## DELAWARE'S CHILDREN WITH MEDICAL COMPLEXITY ADVISORY COMMITTEE

July 8, 2025 9:00 AM – 11:00 AM

## **Meeting Notes**

Welcome and Roll Call	DMMA Director Andrew Wilson introduced himself as the Chair of CMCAC and thanked the CMCAC for the work that has been done thus far for children in Delaware. DMMA Chief Medical Officer Dr. Krishna Upadhya welcomed everyone to the CMCAC meeting. Attendees announced their name and affiliation via the chat box.
DMMA Updates	Overview of Federal Updates: The One Big, Beautiful Bill Act (OBBA / Budget Reconciliation)  Director Drew provided an overview of OBBA, noted key facts, financial considerations, opportunities for Delaware, and also goals. OBBA/Budget Reconciliation Bill was passed on 7/4/2025. OBBA is a new law that changes how states operate Medicaid and other safety newt programs. OBBA will impact populations such as Delaware's expansion (approximately 70,000 individuals) and undocumented (pregnant) populations. OBBA ensures that the right people enter the program under federal guidelines. Delaware will have a lot of work to do around eligibility to ensure that we are updating all areas to meet these new federal guidelines and criteria. However, it is important to note that nothing is changing at this very moment; this will be a rollout over several years.
Follow Up Items from April 2025 Meeting	<ul> <li>DMMA provided updates on CMCAC items from the last committee quarterly meeting held on 4/8/25. Updates included the following items:         <ul> <li>Respite FAQ – FAQ is complete and posted to the DMMA CMCAC website.</li> <li>Enfit Update- Coding concerns were reported. DMMA's Pharmacy Director is currently working on an alternative to address concerns.</li> <li>MAC and BAC- First BAC meeting is scheduled for 9/18. Recruitment continues and registration is still open.</li> </ul> </li> <li>Letters from MCOs to schools - DMMA Chief Medical Officer Dr. Upadhya provided an update regarding letters that are being sent out from MCO Care Coordinators to schools. A discussion was held between DMMA and MCOs this quarter to discuss this matter. MCOs informed that these letters are for data gathering purposes and MCOs report information gathered to the state. Information is gathered only for students whose parents consent, per MCOs.</li> <li>PDN Public Service Announcement – Dr. Upadhya provided an update on the PSA, citing that the PSA work is ongoing.</li> </ul>

DMMA Topics of Interest: Comparison of Medicaid Programs	DMMA Deputy Director Janneen Boyce provided a review and presentation of some of the services offered through Delaware Medicaid for Children, the eligibility criteria, the renewal process, and also informed committee members that someone receives the type of services they receive based on what they are eligible for, and this is why some people receive difference services from others. Families had several questions at the end of this review related to renewals and eligibility, all of which DMMA was able to answer during today's meeting (see public comment section of this document for details).  CCADP  DMMA Director Drew provided an update on CCADP.
Review of CMC Workgroups	Project Updates  DMMA EPSDT Program Manager Melecia Da Silva provided a summary of the following CMCAC projects completed during Quarter 2 by CMCAC workgroups:  Respite FAQs Overview of Benefits Private Duty Nursing (PDN) Initiative Transition of Care
Groups with Work that Align with CMCAC	PIC - The representative informs that PIC is hosting a Symposium on Medical Homes and Transition of Care on 9/24 at the Dover Public Library.  GACEC – The representative informed the group that the GACEC would like to collaborate with DMMA regarding how to use a grant, among other things.
Future CMCAC Meetings	The next CMCAC meeting will be held on October 14, 2025, and will be Hybrid, with both in-person and virtual options.
Public Comment	PIC Comment: Informs that parents have reported better collaboration between MCO Care Coordination and that they are experiencing less concerns overall.  CCADP-Related Public Comments  PIC Question: Will the renewal will now change to every 6 months under the OBBB instead of annually (regarding MAGI and CCADP)?  DMMA Response from Deputy Director Boyce: No, the criteria will only change for able bodied adults on Medicaid.  Committee Member Question: When renewals go out to parents, will someone explain to the parents why there are more renewals happening now?  DMMA Response from Deputy Director Boyce: We have been working on improving our notice process for CCADP. When the medical notices go out, it does explain this better.

