

DEPARTMENT OF MEDICAID SERVICES
HOME HEALTH CARE TECHNICAL ADVISORY COMMITTEE

APRIL 9, 2024
11 a.m.

Stefanie Sweet, CVR, RCP-M
Certified Verbatim Reporter

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A P P E A R A N C E S

TAC Members:

Annlynn Purdon, Chair
Marlene Reynolds
Susan Stewart
Teudis Perez
Evan Reinhardt

1 MS. BICKERS: Good morning.
2 This is Erin with the Kentucky Department
3 of Medicaid. It is not quite 11 o'clock
4 and we are still clearing out the waiting
5 room.
6 MS. REYNOLDS: Annlynn, this is
7 Marlene. Can you hear me?
8 MS. PURDON: I can.
9 MS. REYNOLDS: Okay, thank you.
10 MS. PURDON: You're welcome.
11 MS. REYNOLDS: I was having
12 issues with my mute button.
13 MS. PURDON: Must be the day for
14 it. I was having problems getting logged
15 in all together.
16 MS. REYNOLDS: Hello, Evan.
17 MR. REINHARDT: Good morning.
18 How are you all?
19 MS. REYNOLDS: Good.
20 MS. PURDON: Good.
21 MS. BICKERS: We have cleared
22 the waiting room. I have four out of five
23 TACs members logged in so if you guys want
24 to begin, I will turn it over to you.
25 MS. PURDON: Thank you. I want

1 to thank everybody for being here. We
2 will start with the TAC member
3 introductions. My name is Annlynn Purdon.
4 I am with Hayswood Home Health.

5 MS. STEWART: Susan Stewart,
6 Appalachian Regional Healthcare.

7 MS. REYNOLDS: Marlene Reynolds,
8 LHC Group.

9 MR. REINHARDT: Good morning,
10 everyone. I'm Evan Reinhardt with the
11 Kentucky Home Care Association.

12 MS. PURDON: Okay. We will move
13 on to the minutes of the previous meeting.
14 I did have two changes. On page 4, it
15 says that Ms. Risner made a motion, and in
16 my notes I had that Susan Stewart made
17 that motion, and that Ms. Bickers asked
18 for all in favor, and that would have been
19 me. But other than that, I believe they
20 are fine, unless anybody else saw
21 anything.

22 MR. REINHARDT: Nope.

23 MS. BICKERS: I will make note
24 of that and have those corrected and get
25 those back out to you so we have correct

1 minutes. Thank you.

2 MS. PURDON: No problem. I will

3 make the motion to approve the minutes

4 with those changes.

5 MS. STEWART: I'll second.

6 Susan Stewart.

7 MS. PURDON: All in favor?

8 TAC MEMBERS: Aye.

9 MS. PURDON: Motion passes.

10 And then, I believe we are on to

11 old business. Any EVV updates?

12 Do we need anything specific,

13 Evan?

14 MR. REINHARDT: No. Just

15 checking in to see where things are and if

16 any issues have popped up to this point.

17 MS. PURDON: Well, I have to say

18 coming to the game very, very late with

19 Therap, they have been wonderful to work

20 with, so I believe we will actually be up

21 and running June 1st.

22 MR. REINHARDT: Awesome.

23 MS. PURDON: And that was major

24 with their help, yeah.

25 MS. STEWART: In having to deal

1 with other options, I can tell you Therap
2 far exceeds others in the realm.

3 MR. REINHARDT: Erin, do you
4 know if Pam Smith or anyone from DMS is
5 going to be on to just chat about EVV real
6 quick?

7 MS. LOWERY: I'm here, Evan.
8 This is April. Pam is on her way, but I
9 can go ahead and start while she is
10 joining us.

11 So glad to hear that everybody
12 has been very happy with Therap. We have
13 had very good success with Therap and that
14 transition, it has been very, very smooth.
15 And any issues with providers, we have
16 been working with them on a one-on-one
17 basis, but overall, our adoption rate has
18 been very, very good.

