

# CHIPAC

Children's Health  
Insurance Program  
Advisory Committee  
of Virginia



## Quarterly Meeting

March 2, 2023

# Real-time Remote Captioning

- Remote conference captioning is being provided for this event.
- The link to view live captions for this event will be pasted in the chatbox.
- You can click on the link to open up a separate window with the live captioning.

# Meeting Notice – Public Access

- This meeting is being held in person with electronic access via WebEx.
- Members of the public may attend in person or virtually.
- There will be a public comment period at the close of the meeting (~3:00 PM).
- The meeting is being recorded.

# Roll Call

Organization	Name
Virginia Department of Social Services	Irma Blackwell
VCU Health	Dr. Tegwyn Brickhouse
American Academy of Pediatrics – VA Chapter	Dr. Susan Brown
Virginia Hospital and Healthcare Association	Kelly Cannon
Virginia Poverty Law Center	Sara Cariano
Board of Medical Assistance Services	Dr. Kannan Srinivasan (Michael Cook)
Virginia Association of Health Plans	Heidi Dix
Virginia Community Healthcare Association	Martha Crosby
Families Forward Virginia	Ali Faruk

# Roll Call

Organization	Name
Center on Budget and Policy Priorities	Shelby Gonzales
Voices for Virginia's Children	Emily Griffey
Virginia Department of Education	Alexandra Javna
Joint Commission on Health Care	Jeff Lunardi
Virginia Department of Health	Jennifer Macdonald
The Commonwealth Institute for Fiscal Analysis	Emily King (Freddy Mejia)
Virginia League of Social Services Executives	Michael Muse
Virginia Health Care Foundation	Denise Daly Konrad (Emily Roller)
Dept. of Behavioral Health and Developmental Services	Hanna Schweitzer
Medical Society of Virginia	Dr. Nathan Webb

# Meeting Agenda

- ❑ CHIPAC Business (1:00-1:15)
- ❑ Continuous Coverage Unwinding and New Federal Legislation (1:15-2:15)
- ❑ General Assembly Update (2:15-2:45)
  - Legislative Update – Will Frank, Senior Advisor for Legislative Affairs
  - Finance Update – Cat Pelletier, Operations Lead for Finance
- ❑ Committee Discussion of Legislative and Policy Priorities (2:45-3:00)
- ❑ Agenda Items for June 1 CHIPAC Meeting (3:00-3:05)
- ❑ Public Comment (3:05-3:15)



# VIRGINIA MEDICAID UNWINDING: ENDING CONTINUOUS COVERAGE REQUIREMENTS

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES



# Medicaid Continuous Coverage Requirements Under the Families First Coronavirus Response Act (FFCRA) and Unwinding Policies

To support states and promote stability of coverage during the COVID-19 pandemic, FFCRA provided a 6.2 percentage point increase in the regular Medicaid matching rate, tied to certain conditions that states must meet in order to access the enhanced funding.

- As one of several conditions of receiving the temporary Federal Medical Assistance Percentage (FMAP) increase under FFCRA, states are required to maintain enrollment of individuals in Medicaid until the end of the month in which the Public Health Emergency (PHE) ends (the “continuous coverage” requirement).
- The continuous coverage requirement applies to individuals enrolled in Medicaid as of March 18, 2020, or who were determined eligible on or after that date and has allowed people to retain Medicaid coverage and get needed care during the pandemic.
- On December 29<sup>th</sup>, 2022, the 2023 Consolidated Appropriations Act was passed (an omnibus spending bill to fund the federal government for FY 2023). The legislation included the decoupling of the continuous coverage requirements for Medicaid from the COVID-19 federal PHE.
- **Starting April 1<sup>st</sup>, 2023, states will be required to redetermine eligibility for nearly all Medicaid enrollees.** As of 02/2023, Virginia will be responsible for redetermining 2,154,617 members within 1,256,294 cases – one third of all cases are expected to be redetermined automatically, with the remaining cases to be redetermined by local Departments of Social Services.
  - DMAS is working to obtain vendor support to supplement local agency efforts.



# Financial Elements Related to the PHE and Unwinding

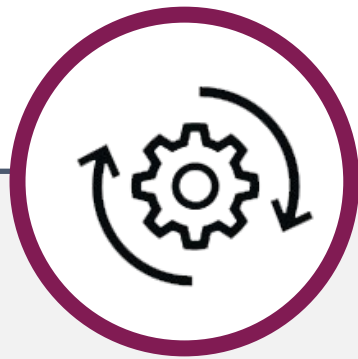
- With the Federal omnibus bill passage, the enhanced Federal Medical Assistance Percentage (FMAP) would be ramped down as follows –

Calendar Year Quarter	Medicaid Enhanced FMAP
Q1 2023 (January – March)	6.2%
Q2 2023 (April – June)	5%
Q3 2023 (July – Sept)	2.5%
Q4 2023 (October – December)	1.5%

- Virginia has received nearly \$2.5 billion in additional federal funds throughout the pandemic.
- DMAS also received \$15 million in American Rescue Plan Act (ARPA) funding to assist with unwinding related work, including but not limited to system enhancements, temporary staffing, and communications/outreach. DMAS has requested an additional \$20 million in ARPA funding and \$3.3 million in general funds approval from the General Assembly in the 2023 session to assist with redetermination efforts through the Cover Virginia vendor.

