

**MINUTES
MEDICAL SERVICES FUND ADVISORY COUNCIL
(MSFAC)
TC Energy Conference Room
December 12, 2025**

Members and Alternates Present or Online

Cynthia Beane, Commissioner, BMS
Sherri Ferrell, WV Primary Care Association, CEO, MSFAC Chair
Sarah Young, Deputy Commissioner of Policy and Operations, BMS (alternate)
Debra Boyd, WV Primary Care Association (alternate)
Lisa Costello, MD, MPH, West Virginia State Medical Association
Melanie Dempsey, WV Hospital Association (online)
Ben Beakes, Managed Care Organization Advocate
Kimberly Becher, MD, WV Academy of Family Physicians (online)
Brad Story, WV Behavioral Health Provider Association Representative
Sabrina Pendergrass, Beneficiary Advisory Council
Hallie Mason, Dental Association (online)AD
Scott Eder, DDS (alternate)
Scott Brown, WV Pharmacy Association
Matthew Davis, WV Academy of Family Physicians (alternate/online)
Matt Walker, WV Academy of Family Physicians (alternate)
Marty Wright, WV Healthcare Association (online)
Rhonda Rogombe, Local Advocacy Consumer Group

Bureau for Medical Services Employees (BMS) Present

Margaret Brown
Riley J. Romeo
Jennifer Myers
Regina McCormick (online)
Mandy Carpenter
Joseph Bush
Joy Burns (online)

Interested Parties Present or Online:

Phil Shimer, Duffy Street Strategies
William Wright (online)
Benita Whitman, Legal Aid (online)
Jason Landers, Highmark Health Options (online)
Jeff Wiseman, The Health Plan (online)

Welcome, Opening Remarks, and Commissioner's Update:

- Council Chair, Sherri Ferrell, welcomed meeting participants and presented the September 19, 2025, Meeting Minutes, Minutes were approved.
- Commissioner Beane announced her retirement from the Bureau for Medical Services, with an official day of January 5, 2026. Beane further stated that the Governor's Office is currently interviewing candidates for the successor, and an announcement will be expected soon.
- Commissioner Beane expressed confidence in the direction of the West Virginia Medicaid program, stating that West Virginia Medicaid is recognized nationally as a program that other state programs consult with for the best practices.
- Upcoming Legislation: The Bureau for Medical Services (BMS) is preparing three bills for the upcoming legislative session, the H.R. 1 Bill, known as the "One Big Beautiful Bill Act" is viewed as the most significant legislation for the Medicaid program since the Affordable Care Act.

- The BMS is preparing for significant changes regarding work and community engagement requirements. Communications regarding these requirements must begin by September to ensure members understand the process for maintaining coverage.
- The BMS intends to support the three legislative bills:
 - I. A revision to the managed care organization (MCO) tax to ensure federal compliance.
 - II. Legislation to formalize the advisory council's structure within the state statute.
 - III. A subrogation bill that had previously passed but was subsequently vetoed.
- Commissioner Beane addressed questions from council members and interested parties.

Policy and Operations Update:

- Deputy Commissioner of Policy and Operations, Sarah Young, provided the following updates:
- As of December 1, 2025, Medicaid enrollment continues a downward trend, returning to pre-pandemic patterns. The current enrollment is 493,000.
- The agency is working on public-facing dashboards to improve transparency and accessibility of program information.
- Regarding citizenship and immigration file that are sent from the Centers for Medicare and Medicaid Services (CMS), since August 2025, approximately 10,000 unduplicated individuals, of those, 4,000 were in foster care and removed from the file; 3,000 already had their status verified. The BMS is working on documentation and correcting data issues as well as improving filtering files.
- Planning for eligibility compliance is focused on qualifying activities, which include 80 hours of employment per month, community service through 501(c)(3) organizations, or half-time enrollment in an education program. Communication must start September 2026 as this goes into effect January 1, 2027.
- Deputy Commissioner Young presented the Community Engagement Qualifying Activities and Regulation and Mandatory and Optional Exemptions List. Deputy Commissioner Young addressed questions and concerns from the MSFAC members and interested parties.
- Estimates based on current expansion population data suggest that out of approximately 157,000 individuals, roughly 67,000 will need to demonstrate compliance or provide exemption information.
- The BMS is working with CMS to define "medically frail" status for this purpose.
- Updates to school-based services are planned, with an expansion of eligibility and provider categories. A formal vote is anticipated for the March advisory council meeting.

State Plan Amendment (SPA) Update:

- No State Plan Amendments were presented. Commissioner Beane stated that the SPA involving school-based services, was not appropriate to present at today's meeting and hold a discussion or vote because it involves a partnership with the Department of Education. Commissioner Beane stated it would be appropriate for them to be in attendance to discuss the SPA.
- General Counsel Riley Romeo discussed the working school-based services SPA that would expand the population and category of providers. The SPA is set to be presented and voted on at the next MSFAC meeting in March 2027. The SPA number is anticipated to be 26-0001.

Plan Management, Integrity and Pharmacy Update:

- Deputy Commissioner Gary Knight presented the following updates:
 - Medical Loss Ratio (MLR) reviews for 2023 are underway, with 2024 reviews scheduled to begin in January.
 - Managed care initiatives include exploring "food as medicine" programs and developing more predictable models to manage high-cost gene therapies.
 - The agency is expanding its recovery audit contracts to conduct clinical reviews and is focusing on increasing prepayment reviews to improve efficiency.
 - The agency is utilizing a grant-funded vendor to manage high-cost drugs, including gene therapies.

- Recovery audit contract services are expanding to include clinical reviews.
- Payment Error Rate Measurement (PERM) reviews remain largely complete showing positive progress.
- Deputy Commissioner Knight addressed questions from the MSFAC.

Finance Update:

- Interim Deputy Commissioner of Finance Mandy Carpenter presented the Finance Report with the following:
 - Expenditure analysis indicates that while spending appears to have spiked in the first quarter, this is primarily due to front-loaded payments for the Directed Payment Program (DPP) rather than an overall budget increase.
 - The agency maintains a strong financial record, with actual spending remaining within approximately 3% of the budgeted amount.
 - The Federal Medical Assistance Percentage (FMAP) for 2027 is projected to be 74.243%.
 - Carpenter addressed questions and comments from the MSFAC.

Public Comment:

- The council members concluded the meeting by thanking the Commissioner for her leadership, engagement with provider groups, and contributions to the program.
- There were no public comments. The meeting was adjourned.

Minutes submitted by:
Margaret Y. Brown
Bureau for Medical Services