This document, together with the supporting documentation outlined below, constitutes Montana's application to the Centers for Medicare & Medicaid Services (CMS) to extend the Montana Plan First (Project No. 11-W-00276/8) for a period of nearly 5 years pursuant to section 1115(a) of the Social Security Act.

Type of Request (*select one only*):

___X___Section 1115(a) extension <u>with no</u> program changes

This constitutes the state's application to the Centers for Medicare & Medicaid Services (CMS) to extend its demonstration without any programmatic changes. The state is requesting to extend approval of the demonstration subject to the same Special Terms and Conditions (STCs), expenditure authorities, and associated "not applicable" Medicaid provisions that are currently in effect for the period January 1, 2015 through December 31, 2017, and by temporary extension, through May 31, 2018. There are no waivers approved under this demonstration or needed to continue operation of the program over the requested near five-year period. Please see Attachment 1.

The state is submitting the following items that are necessary to ensure that the demonstration is operating in accordance with the objectives of title XIX and/or title XXI as originally approved. The state's application will only be considered complete for purposes of initiating federal review and federal-level public notice when the state provides the information as requested in the below appendices.

- **Appendix A:** A historical narrative summary of the demonstration project, which includes the objectives set forth at the time the demonstration was approved, evidence of how these objectives have or have not been met, and the future goals of the program.
  Please see Appendix A

- **Appendix B:** Budget/allotment neutrality assessment, and projections for the projected extension period. The state will present an analysis of budget/allotment neutrality for the current demonstration approval period, including status of budget/allotment neutrality to date based on the most recent expenditure and member month data, and projections through the end of the current approval that incorporate the latest data. CMS will also review the state's Medicaid and State Children's Health Insurance Program Budget and Expenditure System (MBES/CBES) expenditure reports to ensure that the demonstration has not exceeded the federal expenditure limits established for the demonstration. The state's actual expenditures incurred over the period from initial approval through the current expiration date, together with the projected costs for the requested extension period, must comply with CMS budget/allotment neutrality requirements outlined in the STCs.
  Please see Appendix B, content in separate attachment document: 2018MTpfExtensionAP-BN508.pdf

- **Appendix C:** Interim evaluation of the overall impact of the demonstration that includes evaluation activities and findings to date, in addition to plans for evaluation activities over the requested extension period. The interim evaluation should provide CMS with a clear analysis of the state's achievement in obtaining the outcomes expected as a direct effect of the demonstration program. The state's interim evaluation must meet all of the requirements outlined in the STCs.
  Please see Appendix C

- **Appendix D:** Summaries of External Quality Review Organization (EQRO) reports, managed care organization and state quality assurance monitoring, and any other documentation of the quality of and access to care provided under the demonstration. *Please see Appendix D*

- **Appendix E:** Documentation of the state's compliance with the public notice process set forth in 42 CFR 431.408 and 431.420.
  Please see Appendix E and Appendix E-2

- **Attachment 1**: CMS-approved STCs in effect through December 31, 2017, and temporarily extended through May 31, 2018.

  The state attests that it has abided by all provisions of the approved STCs and will continuously operate the demonstration in accordance with the requirements outlined in the STCs.
  Please see Attachment 1, content in separate attachment document: 2018MTpfExtensionAP-STCs508.pdf

Signature:_____ **Date:**_____
[Governor]

CMS will notify the state no later than 15 days of submitting its application of whether we determine the state's application meets the requirements for a streamlined federal review. The state will have an opportunity to modify its application submission if CMS determines it does not meet these requirements. If CMS reviews the state's submission and determines that any proposed changes significantly alter the original objectives and goals of the existing demonstration as approved, CMS has the discretion to process this application full scope pursuant to regular statutory timeframes for an extension or as an application for a new demonstration.

Appendix A

Historical Narrative Summary

Montana Plan First
Section 1115 Family Planning Demonstration Waiver

History

Montana's Plan First section 1115 Medicaid demonstration was initially approved May 30, 2012 through December 31, 2014 and later approved for extension for the period of January 1, 2015 through December 31, 2017. CMS then granted a temporary extension through May 31, 2018. The current demonstration provides family planning services to enrolled women statewide who are:

- Montana residents;
- Ages 19 – 44 with income up to and including 211% of the federal poverty level; and
- Able to bear children and not presently pregnant.

Plan First offers family planning services for eligible women. Some of the services covered include office visits, contraceptive supplies, laboratory services, and testing and treatment of STDs. A large portion of Plan First members are enrolled through Title X family planning clinics. These clinics are commonly staffed with mid-level providers. A recent look at provider types utilized by Plan First members included:

- Mid-Levels;
- Pharmacy;
- Laboratory; and
- Physicians.

The waiver is capped at 4,000 members and currently includes approximately 1,600 women. Montana implemented Medicaid expansion in 2016. Some existing and potential Plan First members then qualified for this more comprehensive coverage.

The goals of the demonstration, set at approval were:

***Goal* 1:** The demonstration will result in an increase in the number of female Medicaid members ages 19 through 44 receiving family planning services paid by Medicaid.

Goal 2: The demonstration will result in a decrease in the annual number of births paid by Medicaid for women ages 19 through 44.

Goal 3: The demonstration will reduce annual Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care.

Goal 4: The demonstration will improve birth outcomes and the health of women by increasing the child spacing interval among women in the target population.

The Montana Plan First website went live in early June 2012. The website contains general information on Plan First including eligibility criteria, documents, resources, contact information, the Plan First brochure, and an easy-to-use online application.

Medicaid providers including physicians, pharmacies, mid-level practitioners, family planning clinics, public health clinics, Indian Health Services, federally qualified health centers and rural health clinics were all introduced to Plan First through the Montana Department of Health and Human Services website. In addition, an article about Plan First was published in the Claim Jumper, an on-line provider newsletter published by Montana Health Care Programs' fiscal agent and available electronically to all Medicaid providers.

The Plan First announcement to the media, public, and providers was completed during the month of June 2012.

On January 1, 2014, Montana adopted the modified adjusted gross income (MAGI) family and income counting eligibility methodology required by the Affordable Care Act (ACA). This change increased Plan First's federal poverty level (FPL) percentage from 200% to 211%, requiring a new state administrative rule and eligibility application. The administrative redetermination process, which automatically enrolls members who do not report any household or income changes, was suspended for 2014.

CMS extended the original waiver to December 31, 2014. Waiver renewal activities began in early 2014 to prepare for a new three-year waiver cycle beginning January 1, 2015. Tribal notification was sent April 2, 2014. Public meetings were held in Billings and Helena on April 9, 2014, and April 14, 2014 respectively. Public notice was published in Billings and Missoula newspapers on April 1, 2014, and April 6, 2014 respectively. The waiver renewal application was submitted on June 30, 2014.

Montana received the preliminary waiver renewal STCs on December 30, 2014, and formally accepted the waiver renewal on January 22, 2015.

The draft evaluation report was submitted June 2, 2015.

A post award public notice meeting for the waiver was held December 1, 2015. Montana Medicaid expansion began January 1, 2016.

Public hearing meetings for the waiver renewal were held October 4, 2016, in Helena, Montana, and October 5, 2016, in Billings, Montana. Plan First was discussed at the Montana Health Coalition meeting held in Helena, Montana on November 28, 2016 and again at the Montana Health Coalition meeting held in Helena, Montana on November 29, 2017. Find more details about these public input meetings in Appendix E of this document.

Montana submitted a Plan First waiver renewal application December 31, 2016. A revised and abbreviated extension/renewal application submitted December 15, 2017, with progress updates on the goals of this demonstration, was withdrawn shortly thereafter. The progress updates relevant to the December 15, 2017 application submission remain the same and are what follows. This extension/renewal application is now resubmitted, May 11, 2018, with mostly minor textural updates, but significantly, a revision and repetition of the Public Notice Process (see Appendix E and Appendix E-2).

Evaluation of the demonstration goals has been ongoing.

***Goal 1*:** The demonstration will result in an increase in the number of female Medicaid members, ages 19 through 44, receiving family planning services paid by Medicaid.

Measure: The number of women ages 19 through 44 who receive Medicaid family planning services each waiver year.

Data required: The number of women ages 19 through 44 who receive Medicaid family planning services as identified by a code unique to Plan First members.

***Progress Update as of late June 2014*:** During DY1 - 92 women were enrolled in Plan First. After DY2 - 2,290 women were enrolled in the program, and the number increased to 5,760 in DY3. This is an increase in the number of women eligible to receive family planning services paid by Montana Medicaid.

***Progress Update as of the end of 2015*:** A total of 4,595 Plan First members have received a Medicaid family planning service since the beginning of the demonstration.

Progress Update as of the end of 2016: Utilization of family planning services increased from 16% in DY1 to 21% in SFY2016. Montana expanded Medicaid effective January 1, 2016, which explains the significant increase in Female Medicaid Members in CY2016. Even with the addition of expanded Medicaid, which offers many low-income women a more comprehensive benefit, over 500 low-income women who did not qualify for expanded Medicaid received family planning services through Plan First in 2016.

Goal 2: The demonstration will result in a decrease in the percentage of births paid by Medicaid for women ages 19 through 44.

Measure: The percentage of births to women ages 19 through 44 paid by Medicaid.

Data required: The total number of births. The number of births to Medicaid members ages 19 through 44. The total number of female Medicaid members ages 19 through 44.

Progress Update as of late June 2014: Data detailing the number of Montana births is not available by age, so the number of Montana births has been compared to the number of Medicaid paid births. A Medicaid Births Report, 2010-2013 was published in November of 2015. The report explained that the Medicaid birth rate increased from 2012 to 2013, 43.6% and 45.8% respectively for a 2.4% increase. The increase in birth rate corresponds to an even larger increase in Medicaid enrollment from the beginning of 2012 to the end of 2013, of 5.7%.

Progress Update as of the end of 2015: Unchanged from prior report.

Progress Update as of the end of 2016: Births paid by Medicaid seem to be levelling off while Medicaid members have significantly increased. Also, Montana began a long acting reversible contraceptive (LARC) initiative in January 2016. The consequences of this initiative will also be monitored. We are awaiting the results of a new report, similar to the one published in November of 2015, in order to better evaluate this goal.

Goal 3: The demonstration will reduce annual Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care.

Measure: Estimated Medicaid savings from births averted by the family planning waiver less the cost of family planning services paid under the waiver, and the percent decrease in Medicaid births.

Data required: The difference in cost and the percent difference between the expected number of Medicaid births and the actual number of Medicaid births for Medicaid members ages 19 through 44 each waiver year. The estimated cost of each birth including prenatal care, delivery, and newborn and infant care costs. The cost of providing family planning services to the waiver population.

Progress Update as of late June 2014: The number of Medicaid births has not yet decreased, so there is not a reduction in Medicaid birth-related expenditures.

Progress Update as of the end of 2015: Unchanged from prior report.

Progress Update as of the end of 2016: The information available at the time of this report does not include newborn care. It will be included on a future report. Even though all claims for SFY2016 services have not yet been paid, it appears that the costs for Medicaid births for SFY2016 have not significantly increased from SFY2015, even with the significant increase in female Medicaid members attributable to Medicaid expansion.

Goal 4: The demonstration will improve birth outcomes and the health of women by increasing the child spacing interval among women in the target population.

Measure: The proportion of women ages 19 through 44 with a Medicaid paid birth in a waiver year with a subsequent Medicaid paid birth within 18 months.

Data required: The number of Medicaid paid births to Medicaid members ages 19 through 44 each waiver year and the number of subsequent Medicaid paid births for those women within 18 months.

Progress Update as of late June 2014: The data has just become available for women with Medicaid paid births in DY2. Of the 4,499 women who had Medicaid paid births from July 1, 2012, through June 30, 2013, 362, or 8%, had a subsequent Medicaid paid birth within 18 months. We will continue to monitor this figure as the demonstration continues.

Progress Update as of the end of 2015: Unchanged from prior report.

Progress Update as of the end of 2016: It is still too early in the demonstration to identify any trends in decreasing subsequent births. Recent data shows a slight increase in child spacing (.54%) from State Fiscal Year (SFY) 2014 to SFY 2015 as Medicaid enrollment has increased. Montana will continue to monitor this as well as the influence of the LARC initiative.

The goals of the Montana Plan First demonstration project remain the same for our extension request period of June 1, 2018 through December 31, 2022.