# Medicaid Enrollment in the Commonwealth

The end of the continuous coverage requirement in the Commonwealth will present the single largest health coverage event since the first open enrollment of the Affordable Care Act (ACA).



Historically, the Commonwealth has experienced **churn, which is enrollees who reapply and re-gain coverage shortly after being terminated.**



From March 2020 through February 1, 2023, the Commonwealth experienced an **increase of 620,100 enrollees (a 40% increase in enrollment growth).**



Enrollment growth has been the **fastest among non-elderly, non-disabled adults**, and slower among children and aged, blind, and disabled (ABD) eligibility groups.



Post continuous coverage, **roughly 14% of the state's total Medicaid enrollees may lose coverage, and up to 4% of members may lose and regain coverage within 1-6 months of closure. The national average for loss is around 20%.**

# Redetermination Processing Timeline

Closures from redeterminations may not occur prior to the month after the continuous coverage requirement ends. Redeterminations will be initiated over a 12-month period to ensure an even distribution of overdue renewals combined with currently due renewals, and a sustainable workload for local agencies in future years. In addition, CMS allows states an additional two months for all clean up work in order to align with federal processing requirements.



# Preparations to Resume Normal Operations

In mid-2020, shortly after the PHE declaration, preparations for resuming normal operations began. Much of this work will require teams to pivot to finalize the changes and undo temporary policies and procedures to revert to normal operations.

## System Updates – Increased Automation

(VaCMS & MES)

20 Changes Implemented  
3 Changes in Progress

## Clean Up & Pre-Unwinding Processes

5 New or Updated Processes Implemented

## Stakeholder Outreach/Engagement

4 Toolkits  
18 Outreach Templates  
65 Provider Memos Issued  
2 PHE Website Pages

## Member Outreach/Engagement

1 million + Letters Mailed  
1 Social Media Campaign  
Radio Campaign in 5 Regions  
3 PHE Website Page  
1 Television Campaign

## Training

7 Trainings Developed

## Policy Flexibilities

9 Flexibilities Made Permanent

## Unwinding Waivers

7 Waivers Submitted & Approved

## Temporary Flexibilities

116 Total Implemented  
(74: Ended, 42: in Progress)

# Expiring COVID-19 PHE Flexibilities

- The provider flexibilities relate to the public health emergency, which is ending on May 11, 2023. The flexibilities are NOT related to the end of the continuous coverage requirement.
- Most of the flexibilities that remain relate to Home and Community Based Services (HCBS) waivers.
- Some of these will end on May 11, 2023, and some will last for an additional six months.
- COVID vaccines, vaccine counseling, testing, and treatment will remain covered services under federal requirements until September 30, 2024. After that, vaccines will be covered as preventive services.
- For more information, go to [dmas.virginia.gov/covid-19-response](https://dmas.virginia.gov/covid-19-response)

# COVID-19 Flexibilities Now Permanent

Virginia has permanently adopted the following COVID-19 flexibilities:

- No co-payments for Medicaid and FAMIS members
- Telehealth
- Electronic signatures
- 90-day supply for many drugs
- Opioid treatment programs may administer medication as take-home dosages, up to a 28-day supply
- Allowing a member's home to serve as the originating site for prescription of buprenorphine

# 2023 Consolidated Appropriations Act

## Maternal and Child Health Provisions - Highlights

- Effective January 1, 2024, all states must permanently provide **12 months continuous coverage** to children enrolled in Medicaid and CHIP, regardless of changes in income/circumstances that would ordinarily affect eligibility.
- **CHIP federal funding extended** for an additional two years, through FFY 2029.
- CAA includes funding for **pediatric quality measures** and **CHIP outreach and enrollment grants**.

# 2023 Consolidated Appropriations Act

## Medicaid and CHIP Mental Health & Justice-Related Provisions

- Establishes **state option to provide Medicaid and CHIP coverage to juvenile youth in public institutions** during the initial period pending disposition of charges (effective January 1, 2025).
- Aligns CHIP rules with Medicaid rules concerning **suspension rather than termination of coverage** while a child is an inmate of a public institution and establishes related requirements regarding redeterminations.
- Effective January 1, 2025, requires states to provide certain required **screenings, referrals, and case management services** for Medicaid and CHIP-eligible juvenile youth in public institutions.



