

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

June 10, 2024 Minutes

Committee Members	DMAS Staff
Present: In Person	DMAS Executive Leadership Team Members
JoAnn Croghan	Jeff Lunardi, Chief Deputy Director
Jacqi Dix	Ivory Banks, Chief of Staff
Lorri Lee Griffin	Adrienne Fegans, Deputy Director of Program Operations
Sheila Johnson	John Kissel, Deputy Director for Technology
Brian Marroquin	
	Speaker(s)/Facilitators(s)
Present: Virtual	Aaron Moore, Manager, Transportation Management Services Unit, DMAS
Leah Leuschner	Justin Gist, Dental Program Manager, DMAS
Sydnee Evans	Tim Whited, VA SFC Outreach Coordinator; DentaQuest
Mark Dixon	
Bryan Roaché	DMAS Support Team Members
Kyung Sook Jun	Natalie Pennywell, Outreach and Community Engagement Manager (meeting organizer and facilitator)
	Dorothy Swann, Outreach and Member Engagement Specialist (meeting organizer)
Absent	Kristin Lough, Hearing Officer (minutes recorder)
Chiquita Hubbard	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)
	Sandra Coffey (Sandi), EPO Administrative Assistant
	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	4	3	8	34	59
Member Engagement Since Last Meeting					
# of Comments	# Inquiries	# Outstanding Inquiries	# Inquiries Closed	Total	
9	24	0	24	33	

Welcome and Call To Order

Natalie Pennywell called to order the meeting of the Medicaid Member Advisory Committee (MAC or Committee) at 10:02 a.m. on Monday, June 10, 2024, via WebEx online meeting platform. Ms. Pennywell explained that the meeting had a full agenda and emphasized that Committee members would have time to ask questions and share feedback during the meeting. She then introduced the DMAS Chief Deputy Director, Jeff Lunardi.

Welcome

Welcome – Jeff Lunardi, Chief Deputy Director

Chief Deputy Director Lunardi greeted the Committee and thanked the Committee for their participation in the MAC meeting.

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. Ms. Pennywell thanked DMAS team for supporting and helping with the MAC meeting.

Review and Vote to Approve Minutes from Meeting on April 8, 2024

Each of the MAC members were provided a copy of the April 8, 2024, 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 Brian Marroquin made a motion to accept the draft minutes from the April 8, 2024, meeting. MAC member Sheila Johnson 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 - Navigating Transportation Benefits

Aaron Moore – Manager, Transportation Management Services Unit; Virginia Department of Medical Assistance Services (DMAS)

Mr. Moore introduced Medicaid by demographics, including adults, children, and others. Approximately 80% of members receive managed care benefits. The Transportation Management Services Unit (TMSU) manages transportation, and the state is broken into six regions with four individuals managing the six regions. DMAS contracts with non-emergency transportation brokers that arranges transportation with Non-Emergency Medical Transportation (NEMT) providers. These providers are not meant for emergency care, and members should call 911 for emergencies. NEMT services include ambulatory service for individuals who can transport in and out of the vehicle alone, wheelchair vans for individuals who need to remain in a wheelchair, van-stretcher for parties who need to be transported lying down and stretcher in a non-emergency ambulance for parties who need to be transported lying down and require medical care en route, gas reimbursement and bus tickets.

Fee-for-service providers provide approximately 129,000 members transportation benefits, and the five Managed Care Organizations (MCOs) provide transportation benefits to members of each of their organizations. MCOs can provide additional benefits, but the standards are parallel between fee-for-service and MCO access. TMSU meets with compliance teams monthly to ensure consistency. NEMT Brokers contract with DMAS or an MCO to coordinate access to transportation and ensure eligibility.

All transportation is mapped digitally so DMAS can identify drivers who are late or unsafe and ensure that providers are working appropriately for the members. The parties have implemented digital automated scheduling, so members do not have to call the call center to schedule appointments. All brokers have an online portal, and some brokers have apps for scheduling appointments and tracking. Brokers are required to manage member information, report, collect data and files, and be HIPAA compliant.

Comments and questions from members include:

Transportation providers should provide with standards for sitting in a wheelchair in vehicles. ANSI/RESNA WC19 Standards require four tie-downs at the front and back of the chair to keep the riders safe in the vehicles. Mr. Moore indicated that drivers receive extensive training both for

empathy and understanding as well as physical safety of the members and stated that WC19 is included in the standards.

How can members find the information about NEMT provider processes, and what are the steps in the pre-authorization process? Mr. Moore answered that each NEMT provider or broker has its own website, and he will work with members to help understand that information as needed. Fee-for-service brokers follow the DMAS pre-authorization process and have access to DMAS eligibility information. Brokers should keep member preferences in their file to prevent repeat questions during scheduling.

Members prefer certain providers over others, and it is challenging when the preferred providers are not available for transportation. Some transportation providers are not consistent with others. Some members are required to schedule trips earlier than is indicated in the presentation.

Ms. Pennywell thanked Mr. Moore and introduced Mr. Gist and Mr. Whited.

Presentation - Dental Benefit Update & DentaQuest Partnership Resources

Justin Gist – Dental Program Manager; Virginia Department of Medical Assistance Services

Tim Whited – VA SFC Outreach Coordinator; DentaQuest

Mr. Gist introduced the Smiles for Children program to MAC Members. Smiles for Children was established in 2005, and it was expanded to pregnant members in 2015. By 2021, adult members were eligible for dental care. Prior to Smiles for Children, less than one third of child Medicaid members received dental benefits.