Appendix B

Budget Neutrality Assessment and Projections

Montana Plan First
Section 1115 Family Planning Demonstration Waiver

Please see content in separate document: 2018MTpfExtensionAP-BN508.pdf

Appendix C

Montana Plan First
Section 1115 Family Planning Demonstration Waiver

Baseline and Interim Data

Data is reported for State Fiscal Year (SFY) 2012 which coincides with demonstration year (DY) 1, SFY2013 which coincides with DY2, and SFY2014 which coincides with DY3. Beginning 2015, the demonstration year changed from Montana's State Fiscal Year (SFY) (July 1-June 30), to a calendar year. This means that SFY 2015 consists of the last two quarters of DY4 and the first two quarters of CY2015. SFY 2016 consists of the last two quarters of CY2015 and the first two quarters of CY2016. For consistency, the data is reported below by State Fiscal Year (July 1-June 30) for each of the five years reported on below. DY1 only consists of June 2012, the first month of the demonstration. This year is being used as a baseline.

Hypothesis 1: The demonstration will result in an increase in the number of female Medicaid members ages 19 through 44 receiving family planning services paid by Medicaid.

- The Medicaid Management Information System (MMIS) was queried to determine if a female Montana Medicaid member, aged 19 through 44, received a service with one of the following characteristics: a family planning indicator diagnosis, a diagnosis for contraceptive management, a contraceptive prescription, or a service designated as family planning related for a Plan First member. The results are compared with the female Montana Medicaid enrollment for the demonstration years described above.
- Similarly, the MMIS was queried to determine the number of Plan First Members who obtained one or more covered family planning services through the Demonstration. These Plan First Members (group C.) would be a sub-set of group B., which is a subset of group A.

N/A	**DY1 (SFY2012)**	**DY2 (SFY2013)**	**DY3 (SFY2014)**	**DY4 &CY2015 (SFY2015)**	**CY2015& CY2016 (SFY2016)**
(Group A.) Female Medicaid Members aged 19-44 years	22,616	24,581	28,339	32,085	47,139
(Group B.) Female Medicaid Members aged 19-44 years receiving Family Planning Services	3,747	6,563	9,713	8,060	10,021
(Group C.) ***Female Plan First Members aged 19-44 years receiving Family Planning Services***	***36***	***1,795***	***1,734***	***1,884***	***510***

Utilization of family planning services increased from 16% in DY1 to 21% in SFY2016. Montana expanded Medicaid effective January 1, 2016, which explains the significant increase in Female Medicaid Members in CY2016, and the decrease of Plan First Members receiving family planning services as many prior members now qualify for more comprehensive coverage. However, the data shows that, even after Medicaid expansion, there has been and remains an isolated block of low-income Montana women age 19-44 years who access family planning services through the Montana Plan First 1115 Waiver and

thus, contribute to the overall increase in the number of female Medicaid members ages 19 through 44 receiving family planning services paid by Medicaid.

Hypothesis 2: The demonstration will result in a decrease in births paid by Medicaid for women aged 19 through 44.

- The Medicaid Management Information System (MMIS) was queried to determine the number of Female Medicaid Members aged 19-44 years in each of the completed State fiscal years and the number of births paid by Medicaid in the corresponding State fiscal years.
- The number of births to Female Medicaid Members in that age range compared to all Female Medicaid Members in that same age range gives us an approximate ratio of births to potential child-bearer per demonstration year.

N/A	**DY1** **(SFY2012)**	**DY2** **(SFY2013)**	**DY3** **(SFY2014)**	**DY4 & CY2015** **(SFY2015)**	**CY2015 & CY2016** **(SFY2016)**
Female Medicaid Members aged 19-44 years	22,616	24,581	28,339	32,085	47,139
Births paid by Medicaid	4,341	4,405	4,922	5,167	5,284
Approximate Ratio of Births paid by Medicaid to Female Medicaid Members aged 19-44 years	1: 5.2	1: 5.9	1: 5.6	1: 6.2	1: 8.9

Births paid by Medicaid seem to be levelling off while Medicaid members have significantly increased. Also, Montana began Medicaid expansion and a long acting reversible contraceptive (LARC) initiative in January 2016. The consequences of this initiative will also be monitored. Until we have more years of data, following Medicaid expansion and the LARC initiative, it will be difficult to isolate the impact of Plan First on the rate of Medicaid births independent of these concurring events.

Hypothesis 3: The demonstration will reduce annual Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care.

- The method used to determine the annual Federal and State Medicaid cost reduction for prenatal, delivery, and newborn/infant care is thus: Estimated Medicaid savings from births averted by the family planning waiver less the cost of family planning services paid under the waiver, and the percent decrease in Medicaid births.

N/A	**DY1**	**DY2**	**DY3**
Female Medicaid Members aged 19-44 years	22,616	24,581	28,339
Total Medicaid expenditures for births and newborn care.	$30,185,053	$36,158,716	$38,090,779
Approximate Medicaid expenditures for births and newborn care, per Female Medicaid Member aged 19- 44 years	$1,334	$1,471	$1,344

N/A	**DY4 & CY2015 (SFY2015)**	**CY2015 & CY2016 (SFY2016)**
Female Medicaid Members aged 19-44 years	32,085	47,139
Total Medicaid expenditures for pregnancy and birth.	$18,534,026*	$19,206,446*
Approximate Medicaid expenditures for pregnancy and birth, per Female Medicaid Member aged 19-44 years	$ 577*	$ 407*

*These figures do not include newborn care. That information was not available at the time of this report. It will be included on a future report.

Even though all claims for SFY2016 services have not yet been paid, it appears that the costs for Medicaid births for SFY2016 has not significantly increased from SFY2015. After an initial per Female Medicaid Member cost increase (for prenatal, delivery and newborn/infant care) in DY2, it appears that this cost has indeed decreased per potential child-bearer since that year. The analysis of CY 2015 and CY 2016, when the information is available, will determine if the downward cost trend continues.

Hypothesis 4: The demonstration will improve birth outcomes and the health of women by increasing the child spacing interval among women in the target population. The measure is the number of women ages 19 through 44 with a Medicaid paid birth in a waiver year with a subsequent Medicaid paid birth within 18 months.

- The Medicaid Management Information System (MMIS) was queried to determine the number of women ages 19 – 44 with a Medicaid paid birth in a waiver year that have a subsequent Medicaid paid birth within 18 months.

N/A	**SFY 2010**	**SFY 2011**	**SFY 2012 (DY1)**	**SFY 2013 (DY2)**	**SFY 2014 (DY3)**
Female Medicaid Members aged 19-44 years	23,004	23,538	22,616	24,581	28,339
Number of women with a Medicaid paid birth that had a subsequent Medicaid paid birth within 18 months of the previous birth.	307	303	318	362	367
Approximate Ratio of women with a Medicaid paid birth within 18 months of the previous Medicaid paid birth – to number of Female Medicaid Members aged 19-44 years.	1: 77	1: 78	1: 75	1: 82	1: 94

It is still early in the demonstration to see a decrease in subsequent births, but, with the exception of SFY 2012, it appears that there has been a slight improvement in the child spacing interval from SFY 2010 through SFY 2014 with the largest improvement from SFY 2013 to SFY 2014. Monitoring will continue. Montana will monitor the influence of the LARC initiative and Medicaid expansion (both implemented in 2016) on this measure as well.

Montana does not use point-of-service eligibility.

Evaluation Design

The Montana Department of Public Health and Human Services (DPHHS), Health Resources Division (HRD), Member Health Management Bureau (MHMB) will manage the evaluation of the Montana Plan First Family Planning Demonstration. At the end of each waiver year, the MHMB will complete the evaluation and deliver a report within 90 days of waiver year end. The evaluation will include the rate in expenditure growth for family planning services on a per capita basis, using total expenditures recorded during the second year of the demonstration as a baseline. (The first year of the Montana Demonstration has only one month of data). MHMB will also compare the annual rate of growth of actual expenditures with the baseline amount trended forward using the Medical Consumer Price Index (MCPI).

Performance Measures/Data Sources: Specific performance measures and the rationale for selection, including statistical reliability and validity include:

1. The percent increase in the number of women ages 19 through 44 receiving family planning services paid by Medicaid. Rationale for selection: High statistical reliability and validity because claims data for actual services received will be used (not sample data).

2. The percent decrease in the annual number of births paid by Medicaid for women ages 19 through 44. Rationale for selection: High statistical reliability and validity because actual claims data for births paid by Medicaid will be used to compare to previous years' data (not sample data).

3. The percent decrease in the amount of Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care. Rationale for selection: High statistical reliability and validity because claims data for actual services will be used to compare previous years' data (not sample data).

4. The percent decrease in the number of subsequent births to Medicaid members ages 19 through 44 who gave birth in the past 18 months. Rationale for selection: High statistical reliability and validity because claims data for actual services will be used to compare to previous years' data (not sample data).

Measurement methodology and specifications, including eligible/target populations and time period of study for the specific measure:
Number of Montana women ages 19 through 44 with incomes at or below 211 percent FPL with access to family planning services over the life of the waiver

Data sources, method for data collection, rationale for the approach, and sampling methodology:
Data source—MMIS; method for data collection—Medicaid decision support system; rationale for approach—identification of service codes received by women ages 19 through 44 for family planning services, prenatal care, delivery, and newborn and infant care costs for the infant's first year, over the life of the waiver.

Appendix D

Summary of State Quality Assurance Monitoring

Montana Plan First
Section 1115 Family Planning Demonstration Waiver

The Montana Department of Public Health and Human Services' Quality Assurance Division houses a Bureau tasked with ensuring quality services across the spectrum of Montana Office of Public Assistance. Three units within this Bureau monitor Medicaid programs:

1) The Program Integrity Unit investigates allegations of intentional fraud and performs federally mandated quality control reviews of Medicaid programs.
    - No allegations of intentional fraud were identified as applicable to the Montana Plan First Section 1115 Family Planning Demonstration Waiver since its introduction.
2) The Quality Control Unit conducts federally mandated random reviews of Medicaid recipient eligibility to ensure accuracy.
    - Since Waiver introduction, there's been no eligibility inaccuracies as relating to the Montana Plan First Section 1115 Family Planning Demonstration Waiver recipients.
3) The Surveillance and Utilization Review Unit is responsible for protecting the integrity of the Montana Medicaid Program from fraud, waste and abuse.
    - There have been no identified surveillance and Utilization Review findings related to the Montana Plan First Section 1115 Family Planning Demonstration Waiver since its introduction.

Also, the Payment Error Rate Measurement (PERM) program monitors for improper payments in Medicaid programs on a three-year cycle. The 2014 PERM cycle was completed with no findings of impropriety identified as relating to the Montana Plan First Demonstration. The 2017 PERM cycle is currently in progress.

Appendix E

Compliance with the Public Notice Process

Montana Plan First
Section 1115 Family Planning Demonstration Waiver

The draft December 2016 Medicaid 1115 Plan First Family Planning Waiver Renewal application was posted on the department website on September 1, 2016.

The waiver status and renewal was presented to the Children, Families, Health and Human Services Interim Legislative Committee on August 26, 2016.

Letters were sent to all Montana Tribal entities and the Montana Health Coalition members on August 31, 2016. This letter announced the waiver renewal and the public notice meetings and WebEx's scheduled for October 4, 2016 and October 5, 2016. Montana did not receive any responses from the letters.

The Montana Health Coalition members were contacted by email and the Montana Title X Family Planning clinics were also notified of the upcoming waiver public notice meetings via email. The public notice meetings were also posted on the Department calendar.

A newspaper notice announcing the public notice meetings was published in the three largest Montana newspapers on September 4, 2016. The newspaper directed the reader to the Plan First website to get login information for the WebEx. The public notice meetings were conducted on October 4, 2016 and October 5, 2016. There was no attendance outside of Department staff at either public meeting. Several Title X family planning clinics called to find out what information was being provided at the public notice meeting, but were unable to attend. Per CFR, Montana allowed 30 days for public comment through several venues listed in the public notice. No negative comments were received about the waiver.
Montana received one positive email comment regarding the waiver. No response to the tribal letters was received. Given the minimal comment from the public comment period, Montana made no adjustments to the waiver application as a result of the public meetings.

