

Medicaid Member Engagement Committee Meeting (MMEC) Minutes

September 10, 2024

Welcome & Icebreaker

- Meeting called to order: 9:30am
- Meeting adjourned: 11:30am
- Welcome
- Roll Call
 - Roll call of committee members in attendance:
 - Jon Fettig
 - Jacqueline Frost-Hodney
 - Heather Skadsem
 - Eldor Scheid
 - Members Absent:
 - Victoria Alexander
 - Kara Hansen
 - Allison Wanner
 - Also in attendance:
 - Jen Sheppard, Member Liaison
 - Mandy Dendy, Coverage Director
 - Monique Runnels, Tribal Liaison
 - Susan Burns, Utilization Review Administrator
 - Rachael Buchwitz, Utilization Review Administrator
- Meet & Greet
- Icebreaker

Guest Speaker

- Out-of-State Services: Susan Burns
 - Brief overview of how out-of-state services and travel assistance that is offered and approved.
 - MMEC member suggestions:
 - One MMEC member shares they had out-of-state services not approved for the Medicaid member. The time allotted to appeal the Medicaid decision was 30 days. This did not leave enough time to communicate back-and-forth with Medicaid on the appeal decision.
 - The 30 days starts over with each determination.
 - Some providers may offer a referral even if the service can be offered in ND. This can create confusion for the member. Providers need to share a reason why an out-of-state service is necessary with Medicaid when seeking authorization for these services.
 - MMEC member questions:
 - Can family/caregivers of Medicaid members get travel assistance?
 - Yes. ND Medicaid is enrolling family members as Non-Emergency Medical Transportation (NEMT) providers. Family members must enroll as an NEMT



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provider and can find out more by connecting to our Customer Support Center or the out-of-state travel specialist at 701-328-2159.

- NEMT travel assistance may apply to out-of-state travel also.
- Why do out-of-state services require a prior authorization?
 - This process comes from federal and state guidance. It is most costeffective to have services offered in ND rather than outside of the boundaries.
 - Having a provider closer to home who knows the member and their health history can improve the level of care.
- Why would members request out-of-state services?
 - Some members keep their ND Medicaid coverage as they relocate to college or a new foster care location near or outside of ND borders.
 - Members may want to keep the same provider for continuation of care or remain in the same coverage network. Members can see providers up to 50 miles outside of the ND border.
 - Depending on location, some members may need to visit an out-of-state hospital when that is the closest facility in times of urgent need.
- Medicaid Medical Advisory Council (MMAC): Mandy Dendy
 - Updates on MMAC term lengths for MMEC members, final rule requirements, open seats available to MMEC members, and how the MMEC and MMAC work together were shared.
 - MMAC is made of 25 seats. Members must apply for a seat. Members outside of MMEC members serve three-year terms. Terms cannot be consecutive. This council is made of ND Medicaid members, medical professionals, legislators, and others connected to Medicaid create a well-rounded perspective.
 - This council is notified of changes within Medicaid such as state plan amendments or waiver changes and are offered educational updates. The MMAC makes suggestions, shares ideas, and gives feedback.
 - Five MMEC members will need to join the MMAC. Seven seats will open in February of 2025. MMEC members can apply to the MMAC by sending an email to the Medical Services Director with their reason for serving and information about themselves, their health care experiences, and their Medicaid connection.
 - MMAC meetings are a combination of virtual, hybrid, and in-person.
 - MMEC members were asked what MMAC term length would be best for MMEC members?
 - Members feel that three years is a long commitment.
 - Members agree that two years may be best.
 - Offer a potential three-year term with an option to step down at two years. Some MMEC members may feel over-burdened with a three-year commitment while others may feel strengthened by the experience gained with a longer term limit.
 - Mandy Dendy will take this information back to the November MMAC meeting.

Last Meeting's Follow-ups

- What term lengths have other states established for their member-based committees?
 - Nevada: 2 years
 - California: 2 years

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Be Legendary.

- o Arkansas: 2 years
- o Indiana: 2 years

Discussion

- Learning and Action Series Training:
 - Center for Health Care Strategies accepted North Dakota's Medicaid member engagement team to a 14-month-long, nation-wide training series.
 - This training will offer peer-to-peer discussion, individual training, action plan development for member-based committees, and assistance in forming partnerships with community-based organizations to better connect with Medicaid members.
 - This training started this July and will continue through the fall of 2025.
- Member Notice Review:
 - o MMEC reviewed a recent notice to all Medicaid home oxygen therapy use members.
 - MMEC members were asked for input in the following areas:
 - Is there a clear call to action?
 - Yes, but could bold text to identify important information more easily.
 - Consider making a header with a strong statement that catches the reader's attention.
 - Do we have information that isn't needed?
 - No.
 - Did we miss information that should have been included?
 - Clarify that the device being offered is paid for by Medicaid.
 - Rely less on the term "covered" or "will cover" as some readers may not understand that this is related to cost.
 - Clarify if installation of this product can be done by the member or should be done by a professional.
 - Will readers stay engaged based on length and content of the letter?
 - Length of letter is good at one page.
 - Break up sentences that introduce two main points so one point is not overlooked.
 - MMEC member suggestions:
 - Bold any links.
 - QR codes are good and necessary.
 - Consider an even lower reading level for writing style. Aim for a fifth-grade level.
 - MMEC member questions:
 - Do we have a way to send these letters to specific members?
 - Yes. We can identify members that have a specific diagnosis or order for oxygen/oxygen therapy supplies.
- Member News Review:
 - o E-News
 - How do you feel about the current frequency of every other month?
 - This is good. More frequent delivery would reduce the likelihood that recipients will read due to an overwhelmed in-box.
 - What topics should we cover?
 - New changes.
 - Contact information.
 - Having a theme for each issue is helpful.
 - Appeal process information.



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- Be Legendary.
 - Printed Annual Newsletter
 - How do you feel about the current frequency of once per year in November?
 - Timing is good.
 - Avoid major holiday seasons, aim for beginning of November.
 - What topics should we cover?
 - Commonly needed contact information.
 - How to access more information. Make sure website and phone numbers are offered.
 - Other feedback:
 - QR codes are good and necessary.
 - Give members the option to receive the annual newsletter electronically to save on cost.
- Q&A
 - How does the MMEC feel about guest speakers attending meetings?
 - Guests may hinder members' willingness to share their thoughts and opinions openly.
 - Guests should present their reasons for wanting to attend.
 - There should be a small, set number of guests.
 - MMEC members should be notified in advance.
 - MMEC members should be well-established on the committee (after one year of attendance for the majority).
 - The MMEC meetings should not have visitors directly after a new member has joined.
- Open Discussion
 - MMEC members request a quest speaker on the ND Medicaid appeals process.
 - Member liaison will organize requested guest speaker.
 - One MMEC member shares that out-of-state services can be confusing and complicated processes may lead to poorer health outcomes.
 - One MMEC member suggests considering the member and/or caregivers experiencing out-of-state services. These times can be overwhelming or stressful for those involved. Explore ways to build in ways to help relieve members and/or their caregivers having to get out-of-state services. Having an assigned advocate to assist with arrangements, appeals, etc. could help relieve added pressure for this process.
 - One member shares their experience with out-of-state services being needed and then approved and now being denied. This member expressed the frustration of this situation.

Next Steps

- Reminder for next meeting
 - November 5, 2024 @ 9:30-11:320a
 - Upcoming meetings
 - o January 7, 2025
 - o March 4, 2025
 - o May 6, 2025
 - o July 8, 2025
 - o September 9, 2025
 - o November 4, 2025