# 2023 Consolidated Appropriations Act

## Medicaid and CHIP Mental Health Provisions – Cont'd

- Effective July 1, 2025, **takes steps to address “phantom networks”** by requiring state Medicaid and CHIP programs and MCOs to publish accurate, updated, and searchable provider directories that include information on whether a provider is accepting new patients, the provider’s cultural, linguistic, and disability access capabilities, and whether the provider offers services via telehealth.
- By July 1, 2025, directs Department of Health and Human Services to issue guidance to states and establish a guidance and technical assistance center on the **continuum of crisis response services** in Medicaid and CHIP.

Partnership between



School Aged Children



VIRGINIA DEPARTMENT OF  
SOCIAL SERVICES



SNAP Children under 6  
(childcare)



- For SY22-23, Virginia will not issue P-EBT benefits for school aged children.
- For SY22-23, Virginia will begin issuing P-EBT benefits for eligible SNAP children under six shortly.
  - March = September, October & November
  - April = December, January & February
  - May = March & April
  - June = Pro-rated May (PHE ending May 11, 2023)
- Summer P-EBT 2023 = school aged children only (in July or Aug 2023)



Ending of PHE – May 11, 2023

- Updating VDSS public facing website ([dss.virginia.gov](https://dss.virginia.gov))
- Updating VDSS intranet website (FUSION)
- Public Service Announcements
- Flyers for LDSS and VDOE distribution



# EBT (SNAP) Replacement Funds

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# Consolidated Appropriations Act

22



- The US Congress passed, and the president signed [H.R. 2617](#) (Consolidated Appropriations Act, 2023), also known as the Omnibus Bill into law. This bill became Public Law No: [117-328](#) on **12/29/2022**. This bill authorized the potential replacement of some EBT benefits that were stolen through card skimming, card cloning, or similar fraudulent methods, and the establishment of a permanent summer EBT program starting in 2024.
- **Virginia cannot access/utilize these funds to replace benefits until certain steps are completed.**



- Applies only to SNAP benefits stolen between October 1, 2022, through September 30, 2024.
- EBT Replacement Benefits are only applicable to SNAP benefits, which include D-SNAP and Emergency Allotments. P-EBT benefits are not SNAP benefits and therefore cannot be replaced under the authority of the CAA 2023.
- The amount of the replacement benefits for a household is the lesser of:
  - ✓ the amount stolen, or
  - ✓ the amount equal to 2 months of the monthly allotment of the household immediately prior to the date on which the benefits were stolen.
- EBT Benefits may only be replaced twice in a federal fiscal year (October 1 to September 30).



- VDSS is currently drafting a plan for approval by the federal government to address the restoration of benefits stolen by card skimming, cloning and other similar fraudulent methods. Due to FNS **on 2/27/23**
- Once FNS approves the plan VDSS will move forward with implementing, which may take several months. Part of the plan will address replacement benefits for eligible EBT benefits from October 1, 2022, through the approval of the plan.
- Part of the plan includes short-term and long-term solutions.
- Currently, VDSS has no estimated date for availability of federal EBT Replacement Funds in Virginia.





# EBT Scamming/ Skimming/ Phishing/ Cloning

# 25

- 2022 – 2023 Nationwide drastic increase in skimming, scamming, and cloning of Electronic Benefit Transfer (EBT) cards.
- [Protect Yourself from EBT Scams - Virginia Department of Social Services](#)

## Protect Yourself from EBT Scams



Criminals are trying to steal card benefits nationwide through scams that attempt to trick you into providing your EBT or P-EBT card number and/or PIN. The USDA is actively monitoring this fraudulent activity and has created [this dedicated webpage](#) to keep the public informed.

The Virginia Department of Social Services is unable to replace missing or stolen EBT funds when scams occur, so it's important to **take action now to help protect your EBT card and benefits.**

1. **Do not respond to unsolicited texts, emails or phone calls concerning your EBT account.**
  - Scammers may attempt to contact you with links to access your account or alerts that your account is locked. Virginia EBT will NEVER contact you through these methods and will only discuss your account through the official EBT Client Customer Service Helpdesk line at 1-866-281-2448.
2. **The USDA encourages cardholders to change their card PIN often to prevent card skimming.**
  - You can do that today by:
    - Using the ConnectEBT web portal or mobile app
    - Calling Virginia's EBT Client Customer Service Helpdesk at 1-866-281-2448 (accessible 24 hours a day, 7 days a week)
3. **Routinely check the balance of your EBT card** to ensure that no unauthorized purchases have been made.
  - Check your account balance online at [ConnectEBT.com](#) or download the ConnectEBT mobile app for convenience. Select Virginia EBT from the dropdown.
4. **Create a strong password for your client portal account and mobile app.**

A strong password will:

  - Have a combination of uppercase and lowercase letters, numbers and symbols
  - Be significantly different from your previous passwords