19 Still trying to get some arms
20 wrapped around the third party data that
21 is coming into the aggregator, but again,
22 we are reaching out to those providers as
23 we need to, so just wanted to provide an
24 update for her as Pam is, like I said, on
25 her way over from another meeting.

1 MS. PURDON: April, I had sent
2 an email, I believe originally to Pam, and
3 then to you, and then maybe to both of
4 you. When I was doing my training with
5 Therap, they said that the state wanted
6 any provider that hadn't -- had captured
7 the data live, that we go back and
8 manually enter it, and that wasn't
9 anything that I have been told, so I sent
10 an email asking that because if that is
11 required, then I need to get started on
12 it.

13 MS. LOWERY: Okay. I know Pam
14 said she had an email from you, but I did
15 not have that, so let me, let me follow up
16 with that.

17 MS. PURDON: Okay.

18 MS. LOWERY: So your manual
19 visits --

20 MS. BICKERS: Pam just logged
21 in. Sorry didn't mean to cut you off,
22 April.

23 MS. LOWERY: No, you are fine.
24 You are good.

25 MS. REYNOLDS: So Annlynn, can

1 you ask your question one more time?

2 MS. PURDON: Yeah. When I was
3 doing my training with Therap, since we
4 had not captured any of our visit data
5 starting January 1, they said that they
6 felt the state wanted us to go back and
7 manually enter the times on every visit.

8 MS. SMITH: No. No. I don't
9 want you all to take the time to do that.
10 We have been monitoring --

11 MS. PURDON: Okay.

12 MS. STEWART: -- we have been
13 monitoring that. And I will encourage you
14 that the more you are using it and as get
15 into using it, to start getting in the
16 practice of doing that, so any of the
17 visits that maybe somebody has missed, or
18 for whatever reason did not get -- once
19 you are up and going and you're using it,
20 so I would go ahead and encourage you to
21 get in the practice of putting those
22 visits in manually, because when we do
23 turn that edit on as a hard edit, I'm not
24 going to go backwards. So we are not
25 going to go backwards and look at previous

1 dates of service, but I think it is just
2 good to be in the practice of doing it and
3 in the habit of doing it, so that it is
4 kind of a habit and you do it going
5 forward, so. But no, you do not need to
6 go back and enter in all of your data
7 before you are using the system.

8 MS. PURDON: Thank you. And the
9 date is still June 1st; right, for the
10 claims?

11 MS. SMITH: As of right now, we
12 are still looking at June 1st. I am --
13 and sorry I was just a little bit late. I
14 was talking to someone from our systems
15 team looking at, kind of, where we stand
16 on how many visits would be getting --
17 that we paid would have been denied had
18 there, you know, had that hard edit been
19 turned on, so.

20 MS. PURDON: Okay.

21 MS. REYNOLDS: So Pam, did I
22 understand you that claims aren't going to
23 be denied until June 1st?

24 MS. SMITH: As of right now, it
25 is date of service, June 1st, yes. And we

1 have been monitoring, we are in the
2 process of getting some reports out to
3 let, you know, providers know where they
4 stand. But we do know that there are a
5 couple of providers that are using a third
6 party that -- one that we are going to
7 reach out to, in particular, because we
8 need the provider to work with their
9 third-party vendor a little bit. This is
10 on the Model II side, but, because their
11 third-party is holding them up. I don't
12 know if they know that or not, that it is
13 the third-party that is not taking some
14 actions that is stalling things, so we
15 want to make sure they know that because,
16 ultimately, as the provider, they're going
17 to be responsible, but as long as -- and
18 we do have a couple that are still in the
19 process, and we understand that they are
20 working through testing, and so we have
21 seen that and people are making progress,
22 but, we have been playing, you know,
23 really looking at the claims and how many
24 would have been denied for no EVV visit
25 had the edit already been turned on right

1 now, so.