Additionally, Montana used these two public meetings to gather public input on the current status for CY 2016 in order to meet public forum requirements as outlined in 42 CFR 431.420(c).

Documentation of Montana's full public notice process followed for the December 2016 Medicaid 1115 Plan First Family Planning Waiver Renewal application, including public feedback received through this process, is included on the following pages and posted to the Plan First website as indicated below:

- Plan First Waiver Renewal Schedule 8-2016

- Plan First Public Forum at the Children, Families, Health, and Human Services Interim Committee
  - Meeting Minutes 08-26-16
  - Meeting Talking Points 08-26-16
  - Meeting Comments 08-26-16

- 8-31-16 Tribal Letter
- 8-31-16 Montana Health Coalition memo
- CMS Website for Section 1115 Waivers and Public Notice (posted only)

- Plan First Renewal Helena Meeting for December 2016 Three-Year Request
  - Meeting Minutes 10-4-16
  - Meeting Handouts 10-4-16
  - Agenda 10-4-16

- Plan First Renewal Billings Meeting
  - Meeting Minutes 10-5-16
  - Meeting Handout 10-5-16
  - Agenda 10-5-16

This December 2016 Medicaid 1115 Plan First Family Planning Waiver Renewal application was found to be incomplete by CMS. Montana made plans to revise and resubmit the application.

Montana revised the application, this time requesting a five-year extension/renewal titled December 2017 Medicaid 1115 Plan First Family Planning Waiver Revised Extension/Renewal, and posted the draft on the department website on November 15, 2017. CMS instructed a repeat of the public comment period was needed. The notice could exclude the public hearings but must include electronic notices of any changes. This notice was sent to Montana Tribes and other interested parties, per instruction from CMS, on November 14, 2017.

On November 29, 2017, the 2017 waiver status and extension plans were presented to the Montana Health Coalition Meeting as a part of the annual public forum.

Documentation of Montana's full public notice process follows for the December 2017 Medicaid 1115 Plan First Family Planning Waiver Revised Extension/Renewal application, including public feedback received through this process. These documents are included on the following pages and posted to the Plan First website as indicated below:

- Plan First, change to a Five-Year Extension Application: Public Notice Schedule
  - Public Input Forum Announcement – November 29, 2017
  - Public Input Forum Agenda – November 29, 2017
  - Public Input Forum Handout
  - Public Notice Schedule
  - Montana Health Coalition and Interested Parties Letter
  - Tribal Letter
  - Public Comments
  - CMS Website for Section 1115 Waivers and Public Notice (posted only)

The December 2017 Medicaid 1115 Plan First Family Planning Waiver Revised Extension/Renewal application was submitted to CMS, December 15, 2017. Shortly thereafter CMS informed Montana of additional deficiencies in the Public Notice documentation and Montana withdrew the application with plans to correct and resubmit.

Montana's May 2018 Medicaid 1115 Plan First Family Planning Waiver Revised Extension/Renewal: Repeat of Public Notice Period Public Notice and Public Input Documents follow in Appendix E-2.

Public Notice Documents Relevant to the December 2016 Medicaid 1115 Plan First Family Planning Waiver Renewal Submission

Montana Plan First
Section 1115 Family Planning Demonstration Waiver

- Plan First Waiver Renewal Schedule 8-2016

- Meeting Minutes 08-26-16
- Meeting Talking Points 08-26-16
- Meeting Comments 08-26-16

- 8-31-16 Tribal Letter
- 8-31-16 Montana Health Coalition memo

- Meeting Minutes 10-4-16
- Meeting Handouts 10-4-16
- Agenda 10-4-16

- Meeting Minutes 10-5-16
- Meeting Handout 10-5-16
- Agenda 10-5-16

- CMS Website for Section 1115 Waivers and Public Notice (posted only)

Montana Section 1115 Plan First Waiver Renewal Public Input Notice Schedule

Plan First Waiver Expires 12/31/2017.

Task	Due Date	Comments
Presentation For The Children, Families, Health And Human Services Interim Legislative Committee.	8/26/16	Presentation Will Be Made By TPA Supervisor.
Mail Tribal Consultation Letter And Health Coalition Letter.	8/31/16	Use Public Notice Text. Tribal Consultation Must Be 28 Days Prior To Waiver Submittal.
Contact Interested Parties Using Electronic Mailing Address.	8/31/16	
Post Public Meeting Notice, Public Notice, Waiver Application Changes, Tribal Consultation Letter, Health Coalition Letter, and Public Input Notice Schedule To DPHHS Website. Post Public Meeting Notice on DPHHS Calender.	9/1/16	
Publish Meeting Notice.	9/4/16	Publish Meeting Notice in Three Largest Newspapers for 60 Day Notice.
Request Letter Of Support From the Montana Primary Care Association.	9/15/16	Request Letter To Be Dated By 10/10/16.
Conduct Two WebEx Public Information Meetings.	10/4/16 10/5/16	Must Be Completed 20 Days Before Waiver Renewal Submission, And Public Comment Must Be Allowed For 30 days Before Submittal. Public Information Meeting Details Are Found At http://dphhs.mt.gov/planfirst.
Post Public Comment Summary.	10/15/16	
Governor's Letter.	10/15/16	
Complete 508 Compliant Version Of Waiver Application And Comments Summary.	11/1/16	
Submit Waiver And Post All Documents.	12/1/16	Must Be Submitted By 12/31/16.

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Children, Families, Health, and Human Services Interim Committee

64th Montana Legislature

SENATE MEMBERS
MARY CAFERRO--Vice Chair
FREDERICK (ERIC) MOORE
DIANE SANDS
ROGER WEBB

HOUSE MEMBERS
RON EHLI--Chair
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ALBERT OLSZEWSKI
GORDON PIERSON

COMMITTEE STAFF
SUE O'CONNELL, Lead Staff
ALEXIS SANDRU, Staff Attorney
FONG HOM, Secretary

MINUTES LOG

August 25-26, 2016
Room 137, Capitol Building
Helena, Montana

August 26, 2016

Please note: This document is a Minutes Log and provides a notation of the time elapsed between the beginning of the meeting and the time at which the item was presented or discussed, a motion was made, or a vote was taken. The narrative presented here is provided only as a guide to the audio or video record of the meeting. The official discussion, motion, or vote is available on the audio or video archive of this meeting. The Legislature does not prepare a transcript of meeting activities. The time designation may be used to locate the referenced discussion on the audio or video recording of this meeting.

Access to an electronic copy of these minutes and the audio or video recording is provided from the Legislative Branch home page at http://leg.mt.gov. On the left-side menu of the home page, select Committees, then Interim. Once on the page for Interim Committees, scroll down to the appropriate committee. The written Minutes Log, along with the audio and video recordings, is listed by meeting date on the interim committee's web page. Each of the Exhibits is linked and can be viewed by clicking on the Exhibit of interest. All Exhibits are public information and may be printed.

Please contact the Legislative Services Division at 406-444-3064 for more information.

COMMITTEE MEMBERS PRESENT

REP. RON EHLI, Chair
SEN. MARY CAFERRO, Vice Chair

SEN. DIANE SANDS
SEN. ROGER WEBB

REP. JESSICA KARJALA
REP. ALBERT OLSZEWSKI
REP. GORDON PIERSON

COMMITTEE MEMBERS EXCUSED

SEN. FREDERICK (ERIC) MOORE

STAFF PRESENT

SUE O'CONNELL, Lead Staff
ALEXIS SANDRU, Staff Attorney
FONG HOM, Secretary

VISITORS' LIST (Attachment 1)

AGENDA (Attachment 2)

RECONVENE

00:04:29 Rep. Ehli reconvened the meeting at 8:35 a.m.

00:05:42 Ms. O'Connell distributed a memo from Marie Matthews, DPHHS Operations Services Branch Manager, regarding "SFY 2016 Resolution of Montana State Hospital Budget Pressures". **(Exhibit 28)**

AGENCY OVERSIGHT: AGENCY REPORTS

Department of Public Health and Human Services Update - Richard Opper, DPHHS Director

Director Opper gave an update of the Department of Public Health and Human Services' activities:

00:08:47 Personnel Issues

00:12:30 Medicaid Expansion **(Exhibit 29)**

00:21:18 Adverse Childhood Experiences Update

00:27:21 Meghan Peel, Health Resource Division, gave an update on the 1115 Plan First Waiver. **(Exhibit 30)**

Committee Questions

00:30:38 Sen. Caferro asked about the match rate on the waiver.

Review of Agency Legislation

Purpose and Process of Committee Review - Sue O'Connell

00:31:30 Ms. O'Connell **(Exhibit 31)**

Overview of Agency Legislation - Jessica Rhoades, DPHHS Policy Director

00:33:48 Ms. Rhoades **(Exhibit 32)**

Committee Questions of Ms. Rhoades

00:38:53 Sen. Sands asked how the department's legislation interfaces with the discussion on financial exploitation of seniors.

00:39:39 Alexis Sandru, staff attorney, explained that the draft committee bill specifically amends the Securities Act and would require broker dealers and investment advisors and certain qualified individuals to report just to the Commissioner of Securities. The department's bill would include mandatory reporting for financial advisors.

00:41:58 Rep. Ehli asked if the department has talked to the banks.

Motion/Vote

00:47:53 Sen. Sands moved to authorize the drafting of the agency's bills. The motion passed unanimously by voice vote.

HELP Act Oversight Committee Report - Jessica Rhoades, DPHHS Policy Director

00:48:29 Ms. Rhoades **(Exhibit 33)**

Committee Questions
00:53:46 Rep. Olszewski asked about the CPC Plus program.
00:54:00 Rep. Karjala thanked the coalition and all the stakeholders who worked on the oversight committee.
00:54:28 Sen. Caferro asked about Native American enrollment in Medicaid.

BREAK (Reconvene at 9:49 a.m.)

Montana Suicide Prevention Plan/Montana Suicide Review Team - Karl Rosston, DPHHS Suicide Prevention Coordinator
01:19:11 Mr. Rosston **(Exhibit 34)**

Committee Questions of Mr. Rosston
02:01:42 Rep. Pierson asked about the suicide situation in Deer Lodge County and in Anaconda County.
02:04:44 Sen. Sands asked about Mr. Rosston's budget, the need for additional resources for education in the communities, and proposed legislation to require schools to implement the program.
02:13:02 Rep. Karjala asked Mr. Rosston to go into more depth about chronic pain and depression as it relates to mental health.
02:16:21 Sen. Caferro asked Mr. Rosston about providing suicide prevention training for legislators in the 2017 legislative session.
02:17:02 Rep. Ehli asked about the suicide prevention coordinator position and how long has the suicide review team been in place.

SJR 22 STUDY: GUARDIANSHIP/ALZHEIMER'S DISEASE

Review of Revisions Requested by Committee - Sue O'Connell
Ms. O'Connell reviewed changes to three bills:
02:23:15 LCCF02 **(Exhibit 35)**

Committee Questions on LCCF02
02:26:09 Rep. Olszewski asked about the definition of "intellectual disability".
02:27:48 Ms. Sandru discussed the definition of developmental disability that is cross referenced in 53-20-102, MCA.
02:29:31 Sen. Webb said he was concerned about changing the title of the bill.
02:29:45 Ms. O'Connell discussed the issue of mandatory or permissive reporting and the title of the bill as written.

02:32:47 LCCF4a **(Exhibit 36)**
02:34:24 LCCF6a **(Exhibit 37)**

Public Comment on Revised Bill Drafts
02:35:26 Erin McGowan, Montana Association of Area Agencies on Aging

PUBLIC COMMENT ON ANY OTHER TOPIC IN THE COMMITTEE'S JURISDICTION

02:36:40 Matt Kuntz, Executive Director, NAMI Montana, commented on Karl Rosston's presentation.
02:42:42 Kelly Jepson, Consumer Direct Care Network, urged the committee to support a direct care provider rate increase.
02:46:10 Dr. Gary Mihelish, advocate for the mentally ill, commented on the agency bills.

COMMITTEE WORK SESSION
Final action on:
SJR 22 Bill Drafts

LCCF02

Motion/Vote

02:51:34 Sen. Caferro moved to accept the changes to LCCF02 and to introduce it as a committee bill. The motion passed unanimously by voice vote, with Sen. Moore voting yes by proxy.

