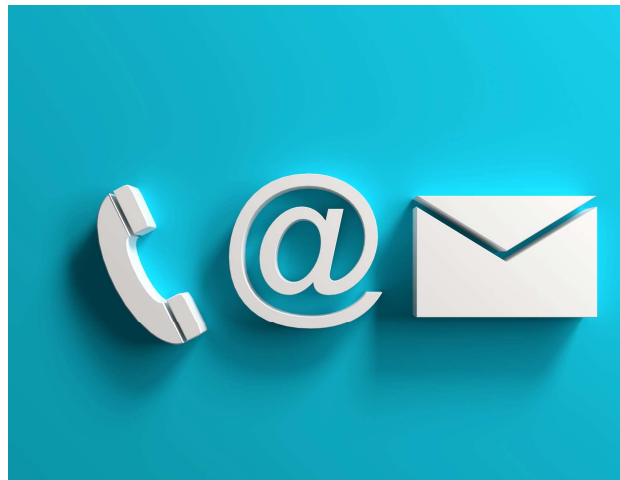
600 East Broad Street, Richmond, VA 23219

Email: mac@dmas.virginia.gov

Website: <https://www.dmas.virginia.gov/for-members/member-advisory-committee/>

Cover Virginia: <https://coverva.dmas.virginia.gov/>

Cover Virginia Email: covervirginia@dmas.virginia.gov



72

72



ADJOURNMENT

Presenter:

Natalie Pennywell

Outreach and Community Engagement Manager
Virginia Department of Medical Assistance Services

Adjournment



- Don't forget to tell a friend about Virginia Medicaid MAC.
- Encourage a member to apply to be a MAC member.
- Do something outside and get an extra dose of Vitamin D and fresh air this week!

See you on August 12, 2024!



NOTES

Meeting Notes



Meeting Notes

Meeting Notes



About Virginia's Medicaid Member Advisory Committee

Virginia is one of only two states to create a Medicaid Member Advisory Committee made up exclusively of members and their authorized representatives. Launched in April 2019, the group meets quarterly to provide the Medicaid Director with valuable feedback and recommendations on the agency's programs, policies, services and communications.

The committee members represent all regions of the state and a cross-section of Medicaid programs. Through their participation, they are helping to make Medicaid more accessible and effective in serving our larger membership.