2 MS. REYNOLDS: Pam, that was
3 going to be my question. If there are
4 issues, currently, with either the
5 third-party or with Therap, are you all
6 reaching out to the individual agencies?

7 MS. SMITH: Yes. Yes. You will
8 hear from us. We are going to give
9 some -- we've actually worked with one of
10 the other states that used Therap, has
11 been kind enough to share a template with
12 us, to use, kind of, a report card thing
13 to basically let people know, okay, this
14 is the percent of visits that you had,
15 these are the ones that were in the
16 system, so that you all have that
17 information. So we are in the process of
18 pulling all that together and I was
19 really, this morning, kind of, delving
20 into looking at the claims and how many
21 would have denied had we had that hard
22 edit in place.

23 MS. REYNOLDS: So are you
24 reaching out to the billing department of
25 those individual agencies, or the contacts

1 that you have through your association?
2 MS. SMITH: It will be the
3 contacts that we have that we've requested
4 through EVV, or that we know -- for
5 example, like, Susan or Annlynn, I would
6 know to reach out to, you know, that they
7 would be my contact because I have spoken
8 with them, but it's whoever we have been
9 working with about EVV or who we have as a
10 regular contact at that agency.

11 MS. REYNOLDS: Okay, thank you.

12 MS. SMITH: Mm-hmm.

13 MS. PURDON: Anything else on
14 EVV? Nope.

15 Okay I will go ahead and take
16 the a) on new business, since that is
17 mine. I was hoping that we could get some
18 official anything from the Medicaid MCOs
19 about the type of bill they require. No
20 matter what clearinghouse I have ever had,
21 I have always had problems with this,
22 because they want to use the -- what
23 commercial uses. And so I had one that
24 made me sign a form saying that I was
25 going to have them turn off those edits.

1 I had another one once that they made it a
2 warning that we could override, so they
3 said they officially had it in their
4 system that we weren't doing what they
5 suggested. This one is requiring me to
6 prove that claims are being denied. So
7 the problem is, is the MCOs will pay the
8 claims and then come back three years
9 later and say, oops, she billed the wrong
10 type of bill, even though they didn't deny
11 it at the time. I did that with Aetna and
12 I rebilled three years worth of corrected
13 claims that took me months of staying up
14 all night long to get it done. So I was
15 hoping to avoid this, and hopefully get
16 something official that I can give them.

17 MS. SMITH: Erin, do we have
18 somebody on from the MCO group?

19 MS. BICKERS: I'm scrolling.

20 MR. OWEN: Yeah, this is Stuart
21 Owen from WellCare. I'm really not clear,
22 type of -- I mean, providers claims, I
23 guess I would need examples. I'm not
24 really clear on type of bill, exactly.

25 MR. ELLIS: Same with for

1 Humana. We'd be interested in knowing if
2 you actually received something like this
3 for Humana so we can, kind of, investigate
4 that. I'm not aware of any specific type
5 of bill funding requirements specific to
6 home health. I mean, you have your
7 standard billing requirements which are,
8 you know, required X12 requirements, but
9 not any other special requirements.

10 MS. PURDON: Yeah, I believe
11 Anthem, they won't officially say it, but
12 a 321 is what is required and that is what
13 traditional Medicaid requires. Now
14 traditional Medicaid will deny the claim
15 if you send anything else. I'd have to
16 look at what Humana and WellCare requires.

17 MR. ELLIS: And we would expect
18 that.

19 MS. PURDON: Yeah, Aetna they do
20 have a specific. I think it's a 322,
21 unless it is a discharge, and that's a 334
22 or 324, maybe. So I can email, who do I
23 email those examples to for each of you?

24 MS. OWENS: This is Holly with
25 Anthem. And I'm not sure of the answer

1 either for our TLB requirements, but we
2 could definitely find out. Would it be
3 possible to send an email, maybe to -- or
4 the state could send an email to our
5 regulatory team and that way maybe all
6 MCOs can receive it and we can get back to
7 you with a formal response.