### Other EBT Scam Resources

[How to Recognize and Report Spam Text Messages](#)

[VDSS EBT Scam Notice Flyer - English](#)

[| Amharic \(PDF\) | | Arabic \(PDF\) | | Dari \(PDF\) | | Pashto \(PDF\) | | Spanish \(PDF\) | | Ukranian \(PDF\) | | Urdu \(PDF\) | | Vietnamese \(PDF\) |](#)

[USDA EBT Skimming Information Sheet](#)

## EBT/P-EBT SCAM NOTICE



Help protect yourself against scam attempts. Never provide your personal information, including your EBT or P-EBT pin, to any unsolicited source. [Learn more.](#)



**The Virginia Department of Social Services** @VDSS · 3h  
EBT cardholders: There is a scam occurring in which individuals are receiving emails and texts stating that their EBT card is locked and they need to share their PIN to unlock their card. These emails and texts are NOT from VDSS. DO NOT RESPOND! VDSS will NEVER ask for your PIN.



- CAA authorized a permanent Summer EBT Program starting in 2024.
- Specific details are pending written guidance from FNS.
- Will build off technology infrastructure established during P-EBT program





# VIRGINIA GENERAL ASSEMBLY UPDATE

*March 2, 2023*

**Will Frank**

*Senior Advisor for Legislative,*

*Department of Medical*

*Assistance Services*

# DMAS Legislative Role

- Monitor introduced legislation.
- Review legislation and budget language for Secretary and Governor.
- Make position recommendations to Secretary and Governor.
- Communicate Governor positions to General Assembly.
- Provide expert testimony and technical assistance to legislators on legislation.

# 2023 GA Session Stats

- 2,863 bills introduced.
- DMAS was assigned 31 bills.
- 13 bills passed.
- 18 bills failed.
  - These included bills with Amend, No Position, and Oppose positions.
- DMAS commented on another 26 bills assigned to other agencies.
- DMAS Tracked another 107 bills.

# Child, Youth, and Maternal Health - Introduced Bills 2023

## Legislation Monitored by DMAS (Did Not Pass):

### HB1919 & SB1439

- Requires coordination between DMAS and DOC to identify pregnant individuals in the custody of state correctional facilities who are currently enrolled in Medicaid or who may be eligible for Medicaid and ensure that those released for the purpose of giving birth or other pregnancy-related care are informed of the steps necessary to obtain coverage for such care.

### HB2210 & SB1327

- Directs DMAS to establish a state-funded comprehensive health care coverage program for children under 19 years of age who are uninsured and would be eligible for Medicaid or FAMIS coverage if not for their immigration status.

### HB2232 & SB1104

- Directs DMAS to amend the state plan to include a provision for the payment of violence prevention services.

# Key Bills 2023

## Long-Term Care

- HB1681/SB1457- Long-term services and supports screening; screening after admission.
- HB1446/SB1339- Certified nursing facilities; minimum staffing standards, administrative sanctions.

## Developmental Disabilities

- HB1963/SB945- Individuals with developmental disabilities; financial flexibility, report.
- HB2315- Intellectual/Developmental Disability services; DMAS to study, dissemination of information.

## Managed Care

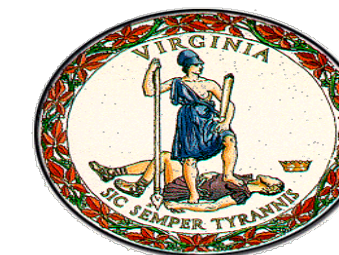
- HB2190/SB1270- Managed care organizations; data collections and reporting requirements, report.
- HB2262/SB1154- Health insurance; online credentialing system, processing of new applications.
- HB1879/SB1301- Managed Care network adequacy for mental health care services.

Questions????

# Thank you

Will Frank- [will.frank@dmas.virginia.gov](mailto:will.frank@dmas.virginia.gov)