LCCF4a

Motion/Vote

02:52:18 Rep. Olszewski moved to accept changes to LCCF4a and to introduce it as a committee bill. The motion passed unanimously by voice vote, with Sen. Moore voting yes by proxy.

LCCF6a

Motion/Vote

02:53:00 Sen. Sands moved to accept changes to LCCF4a and to introduce it as a committee bill. The motion passed unanimously by voice vote, with Sen. Moore voting yes by proxy.

Senate Bill 418

02:53:10 Ms. O'Connell said that Senate Bill 418 was on the agenda in case there were any requests for changes.

ASSIGNMENT OF COMMITTEE LEGISLATION

02:54:33 Rep. Ehli and Ms. O'Connell discussed how the proposed bills will move forward.
02:56:15 LC170: Sponsor is Rep. Olszewski and Rep. Karjala is backup.
03:00:28 LCCF02: Sponsor is Sen. Caferro.
03:01:11 LCCF4a: Sponsor is Rep. Pierson and Sen. Sands is backup.
03:01:39 LCCF172: Sponsor is Rep. Pierson and Sen. Caferro is backup.
03:02:10 LCCF6a: Sponsor is Rep. Ehli and Sen. Caferro is backup.
03:03:03 LCCF7b: Sponsor is Rep. Karjala and Sen. Sands is backup.
03:03:53 LC171: Sponsor is Sen. Sands.

03:05:11 Rep. Ehli thanked the members and staff for the good work that was done during the interim.
03:05:50 Sen. Caferro also thanked the members for their work on the various issues that were before the committee.

ADJOURNMENT

03:09:15 With no further business before the committee, Rep. Ehli adjourned the meeting at 11:40 a.m.

Section 1115 Medicaid Family Planning Waiver
Plan First
Children, Families, Health, & Human Services Interim Committee Meeting
August 25-26, 2016

Plan First Eligibility:

- Montana women ages 19 through 44;
- Not eligible for other Medicaid benefits;
- Able to become pregnant but are not now pregnant; and
- Earning a household income up to 200% of the federal poverty level (FPL) plus 11% of the FPL calculated by CMS as a substitute for income disregards, for a total of 211% of the FPL.

Plan First's Goals:

- Improved access to and use of family planning services among the participants;
- Fewer unintended pregnancies; and
- Improved birth outcomes and women's health by increasing the child spacing interval.

Plan First's Renewal:

- The Plan First Waiver expires on December 31, 2017, and the waiver renewal submission is due on or before December 31, 2016, effective January 1, 2018;
- The renewal has no substantial changes; and
- Although the waiver is limited to 4,000 women at any time, the current enrollment is holding steady at approximately 2,000 women.

Section 1115 Medicaid Family Planning Waiver
Plan First
Children, Families, Health, & Human Services Interim Committee Meeting
August 25-26, 2016

No comments were received at this public input meeting.

MONTANA DPHHS
Healthy People. Healthy Communities.
Department of Public Health & Human Services

Department of Public Health and Human Services

Director's Office ♦ PO Box 4210 ♦ Helena, MT 59620 ♦ (406) 444-5622 ♦ Fax: (406) 444-1970♦ www.dphhs.mt.gov

Steve Bullock, Governor

Richard H. Opper, Director

August 31, 2016

Address

Re: Inpatient Hospital Services Medicaid State Plan Amendment (SPA) and Plan First Section 1115 Medicaid Family Planning Waiver Renewal

Dear

The following SPA and waiver renewal do not affect Tribes, Urban Indian Centers or Indian Health Service directly; but under our agreement with the Tribes and the federal government, we provide you notice of all Medicaid State Plan and waiver changes.

On or before September 30, 2016, the Montana Department of Public Health Human Services (DPHHS) will submit the Inpatient Hospital Services Medicaid State Plan Amendment (SPA) to the Centers for Medicare and Medicaid Services (CMS) to update the Hospital Tax methodology, effective January 1, 2017.

In 2016, Montana expanded Medicaid by enacting the Montana Health and Economic Livelihood Partnership (HELP) Program. The HELP Program provides coverage through a contract with a Third Party Administrator (TPA). The TPA administers the delivery and payment for healthcare services for many of the newly eligible adults. Other HELP expansion participants receive coverage through the Medicaid provider network.

The current Hospital Tax methodology does not include the use of the claims data for the newly expanded Medicaid population. The proposed amendment will revise the database sources used to calculate the Hospital Reimbursement Adjustor (HRA) and add the HELP program data, including the TPA paid claims data, to the HRA methodology. The estimated fiscal impact is $115 million.

We invite your comments and questions on the Inpatient Hospital services SPA postmarked **by September 29, 2016.**

On or before December 31, 2016, DPHHS will submit a 3-year Plan First Section 1115 Medicaid Family Planning Waiver Renewal for approval to CMS with a proposed effective date of January 1, 2018. The waiver renewal makes no substantial changes. The current waiver includes about 2,000 women, ages 19-44, able to become pregnant but not presently pregnant, who are not otherwise eligible for Medicaid, and earning a household income up to 211% of the federal poverty level. The waiver goals are to decrease the number of births paid for by Medicaid, and improve health outcomes for members. Services are limited to waiver covered family planning services and supplies. The estimated total annual fiscal benefit impact is $1.01 million.

We invite your comments and questions on the Plan First Waiver renewal postmarked **by October 10, 2016**.

The proposed Plan First changes, waiver benefit description, eligibility and program description, copayment requirements, waiver evaluation design with goals/objectives, healthcare delivery system, public meeting details, and public notice schedule are located on the Department website at http://www.dphhs.mt.gov/planfirst. Two public meetings will be held regarding the renewal:

1) October 4, 2016, 12:30-1:30 PM by WebEx, or in person at the Cogswell Building, Room C209, 1400 Broadway, Helena, MT; and
2) October 5, 2016, 12:30-1:30 PM by WebEx, or in person at the conference room at the Yellowstone County Office of Public Assistance, 111 N 31st St., Billings, Montana.

Please direct your comments and questions on the Inpatient Hospital Services SPA and Plan First Waiver renewal to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at (406) 444-2584 or mkulawik@mt.gov; or Director's Office, PO Box 4210, Helena, MT 59604-4210. Please let us know if you would like to arrange a date and time to discuss further.

Sincerely,

Mary E. Dalton
State Medicaid Director

cc: Jessica Windy Boy, CEO, Rocky Boy Tribal Health Board
Jason Smith, Director, Governor's Office of lndian Affairs
Lesa Evers, Tribal Relations Manager, DPHHS
Mary Lynne Billy, Director, Office of American Indian Health

Department of Public Health and Human Services

Director's Office ♦ PO Box 4210 ♦ Helena, MT 59620 ♦ (406) 444-5622 ♦ Fax: (406) 444-1970♦ www.dphhs.mt.gov

Steve Bullock, Governor

Richard H. Opper, Director

Date: August 31, 2016

To: Montana Health Coalition Members, Ad Hoc Members, and Interested Parties

From: Mary E. Dalton, Medicaid State Director

Subject: Plan First Section 1115 Medicaid Family Planning Waiver Renewal

This memo is to inform you that on or before December 31, 2016, the Department of Public Health and Human Services will submit a three-year Plan First Section 1115 Medicaid Family Planning Waiver Renewal for approval to the Centers for Medicare and Medicaid Services, with a proposed effective date of January 1, 2018. The waiver renewal makes no substantial changes. The current waiver includes about 2,000 women, ages 19-44, able to become pregnant but not presently pregnant, who are not otherwise eligible for Medicaid, and earning a household income up to 211% of the federal poverty level. The waiver goals are to decrease the number of births paid for by Medicaid, and improve health outcomes for members. Services are limited to waiver covered family planning services and supplies. The estimated total annual fiscal benefit impact is $1.01 million.

We invite your comments and questions on the Plan First Waiver renewal postmarked **by October 10, 2016.** You may direct comments to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at (406) 444-2584 or mkulawik@mt.gov; or Director's Office, PO Box 4210, Helena, MT 59604-4210.

The proposed changes, waiver benefit description, eligibility and program description, copayment requirements, waiver evaluation design with goals/objectives, healthcare delivery system, public meeting details, and public notice schedule are located on the Department website at http://www.dphhs.mt.gov/planfirst. Two public meetings will be held regarding the renewal:

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Department of Public Health and Human Services
Montana Medicaid
Plan First Medicaid Section 1115 Family Planning Waiver Renewal
Effective January 1, 2018
WebEx Public Meeting Minutes
Tuesday, October 4, 2016, 12:30-1:15 PM
Cogswell Building, Room C209
1400 Broadway, Helena, MT

12:30 **Welcome and Introductions**
In addition to Elizabeth LeLacheur, Meghan Peel and Mary Eve Kulawik, both of DPHHS joined the meeting in person. No one joined the meeting via WebEx.

12:35 **Review Posted Materials**

The posted materials were reviewed.

12:45 **1115(a) Family Planning Waiver Summary**
The family planning waiver summary information was reviewed.

1:00 **Public Comment-Discussion**
Both attendees were appreciative of the waiver

1:15 **Adjourn**

For questions, please contact: Elizabeth LeLacheur, Program Officer, at elelacheur@mt.gov, at PO Box 202951, Helena, MT, 59620 or (406) 444-6002. Please call if you need an accomodation.

Department of Public Health and Human Services
Montana Medicaid
Plan First Medicaid Section 1115 Family Planning Waiver Renewal
Effective January 1, 2018
WebEx Public Meeting
Tuesday, October 4, 2016, 12:30-1:15 PM
Cogswell Building, Room C209
1400 Broadway, Helena, MT
Join Audio, Call 1-877-668-4490, Access Code, 282 229 926
Access Internet Presentation Using Meeting Password: health

Plan First Eligibility:

- Montana women ages 19 through 44;
- Not eligible for other Medicaid benefits;
- Able to become pregnant but are not now pregnant; and
- Earning a household income up to 200% of the federal poverty level (FPL) plus 11% of the FPL calculated by CMS as a substitute for income disregards, for a total of 211% of the FPL.

Plan First's Goals:

- Improved access to and use of family planning services among the participants;
- Fewer unintended pregnancies; and
- Improved birth outcomes and women's health by increasing the child spacing interval.

Plan First's Renewal:

- The Plan First Waiver expires on December 31, 2017, and the waiver renewal submission is due on or before December 31, 2016, effective January 1, 2018;
- The renewal has no substantial changes; and
- Although the waiver is limited to 4,000 women at any time, the current enrollment is holding steady at approximately 2,000 women.

For questions, please contact: Elizabeth LeLacheur, Program Officer, at elelacheur@mt.gov, at PO Box 202951, Helena, MT, 59620 or (406) 444-6002. Please call if you need an accomodation.

Department of Public Health and Human Services
Montana Medicaid
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12:30	**Welcome and Introductions**
12:35	**Review Posted Materials**
12:45	**1115(a) Family Planning Waiver Summary**
1:00	**Public Comment-Discussion**
1:15	**Adjourn**

For questions, please contact: Elizabeth LeLacheur, Program Officer, at elelacheur@mt.gov, at PO Box 202951, Helena, MT, 59620 or (406) 444-6002. Please call if you need an accomodation.

Department of Public Health and Human Services
Montana Medicaid
Plan First Medicaid Section 1115 Family Planning Waiver Renewal
Effective January 1, 2018
WebEx Public Meeting Minutes
Wednesday, October 5, 2016, 12:30-1:15 PM
Yellowstone County Office of Public Assistance, Conference Room

12:30 **Welcome and Introductions**
There were no in person attendees. Mary Eve Kulawik joined by WebEx.

12:35 **Review Posted Materials**
The posted materials were reviewed.

12:45 **1115(a) Family Planning Waiver Summary**
The waiver summary was reviewed.

1:00 **Public Comment-Discussion**
Ms. Kulawik was supportive of the waiver

1:15 **Adjourn**

For questions, please contact: Elizabeth LeLacheur, Program Officer, at elelacheur@mt.gov, at PO Box 202951, Helena, MT, 59620 or (406) 444-6002. Please call if you need an accomodation.