8 MS. SMITH: Annlynn, why don't
9 you send it to Erin and Kelli, and let
10 them -- that way the state MCO team and
11 they can then forward it out through the
12 MCO channel, that way everybody has the
13 same communication and it's going to all
14 of the same people.

15 MR. ELLIS: Agreed.

16 MS. BICKERS: Thank you, Pam,
17 that was going to be my suggestion.

18 MR. ELLIS: And on that type of
19 bill, I would have expected that first
20 digit to be the 3 for home health. Maybe
21 before you start throwing in the 1s and
22 the 2s that weren't tied to home health,
23 that's probably where you had issues. But
24 if the issues really on the second and
25 tertiary digits, then we'd be interested

1 in knowing what that is.

2 MS. PURDON: Well, like I said,
3 usually the MCOs will pay it and I'll have
4 to get my list. It's just after years of
5 trial and error, if we could get it
6 actually answered that we found --

7 MR. ELLIS: Okay.

8 MS. PURDON: What the MCOs want,
9 or what we think they want, and then years
10 later we end up doing corrected billings
11 for three years.

12 MR. ELLIS: Got it.

13 MS. PURDON: And actually Aetna
14 told me the reason I had to do all these
15 corrected billings is something about when
16 they turned it into Kentucky Medicaid,
17 Kentucky Medicaid wouldn't accept that
18 type and something about, they wouldn't
19 get paid their encounter data or encounter
20 payment. I don't know. I don't know what
21 that meant. But anyway. Okay. I will
22 send that email.

23 And do you want me to go over
24 the rest of them, Evan, or?

25 MR. REINHARDT: Yeah, that's

1 fine. I think we just had some dialogue
2 on the second one there. So feel free.

3 MS. PURDON: So is this kind of
4 a follow-up guidance summary reimbursement
5 for wipes and gloves? So is this for home
6 health to be able to bill on?

7 MR. REINHARDT: Yeah, this
8 question came from Teudis and he's asking
9 how other home health agencies are
10 handling their requests for wipes and
11 gloves under supply-only, and if there is
12 any reimbursement and if there's any
13 guidance from Medicaid.

14 MS. SMITH: So we are in the
15 process of evaluating the fee schedules
16 because, as you know, we are going to
17 correspond for home health and also the
18 PDN supply fee schedule to match it to
19 what has been done with DME, so those
20 things can be provided under supply-only,
21 so we are in what I hope is the final part
22 of that comparison in getting those fee
23 schedules updated. As well as, I think
24 there was a size of, I believe, pull-ups
25 that got either, somehow, dropped or left

1 off the fee schedule that we've added on,
2 and the PleurX drains that we got that
3 that is added on, that we need to make
4 sure the fee schedule is updated. So we
5 are working on getting those updated and
6 really trying to make sure that we have
7 things that match across so it doesn't
8 matter which stream that they are being
9 provided under, that we don't have
10 different rates for the same product or
11 the same code.

12 MS. PURDON: Thank you, Pam.

13 MS. SMITH: And we'll send
14 out -- we'll send out a note when that fee
15 schedule -- and we'll update it on the
16 website, but when that happens, we'll send
17 out the notification that it is updated,
18 that it's out there.

19 MS. PURDON: Thank you.

20 MS. SMITH: You're welcome.

21 MR. REINHARDT: Sounds good.
22 Yeah, thank you.

23 MS. PURDON: Any other items?

24 MR. REINHARDT: Nothing on my
25 end.

1 MS. PURDON: All right. Under
2 number 6, general discussion. Any updates
3 from the MCOs?

4 MS. PAGE: This is Anna from
5 Passport. No updates to report today.

6 MR. OWEN: This is Stuart from
7 WellCare. We had a huddle, like we do,
8 before these meetings and no issues that
9 we are aware regarding auths or claims or
10 billing.

