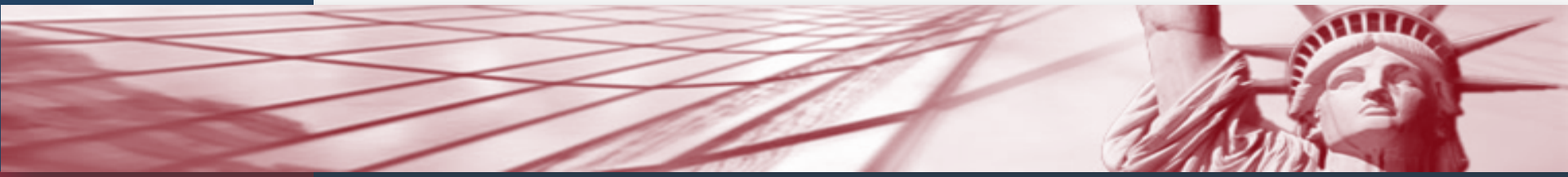


Overview of Partnership Plan Waiver Extension Request

September 20, 2012 – Albany
September 25, 2012 – Brooklyn
September 27, 2012 – Webinar

Jason A. Helgerson
Medicaid Director
NYS Department of Health

Agenda

- Review of Section 1115 Medicaid Waiver Partnership Plan
- Partnership Plan Background
- Success of the Partnership Plan
- Purpose of Waiver Extension Request

  - *Medicaid Redesign Team Multi -Year Action Plan*
  - *National Health Care Reform*

- Timeline for Submission to CMS

  - *Transparency Regulations*

- Public Hearing Process

What is a Section 1115 Medicaid Waiver?

- Section 1115 of the Social Security Act provides the authority to implement pilot or demonstration projects that promote objectives of the Medicaid statute:
  - ✓ *Section 1115(a)(1) waives provisions of Section 1902.*
  - ✓ *Section 1115(a)(2) provides federal financial participation for costs that cannot otherwise be matched under Section 1903.*

What is a Section 1115 Medicaid Waiver?

- A waiver is an agreement between the state and the federal government that:
  - ✓ *allows the state greater flexibility to administer programs;*
  - ✓ *allows the state to invest savings to improve care, increase efficiency, and reduce costs;*
  - ✓ *allows the state to demonstrate and evaluate an innovative policy approach not demonstrated on a statewide basis.*

What is a Section 1115 Medicaid Waiver?

- Generally, 1115 waivers are approved for a five-year period.
- Waivers must be “budget neutral”
  - ✓ *for the duration of the demonstration, federal spending must not be more than federal spending without the waiver*

Section 1115 Partnership Plan Background

- Operating since 1997, New York's Section 1115 Partnership Plan waiver program has played a critical role in improving the health status of low-income residents by:
  - ✓ *Improving access to health care;*
  - ✓ *Improving the quality of services delivered;*
  - ✓ *Expanding coverage to additional low-income New Yorkers with resources generated through manage care efficiencies.*

Partnership Plan Background

1997

- ✓ Implemented Managed Care Delivery System
- ✓ Extended Medicaid coverage to certain adults not otherwise eligible for health insurance.
- ✓ Provide 24 months of coverage to women losing Medicaid after giving birth.

2001

- ✓ Family Health Plus Program (FHPlus) was added to provide coverage to low-income uninsured adults, with or without children, as a result of accrued savings.

Partnership Plan Background

2002

- ✓ Family Planning Expansion Program was added to provide family planning related services to certain adults.

2005

- ✓ Mandatory enrollment of Supplemental Security Income (SSI) population started to be phased in (completed in 2007).