Department of Public Health and Human Services
Montana Medicaid
Plan First Medicaid Section 1115 Family Planning Waiver Renewal
Effective January 1, 2018
WebEx Public Meeting
Wednesday, October 5, 2016, 12:30-1:15 PM
Yellowstone County Office of Public Assistance, Conference Room
111 N 31st St, Billings, MT
Join Audio, Call 1-877-668-4490, Access Code, 282 236 347
Access Internet Presentation Using Meeting Password: health

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For questions, please contact: Elizabeth LeLacheur, Program Officer, at elelacheur@mt.gov, at PO Box 202951, Helena, MT, 59620 or (406) 444-6002. Please call if you need an accomodation.

Department of Public Health and Human Services
Montana Medicaid
Plan First Medicaid Section 1115 Family Planning Waiver Renewal
Effective January 1, 2018
WebEx Public Meeting
Wednesday, October 5, 2016, 12:30-1:15 PM
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Access Internet Presentation Using Meeting Password: health

12:30	**Welcome and Introductions**
12:35	**Review Posted Materials**
12:45	**1115(a) Family Planning Waiver Summary**
1:00	**Public Comment-Discussion**
1:15	**Adjourn**

For questions, please contact: Elizabeth LeLacheur, Program Officer, at elelacheur@mt.gov, at PO Box 202951, Helena, MT, 59620 or (406) 444-6002. Please call if you need an accomodation.

Public Notice Documents Relevant to the December 2017 Medicaid 1115 Plan First Family Planning Waiver Revised Extension/Renewal Submission

Montana Plan First
Section 1115 Family Planning Demonstration Waiver

- Public Input Forum Announcement – November 29, 2017
- Public Input Forum Agenda – November 29, 2017
- Public Input Forum Handout

- Public Notice Schedule
- Montana Health Coalition and Interested Parties Letter
- Tribal Letter
- Public Comments

- CMS Website for Section 1115 Waivers and Public Notice (posted only)

PUBLIC NOTICE ANNOUNCEMENT FOR PUBLIC FORUM TO SOLICIT COMMENTS ON THE PROGRESS OF THE PLAN FIRST AND WASP DEMONSTRATIONS

The Centers for Medicare and Medicaid Services requires the Montana Medicaid Program to hold a yearly public input forum to solicit comments on the progress of its 1115 Plan First Family Planning Waiver and its 1115 Waiver for Additional Services and Populations. The Forum will be held Wednesday, November 29, 2017, during the Montana Health Coalition Meeting. The meeting will be held from 9:30 a.m. to 1:30 p.m. in the Cogswell Building, 1400 Broadway, Room C205, in Helena, Montana. The public input forum for the 1115 waivers is scheduled between 9:30 a.m. and 11:30 a.m.

You can also attend the public forum by telephone, by calling 1-408-792-6300, Access Code: 801 612 332.

Additional information about the Plan First program may be found at Montana Plan First . Questions or comments may be addressed to Linda Skiles-Hadduck, Plan First Program Officer, P.O. Box 202951, Helena, MT 59620-2951, at 406-444-6868 or email at lskiles-hadduck@mt.gov.

Additional information about the Waiver for Additional Services and Populations (WASP) program may be found at Montana WASP . Eligibility or benefit questions regarding individuals who qualify for the MHSP Waiver population in the WASP program should be directed to Helen Higgins, Addictive and Mental Disorders Division, PO Box 202905, Helena, MT 59620-2905 or email at hhiggins@mt.gov . Questions or comments about the WASP may be addressed to Linda Skiles-Hadduck, Health Resources Division, P.O. Box 202951, Helena, MT 59620-2951, at 406-444-6868 or email at lskiles-hadduck@mt.gov .

MONTANA HEALTH COALITION AGENDA
Department of Public Health and Human Services (DPHHS)
November 29, 2017, 9:30 am – 1:30 pm

Cogswell Building, 1400 Broadway Street, Room 205
Helena, Montana

❖ You can also attend by telephone and/or webinar:
Join by phone: 1-408-792-6300, Access Code: 801 612 332

AGENDA

9:30 am – 11:30 am

- **Budget Status** *Marie Matthews, Montana State Medicaid Director*
  - Reduction Medicaid State Plan Amendments (SPAs) Updates

- **Health Resources Division (HRD):**
  - Medicaid Expansion Update (change from Third Party Administrator) *Duane Preshinger, HRD Administrator*
  - 1115 Demonstration Waiver for Additional Services and Populations (WASP) Annual Update *Meghan Peel, HRD Member Health Management Bureau Supervisor*
  - 1115 Demonstration Plan First Family Planning Waiver Annual Update
  - Other HRD Updates

- **Senior & Long Term Care (SLTC) Division:** *Barbara Smith, SLTC Administrator*
  - Big Sky 1915(c) Home and Community Based Services (HCBS) and 1915(b)(4) Selective Contracting Waiver Renewal Update
  - Civil Monetary Penalties Grant Program
  - Other SLTC Division Updates

11:30 am – 11:45 am **Break with Refreshments**

11:45 am – 1:00 pm

- **Developmental Services Division (DSD):** *Rebecca de Camara, DSD Administrator*
  - Zero Suicide Initiative
  - Autism 1915(b)(4) Evaluation Waiver and State Plan Update
  - Other DSD Updates

- **Addictive & Mental Disorders Division (AMDD):** *Zoe Barnard, AMDD Administrator*
  - AMDD Updates

PLAN FIRST REVIEW FOR ANNUAL PUBLIC INPUT FORUM – 11/29/2017

Plan First is a Montana Medicaid Family Planning Waiver Program administered by the Department of Public Health and Human Services.

It is designed for women who are over income for Montana Medicaid enrollment but have incomes at or below 211% of the federal poverty guidelines.

The Plan First Program has been active since mid-2012. The current waiver approval expires 12/31/2017. An application to extend this approval for 5 years, until 12/31/2022, is currently under consideration. Late in 2016 Montana submitted an extension request for 3 years only. Since that time we have revised that extension request and made the following changes:

1) The requested length of the renewal/extension is now five (5) years as opposed to the prior three (3) year request;
2) More detail added to the Interim Evaluation of the Impact of the Demonstration section; and
3) Change in format and budget trend rate in the Budget Neutrality Assessment and Projections section.

The proposed changes, waiver benefit description, eligibility and program description, waiver evaluation design with goals/objectives, healthcare delivery system, public meeting details, and public notice schedule are located on the Department website at Montana Plan First . The five year renewal/extension request is currently in its public comment period. That period ends 12/14/2017.

ELIGIBILITY:

- Montana resident
- Woman age 19 through 44 years
- Able to bear children and not presently pregnant
- Not eligible for or enrolled in Montana Medicaid
- Have a family income at or below 211% of the federal poverty limit

ENROLLMENT:
Current Plan First enrollment is approximately 1,700 members and has been gradually decreasing since the implementation of Medicaid Expansion that allows some women to qualify for more comprehensive coverage. The Plan First Waiver allows a maximum of 4,000 women to be served.

PLAN FIRST COVERED SERVICES:

- Annual visit
- Follow-up visits
- Comprehensive history
- Physical exams
- Lab services
- Medical counseling
- Contraceptive supplies
- Vaccinations against sexually transmitted diseases (STDs)
- STD treatment
- Family Planning related services

PLAN FIRST 2017 UPDATES:

- Additional covered hysterectomy and anesthesia service codes have been added to correspond with current norms

CONTACT INFORMATION:

- Plan First email: planfirst@mt.gov
- Plan First enrollment questions should be directed to 855-854-1399
- Plan First Program Officer, Linda Skiles-Hadduck, (406) 444-6868, lskiles-hadduck@mt.gov

11:45 am – 1:00 pm (continued)

- **Tribal Federally Qualified Health Center conversations with Tribes** *Marie*
- **100% Tribal FMAP "received through" Policy Update** *Marie*

1:00 pm - 1:15 pm **Coalition members' topics**

1:15 pm – 1:30 pm **Wrap Up**

There will be time for public comment after each topic. ***Please note the times above are approximate.*** Topics may take less or more time depending on amount of discussion.

AMERICANS WITH DISABILITIES ACT: The Department of Public Health and Human Services is committed to providing meeting access through reasonable accommodation under the Americans with Disabilities Act. If special accommodations are needed to access the portion of the meeting being held in the Cogswell Building, please contact Mary Eve Kulawik at 444-2584 or mkulawik@mt.gov prior to the meeting for further information.

MONTANA 1115 FAMILY PLANNING DEMONSTRATION - PLAN FIRST DECEMBER 2017
EXTENSION REQUEST
PUBLIC NOTICE SCHEDULE

DATE	ACTION
2016	• Original 3 year Extension Request Public Notice requirements were completed in 2016
01/12/2017	• Received CMS Incomplete Letter regarding Extension Application
03/2017	• Decision to revise Extension Request to 5 years
11/15/2017	• Post full (3 part) PF Extension Application on Plan First Website (app body, BN, STCs) • Post Public Notice Schedule on Website • Send out electronic notice of changes to PF Extension Application since last notice period. Send to: - Montana Tribes - Montana Health Coalition and Ad Hoc members - Women & Men's Health Branch of PH&S, MT DPHHS - Others if applicable o Post above notice on Plan First webpage
12/14/17	• End of 30 day public notice period, post summary of comments received and responses to comments on PF webpage
On or before 12/15/17	• Adjust Extension Application according to comments if warranted. Post updated Extension Application if changes were made. • Submit (3 part) PF Extension Application to CMS including Governor's signature

MONTANA DPHHS
Healthy People. Healthy Communities.
Department of Public Health & Human Services

Department of Public Health and Human Services

Health Resources Division ♦ P. O. Box 202951 ♦ Helena, MT 59620-2951 ♦ Voice: 406-444-4455 ♦ Fax: 406-444-1861

Steve Bullock, Governor

Sheila Hogan, Director

Date: November 14, 2017

To: Montana Health Coalition Members, Ad Hoc Members, and Interested Parties

From: Marie Matthews, Medicaid State Director

Subject: Plan First Section 1115 Medicaid Family Planning Waiver Renewal

This memo is to inform you that on or before December 20, 2017, the Department of Public Health and Human Services will submit a revised Plan First Section 1115 Medicaid Family Planning Waiver Renewal/Extension for approval to the Centers for Medicare and Medicaid Services, with a proposed effective date of January 1, 2018.

The waiver renewal/extension makes no substantial changes. The current waiver includes about 2,000 women, ages 19-44, able to become pregnant but not presently pregnant, who are not otherwise eligible for Medicaid, and earning a household income up to 211% of the federal poverty level. The waiver goals are to decrease the number of births paid for by Medicaid, and improve health outcomes for members. Services are limited to waiver-covered family planning services and supplies. The estimated total annual fiscal impact is $1.01 million.

The changes made by the new renewal/extension application are as follows:

1) The requested length of the renewal/extension is now five (5) years as opposed to the prior three (3) year request;
2) More detail has been added to the Interim Evaluation of the Impact of the Demonstration section; and
3) Change in format and budget trend rate in the Budget Neutrality Assessment and Projections section.

The proposed changes, waiver benefit description, eligibility and program description, waiver evaluation design with goals/objectives, healthcare delivery system, public meeting details, and public notice schedule are located on the Department website at http://dphhs.mt.gov/planfirst.

We invite your comments and questions on the Plan First Waiver renewal postmarked by December 14, 2017. You may direct comments to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at (406) 444-2584 or mkulawik@mt.gov; or Director's Office, PO Box 4210, Helena, MT 59604-4210.

You will also will have opportunity to officially comment during the federal public comment period after the state submits the waiver renewal.

MONTANA DPHHS
Healthy People. Healthy Communities.
Department of Public Health & Human Services

Department of Public Health and Human Services

Director's Office ♦ PO Box 4210 ♦ Helena, MT 59620 ♦ (406) 444-5622 ♦ Fax: (406) 444-1970♦ www.dphhs.mt.gov

Steve Bullock, Governor

Sheila Hogan, Director

November 14, 2017

Address

Re: Plan First Section 1115 Medicaid Family Planning Waiver Renewal

Dear :

The following waiver renewal does not affect Tribes, Urban Indian Health Centers or Indian Health Service directly; but under our agreement with Tribes and the federal government, we provide you notice of all Medicaid State Plan and waiver changes.

This letter is to inform you that on or before December 20, 2017, the Department of Public Health and Human Services will submit a revised Plan First Section 1115 Medicaid Family Planning Waiver Renewal/Extension for approval to the Centers for Medicare and Medicaid Services, with a proposed effective date of January 1, 2018.