11 MR. ELLIS: This is Herb with
12 Humana. No general issues. Some of this
13 is informational, some of the top reasons
14 for denials goes back to EOB issues or
15 missing EOBs and no referrals and
16 duplicates. And then, I think our top one
17 for denial of service was a direct skilled
18 nursing service of a registered nurse, an
19 RN, the G0299 was the top service being
20 denied. But again, nothing that we could
21 see systemically.

22 MS. OWENS: And this is Holly
23 with Anthem. Also no issues that we are
24 aware of or any authorization issues.

25 MS. PURDON: And does that leave

1 Aetna?

2 MS. BARRETT: This is Eltina
3 with Humana. No issues or updates at this
4 time.

5 MS. RISNER: This is Krystal
6 Risner with Aetna. Can you all hear me?

7 MS. PURDON: Yes.

8 MS. RISNER: Okay. Sorry. My
9 mute button was not working. We don't
10 have any issues to report at this time as
11 well.

12 MS. PURDON: All right. Thank
13 you.

14 And any updates from Medicaid?

15 MS. SMITH: Probably our biggest
16 update is on the waiver side, that all of
17 the waiver applications have now been
18 approved. So anybody that is doing HCV
19 Waiver in Model II, well Model II has been
20 approved since February, but the HCV, all
21 of those changes go in as of May 1st, but
22 the webinars or the recordings on, kind
23 of, the outline of the changes, those were
24 posted yesterday or will be posted today
25 and so there's -- anybody who has any

1 questions on any of that. But that was a
2 big thing to get across the finish line
3 with getting all six of those approved,
4 so.

5 MS. PURDON: And you know about
6 that. Since I don't do Waiver, I don't
7 know what she's talking about, or what
8 anybody is talking about.

9 MR. REINHARDT: The Waiver
10 Appendix K applications, you're talking
11 about?

12 MS. SMITH: No. The actual
13 Waiver applications. Appendix K will
14 officially end for Waiver on April
15 the 30th. The new changes are in effect
16 on May 1st.

17 MR. REINHARDT: Okay. Yeah.
18 And you said they sent an email out.

19 MS. SMITH: Yes.

20 MR. REINHARDT: Like, yesterday
21 on that. So we will get all of that
22 information out to the membership.

23 MS. PURDON: Thank you.

24 All right. Any updates from the
25 Commissioner?

1 (No response.)

2 MS. BICKERS: I don't think she

3 was able to join us this morning. I don't

4 see her logged in.

5 MS. PURDON: Okay. And I don't

6 think we have any recommendations;

7 correct?

8 MR. REINHARDT: Nope.

9 MS. PURDON: And MAC meeting.

10 Susan, I'm assuming will be

11 there next month?

12 MS. STEWART: I was there. It

13 was last week.

14 MS. PURDON: Oh, last week. I

15 thought it ran the month that we didn't

16 meet.

17 MS. STEWART: It was the end of

18 March.

19 MS. PURDON: Okay.

20 MR. REINHARDT: Yeah, they

21 changed up the cadence, so it's a little

22 different now.

23 MS. PURDON: Shows what I know.

24 Alrighty.

25 MS. STEWART: But I was there.

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MS. PURDON: Very good. All
right.

Our next meeting will be June
the 11th. That will be 2024 instead of
2025, I believe. Sometimes I don't always
catch that, and I just read it. All
right.

There's nothing else, motion to
adjourn?

MR. REINHARDT: Motion to
adjourn.

MR. PEREZ: Second that.

MS. SMITH: Short meeting. Have
a great rest of the week you all.

MS. PURDON: Thank you.

(Meeting adjourned at 11:24
a.m.)

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C E R T I F I C A T E

I, STEFANIE SWEET, Certified Verbatim
Reporter and Registered CART Provider -
Master, hereby certify that the foregoing
record represents the original record of the
Technical Advisory Committee meeting; the
record is an accurate and complete recording
of the proceeding; and a transcript of this
record has been produced and delivered to the
Department of Medicaid Services.

Dated this 11th of April, 2024

/s/ Stefanie Sweet

Stefanie Sweet, CVR, RCP-M