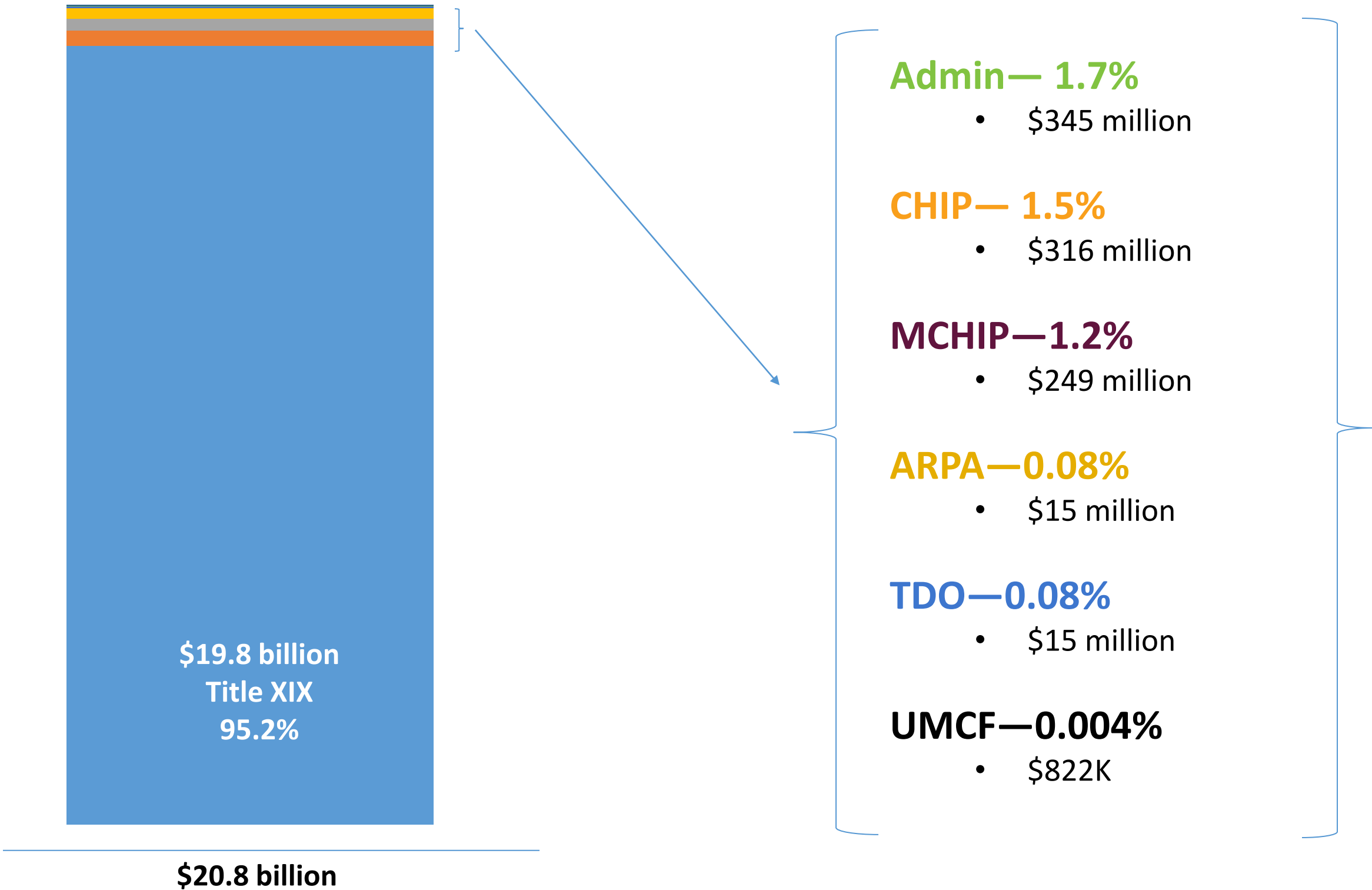
# FINANCE UPDATE

**Cat Pelletier**  
**Operations Lead for Finance,**  
**DMAS**  
**March 2023**

# Agenda

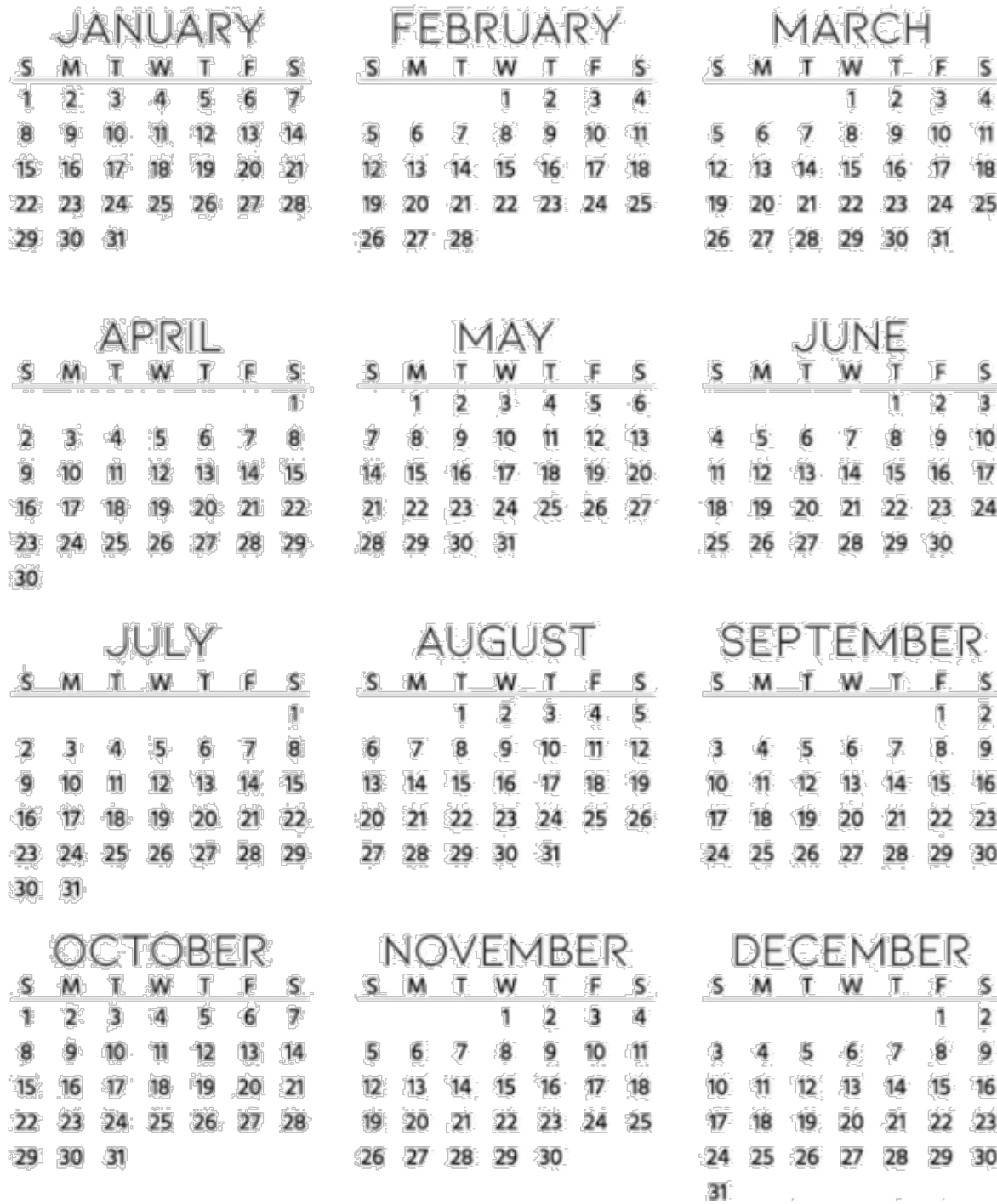
- ❑ FY23 Appropriation
- ❑ Financial Impact of Unwinding (Redetermination)
- ❑ Governor's Introduced Budget
- ❑ 2023 General Assembly Conference Budget Amendments

# DMAS FY23 Appropriation



# Financial Impact of Unwinding (Redetermination)

## 2023



### Medicaid / CHIP eFMAP

6.2% / 4.34%

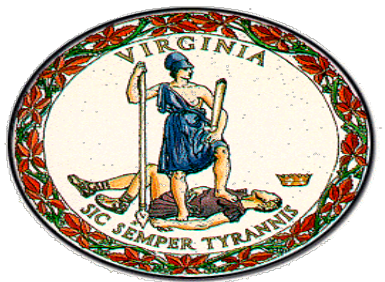
5.0% / 3.49%

2.5% / 1.74%

1.5% / 1.05%

General Fund	FY23	FY24	Net
<b>Medicaid</b>	(29,929,433)	127,293,475	97,364,042
<b>CHIP</b>	(878,961)	3,490,994	2,612,033
<b>Total</b>	(\$30,808,394)	\$130,784,469	<b>\$99,976,075</b>

# GOVERNOR'S INTRODUCED BUDGET



# Governor's Introduced Budget

## Rate Increases



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Increase Rates for Consumer Directed Personal Care, Respite, and Companion Services (304 XXX)</b>	\$ -	\$ -	\$ 41,616,322	\$ 47,194,131
<b>Increase Rates for Early Intervention Services (304 TTTT)</b>	-	-	1,117,018	1,187,947

