

MINUTES

Senate Committee on Public Health, Welfare, and Labor
House Committee on Public Health, Welfare, and Labor

Tuesday, June 1, 2021

1:00 P.M.

Committee Members Present: Senators Cecile Bledsoe, Chair; Breanne Davis, Scott Flippo, Vice-Chair; Ben Gilmore, Kim Hammer, Dan Sullivan, and David Wallace Representatives Jack Ladyman, Chair; Fred Allen, Mary Bentley, Bruce Coleman, Jim Dotson, Jon Eubanks, Stephen Magie, Josh Miller, John Payton, Clint Penzo, Aaron Pilkington, and Carlton Wing

Other Legislators Present: Senators Alan Clark, Trent Garner, and Mark Johnson Representatives Mark Berry, Stan Berry, Kenneth Ferguson, Vivian Flowers, Jimmy Gazaway, Steve Hollowell, Fredrick Love, Julie Mayberry, Tippi McCollough, David Ray, Johnny Rye, Matthew Shepard, and Carlton Wing

Call to order and Comments by the Chairs Representative Ladyman called the meeting to order. Senator Bledsoe noted that the Department of Human Services (DHS) would discuss the impact of ending the federal public health emergency and the implementation of the new Arkansas Integrated Eligibility System (ARIES) at the meeting in July.

Consideration to Adopt the December 14, 2020 Meeting Minutes [Exhibit C]

Without objection, the minutes were approved.

Consideration of a Motion to Authorize the Chairs to Approve Special Expenses Incurred by the House and Senate Interim Committees on Public Health, Welfare and Labor

Senator Hammer made a motion to approve special expenses.

Senator Davis seconded the motion.

Motion carried.

Report on Activities that Arkansas Department of Health (ADH) and Department of Human Services (DHS) have completed to comply with Act 311 of 2021, An Act to Create the No Patient Left Alone Act. [Exhibit E-1] [Exhibit E-2] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS presented Act 311 of 2021 which addressed the visitation rights had by patients and residents in healthcare facilities. Under the act, long-term care facilities must allow compassionate care visitation to alleviate stress unless it would interfere with the rights of other residents or if they are causing disruption within the facility. Facilities that have no recent COVID cases and whose county has a low positivity level, must allow indoor visitation for other reasons beyond just compassionate care. Federal guidelines regarding visitation are still in place and will expire at the end of the state emergency. Notice has been provided to facilities notifying them of visitation changes.

Melody Jones, Director, Office of Long-Term Care, Division of Provider Services and Quality Assurance, DHS explained the process of investigating complaints that come in along with who is able to file a complaint. If there is an outbreak within a facility, visitation will become limited

to some degree. Visitation related to compassionate care may continue, but precautions such as protective equipment may be utilized.

Sarah Schmidt, Assistant Director, Division of Provider Services and Quality Assurance, DHS stated that complaints regarding assisted living services can be made through a hotline to remain anonymous.

Renee Mallory, Deputy Director for Public Health Programs, Arkansas Department of Health (ADH) stated that any complaints deemed as immediate jeopardy is sent to the Centers for Medicare and Medicaid (CMS) to determine how to best prioritize them. It is then determined how to best enter both accredited and unaccredited facilities. This is true for complaints regarding visitation. Facilities are not being asked to send in updated policies at this time.

Arkansas Department of Human Services, Division of County Operations, Review of COVID-19 Response Manual [Exhibit F] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS discussed the loosening of requirements for receiving Medicaid, the Supplemental and Nutritional Assistance Program, and Transitional Employment Assistance by the federal government. There is an enhanced match for Medicaid, but it is required to keep Medicaid beneficiaries on the roll even if the beneficiaries become ineligible. The only way to remove a beneficiary is in the case of death, they move out of state, or they ask to be removed from the program.

Representative Ladyman stated that without objection, the item stands as reviewed.

Arkansas Department of Human Services, Division of Provider Services and Quality Assurance, Review of COVID-19 Response Manual [Exhibit G] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS stated this manual only contained two items including the suspension of prescreening for nursing homes making it easier to get residents in the facility and get them started as clients. The other is a loosening of time requirements around therapeutic communities for those who need to be in a more residential setting.

