

TAC ON CONSUMER RIGHTS & CLIENT NEEDS

February 21, 2023 at 1:30pm ET

Zoom link available on the [Consumer TAC webpage](#)

1. Welcome & Introductions - TAC Chair
2. Establish Quorum – TAC Chair
3. Approval of Minutes from Previous Meeting – TAC Chair
4. Old Business – TAC Members & DMS Staff
What is the status of the following?
 - a. Standing data requests:
 - i. How many Kentuckians are currently covered under traditional, expanded, Emergency Time-Limited Medicaid (ETLM), and Presumptive Eligibility (PE)?
 - ii. How many people are currently receiving 1915c waiver services or on the waiting list for each waiver?
 - b. Status of PHE unwinding
 - c. HCBS rate study workgroup and on-boarding costs for new PDS employees and pay rates
 - i. public comment period.
 - d. PACE program roll out
 - e. Kentucky Medicaid Quality Strategy plan
 - f. Hospital Rate Improvement Program quality metrics and data
 - i. Review DMS report
 - g. Next steps for Medicaid reimbursement for licensed Certified Professional Midwives
5. Implementation plan for Certified CHW reimbursement
 - a. What is the tentative timeline for implementation?
 - b. Does the proposed State Plan Amendment (SPA) include codes that can be used outside of clinic walls?
 - c. What options will community-based organizations have for contracting with a Medicaid provider in order to participate?
6. Network Adequacy
 - a. What data do MCOs report to DMS on Network Adequacy?
 - b. When an audit or secret shopper survey finds inadequate NA, what corrective action is taken?
 - c. If NA is not met and an individual is denied an out-of-network provider by a particular MCO, is there a process for reporting that information to DMS?
 - d. What can an individual do to get out-of-network care if they can't or don't want to change MCOs for other reasons?
7. New Business – TAC Members & DMS Staff
 - a. Value-added benefits side-by-side with behavioral health items
 - i. Which of the BH services are value-added and which are covered services? It seems like there is a mix.
 - ii. Do MCOs provide additional details to DMS about who is eligible for each value-added benefit and how they can access each particular benefit? Having a supplementary value-added benefit guide would be a useful resource.
8. General Discussion – TAC Members, DMS Staff, MCO Representatives
 - a. How many out-of-network providers were approved in 2022 by each MCO? What provider types?
9. Recommendations

10. MAC Meeting Representation

11. Next Meeting

2023 TAC meetings: 1:30PM ET on Feb 21, Apr 18, June 20, Aug 15, Oct 17, Dec 19

Need to consider rescheduling Dec. meeting to the 5th.

- a. 2023 MAC meeting dates: January 26th, 4th Thursdays at 10am

12. Adjourn