The waiver renewal/extension makes no substantial changes. The current waiver includes about 2,000 women, ages 19-44, able to become pregnant but not presently pregnant, who are not otherwise eligible for Medicaid, and earning a household income up to 211% of the federal poverty level. The waiver goals are to decrease the number of births paid for by Medicaid, and improve health outcomes for members. Services are limited to waiver-covered family planning services and supplies. The estimated total annual fiscal impact is $1.01 million.

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1) The requested length of the renewal/extension is now five (5) years as opposed to the prior three (3) year request;
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3) Change in format and budget trend rate in the Budget Neutrality Assessment and Projections section.

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We invite your comments and questions on the Plan First Waiver renewal postmarked by December 14, 2017. You may direct comments to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at (406) 444-2584 or mkulawik@mt.gov; or Director's Office, PO Box 4210, Helena, MT 59604-4210.

You will also will have opportunity to officially comment during the federal public comment period after the state submits the waiver renewal.

Sincerely,

Marie Matthews
State Medicaid Director

cc: Jason Smith, Director, Governor's Office of Indian Affairs
Lesa Evers, Tribal Relations Manager, DPHHS

MONTANA DPHHS
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Department of Public Health & Human Services

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Steve Bullock, Governor

Sheila Hogan, Director

Montana Plan First Section 1115 Family Planning Demonstration Waiver

During the annual Public input forum to solicit comments on the progress of the 1115 Demonstration Waivers, held November 29, 2017, we received one comment on Montana's Plan First Family Planning Waiver. The comment came from Stacey Anderson, Communication and Public Affairs Manager, for the Montana Primary Care Association. Her comment was in support of the on-going Plan First waiver, and extension of that waiver, effective January 1, 2018. She commented that FQHCs around the state have expressed appreciation of the waiver. She added it as a great program to fill the family planning needs of women who do not qualify for Medicaid.

There were no other public comments received for the Montana Plan First Section 1115 Family Planning Demonstration Waiver.

Appendix E-2

Public Notice Documents Relevant to the May 2018 Medicaid 1115 Plan First Family Planning Waiver Revised Extension/Renewal Application: Repeat of Public Notice Period

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Montana Plan First
Section 1115 Family Planning Demonstration Waiver

(1) Public Notice / Public Input Schedule

(2) Newspaper Public Notice Announcements

(3) Brief Summary of the Demonstration

(4) Explanation of Public Notice Process and Public Input Process

(5) Abbreviated Public Notice

(6) Full Public Notice

(1)

PUBLIC NOTICE / PUBLIC INPUT SCHEDULE

FOR THE MAY 2018 MEDICAID 1115 MONTANA PLAN FIRST
FAMILY PLANNING WAIVER REVISED EXTENSION/RENEWAL SUBMISSION:
REPEAT OF PUBLIC NOTICE PERIOD

Public Input and Comments are welcome:
April 1, 2018 through May 4, 2018

Comments and questions may be submitted by to the following methods:

- By US Mail:
  Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator
  Director's Office
  PO Box 4210
  Helena, MT 59604-4210
- By telephone:
  (406) 444-2584
- By electronic mail: mkulawik@mt.gov

You will also have opportunity to officially comment during the federal public comment period after CMS finds the application and public notice requirements met.

TASK	DUE DATE	COMMENTS
PUBLISH IN THREE MONTANA NEWSPAPERS WITH THE LARGEST CIRCULATION • Newspaper Public Notice Announcements	04/02/2018	Billings Gazette, The Missoulian, Great Falls Tribune
POST TO THE PLAN FIRST WEB PAGE • Public Notice / Public Input Schedule • Brief Summary of the Demonstration • Explanation of Public Notice Process and Public Input Process • Abbreviated Public Notice • Full Public Notice • Compiled Public Notice Documents Packet • Preliminary application	04/02/2018	All postings to the "Plan First web page" will appear here: Plan First webpage under the title of "May 2018 Medicaid 1115 Montana Plan First Family Planning Waiver Revised Extension/Renewal Submission: Repeat of Public Notice Period" "Compiled Public Notice Documents Packet" contains: - Compliance with the Public Notice Process document taken from Appendix E of the application - Public Notice / Public Input Schedule - Brief Summary of the Demonstration - Explanation of Public Notice Process and Public Input Process - Text of Newspaper Public Notice Announcements - Abbreviated Public Notice - Full Public Notice

TASK	DUE DATE	COMMENTS
POST TO DPHHS MAIN WEB PAGE – UNDER PUBLIC NOTICES Announcement of May 2018 Medicaid 1115 Plan First Family Planning Waiver Revised Extension/Renewal Submission: Repeat of Public Notice Period" Period 04/02/2018 – 05/04/2018 linked directly to the Plan First web page.	04/02/2018	N/A
Mail Tribal Consultation/Indian health providers and Urban Indian Organizations Letter and Health Coalition Letter	04/02/2018	Include instructions on where to view all public notice documents.
Inform Interested Parties Using Electronic Mailing Addresses	04/02/2018	Include instructions on where to view all public notice documents.
POST TO THE PLAN FIRST WEB PAGE • Tribal Consultation Letter • Health Coalition Letter • Interested Parties Letter • Text of Newspaper Public Notice • CMS Website for Section 1115 Waivers and Public Notice	04/03/2018	N/A
Post any Public Comments received, and responses given, during comment period	05/07/18	N/A
If any revisions to Preliminary Extension application based on Public Comment; Post to Plan First web page: • Red-line version of Preliminary Application showing changes • Clean version of Application now titled Final Application Submission	05/10/18	N/A
Submit Plan First Extension Application to CMS	05/11/18	Must be submitted by 05/31/18

(2)

TEXT OF NEWSPAPER PUBLIC NOTICE ANNOUNCEMENT

FOR THE MAY 2018 MEDICAID 1115 MONTANA PLAN FIRST
FAMILY PLANNING WAIVER REVISED EXTENSION/RENEWAL SUBMISSION:
REPEAT OF PUBLIC NOTICE PERIOD

On or before 05/11/18, the Montana Department of Public Health Human Services (DPHHS) will submit a near 5-year Plan First Section 1115 Medicaid Family Planning Waiver Extension for approval to the Centers for Medicare and Medicaid Services (CMS) with a proposed effective date of 6/1/18. The waiver extension makes no substantial changes. The current waiver includes about 1,600 women, ages 19-44, able to become pregnant but not presently pregnant, who are not otherwise eligible for Medicaid, and earning a household income up to 211% of the federal poverty level. The waiver goals are to decrease the number of births paid for by Medicaid, and improve health outcomes for members. Services are limited to waiver covered family planning services and supplies. The estimated total annual fiscal benefit impact is $530,000.

The Montana DPHHS held an initial public comment period for the Section 1115 Medicaid Family Planning Waiver Extension (submitted 12/31/16) from 10/04/16 through 11/02/16, and also held three public hearings. These hearings were as follows: on 08/26/16, the Children, Families, Health, and Human Services Interim Committee meeting held in the Capitol Building in Helena, MT; on 10/04/16, a WebEx and public meeting held in the Cogswell Building in Helena, MT; and on 10/05/16, a WebEx and public meeting held in the Yellowstone County Office of Public Assistance in Billings, MT.

As a result of these public input opportunities: the Montana DPHHS received three comments, all of which supported the continuation of the waiver.

The 12/31/16 application submission was found incomplete by CMS. The Montana DPHHS then revised and abbreviated the extension application and resubmitted it on 12/15/17, with progress updates on the goals of the demonstration and a request for a 5-year extension instead of the prior 3-year request. On the instruction of CMS, repetition of the public hearings was not required, but a new public comment period was needed. The public comment period for this revised and abbreviated application was from 11/16/17 through 12/14/17.

As a result of these public input opportunities: the Montana DPHHS received one comment that expressed support of the waiver's extension and she also relayed appreciation for the waiver from the FQHCs around the state.

The 12/15/17 application submission was withdrawn by the Montana DPHHS shortly after submission. A temporary extension of the Montana Plan First section 1115 Family Planning Demonstration was granted by CMS with Special Terms and Conditions and associated expenditure authorities extended through 05/31/18.

The Montana DPHHS will soon request a near 5-year extension, applicable to 06/01/18 through 12/31/22. To provide further transparency in the state's proposed application for the near 5-year Plan First Section 1115 Medicaid Family Planning Waiver Extension, we are providing a third public comment period that provides clarification on the details of this proposed submission to CMS.

Public comments on the Family Planning Waiver Extension must be submitted between 4/2/18 and 5/4/18, to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, Director's Office, PO Box 4210, Helena MT 59604-4210, or by telephone to (406) 444-2584, or by electronic mail to mkulawik@mt.gov. You will also have opportunity to officially comment during the federal public comment period after CMS finds the application and public notice requirements met.

The proposed changes, waiver benefit description, eligibility and program description, copayment requirements, waiver evaluation design with goals/objectives, healthcare delivery system, public meeting details, full and abbreviated public notice, and public notice schedule are located on the Department website at Plan First website.

(3)
BRIEF SUMMARY OF THE DEMONSTRATION

FOR THE MAY 2018 MEDICAID 1115 MONTANA PLAN FIRST
FAMILY PLANNING WAIVER REVISED EXTENSION/RENEWAL SUBMISSION:
REPEAT OF PUBLIC NOTICE PERIOD

Plan First Eligibility:

- Montana women ages 19 through 44;
- Not eligible for other Medicaid benefits;
- Able to become pregnant but are not now pregnant; and
- Earning a household income up to 200% of the federal poverty level (FPL) plus 11% of the FPL calculated by CMS as a substitute for income disregards, for a total of 211% of the FPL.

Plan First's Goals:

- Improved access to and use of family planning services among the participants;
- Fewer unintended pregnancies; and
- Improved birth outcomes and women's health by increasing the child spacing interval.

Plan First's Renewal:

- The Plan First Waiver expired on December 31, 2017, but was temporarily extended through May 31, 2018. The extension/renewal requests continued authorization through December 31, 2022.
- The extension/renewal has no substantial changes; and
- Although the waiver is limited to 4,000 women at any time, the current enrollment is holding steady at approximately 1,600 women.

Family Planning Benefits: Family planning services and supplies are limited to services and supplies with the primary purpose of family planning, and are provided in a family planning or other medical setting.

Family Planning-Related Services: Family planning-related services and supplies are services provided as part of, or as follow-up to, a family planning visit. Such services are provided because a family planning-related problem was identified and/or diagnosed during a routine or periodic family planning visit.

(4)

EXPLANATION OF PUBLIC NOTICE PROCESS AND PUBLIC INPUT PROCESS

FOR THE MAY 2018 MEDICAID 1115 MONTANA PLAN FIRST
FAMILY PLANNING WAIVER REVISED EXTENSION/RENEWAL SUBMISSION:
REPEAT OF PUBLIC NOTICE PERIOD

On April 2, 2018, Montana will publish, in the state's three largest newspapers, an announcement of the Montana Department of Public Health Human Services planned submission of a near 5-year Plan First Section 1115 Medicaid Family Planning Waiver Extension application. This announcement summarizes the current waiver and extends an invitation for the public to review pertinent information posted on the Department website. The announcement further invites public comment, between April 2, 2018 and May 4, 2018 via the contact information listed. Also on April 2, 2018, Montana will post, to the Montana Department of Health and Human Services main web page, Montana DPHHS website. Public Notices section, an announcement of the May 2018 Medicaid 1115 Plan First Family Planning Waiver Extension Submission: Repeat of Public Notice Period Submission. This announcement will link directly to the specific Plan First web page, May 2018 Submission, where copies of the below public notice documents will be available for review:

- A Public Notice / Public Input Schedule with Public Input accepted April 2, 2018 through May 4, 2018.
- A Brief Summary of the Demonstration
- This explanation of the **Public Notice Process and Public Input Process**:
  - The public has from April 2, 2018 through May 4, 2018 to examine and comment on Montana's planed Plan First Extension Application;
  - Informative documents are available for review on the Plan First webpage;
  - Public input is invited, via a Newspaper Public Notice Announcement published in the state's three largest newspapers;
  - Tribes, the Montana Health Coalition and other interested parties are specifically invited to comment;
  - Comments and questions may be directed to the following:
    - By US Mail:
      Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator
      Director's Office
      PO Box 4210
      Helena, MT 59604-4210
    - By telephone:
      (406) 444-2584
    - By electronic mail:
      mkulawik@mt.gov ; and
  - You will also have opportunity to officially comment during the federal public comment period after CMS finds the application and public notice requirements met. The location to make these comments can be found on-line at CMS Website.
- Text of the Newspaper Public Notice Announcements
- An Abbreviated Public Notice Document

- A Full Public Notice Document
- A Compiled Public Notice Documents Packet
- A Tribal Consultation / Indian health providers and Urban Indian Organization letter sent to Montana Tribes, Indian health providers and Urban Indian organizations soliciting comments on the demonstration extension application;
- A letter sent to the Montana Health Care Coalition soliciting comments on the demonstration extension application;
- An electronic letter sent to other interested parties soliciting comments on the demonstration extension application;

At the end of the Public Input Period, Montana will post a summary of comments received and actions taken because of those comments. If the comments received stimulate a change to the Extension Application, Montana will post the Preliminary Extension Application, including Budget Neutrality projections, with red-line changes, and then also post the finalized version of the Extension Application.