Partnership Plan Background

2006

- ✓ Renewed the 1115 Partnership Plan Waiver
- ✓ New Section 1115 Medicaid waiver was approved, the Federal-State Health Reform Partnership (F-SHRP)
- ✓ SSI population was shifted to the 1115 F-SHRP Waiver

Partnership Plan Background

2006

- ✓ Renewed the 1115 Partnership Plan Waiver
- ✓ New Section 1115 Medicaid waiver was approved, the Federal-State Health Reform Partnership (F-SHRP)
- ✓ SSI population was shifted to the 1115 F-SHRP Waiver

Partnership Plan Background

2007

FHPlus was amended to implement Employer Sponsored Health Insurance (ESHI) (Premium Assistance and Wraparound services)

2010

Eligibility simplifications and delivery systems enhancements were added to the 1115 Partnership Plan Waiver

- ✓ *12 month continuous enrollment*
- ✓ *Elimination of resource test*
- ✓ *Spousal budgeting for Home and Community-Based Waiver Programs*
- ✓ *Expansion of mandatory managed care into additional counties*
- ✓ *Mandatory managed care enrollment of HIV + population*

Partnership Plan Background

2011

Partnership Plan renewed and added:

- ✓ Hospital-Medical Homes
- ✓ Potentially Preventable Readmissions initiatives
- ✓ Federal match for Designated State Health Programs for new waiver initiatives (i.e. Indigent Care Pool/Uncompensated Care)

2012

Pending approval of Mandatory Managed Long Term Care to provide long term care services for those in need of more than 120 days of community-based long term care, for dual eligible individuals over age 21 and nursing home eligible non-dual individuals.

Success of the Partnership Plan Waiver

- Statewide Managed Care enrollment has grown from 650,000 in July 1997 to more than 3.2 million as of July 2012.
- Increased the number of health care providers available to recipients through enrollment in Medicaid managed care.
- Insured more New Yorkers through Family Health Plus with incomes up to 150% of the federal poverty level (FPL) for adults with children, and 100% of the FPL for adults without children

  - Resource test for FHPlus was eliminated in January 2012

Success of the Partnership Plan Waiver

- Partnered with private insurers to increase health insurance coverage for the working uninsured
  - ✓ *the FHPlus Premium Assistance Program (FHP-PAP) subsidizes employer sponsored health insurance (ESHI)*
  - ✓ *as of August 2012 approximately 3,080 are enrolled in FHP-PAP*
- Expanded access to Family Planning Services

Medicaid Redesign Team (MRT) Action Plan

- January 2011 Governor Cuomo created the Medicaid Redesign Team to develop a multi year action plan that would:
  - Achieve CMS' Triple Aim – improve health outcomes, increase access to health care and reduce costs through effective care management for all.
  - Facilitate innovation to reinvest in the health care structure.
  - Invest in provider level care management to drive cooperation in improvement of health outcomes.
    - ✓ *Health Homes*
    - ✓ *Patient Centered Medical Homes*
- The multi year action plan was developed with an unprecedented level of stakeholder engagement and a unified approach to Medicaid reform based on fiscal discipline.

1115 Partnership Plan Waiver Extension Request

- New York State is requesting a five-year extension to the 1115 Partnership Plan Waiver to fully implement the most sweeping Medicaid reform plan in New York State history.
  - ✓ *Implementation of the MRT Action Plan requires an Amendment to the Partnership Plan Waiver to:*
    - *Reshape how health care is delivered;*
    - *Build the infrastructure to support provisions of the Affordable Care Act (ACA) health care reforms.*

Key Elements of the Waiver Amendment

As one of the largest waivers in history approved by the Centers for Medicare & Medicaid Services (CMS) the waiver will allow the state the unique opportunity to lower Medicaid costs for the state's health care system by implementing:

- Primary Care Expansion
- Health Home Development Fund
- New Care Models
- Medicaid Supportive Housing Expansion
- Expanding the Vital Access Provider and Safety Net Provider Program
- Public Hospital Innovation
- Public Health Innovation
- Long Term Care Transformation and Integration to Managed Care
- Capital Stabilization for Safety Net Hospital
- Hospital Transition
- Ensuring the Health Workforce Meets the Needs in the New Era of Health Care Reform
- Regional Health Planning
- MRT Waiver Evaluation Program

The Waiver Extension and National Health Care Reform

- The Affordable Care Act (ACA) will ensure that one million New Yorkers gain access to health insurance, many for the first time. The Partnership Plan 1115 Waiver Amendment and Extension will:
  - ✓ Ensure newly enrolled individuals who seek care will have adequate access to state's health care system;
  - ✓ Provide funding for investing in the state's health care delivery system to meet the needs of all New Yorkers - 1.7 million New Yorkers will still be uninsured after the implementation of the ACA;
  - ✓ Reduce the uninsured rate and improve overall population health;
  - ✓ Transition Medicaid enrollees to care management for all and ending Fee-For-Service Medicaid; and
  - ✓ Reduce health disparities

