

DRAFT 2019 Work Plan – Joint Subcommittee for HHR Oversight

Joint Subcommittee Purpose:

- 1) Monitor, evaluate and respond to federal health care legislation and make recommendations.
- 2) Provide on-going oversight of initiatives and operations of HHR agencies.
- 3) Staff determination and options for improving quality and costs of private day placements.
- 4) Establish a workgroup to monitor the implementation of Medicaid coverage of newly eligible individuals pursuant to the Patient Protection and Affordable Care Act.
- 5) **NEW** – Consider options for a § 1332 Affordable Care Act waiver to redesign the individual insurance market.
- 6) **NEW** - Review and approve final format for reporting on Medicaid provider assessment collections and the use of the funds.

Proposed Meetings:

August 20 Meeting:

- Review and discussion of 2019 work plan for the joint subcommittee.
- Supplemental Nutrition Assistance Program error rates and fiscal implications.
- Overview and discussion of Medicaid Spending Target for 2020-2022 biennial budget.
- Update on JLARC HHR Unit activities.
- Review and approval of final format for reporting on Medicaid provider assessment collections and the use of the funds.

September (Date TBD) Meeting:

- Final approval of the Medicaid Spending Target for the 2020-2022 biennial budget.
- Update on federal deferrals, disallowances or other types of federal repayments for Medicaid and CHIP.
- Review of September 1 provider assessment report on revenue collections and spending.
- Update on new process to review Medicaid MCO contract changes for fiscal policy changes outside the normal budget process.
- Update on Medicaid expansion enrollment, costs, and status of waiver implementation.
- Update on impact of Medicaid Expansion on Community Services Boards revenues and distribution of special funds to offset lower planned revenues.
- Overview of agency organizational changes for DMAS and DBHDS.

October 21 Meeting:

- Update on compliance with DOJ Settlement Agreement and projected costs related to exiting the agreement.
- Update on STEP-VA implementation, changes resulting from JLARC report, and projected costs to fully implement STEP-VA.
- Report on hospital supplemental payments, with attention added for those supporting teaching hospitals.
- Update on behavioral health redesign and cost estimates for implementation.
- Review of comprehensive plan for TANF prepared by Department of Social Services.
- Update on Family First Prevention Services Act implementation and budget need.

December (Date TBD) Meeting:

- Overview of improvements to the Medicaid forecasting process and review of any on-going challenges to ensure accurate forecasting.
- Status and update on EHR implementation in HHR agencies and review of analysis of EHR workgroup.
- Update on TDO impact on state hospitals and new methodology for DSH payments that incentivizes private hospital participation.
- Review of final report on the rate study for special education private day schools.
- Overview of potential options for a § 1332 ACA waiver to redesign the individual marketplace.
- Overview and discussion of report on Medicaid pharmacy benefit models for Medicaid.