Representative Ladyman stated that without objection, the item stands as reviewed.

Arkansas Department of Human Services, Division of Medical Services, Review of COVID-19 Response Manual [Exhibit H] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS pointed out the areas within the manual having to mainly with Medicaid. The provisions requiring the submission of fingerprints were suspended for providers enrolling in the program. Swing beds were also allowed within critical access hospitals.

Representative Ladyman stated that without objection, the item stands as reviewed.

Arkansas Department of Human Services, Division of Aging, Adult, and Behavioral Health Services (DAABHS), Review of COVID-19 Response Manual [Exhibit I] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS discussed requirements that were suspended around assessment plans for those who are currently uncomfortable with people coming into their homes and the annual service plan until federal rules change allowing for individuals to be removed from the service plan. It also allows acute crisis units to keep individuals in treatment for longer periods of time.

Representative Ladyman stated that without objection, the item stands as reviewed.

Arkansas Department of Human Services, Division of Developmental Disabilities Services (DDS), Review of COVID-19 Response Manual [Exhibit J] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS explained treatments that were more clinically based allowing those receiving treatment to come to them, were transitioned into more home based treatments at the onset of the pandemic so beneficiaries could avoid more congregate settings. Welfare checks were also implemented.

Representative Ladyman stated that without objection, the item stands as reviewed.

Arkansas Department of Human Services, Division of Medical Services, Review of DHS Telemedicine COVID-19 Response Manual [Exhibit K] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS reviewed the telemedicine section of the COVID manual. Telemedicine was opened up to a number of providers for use, and these flexibilities will continue through the end of 2021. More permanent promulgation will, hopefully, allow such rules to continue after 2021.

Representative Ladyman stated that without objection, the item stands as reviewed.

Department of Human Services, Division of County Operations, Review of rule which updates the Medical Services Policy Manual sections MS D-210 and D-224 [Exhibit L] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS discussed the rule allowing for Medicaid coverage to adult members of the Marshallese population.

Representative Ladyman stated that without objection, the item stands as reviewed.

Department of Human Services, Division of Medical Services, Review of rule which deals with State Plan Amendment SPA 2021-0003 [Exhibit M] Elizabeth Pittman, Director, Division of Medical Services, DHS stated with this rule would allow for medicated assisted treatment for individuals with a history of opioid use disorder to be added to the State Plan. Physicians, in consultation with a therapist, can work to provide comprehensive treatment that would include therapy, use of medications, and lab work. Mark White, Chief of Legislative and Intergovernmental Affairs, DHS added that it is still pending approval from Centers for Medicare and Medicaid Services.

Representative Ladyman stated that without objection, the item stands as reviewed.

Department of Human Services, Division of Medical Services, Review of rule which deals with the Living Choices Assisted Living Facility Waiver Renewal [Exhibit N] Mark White, Chief of Legislative and Intergovernmental Affairs, DHS discussed the renewal of the Living Choices Assisted Living Medicaid Waiver. This allows for assisted living services to the elderly and to adults with physical disabilities. There were some organizational changes as to how the waiver is administered within DHS, but no adjustments were made to the requirements of eligibility. The appeals process was modified to continue services to individuals while the appeals process is ongoing.

Representative Ladyman stated that without objection, the item stands as reviewed.

Arkansas Department of Health, Division of Protective Health Codes, Plumbing and Natural Gas, Review of Rule regarding Arkansas Plumbing Code [Exhibit O] Laura Shue, General Counsel, ADH presented the adjustments to the rule and noted that there were no public comments.

Representative Ladyman stated that without objection, the item stands as reviewed.

Arkansas Department of Health, Division of Protective Health Codes, Plumbing and Natural Gas, Review of Rule regarding Arkansas Fuel Gas Code [Exhibit P] Laura Shue, General Counsel, ADH presented the adjustments to the rule and noted that there were no public comments.

Other Business

Representative Wardlaw made a motion to allow the Chairs to move all Interim Study Proposals to the appropriate subcommittees as they see fit.

Representative Eubanks seconded the motion.

Motion Carried.

Without further business, the meeting was adjourned at 2:37 PM.