Mr. Whited explained that Smiles for Children provide comprehensive dental benefits for children aged 20 years or younger, pregnant women, and adult members over age 21. Once a member is eligible for full coverage Medicaid, they are automatically enrolled in the dental program, and there is not a second identification card. DentaQuest administers the program for the state. Children can receive braces if they are medically necessary, twice-per-year fluoride treatments, cleanings, and others. Members aged 21 and over and pregnant members are eligible for x-rays, cleanings, fillings, extractions, root canals, dentures, and oral disease services. Braces are not covered.

Oral health is comprehensive care. Oral diseases can cause pain, but gum disease can be tied to diabetes, heart disease, stroke, as well as low birth weight, obesity, addiction and more. On July 1, 2021, over one million Medicaid members became eligible for dental benefits. Some members need to be reacquainted to sound oral health after going without healthcare for a long time. DMAS hopes to increase education, cleaning, and restore and rebuild what is salvageable

for members with dental losses. Restorations are out-pacing extractions, meaning the dental benefit is preventing extractions and retaining the teeth members have. “We’re saving the teeth.”

DentaQuest has an Outreach Plan with specific programs for new members, pregnant members, members who miss appointments, individuals with emergency needs, and individuals with chronic conditions. They are holding community engagement events with members, providers, and community stakeholders. The DentaQuest website has a provider search, but they acknowledge parts of the state are a dental desert, and the program is seeking to increase providers throughout the state. Members can call DentaQuest for scheduling, after-hours assistance, provider suggestions, to request an appeal, emergency assistance and to file a complaint.

DMAS has increased non-dental providers’ coverage of fluoride varnish for children and allows dentists to bill for behavioral management codes for adults with developmental disabilities. DMAS now pays for crowns for individuals who received root canals when not Medicaid members. The program is becoming Cardinal Care Smiles, which will be in effect in July 2024. Social determinants of health will remain a priority in the program.

Questions raised by Committee Members included:

What do existing members get as far as communication regarding DentaQuest? Is there reporting and outreach for under-use or non-use? When a new member is enrolled, they receive a welcome packet. Existing members receive some communication and outreach, but typically DentaQuest refers those individuals to dentaquest.com and Member Services. DentaQuest is researching utilization rates and is targeting members, community partners and providers in low utilization areas.

Southwest Virginia has a desert for a lot of things, not just dentistry. This member pays out of pocket for dental benefits for a child due to complex needs. The child had to be admitted into a hospital in another state due to complex needs. Does DMAS cover that type of care? DMAS covers medically challenging extractions. Mr. Gist asked that the MAC member reach out to him so they can work with the care management team and address concerns after the call.

How are DMAS and DentaQuest working with providers to provide care to individuals with developmental and physical disabilities? For example, a blind individual cannot see the dental drill, but if it sounds big, it is big in their perspective. DMAS provides quarterly dental training for providers, including training for managing populations with specific needs.

Members are enjoying regular care after years of out-of-pocket payment for emergent needs only. At some dental providers, members are told Medicaid only covers a limited amount of complex needs, but the provider will need to bill the member for the rest of the cost of care. The handbook says “may cover” or “generally covers” without specific detail to be able to challenge the providers on billing. Are providers permitted to charge coinsurance for complex needs? If not, can we get better information to advocate when providers attempt to charge coinsurance? Can you provide

those specific billing codes? Mr. Gist answered that if there is a specific procedure code, providers are not permitted to charge more than the billing amount for that specific code. If providers are trying to charge more than that code, please inform Mr. Gist. If there is a code that DMAS does not cover, please inform Mr. Gist so he can evaluate whether that specific code should be included in dental coverage. Providers are permitted to charge the members for services not included in the dental program. The billing codes and fee schedules are posted in the dental manual, but Mr. Gist will work with IT to create a guide with covered codes and covered fees on the website.

A young adult member has severe teeth grinding and will not wear a bite guard. Can DMAS cover crowns for those teeth rather than pull all her teeth? Mr. Gist asked if those teeth had root canals, and the member stated that they have had cleanings, root canals, and cavities filled. Mr. Gist stated that providers can place crowns on teeth that have had root canals, and he will work with the medical consultant and perhaps reach out to the provider about those needs.

Ms. Pennywell then opened the meeting to public comment.

Public Comment

JoAnn Croghan stated that there are three dentists in southwest Virginia over five counties that provide care for children with special needs. There is a one-year waitlist for each of those dentists, and some are as many as four hours away. Some members have cars with an arduous gas reimbursement process and they give up. This causes people to receive reduced or no dental care due to the complexities associated with obtaining care.

Bryan Roaché asked if members can participate in some of the meetings and trainings being provided for providers.

Kyung Sook Jun noted that if a care provider is out of state, DMAS will not cover that care. She is grateful that DMAS connected her with a program that could help coordinate care for her Medicaid member.

Mark Dixon spoke with dentists over the weekend, and they do not accept Medicaid because the patients do not show up and the reimbursement rate is so low that they are not able to afford to provide that care.

Leah Leuschner stated that often providers must stay late and keep offices open due to delays in transportation. DMAS may benefit from working with members and advocates, but also care providers, drivers, and other parties impacted by the transportation and associated delays and concerns.

Closing Remarks

Mr. Lunardi thanked members for appearing at the MAC event. He stated that there are clear concerns regarding transportation and dental care, but also highlighted that the General Assembly has increased reimbursement rates for dental care which should benefit members.

Adjournment

Ms. Pennywell thanked the Committee for joining and 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 12:13 p.m.