

1115 Medicaid Redesign Team (MRT) Waiver Public Forum

1115 MRT Waiver Overview



1115 Demonstration Waiver

- Section 1115 of the Social Security Act gives the Secretary of Health and Human Services the authority to waive certain provisions and regulations to allow Medicaid funds to be used in ways that are not otherwise allowed under federal rules.
- 1115 Demonstration Waivers grant flexibility to states for innovative projects that advance the objectives of Title XIX of the Medicaid program by waiving certain compliance requirements of federal Medicaid laws.
- A Waiver can be approved for up to five years and the State may request subsequent extensions.



General 1115 Demonstration Waiver Overview

- Special Terms and Conditions (STCs) outline the basis of an agreement between the State and the Centers for Medicare and Medicaid Services (CMS) including waiver and expenditure authorities. STCs specify the State's obligation to CMS during the life of the demonstration, including general and financial reporting requirements and the timetable of State deliverables.
- Quarterly and annual reports are required and an Independent Evaluation is completed at the end of a Demonstration program.
- Federal Medicaid expenditures with the Waiver cannot be more than federal expenditure without the Waiver during the course of the Demonstration.



New York State's 1115 Waiver

- The NYS Medicaid Redesign Team (MRT) Waiver (formerly the Partnership Plan) has been in operation since 1997.
- New York's 1115 MRT Waiver was renewed on December 6, 2016 effective through March 31, 2021.
- Goals for the Waiver are to:
 - Improve access to health care for the Medicaid population;
 - Improve the quality of health services delivered; and
 - Expand coverage with resources generated through managed care efficiencies to additional low-income New Yorkers.



1115 MRT Waiver Programs

Medicaid Managed Care: Provides comprehensive health care services (including all benefits available through the Medicaid State Plan) to low-income, uninsured individuals. It provides an opportunity for enrollees to select a Managed Care Organization (MCO) whose focus is on preventive health care.

- Programs include:
 - Mainstream Medicaid Managed Care (MMMC)
 - Health and Recovery Plans (HARPs) and Home and Community Based Services (HCBS)
 - Managed Long Term Care (MLTC) and Long Term Services and Supports (LTSS)

Delivery System Reform Incentive Payment (DSRIP) program: Provides incentives for Medicaid providers to create and sustain an integrated, high performance health care delivery system that can effectively meet the needs of Medicaid beneficiaries and low income uninsured individuals in their local communities by improving quality of care, improving health outcomes & reducing costs (CMS Triple Aim).



- Children's System Transformation- Subject to CMS Approval
 - Children's Waiver
 - Authority to mandatorily enroll children participating in the Children's Waiver into Medicaid Managed Care.
 - Add home and community based services provided under the Children's Waiver to the Medicaid Managed Care benefit package.
 - Foster Care
 - Authority to mandatorily enroll children placed with a voluntary foster care agency into Medicaid Managed Care.
 - Add services provided by licensed voluntary foster care agencies to the Medicaid Managed Care benefit package.



- OPWDD Voluntary Managed Care Transition- Subject to CMS Approval
 - OPWDD reform and redesign initiatives developed in collaboration with the Commissioner's Transformation Panel and stakeholder engagement are continuing.
 - The State is reviewing the Managed Care transition plan for individuals with developmental disabilities.



- Managed Long Term Care Partial Plan Nursing Home Benefit- Subject to CMS Approval
 - DOH is continuing to work with CMS to modify the partial capitation long term care plan benefit (MLTCPC) to include only 3 calendar months of permanent nursing home care for individuals who are permanently placed. Discussion includes procedural changes and increased monitoring.
 - The limit in the Nursing Home benefit does not impact the Medicaid Managed Care Plans or the integrated MLTC Plan products (Fully Integrated Dual Alignment- FIDA; Medicaid Advantage Plan- MAP, and Program of All-Inclusive Care for the Elderly- PACE) or their enrollees.



- Managed Long Term Care Partial Plan "Lock-In" Provisions- Subject to CMS Approval
 - DOH is continuing to work with CMS to apply a lock-in period to new enrollments into an MLTC Partial plan.
 - Members who switch from one MLTC plan to another MLTC plan will have a 90-day grace period to make another plan transfer, and then will experience a lock-in period for nine months after the end of the grace period.
 - The lock-in provisions align with those now in place in Mainstream Managed Care.
 - The lock-in provisions do not impact the integrated MLTC Plan products (Fully Integrated Dual Alignment- FIDA; Medicaid Advantage Plan- MAP; and Program of All-Inclusive Care for the Elderly- PACE) or their enrollees.



Work in Progress...

- DSRIP beyond March 2020
- Criminal Justice
 - Provide Medicaid services to certain higher-risk incarcerated individuals during the 30-day period prior to release
- 1115 MRT Waiver Renewal
 - MRT Waiver authority expires March 31, 2021
 - Submit renewal application to CMS by September 30, 2020
- Supportive Housing- 1915(i) SPA
 - Achieve federal financial participation in supportive housing services



DSRIP Renewal Process and Timeline

- DSRIP Renewal Concept Paper- Public Comment and CMS- Summer 2019
- First Public Notice- Tribal Notice
 - September 16, 2019
- Draft Waiver Proposal to CMS
 - September 30, 2019
- Official Waiver Proposal to CMS
 - November 29, 2019



1115 MRT Waiver Resources

1115 MRT Waiver Website

http://www.health.ny.gov/health_care/medicaid/redesign/medicaid_waiver_1115.htm

Managed Care

https://www.health.ny.gov/health_care/managed_care/index.htm

DSRIP

http://www.health.ny.gov/health_care/medicaid/redesign/dsrip/

OPWDD 1115 Transition Webpage

https://www.health.ny.gov/health care/medicaid/program/medicaid health homes/idd/draft idd 1115 waiver.htm



1115 MRT Waiver Resources

04/19/2019 STCs DOH website

https://www.health.ny.gov/health care/managed care/appextensi on/docs/2019-04-19 ny1115 stc.pdf

Quality Strategy

https://www.health.ny.gov/health care/medicaid/redesign/docs/rev quality strategy program sept2015.pdf

CMS Homepage

http://www.cms.gov/

Medicaid Homepage

http://medicaid.gov/



Guidelines for Public Comments

- If you'd like to speak, please sign up at the registration table.
- When your number is called, please come up to the microphone.
- Comments will be timed. You will have 5 minutes to speak.
- Please return your number to one of the timekeepers.

Written comments can be submitted at the registration table.

You may also submit written comments by July 5, 2019 to:

1115waivers@health.ny.gov

Subject: MRT Public Comment