ABBREVIATED PUBLIC NOTICE DOCUMENT

FOR THE MAY 2018 MEDICAID 1115 MONTANA PLAN FIRST
FAMILY PLANNING WAIVER EXTENSION/RENEWAL SUBMISSION:
REPEAT OF PUBLIC NOTICE PERIOD

Pursuant to 42 C.F.R. Section 431.408, public notice is hereby given to the submission of a Medicaid proposed demonstration extension request of the Montana Plan First Family Planning Waiver (Plan First), effective June 1, 2018 through December 31, 2022.

The current extension of the Montana Plan First Family Planning Waiver would have expired on December 31, 2017, but was temporarily extended through May 31, 2018.

Program Description, Goals and Objectives

Eligible individuals are:

- Montana women ages 19 through 44;
- Not eligible for other Medicaid benefits;
- Able to become pregnant but are not now pregnant; and
- Earning a household income through 211% of the FPL.
- This program is limited to 4,000 women at any given time.

The goals of the demonstration are:

- Improved access to and use of family planning services among the participants;
- Fewer unintended pregnancies; and
- Improved birth outcomes and women's health by increasing the child spacing interval.

Family Planning Health Care Delivery System:

- Plan First covered services may be provided by any Montana Medicaid Provider on a fee-for-service basis. A large portion of Plan First members are enrolled through and receive services from Title X family planning clinics. These clinics are commonly staffed with mid-level providers. If family planning-related issues are discovered during the family planning visit, members are often referred to other providers to address those issues. Mid-level providers make up about half of the Plan First care delivery followed by pharmacies, physicians, laboratories, outpatient hospitals, FQHCs and others.

Family Planning Benefits:

Family planning services and supplies are limited to services and supplies with the primary purpose of family planning, and are provided in a family planning or other medical setting.

Family Planning-Related Services:

Family planning-related services and supplies are services provided as part of, or as follow-up to, a family planning visit. Such services are provided because a family planning-related problem was identified and/or diagnosed during a routine or periodic family planning visit.

Cost Sharing Requirements:

There are no cost sharing requirements for members under this program.

Annual Enrollment and Expenditures:

Plan First's average monthly enrollment in 2017 was just over 1,700 women. The program's peak enrollment in 2013 was over 2,600 members and has experienced a gentle decline since then. The implementation of Medicaid Expansion in January of 2016 precipitated a steeper decline in Plan First

members as some women realized qualification for more comprehensive coverage. However, there are and will remain, many qualified low-income women whose income falls between the income eligibility for Medicaid Expansion and the 211% FPL for Plan First. As Medicaid Expansion coverage becomes widely known, we expect average monthly membership for Plan First to level out to around 1,500 to 1,800 members. Program Expenditures have followed the expected downward curve with enrollment. There has been a gradual decline in total expenditures from the demonstration year covering 2013 where costs were over one million dollars to the most recent year with data available, 2017, with costs of just under $530,000.

Ways this program differs from Montana's other program features:
The eligibility parameters are markedly different. The income threshold is higher and Plan First covers women only; women who are not pregnant, but able to become pregnant, and who are aged 19 – 44 years. The benefit offered is more limited than our Standard Medicaid coverage, limiting covered services to family planning and family planning related services only.

Waiver and expenditure authorities the State believes to be necessary to authorize this demonstration*:*
The State is requesting waiver of some Medicaid requirements, thus asking for authority to:

- Not assure transportation to and from providers for the demonstration population;
- Offer the demonstration population a benefit package consisting only of family planning services and family planning-related services;
- Not provide medical assistance to the demonstration population for any time prior to when an application for the demonstration is made;
- Not furnish or arrange for EPSDT services to the demonstration populations;
- Establish reimbursement levels to Federally Qualified Health Centers and Rural Health Centers and Rural Health Clinics that will compensate them solely for family planning and family planning related services;
- Not require reporting of changes for income or household size for 12 months, for a person found income-eligible upon application or annual redetermination when determining eligibility for the family planning demonstration; and
- Allow utilization of an enrollment limit for the demonstration population.

Hypotheses and Evaluation parameters of the demonstration:

Goal 1: The demonstration will result in an increase in the number of female Medicaid members, ages 19 through 44, receiving family planning services paid by Medicaid.

Measure: The number of women ages 19 through 44 who receive Medicaid family planning services each waiver year.

Data required: The number of women ages 19 through 44 who receive Medicaid family planning services as identified by a code unique to Plan First members.

Progress Update as of the end of 2016: Utilization of family planning services increased from 16% in DY1 to 21% in SFY2016. Montana expanded Medicaid effective January 1, 2016, which explains the significant increase in Female Medicaid Members in CY2016. Even with the addition of expanded Medicaid, which offers many low-income women a more comprehensive benefit, over 500 low-income women who did not qualify for expanded Medicaid received family planning services through Plan First in 2016.

Goal 2: The demonstration will result in a decrease in the percentage of births paid by Medicaid for women ages 19 through 44.

Measure: The percentage of births to women ages 19 through 44 paid by Medicaid.

Data required: The total number of births. The number of births to Medicaid members ages 19 through 44. The total number of female Medicaid members ages 19 through 44.

Progress Update as of the end of 2016: Births paid by Medicaid seem to be levelling

off while Medicaid members have significantly increased. Also, Montana began a long acting reversible contraceptive (LARC) initiative in January 2016. The consequences of this initiative will also be monitored. We are awaiting the results of a new report, similar to the one published in November of 2015, in order to better evaluate this goal.

Goal 3: The demonstration will reduce annual Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care.

Measure: Estimated Medicaid savings from births averted by the family planning waiver less the cost of family planning services paid under the waiver, and the percent decrease in Medicaid births.

Data required: The difference in cost and the percent difference between the expected number of Medicaid births and the actual number of Medicaid births for Medicaid members ages 19 through 44 each waiver year. The estimated cost of each birth including prenatal care, delivery, and newborn and infant care costs. The cost of providing family planning services to the waiver population.

Progress Update as of the end of 2016: The information available at the time of this report does not include newborn care. It will be included on a future report. Even though all claims for SFY2016 services have not yet been paid, it appears that the costs for Medicaid births for SFY2016 have not significantly increased from SFY2015, even with the significant increase in female Medicaid members attributable to Medicaid expansion.

Goal 4: The demonstration will improve birth outcomes and the health of women by increasing the child spacing interval among women in the target population.

Measure: The proportion of women ages 19 through 44 with a Medicaid paid birth in a waiver year with a subsequent Medicaid paid birth within 18 months.

Data required: The number of Medicaid paid births to Medicaid members ages 19 through 44 each waiver year and the number of subsequent Medicaid paid births for those women within 18 months.

Progress Update as of the end of 2016: It is still too early in the demonstration to identify any trends in decreasing subsequent births. Recent data shows a slight increase in child spacing (.54%) from State Fiscal Year (SFY) 2014 to SFY 2015 as Medicaid enrollment has increased. Montana will continue to monitor this as well as the influence of the LARC initiative.

The goals of the Montana Plan First demonstration project remain the same for our extension request period of June 1, 2018 through December 31, 2022.

Location and Internet Address of Demonstration Application for Public Comment and Review

- Documents are available for public review at: May 2018 Submission;
- Public Input and Comments are welcome from April 2, 2018 through May 4, 2018. Comments and questions may be directed by to the following:
  - By US Mail:

    Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator
    Director's Office
    PO Box 4210
    Helena, MT 59604-4210
  - By telephone:

    (406) 444-2584

    By electronic mail

    mkulawik@mt.gov

- You will also have opportunity to officially comment during the federal public comment period after CMS finds the application and public notice requirements met.

Public Notice and Public Input Process

On April 2, 2018, Montana will publish, in the state's three largest newspapers, an announcement of the Montana Department of Public Health Human Services planned submission of a near 5-year Plan First Section 1115 Medicaid Family Planning Waiver Extension application. This announcement summarizes the current waiver and extends an invitation for the public to review pertinent information posted on the Department website. The announcement further invites public comment, between April 2, 2018 and May 4, 2018 via the contact information listed. Also on April 2, 2018, Montana will post, to the Montana Department of Health and Human Services main web page, Montana DPHHS Website, Public Notices section, an announcement of the May 2018 Medicaid 1115 Plan First Family Planning Waiver Extension Submission: Repeat of Public Notice Period Submission. This announcement will link directly to the specific Plan First web page, May 2018 Submission, where copies of the below public notice documents will be available for review:

- A Public Notice / Public Input Schedule with Public Input accepted April 2, 2018 through May 4, 2018.
- A Brief Summary of the Demonstration
- This explanation of the **Public Notice Process and Public Input Process**:
  - The public has from April 2, 2018 through May 4, 2018 to examine and comment on Montana's planed Plan First Extension Application;
  - Informative documents are available for review on the Plan First Webpage;
  - Public input is invited, via a Newspaper Public Notice Announcement published in the state's three largest newspapers;
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- Montana Tribes, Indian health providers and Urban Indian organizations soliciting comments on the demonstration extension application;
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- An electronic letter sent to other interested parties soliciting comments on the demonstration extension application;

At the end of the Public Input Period, Montana will post a summary of comments received and actions taken because of those comments. If the comments received stimulate a change to the Extension Application, Montana will post the Preliminary Extension Application, including Budget Neutrality projections, with red-line changes, and then also post the finalized version of the Extension Application.

(6)

FULL PUBLIC NOTICE DOCUMENT

FOR THE MAY 2018 MEDICAID 1115 MONTANA PLAN FIRST
FAMILY PLANNING WAIVER EXTENSION/RENEWAL SUBMISSION:
REPEAT OF PUBLIC NOTICE PERIOD

Pursuant to 42 C.F.R. Section 431.408, public notice is hereby given to the submission of a Medicaid proposed demonstration extension request of the Montana Plan First Family Planning Waiver (Plan First), effective June 1, 2018 through December 31, 2022.

The current extension of the Montana Plan First Family Planning Waiver would have expired on December 31, 2017, but was temporarily extended through May 31, 2018.

Program Description, Goals and Objectives

Eligible individuals are:

- Montana women ages 19 through 44;
- Not eligible for other Medicaid benefits;
- Able to become pregnant but are not now pregnant; and
- Earning a household income through 211% of the FPL.
- This program is limited to 4,000 women at any given time.

The goals of the demonstration are:

- Improved access to and use of family planning services among the participants;
- Fewer unintended pregnancies; and
- Improved birth outcomes and women's health by increasing the child spacing interval.

Family Planning Health Care Delivery System:

- Plan First covered services may be provided by any Montana Medicaid Provider on a fee-for-service basis. A large portion of Plan First members are enrolled through and receive services from Title X family planning clinics. These clinics are commonly staffed with mid-level providers. If family planning-related issues are discovered during the family planning visit, members are often referred to other providers to address those issues. Mid-level providers make up about half of the Plan First care delivery followed by pharmacies, physicians, laboratories, outpatient hospitals, FQHCs and others.

Family Planning Benefits:

Family planning services and supplies are limited to services and supplies with the primary purpose of family planning, and are provided in a family planning or other medical setting. Family planning services and supplies include:

- FDA-approved methods of contraception;
- Sexually transmitted infection (STI)/sexually transmitted disease (STD) testing, Pap tests and pelvic exams;
- Drugs, supplies, or devices related to women health services; and
- Contraceptive management, patient education, and counseling.