# Governor's Introduced Budget

## Services and Supports



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Fund an Additional 500 Developmental Disability (DD) Waiver Slots (Item 304 I)</b>	\$ -	\$ -	\$ 15,155,118	\$ 15,822,689
<b>Reprocure Medicaid Managed Care Program (308 GG)</b>	1,689,750	2,594,750	-	-
<b>Workgroup to Examine Inclusion of Residential Treatment Services in Managed Care (Item 308 EE)</b>	-	-	-	-
<b>Implement Telehealth Service Delivery Options for Developmental Disability (DD) waivers (304 VVVV)</b>	-	-	-	-
<b>Improve Access to Peer Recovery Support Services (304 WWWW)</b>	-	-	-	-

# Governor's Introduced Budget

## Services and Supports



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Fund Costs Associated with Settlement (308)</b>	\$ 2,271,918	\$ 462,689	\$ -	\$ -
<b>ARPA for Redetermination of Eligibility (436(i)(7)(a,b,d))</b>	-	-	-	20,000,000
<b>Improve Third-Party Liability Recoveries (308 FF)</b>	-	-	-	-
<b>Fund Capitated Administrative Contract Cost Escalations (308)</b>	-	2,410,933	-	2,410,933
<b>Align Outpatient Rehabilitation Reimbursement Methodology with Medicare (304 UUUU)</b>	-	-	-	-
<b>Adjust Medical Services for Involuntary Mental Commitments Funding (302)</b>	(1,500,000)	-	(250,000)	-