The Waiver Extension Request Interim Report

- CMS requires all waiver extension requests include an Interim Report to review waiver programs to date.
- The Interim Report of the Partnership Plan waiver programs provides an analysis of the progress to date of the established goals and objectives.
- The Interim Report compares waiver program performance with national efforts and the CMS core measures for Medicaid.
- The Interim Report is available on the MRT Waiver Extension website at: http://www.health.ny.gov/health_care/medicaid/redesign/mrt_waiver_ext_info

1115 Waiver Extension Request Timeline

- Tribal Consultation was conducted as follows:
  - **August 12, 2012** – Tribal Notification Letter
  - **August 24, 2012** – Tribal Conference Call
  - **September 12, 2012** – Pursuant to 42 CFR Section 431.408, the State announced its intent to seek a waiver extension by Public Notice in the New York State Register.

1115 Waiver Extension Request Timeline

- Stakeholder Engagement will be conducted through Public Hearings on:
  - **September 20, 2012** 1:00 PM – 4:00 PM
    Albany, NY
  - **September 25, 2012** 11:30 – 2:30 PM
    Brooklyn, NY
  - **September 27, 2012** 1:00 PM – 4:00 PM
    Webinar
- **October 18, 2012** - NYS will officially submit its request to CMS.

Public Hearing Ground Rules

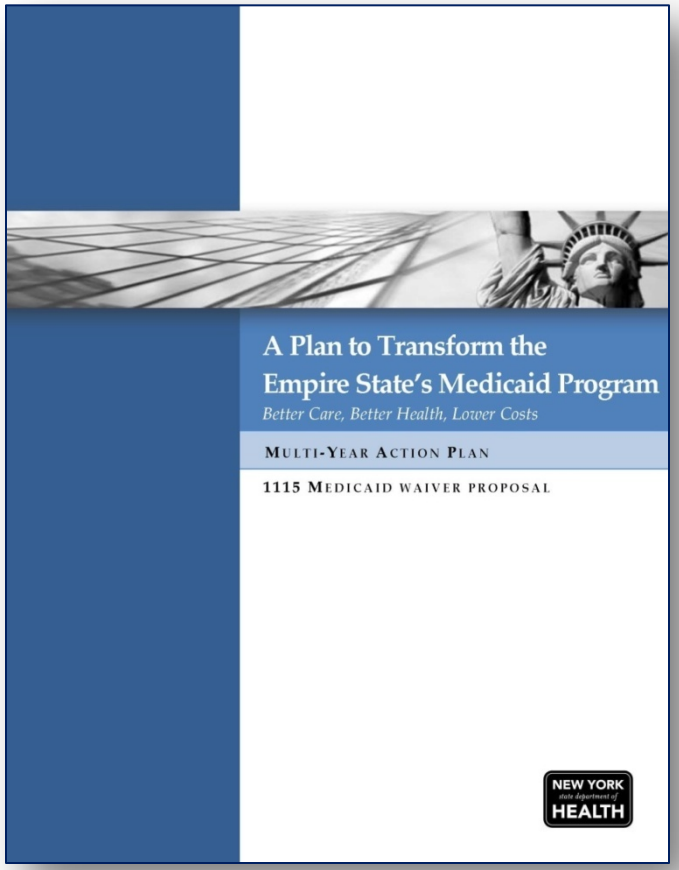
- We want to hear from as many people as possible.
- All speakers will have two minutes to present their idea(s).
- The purpose of this hearing is to gather feedback on the proposed waiver extension.
- We will document every idea we receive today.
- If you have specific concerns regarding the Medicaid program, please see Department staff.

Extension Application and Interim Report

Download your copy of the Partnership Plan Waiver Extension Application and the Interim Report at:

http://www.health.ny.gov/health_care/Medicaid/redesign/mrt_waiver/ext_info.htm.

MRT Action Plan



Download your copy of the MRT Action Plan at:

www.health.ny.gov/health_care/medicaid/redesign/docs/mrtfinalreport.pdf.

Contact Information

We want to hear from you!

MRT Waiver e-mail:
mrtwaiver@health.state.ny.us

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

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