Additional DMMA Response from CMO Dr. Upadyha – It is a federal requirement for us to review a member medically and to determine that they meet eligibility for all parts of the CCADP program each year. We are doing our best to minimize the time that we request for someone to submit information to us, but we do have to follow federal requirements.

Committee Member (GACEC) Question: CCADP is a determination outside of financial eligibility and is based upon medical condition. Is that now changed? Is there now a financial review?

DMMA Response from Deputy Director Boyce: We have always reviewed the child's income. So this is still the same.

Committee Member Question: Are there instances where children are on CCADP and SSI based on a separate entity? Like in some instances if the parent is disabled or retired?

Committee Member Response: Typically that would not be SSI, that would be something like a retirement benefit from the parent.

PIC Comment: Thank You for this clarity. Also on the form of eligibility for CCADP it would be nice to state for the child's income. Not the adult or parent's income

DMMA Response from CMO Dr. Upadyha: informs that this is a great recommendation as DMMA is currently working on streamlining forms and making them better.

DMMA Comment from Social Service Senior Administrator Terri Stoneburner – You can bring all of the above topics for discussion to the Medicaid Beneficiary Advisory Council if you join this Council.

DSCYF Comment: DSCYF representative informs that the division which this individual represents, the Division of Prevention and Behavioral Health, helps families who have children with significant behavioral health needs to access pediatric respite.

DAHCC Comment - DAHCC representative informs that it is sometimes hard to get the nurses in the schools. The school requires one background check and the school district requires another one.

Students are in need of getting into class with the support they need. Right now there is a communications issue, hopefully before September the issue will be resolved and kids won't have to miss school for this reason.

## **Additional Public Comments**

Committee Member Comment (GACEC)—It is important that front line staff who interact directly with families, such as receptionists and secretaries are more kind when interacting with families. Unkind comments should not be made (to and about families). Please speak to all agencies.

DMMA Response from Deputy Director Boyce: Please reach out to us to tell us about your experiences so that we can direct our conversations to the right individuals so that we can re-train our staff based on what the concerns are.

Committee Member Comment (GACEC): Families are afraid that they will be placed to the back of the line and won't get a Nurse if they complain. Committee member informs that she has experienced this before.

DMMA response from Director Drew: Even though we are not providing the front line services, if you let us know, we can help with the issue if you make us aware of what is going on.

DAHCC Comment: If you provide me with the information, I can communicate directly with providers through the provider association.

Committee Member: Medical beds for kids with autism are needed. Neighboring state of Pennsylvania is providing services that children are in need of. Why is this not happening in Delaware. If you are in the grey zone this is a hard zone to be in where you may be viewed as not medical enough to get what they need. Parents are tired and deal with a lot.

Provider Agency Comment- I can't speak for anyone but myself, but I hope if anyone ever has a nurse that's not meeting their expectations from us, I would want to hear about it so I could address it, kindly, sensitively, tactfully, and effectively. We all have opportunities for growth.

Provider Agency Comment- This committee Member informs that this committee member is the Nurse Clinical Manager overseeing home health aids who work in schools and further notes experience on both sides (as a school Nurse and as a school Nurse Supervisor).

MCO Comment: As a teacher to medically complex children, the private duty nurses were absolutely essential for both the student's health and well-being.

Committee Member (parent) comment: Families need beds and are being denied

Provider Agency Comment: We need to know about these concerns so we can address it with the nurse. Provider agency provided parent and all committee members with two contacts during the meeting.

PIC Question – Is there a safe space for families to discuss offensive comments made by service providers?

Provider Agency Response – You can bring the concern to the Director (of that specific agency).

PIC Question - Is there another solution that won't impact services to families?

Mercer (on behalf of DMMA) – If a concern or grievance is filed in a Medicaid system, you have an option to inform the person you are reporting to that you want your concern to be anonymous.

GACEC Representative Comment: Recommended a private duty nursing support group