# Governor's Introduced Budget

## Services and Supports



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Account For the Medicaid Portion of State Facility Salary Actions (304 A)</b>	\$ -	\$ -	\$ 268,792	\$ 280,632
<b>Add 20 Psychiatric Residencies Through Graduate Medical Education (304 GG.1)</b>	-	-	1,000,000	1,000,000
<b>Transfer Resources to Fund Developmental Disability Waiver Responsibilities (308 HH)</b>	-	-	85,000	85,000

# Governor's Introduced Budget

## Financial/Technical Items



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Fund Medicaid Utilization and Inflation (304)</b>	<b>\$ (279,325,319)</b>	\$ 1,483,717,796	\$ 12,266,384	\$ 1,356,069,626
<b>Adjust Virginia Health Care Fund Appropriation (304 C.1)</b>	<b>(50,436,557)</b>	50,436,557	67,732,794	<b>(67,732,794)</b>
<b>Fund Family Access to Medical Insurance Security Program Utilization and Inflation (303)</b>	<b>(13,143,045)</b>	7,098,020	<b>(321,954)</b>	5,279,027
<b>Fund Medical Assistance Services for Low-Income Children Utilization and Inflation (303)</b>	<b>(5,888,208)</b>	16,495,016	<b>(2,820,997)</b>	634,327
<b>Account for Extension of Federal Public Health Emergency (308 V.1)</b>	<b>(157,800,861)</b>	153,859,144	53,439,303	1,113,615,681

# BUDGET AMENDMENTS 2023 GENERAL ASSEMBLY



# Budget Amendments

## Rate Increases



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Consumer-directed Facilitation Service Rates (304 #10s)</b>	\$ -	\$ -	\$ 1,884,261	\$ 2,254,788
<b>Increase Rates for Consumer Directed Service Facilitation (304 #1h)</b>	-	-	242,813	353,575
<b>Increase Rates for Peer Mentoring Waiver Services (304 #20h / 304 #7s)</b>	-	-	6,903	10,053
<b>Personal Care Rates (12% for Agency and Consumer-directed) (304 #3s)</b>	-	-	58,262,851	66,071,783
<b>Parity of Mental Health and Substance Use Rates (304 #14s)</b>	-	-	437,836	1,358,707
<b>Reimbursement Rate for Durable Medical Equipment (304 #11s)</b>	-	-	6,163,453	8,177,789
<b>Supported Living Residential Rate (304 #1s)</b>	-	-	967,073	1,092,927

# Budget Amendments

## Rate Increases



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Early Periodic Screening Diagnosis and Treatment (EPSDT) Therapeutic Group Homes Rate Increase (Grafton) (304 #21h)</b>	\$ 200,661	\$ 218,058	\$ 200,661	\$ 218,058
<b>Medicaid Reimbursement Rates for Community-Based Behavioral Health Services (10% Increase) (304 #4s)</b>	-	-	17,399,136	36,973,347
<b>Adult Day Health Care Rates (304 #6h)</b>	-	-	178,771	211,421
<b>Increase Physician Rates for Primary Care and Psychiatric (5% Increase) (304 #8s)</b>	-	-	28,206,746	30,652,341
<b>Developmental Disability Rates Inflationary Adjustment (5% Increase) (304 #9s)</b>	-	-	28,037,002	30,470,932

# Budget Amendments

## Services and Supports



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Collaborative Care Management Services for Substance Use Treatment (304 #10h / 304 #5s)</b>	\$ -	\$ -	\$ 43,177	\$ 383,834
<b>Merging Caps on DD Waiver Services (HB 1963 / SB 945) (304 #13h / 304 #13s)</b>	-	-	549,756	597,222
<b>Medicaid Central Processing Unit (304 #17h)</b>	-	-	3,324,031	12,495,412
<b>Eligibility Redetermination Contractor (308 #1s)</b>	-	-	2,824,031	13,363,236
<b>Two Positions &amp; Funding for DD Waiver Program Administration (304 #18h)</b>	-	-	180,000	180,000
<b>Locally-owned Nursing Facility Fee (304 #2h)</b>	-	-	11,654,251	(12,481,025)
<b>Locally-owned Nursing Homes (304 #6s)</b>	-	-	5,750,000	(5,750,000)

