

# Kansas Maternal & Child Health Council (KMCHC) Wednesday, July 13, 2022, 9:00 a.m to 11:30 a.m.

Optional Sessions: 8:15 a.m. to 8:45 a.m <u>AND</u> 11:30 a.m.to 12:30 p.m.

https://us02web.zoom.us/j/85428452412

Meeting ID: 854 2845 2412 (312) 626-6799

8:15	Optional Networking Session
	Agenda Items
9:00	Welcome & Recognize New Members & Guests Elaine Johannes, KMCHC Executvie Committee Member
9:10	Title V/Title XIX Partnership
9:25	Kansas Medicaid (KanCare) Initiatives/Updates
10:15	Small Group Instructions and Move to Virtual Breakouts
10:20	Short Break – After you join your breakout group, 5 minute break
10:25	Small Group Discussion (Small Groups: Women/Maternal, Perinatal/Infant, Child, Adolescent)  How can your organization help spread the word to Medicaid beneficiaries about what they need to do to prepare for the PHE unwinding?  How can Medicaid beneficiaries take advantage of the postpartum extension to set themselves up for long-term success? What services and supports are needed related to behavioral health services? Primary care and prevention services? Contraception? Others? Share any specific services or treatments that you, or those you serve, have recently (last 12 months) experienced difficulty in getting prior authorization or were denied coverage.  Are there any specific requests or recommendations you have for Medicaid as they embark on the reprocurement process?
11:00	Reconvene, then Small Group Report Outs
11:15	Announcements
11:25	Closing Remarks
11:30	OPTIONAL: PRAMS Phase 9 Questions

## **Questions Submitted by KMCHC Members**

#### End of PHE

- 1. The KanCare process for confirming eligibility (where are they starting, how that will work)
- 2. How members can help make sure qualified families don't lose coverage

### Reprocurement

- 1. What does KanCare want to get out of public comment for the reprocurement? What is the best way to provide input on reprocurement?
- 2. Updated timeline since the legislation blocked it from happening this year
- 1. Will there be specific language used on the procurement to have consistency between MCO's in the services that must be covered and processes used. Ex: will they be required to use the same prior authorization process and forms? Will they be required to use the same acronyms/names for services and supports?
- 3. What are the value added services (VAS) of each MCO and how will they be promoted to customers? Are the VAS self-selected by MCO's or suggested by the state? Are some of the VAS's directed at lowing poor birth outcomes, if so, what are they?

#### General Questions:

- 2. Update on the extension of postpartum coverage this has already been implemented, but our members are not aware.
- 3. What is happening around CHW payment efforts
- 4. How can we get better data from Kancare?
- 5. Can there be a single medication list or readily available updated medication list?
- 6. Coverage/Service Questions: Postpartum Coverage Extension, cleft lip/cleft palate denials and delays, LARC