

Section 1115 Medicaid Expansion/HELP Demonstration Waiver Legislative Summary (October 1, 2020)

Waiver Summary:

The 2015 Montana Legislature enacted Senate Bill (SB) 405, the Montana Health and Economic Livelihood Partnership (HELP) Act, that among other features, provides for the expansion of health care services through the Medicaid HELP Program to new adults ages 19-64 years old and below 138 percent of the federal poverty level (FPL). HELP Program coverage was effective January 1, 2016 and the State implemented its expansion through a Section 1115 demonstration waiver from the Centers for Medicare and Medicaid Services (CMS).

The Section 1115 waiver authorized:

- 12 months of continuous eligibility for all new adults;
- Premiums for new adults participating in the Third Party Administrator (TPA) equal to 2% of their household income; and
- Maximum copayments allowable under federal law, with total cost sharing not to exceed 5% of a beneficiary's household income.

After the implementation of Senate Bill (SB) 261 in August 2017, DPHHS had four months to implement contract closure with BCBSMT by December 31, 2017 and transition HELP Program administration to the Department by January 1, 2018. This required Waiver changes:

- Update the 1115 Waiver to remove references the TPA;
- Update the 1115 Waiver to remove the 2% premium credit;
- End the 1915b Waiver that allowed the Department to use a TPA for administration of the HELP Plan.

• 2019 Updates

 House Bill (HB) 658, the Medicaid Reform and Integrity Act, was passed as part of the 2019 Legislative Session. HB 658 continues the state's Medicaid expansion and directs DPHHS to request federal Demonstration approval to implement new Medicaid expansion program features. DPHHS is seeking to amend and extend its current 1115 Waiver to:



- Condition Medicaid coverage on compliance with work/community engagement requirements; and
- Apply a premium structure that gradually increases enrollee premiums based on coverage duration.
- A draft of the federal evaluation of the Montana 1115 Waiver was released in July of 2019. DPHHS intends to continue participation in the federal evaluation through federal fiscal year 2019. DPHHS intends to contract with an independent third party to evaluate the updated Demonstration.

• 2020 Updates

- For all claims paid on or after January 1, 2020, there is no longer a copayment charge.
- Effective April 1, 2020, for the duration of the COVID-19 state of emergency, a temporary moratorium on non-voluntary disenrollments was implemented.
- As of October 1, 2020, the application to amend and extend its current 1115 Waiver (submitted August 30, 2019) is under CMS consideration.

• Key Milestones and Accomplishments

- Preventive Care
 - The expansion of Medicaid in Montana has been an opportunity to dramatically improve the health of the state by incentivizing primary and preventive care. To promote use of high value health services, the state did not apply copayments for preventive health care services. As of December 31, 2019, the ten most commonly used preventive services, excluding pharmaceuticals, in 2019 are below:

Preventive Service - 2019	Unduplicated Number of Clients - 2019
Dental Preventive	31,202
Cholesterol Screening	17,056
Preventive/Wellness Exams	14,048
Vaccines	13,323
Diabetes Screening	13,227
Chlamydia Screening	11,735
Gonorrhea Screening	11,650
Colorectal Cancer Screening	9,658
Cervical Cancer Screening	8,914
Depression	7,755



• Participant Enrollment

 Medicaid expansion enrollment has declined to 84,845 as of December 31, 2019 (down by 10,122 since the December, 2018 count) and the August 31, 2020 enrollment was 86,533.

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