# Budget Amendments

## Services and Supports



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Nursing Facility Value-based Program Inflation Factor (304 #21s)</b>	\$ -	\$ -	\$ -	\$ -
<b>Increase Medicaid Nursing Facility Value-based Purchasing Program Funding in FY24 (304 #3h)</b>	-	-	31,148,676	31,148,676
<b>Medicaid Works Eligibility (304 #4h / 304 #12s)</b>	-	-	292,064	315,445
<b>Private Hospital Medicaid Supplemental Payment Program (304 #8h / 304 #23s)</b>	-	-	-	-
<b>Children's Hospital of the King's Daughters Supplemental Payments (304 #9h / 304 #2s)</b>			5,153,878	5,896,122
<b>Review of Managed Care Reprocurement (308 #2s)</b>	(1,689,750)	(2,594,750)	500,000	-
<b>Medically Needy Spenddown for the Waivers (SB 831) (308 #9s)</b>			128,000	384,000

# Budget Amendments

## Services and Supports



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Medicaid Impact of Auxiliary Grant Rate Increase (304 #14h)</b>	\$ -	\$ -	\$ 2,487,240	\$ 2,552,760
<b>Nursing Facility Rates (Fair Rental Value) (304 #15s)</b>	-	-	20,000,000	20,000,000
<b>Dental Program Enhancements (304 #16s)</b>	-	-	428,271	694,772
<b>Paid Sick Leave for Health Care Workers (SB 886) (304 #17s)</b>	-	-	373,049	406,496
<b>Children's National Medical Center IME Payments (304 #20s)</b>	-	-	-	-
<b>Coverage of Complex Rehab. Technology for Medicaid Nursing Facility Members (304 #7h)</b>	-	-	1,272,060	1,335,690
<b>Comprehensive Children's Health Care Coverage Program (SB 1327) (305 #1s)</b>	-	-	7,324,020	-
<b>Technical Assistance to School Divisions to Implement Medicaid Reimbursement (308 #7s)</b>			250,000	250,000



# Budget Amendments

## Services and Supports



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Center for Health Innovation Primary Care Value-based Pilot (308 #3s)</b>	\$ -	\$ -	\$ 275,000	\$ 275,000
<b>Sickle Cell Disease Support (308 #4s)</b>	-	-	50,000	50,000
<b>Medicaid Rate Study for Behavioral Health (308 #5s)</b>	-	-	225,000	225,000
<b>Study Community Health Worker Medicaid Benefit (308 #6s)</b>	-	-	100,000	100,000
<b>Feasibility of Adding Core Services Waiver for Developmental Disabilities (308 #8s)</b>	-	-	250,000	250,000
<b>Federally Qualified Health Center Reimbursement (308 #10s)</b>	-	-	-	-
<b>Plan for Priority One Waitlist Elimination (308 #13s)</b>	-	-	-	-
<b>Workgroup on Including All Children's Residential Services in Medicaid Managed Care (308 #1h)</b>	-	-	-	-

# Budget Amendments

## Financial/Technical Items



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Adjust Virginia Health Care Fund Appropriation for Managed Care Repayments (304 #11h / 304 #18s)</b>	\$ (10,000,000)	\$ 10,000,000	\$ -	\$ -
<b>Account for Changes in the Federal Match Rate Pursuant to Changes in Federal Law (304 #15h / 304 #22s)</b>	30,808,394	(31,889,475)	(129,975,273)	(523,443,091)
<b>Adjust Virginia Health Care Fund Appropriation for Fiscal Impact of HB 1417 (304 #12h)</b>	-	-	12,100,000	(12,100,000)

# Budget Amendments

## Financial/Technical Items



	FY2023		FY2024	
	GF	NGF	GF	NGF
<b>Adjust Medicaid Spending to Reflect Implementation Delays in Services (304 #16h)</b>	\$ -	\$ -	\$ (7,577,559)	\$ (7,577,559)
<b>Address Federal Changes Affecting Nursing Facility Reimbursement (304 #19h)</b>	-	-	-	-
<b>Rates for Specialized Care Facilities (304 #19s)</b>	-	-	-	-
<b>Report on Traumatic Brain Injury (308 #11s)</b>	-	-	-	-
<b>Clarify Medicaid Residency Program (308 #12s)</b>	-	-	-	-
<b>Review of Equalizing Facility and Community Based Care Medicaid Spenddown (308 #2h)</b>	-	-	-	-

# Takeaways

- 2023 Consolidated Appropriation Act decouples continuous coverage requirements from Public Health Emergency (PHE)
  - Includes quarterly step-down of eFMAP beginning April 1, 2023
  
- Budget includes funding for
  - Rate increases
  - Services and supports, including the Comprehensive Children's Health Care Coverage Program

# **Discussion of Agenda Topics For Next CHIPAC Meeting**

**June 1, 2023**

# Public Comment

- If you are joining electronically and wish to submit a public comment, you can unmute yourself by clicking on the microphone icon.
- If you are joining by phone, unmute yourself by pressing \*6.
- You may also submit written comments in the chatbox if you wish to do so.