



Financial Directors Peer Group Meeting

February 24, 2023

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| Peer Group Members Present | Mimi Trujillo, Carbon Medical Services Association Cameron Willford, Green River Medical Center Sonja Levesque, Midtown CHC Eric Johnson, Mountainlands Family Health Center Stormy Scharp, Utah Partners for Health |
| AUCH Staff Present | Courtney Pariera Dinkins, AUCH Kaitlynn Drollinger, AUCH Rachel Craig, AUCH |
| Other Presenters Present | N/A |
| Top Issues / Best Practice Sharing (Roundtable) | <p>STATE LEGISLATIVE UPDATES:</p> <p>Opioid settlement funds request for appropriation: The 8 health centers that requested opioid settlement funds from the state will receive \$1.3 million annually for three years, totaling \$3.9 million, to be split among the health centers. <i>By January 1, 2026</i>, these health centers will have to report to the Social Services Appropriations Subcommittee on use of funds and outcomes. This report will decide whether the funding will continue or if it will cease. There are still many details to narrow down- like when the funding will be received, and how it will be divided based on the new, scaled amount of \$1.3 annually down from \$2.7 million, but for now, THANK YOU to all that worked on short deadlines and let me bug you with emails for two weeks straight. If you have the time, please send a thank you message to Rep. Watkins, who sponsored the appropriation, at christinewatkins@le.utah.gov and her intern Hannah, hoh@le.utah.gov.</p> <p>Health Care Workforce Financial Assistance Program: \$1.7 million in ongoing funding was appropriation to the HCWFAP, which is on top of the \$600,000 annual in ongoing funding.</p> <p>Postpartum Medicaid coverage extension: Extending postpartum Medicaid coverage to 12 months has been funded in an ongoing basis, which bodes well for final passage of the bill.</p> <p><u>SB 133 Modifications for Medicaid Coverage:</u> This bill, sponsored by Sen. Harper, extends postpartum Medicaid coverage from 60 days to 12 months and increases Medicaid coverage for family planning services to 185% Federal Poverty Guidelines. This bill was favorably recommended by the House Health and Human Services Committee but was sent back to the House Rules Committee due to the change in the fiscal note when the family planning services portion of the bill was added. This bill is pending the passage of the budget bill.</p> |

HB 85: Pregnancy Medicaid Coverage Amendments: A companion bill to Rep. Lesser’s postpartum Medicaid coverage extension, this bill would raise the income threshold for pregnancy Medicaid to 185% Federal Poverty Guidelines. This bill failed to receive a favorable recommendation and is likely dead. The Committee struggled to understand that pregnancy did not trigger a special enrollment period for Marketplace plans, and generally expressed concern about further expanding Medicaid.

SB 269 Chronic Conditions Support Amendments: Sponsored by Sen. Hinkins, this bill requires DHHS to apply for a Medicaid waiver to provide additional services for individuals with diabetes, high blood pressure, congestive heart failure, asthma, obesity, chronic obstructive pulmonary disease, or chronic kidney disease. The Medicaid member must not belong to an ACO. “Additional services” include telehealth services, daily remote monitoring and other “coordinated care.” However, this waiver would be set up as a sole-source arrangement, which means that various organizations would bid for a single contract to be reimbursed for these services. Over the years, there have been several Medicaid waivers and other programs that have been set up as a sole-source arrangement. AUCH will continue to monitor and engage in the public comment process to continue to share information about the sole-source arrangement language.

SB 155 Litigation Proceed Fund Amendments: Sponsored by Sen. Plumb, this bill, which has been substituted significantly, would designate the Office of Substance Use and Mental Health as the reporting entity for any reporting requirements associated with the use of opioid settlement funds. It also requires that recipients of funds to report to the Health and Human Services Interim Committee, the Social Services Appropriations Subcommittee, and administrator of the settlement when required, as well post the reports publicly on the DHHS website. This bill failed in Committee but has been put on the agenda for the Senate HHS meeting, which gives it another chance at passage. This is unusual, so it is likely this bill is being supported by leadership or other important stakeholders.

MEDICAID UNWINDING

- Report estimates a 20% drop in Medicaid Encounters because of unwinding, impacting revenue.
 - Two health centers reported anticipating minimal impact on revenue: likely because of lower Medicaid populations.
- March 1st Medicaid started reviewing eligibility; Loss of coverage would start as early as May 1st.
- Medicaid told health centers to encourage patients to review loss of coverage dates visible in MyCase.
- Medicaid will give a warm hand-off to Marketplace if ineligible for coverage.

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| | <ul style="list-style-type: none"> • Medicaid will NOT give a warm hand-off to Marketplace if no response or incomplete applications. • Beneficiaries have 60 days to choose a plan from renewal application initiation. • COVID Medicaid coverage ends May 11th without an automatic eligibility check; letter will be going out to beneficiaries confirming how to sign-up for coverage. <p>NHSC APPLICATIONs NHSC applications likely open March 2023</p> <p>HRSA Hosted PCA Listening Sessions RVIII was combined with RVII and RIII. HRSA reported the top areas of HC non-compliance in RVIII were SFS. AUCH asked HCs what areas of SFS they would like covered: Medical, dental, overall SFS compliance, and care management services were all mentioned. <i>ACTION ITEM: AUCH will review opportunity to host SFS Training in one or more of these areas.</i></p> |
| Next Meeting | VIRTUAL, March 24 th at 10am to 11am |