

Medicaid Member Engagement Committee Meeting (MMEC) Minutes

November 5, 2024

Welcome & Icebreaker

- Meeting called to order: 9:30 a.m.
- Meeting adjourned: 11:00 a.m.
- Welcome
- Roll Call
 - Members present:
 - Allison Wanner
 - Kara Hanson
 - Victoria Alexander
 - Eldor Scheid
 - Jacqueline Frost-Hodney
 - Members absent:
 - Jon Fettig
 - Heather Skadsem
 - Also in attendance:
 - Krista Fremming, Assistant Director
 - Monique Runnels, Tribal Liaison
 - Jen Sheppard, Member Liaison
 - Storm Olson, Attorney
 - Aaron Webb, Attorney
- Meet & Greet
- Icebreaker

Guest Speaker

- Appeals: Storm Olson, Aaron Webb
 - The MMEC was informed on appeals, denials, and reduction or termination of coverage. They were told how, where, and who can file appeals. We discussed the significance of the 30 days from the mailing date on notices, filling out State Form Number-162 notice for hearing, release of information, authorized representatives, and legal counsel. The review process and next steps were explained. Resources for information on appeals was shared. The MMEC was told that the Legal division is reviewing how appeal information is provided. The Document Number-263 that is sent with notices may be revised.
 - The MMEC learned that an appeal can be filed to District Court. If members disagree with the court's decision on an appeal, they can request a rehearing or reconsideration hearing. They must provide information as to the reason. There must be new evidence that the law was applied incorrectly. It was recommended to have an attorney represent the member; however, the system is designed for those who appear without an attorney and judges often provide some grace for those who don't have an attorney.

- The MMEC asked for a list of non-appealable denials and found that there is not a full list published. There are too many examples to list, and some are only appealable by a provider while others are only appealable by the recipient.
 - The MMEC recommended publishing a list of non-appealable denials.
 - A description of denial differences and examples will be added to the member handbook.
- The MMEC was invited to create a list of information or topics they recommend be included in public-facing appeals information.

Discussion

- Last meeting's follow-ups
 - The MMEC requested advocates for members needing out-of-state services.
 - Two employees are in-place to assist members with questions and directives as needed.
 - Members requested contact information for the Out-of-State Services unit to members.
 - This information will be added to the member handbook and considered for a future E-news article.
- Member handbook, Emergency Health Care chapter review
 - The MMEC reviewed the full chapter and recommended adding how to address medication management concerns outside of an emergency room. The MMEC also requested adding information on necessary ambulance use for non-emergency, in-state transportation, and the option to use an ambulette.
 - This information will be added to the member handbook.
 - The MMEC had suggested prominently displaying information on translation ability for the online member handbook. They reviewed a proposed approach to added verbiage at the top of the handbook webpage. One suggestion was to not include a screenshot image of the translation tool to reduce confusion.
- E-News Review
 - The MMEC reviewed articles for the January issue and suggest adding a reminder for renewals. The committee was asked to submit suggestions for future articles. One suggestion was to cover dual special needs plans information.
- Review this year's MMEC concerns and progress.
 - The MMEC reflected on this year's work and recognized our progress in applying best practices for plain language in member-facing materials, website navigation, and increasing access to information through member E-News and the member handbook. We reviewed ongoing work in efficiency, member clarity for processes, member handbook development, website work, increasing coverage, and Self-Service Portal improvements.
- Q&A
 - One member asked if we have information in the member handbook about Medicaid coverage being secondary to other health insurance coverage.
 - The member handbook will have this information in a future chapter.
- Open Discussion
 - The MMEC suggested adding information into the member handbook for primary vs. secondary coverage for out-of-state services.
 - This will be considered for a future handbook chapter.
- Decision: Vote for term length of MMEC members:

- Two-year term:
 - Four members voted for a two-year term.
- Three-year term:
 - One member voted for a three-year term.
- The MMEC will have seats with two-year terms. These terms will be non-consecutive to comply with Centers for Medicare and Medicaid Services (CMS) Ensuring Access to Medicaid Services final rule. This information will be updated in the MMEC Guidelines and published.

Next Steps

- Reminder for next meeting
 - January 7, 2025 @ 9:30-11:30am
- Upcoming meetings
 - March 4, 2025
 - May 6, 2025
 - July 8, 2025
 - September 9, 2025
 - November 4, 2025