Family Planning-Related Services:

Family planning-related services and supplies are services provided as part of, or as follow-up to, a family planning visit. Such services are provided because a family planning-related problem was identified and/or diagnosed during a routine or periodic family planning visit. Examples of family planning-related services and supplies include:

- Colposcopy (and procedures done with/during a colposcopy), or a repeat Pap test performed as a follow-up to an abnormal Pap test, done as part of a routine or periodic family planning visit

- Drugs for the treatment of STI/STDs, except for HIV, AIDS, or hepatitis, when the STI/STD is identified or diagnosed during a routine or periodic family planning visit. A follow-up visit or encounter for the treatment or prescription of drugs, and subsequent follow-up visits to rescreen for STIs and STDs, based on the Centers for Disease Control and Prevention guidelines may be covered;
- Drugs and treatment for vaginal infections and disorders, other lower genital tract and genital skin infections and disorders, and urinary tract infections, where these conditions are identified or diagnosed during a routine or periodic family planning visit. A follow-up visit for treatment or drugs may also be covered;
- Other medical diagnosis, treatment, and preventive services, routinely provided during family planning visit in a family planning or other medical setting. An example of a preventive service could be a vaccination to prevent cervical cancer; and
- Treatment of major complications arising from a family planning procedure such as, but not limited to:
  - Treatment of a perforated uterus due to an intrauterine device insertion;
  - Treatment of severe menstrual bleeding caused by a Depo-Provera injection requiring dilation and curettage; or
  - Treatment of surgical or anesthesia-related complications caused during a sterilization procedure.

Cost sharing requirements:
There are no cost sharing requirements for members under this program.

Annual Enrollment and Expenditures:
Plan First's average monthly enrollment in 2017 was just over 1,700 women. The program's peak enrollment in 2013 was over 2,600 members and has experienced a gentle decline since then. The implementation of Medicaid Expansion in January of 2016 precipitated a steeper decline in Plan First members as some women realized qualification for more comprehensive coverage. However, there are and will remain, many qualified low-income women whose income falls between the income eligibility for Medicaid Expansion and the 211% FPL for Plan First. As Medicaid Expansion coverage has become widely known, we expect average monthly membership for Plan First to level out to around 1,500 to 1,800 members. Program Expenditures have followed the expected downward curve with enrollment. There has been a gradual decline in total expenditures from the demonstration year covering 2013 where costs were over one million dollars to the most recent year with data available, 2017, with costs of just under $530,000.

Ways this program differs from Montana's other program features:
Plan First covers women only; women who are not pregnant, but able to become pregnant, and who are aged 19 – 44 years. The benefit offered is more limited than our Standard Medicaid coverage, limiting covered services to family planning and family planning related services only.

Waiver and expenditure authorities the State believes to be necessary to authorize this demonstration*:*
Montana is requesting waiver of selected Medicaid requirements to enable the operation of the Montana Plan First Waiver as a Demonstration that will effectively meet the objectives as well as budget neutrality expectations. All Medicaid requirements apply except for the following*:*

Medicaid Requirement	Expenditure Authority	Waiver Request
Methods of Administration: Transportation	Section 1902(a) (4) insofar as it incorporates 42 CFR 431.53	To the extent necessary to enable the State to not assure transportation to and from providers for the Demonstration population.
Comparability: Amount, Duration and Scope of Services	Section 1902(a)(10)(B)	To the extent necessary to allow the State to offer the Demonstration population a benefit package consisting only of family planning-related services.
Retroactive Coverage	Section 1902(a)(34)	To the extent necessary to enable the state to not provide medical assistance to the demonstration population for any time prior to when an application for the demonstration is made.
EPSDT Early and Periodic Screening, Diagnostic, and Treatment	Section 1902(a)(43)(A)	To the extent necessary to enable the state to not furnish or arrange for EPSDT services to the demonstration populations.
Prospective Payment for Federally Qualified Health Centers and Rural Health Agencies	Section 1902(a)(15)	To the extent necessary to establish reimbursement levels to these clinics that will compensate them solely for family planning and family planning related services.
Eligibility Procedures	Section 1902(a)(17)	To the extent necessary to allow the state to not require reporting of changes for income or household size for 12 months, for a person found income-eligible upon application or annual redetermination when determining eligibility for the family planning demonstration.
Reasonable Promptness	Section 1902(a)(8)	To enable the state to utilize an enrollment limit for the demonstration population.

Hypotheses and Evaluation parameters of the demonstration:

***Goal 1*:** The demonstration will result in an increase in the number of female Medicaid members, ages 19 through 44, receiving family planning services paid by Medicaid.

Measure: The number of women ages 19 through 44 who receive Medicaid family planning services each waiver year.

Data required: The number of women ages 19 through 44 who receive Medicaid family planning services as identified by a code unique to Plan First members.

***Progress Update as of late June 2014*:** During DY1 -92 women were enrolled in Plan First. At the conclusion of DY2 -2,290 women were enrolled in the program, and the number increased to 5,760 in DY3. This is an increase in the number of women eligible to receive family planning services.

***Progress Update as of the end of 2015*:** A total of 4,595 Plan First members have received a Medicaid family planning service since the beginning of the demonstration.

Progress Update as of the end of 2016: Utilization of family planning services increased from 16% in DY1 to 21% in SFY2016. Montana expanded Medicaid effective January 1, 2016, which explains the significant increase in Female Medicaid Members in CY2016. Even with the addition of expanded Medicaid, which offers many low-income women a more comprehensive benefit, over 500 low-income women who did not qualify for expanded Medicaid received family planning services through Plan First in 2016.

Goal 2: The demonstration will result in a decrease in the percentage of births paid by Medicaid for women ages 19 through 44.

Measure: The percentage of births to women ages 19 through 44 paid by Medicaid.

Data required: The total number of births. The number of births to Medicaid members ages 19 through 44. The total number of female Medicaid members ages 19 through 44.

Progress Update as of late June 2014: Data detailing the number of Montana births is not available by age, so the number of Montana births has been compared to the number of Medicaid paid births. A Medicaid Births Report, 2010-2013 was published in November of 2015. The report explained that the Medicaid birth rate increased from 2012 to 2013, 43.6% and 45.8% respectively for a 2.4% increase. The increase in birth rate corresponds to an even larger increase in Medicaid enrollment from the beginning of 2012 to the end of 2013, of 5.7%.

Progress Update as of the end of 2015: Unchanged from prior report.

Progress Update as of the end of 2016: Births paid by Medicaid seem to be levelling off while Medicaid members have significantly increased. Also, Montana began a long acting reversible contraceptive (LARC) initiative in January 2016. The consequences of this initiative will also be monitored. We are awaiting the results of a new report, similar to the one published in November of 2015, in order to better evaluate this goal.

Goal 3: The demonstration will reduce annual Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care.

Measure: Estimated Medicaid savings from births averted by the family planning waiver less the cost of family planning services paid under the waiver, and the percent decrease in Medicaid births.

Data required: The difference in cost and the percent difference between the expected number of Medicaid births and the actual number of Medicaid births for Medicaid members ages 19 through 44 each waiver year. The estimated cost of each birth including prenatal care, delivery, and newborn and infant care costs. The cost of providing family planning services to the waiver population.

Progress Update as of late June 2014: The number of Medicaid births has not yet decreased, so there is not a reduction in Medicaid birth-related expenditures.

Progress Update as of the end of 2015: Unchanged from prior report.

Progress Update as of the end of 2016: The information available at the time of this report does not include newborn care. It will be included on a future report. Even though all claims for SFY2016 services have not yet been paid, it appears that the costs for Medicaid births for SFY2016 have not significantly increased from SFY2015, even with the significant increase in female Medicaid members attributable to Medicaid expansion.

Goal 4: The demonstration will improve birth outcomes and the health of women by increasing the child spacing interval among women in the target population.

Measure: The proportion of women ages 19 through 44 with a Medicaid paid birth in a waiver year with a subsequent Medicaid paid birth within 18 months.

Data required: The number of Medicaid paid births to Medicaid members ages 19 through 44 each waiver year and the number of subsequent Medicaid paid births for those women within 18 months.

Progress Update as of late June, 2014: The data has just become available for women with Medicaid paid births in DY2. Of the 4,499 women who had Medicaid paid births from July 1, 2012, through June 30, 2013, 362, or 8%, had a subsequent Medicaid paid birth within 18 months. We will continue to

monitor this figure as the demonstration continues.
Progress Update as of the end of 2015: Unchanged from prior report.
Progress Update as of the end of 2016: It is still too early in the demonstration to identify any trends in decreasing subsequent births. Recent data shows a slight increase in child spacing (.54%) from State Fiscal Year (SFY) 2014 to SFY 2015 as Medicaid enrollment has increased. Montana will continue to monitor this as well as the influence of the LARC initiative.

The goals of the Montana Plan First demonstration project remain the same for our extension request period of June 1, 2018 through December 31, 2022.

Location and Internet Address of Demonstration Application for Public Comment and Review

- Documents are available for public review at: May 2018 Submission;
- Public Input and Comments are welcome from April 2, 2018 through May 4, 2018. Comments and questions may be directed by to the following:
  - By US Mail:
    Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator
    Director's Office
    PO Box 4210
    Helena, MT 59604-4210
  - By telephone:
    (406) 444-2584
  - By electronic mail:
    mkulawik@mt.gov
- You will also have opportunity to officially comment during the federal public comment period after CMS finds the application and public notice requirements met.

Public Notice and Public Input Process

On April 2, 2018, Montana will publish, in the state's three largest newspapers, an announcement of the Montana Department of Public Health Human Services planned submission of a near 5-year Plan First Section 1115 Medicaid Family Planning Waiver Extension application. This announcement summarizes the current waiver and extends an invitation for the public to review pertinent information posted on the Department website. The announcement further invites public comment, between April 2, 2018 and May 4, 2018 via the contact information listed. Also on April 2, 2018, Montana will post, to the Montana Department of Health and Human Services main web page, Montana DPHHS Website, Public Notices section, an announcement of the May 2018 Medicaid 1115 Plan First Family Planning Waiver Extension Submission: Repeat of Public Notice Period Submission. This announcement will link directly to the specific Plan First web page (<link to the May 2018 Medicaid 1115 Plan First Family Planning Waiver Extension Submission: Repeat of Public Notice Period Submission page >) where copies of the below public notice documents will be available for review:

- A Public Notice / Public Input Schedule with Public Input accepted April 2, 2018 through May 4, 2018.
- A Brief Summary of the Demonstration
- This explanation of the **Public Notice Process and Public Input Process**:
  - The public has from April 2, 2018 through May 4, 2018 to examine and comment on Montana's planed Plan First Extension Application;
  - Informative documents are available for review on the Plan First Webpage;

- Public input is invited, via a Newspaper Public Notice Announcement published in the state's three largest newspapers;
- Tribes, the Montana Health Coalition and other interested parties are specifically invited to comment;
- Comments and questions may be directed to the following:
  - By US Mail:
    Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator
    Director's Office
    PO Box 4210
    Helena, MT 59604-4210
  - By telephone:
    (406) 444-2584
  - By electronic mail:
    mkulawik@mt.gov ; and
- You will also have opportunity to officially comment during the federal public comment period after CMS finds the application and public notice requirements met. The location to make these comments can be found on-line at the CMS Website.

- Text of the Newspaper Public Notice Announcements
- An Abbreviated Public Notice Document
- A Full Public Notice Document
- A Compiled Public Notice Documents Packet
- A Tribal Consultation / Indian health providers and Urban Indian Organization letter sent to Montana Tribes, Indian health providers and Urban Indian organizations soliciting comments on the demonstration extension application;
- A letter sent to the Montana Health Care Coalition soliciting comments on the demonstration extension application;
- An electronic letter sent to other interested parties soliciting comments on the demonstration extension application;

At the end of the Public Input Period, Montana will post a summary of comments received and actions taken because of those comments. If the comments received stimulate a change to the Extension Application, Montana will post the Preliminary Extension Application, including Budget Neutrality projections, with red-line changes, and then also post the finalized version of the Extension Application.

Attachment 1

Please see content in separate document: 2018MTpfExtensionAP-STCs508.pdf