Heritage Health Adult Expansion and 1115 Waiver Program Overview

HFMA Virtual Conference

January 21, 2021

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Helping People Live Better Lives.

Agenda

- Basics of Medicaid Expansion
- Nebraska Medicaid Expansion / Heritage Health Adult - Phase 1
- HHA 1115 Waiver Program Phase 2 Overview
- HHA Phase 2 Communication Overview
- HHA 1115 Waiver Program Phase 3 Overview

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Medicaid Expansion Basics

- Who could qualify for coverage via Medicaid Expansion?
  - Nebraskans age 19-64 who earn up to 138% of the federal poverty level ($17,605 a year for a single person or $36,156 for a household of four)
- How can newly eligible people apply for coverage?
  - Beginning August 1, 2020, applications can be submitted in the following ways:
    - Online at www.ACCESSNebraska.ne.gov
    - Over the phone by calling ACCESS Nebraska Toll free: (855) 632-7633
    - Submitting a paper application (paper applications may be downloaded from AccessNebraska.gov):
      - By fax at (402) 742-2351,
      - By email at DHHS.ANDICenter@nebraska.gov,
      - By mail at P.O. Box 2992, Omaha, NE 68103-2992, or
    - In person at a DHHS local office.
    - Find a local office at http://dhhs.ne.gov/Pages/Public-Assistance-Offices.aspx

Medicaid Expansion (HHA Phase 1)

- On August 1, 2020 DHHS began accepting applications for Medicaid Expansion and the Heritage Health Adult (HHA) Program
- On October 1, 2020 DHHS and our contracted Health Plans began providing services
  - Implemented a tiered benefit system
  - All expansion adults receive a Basic benefit package that includes comprehensive physical, behavioral, and mental health services
  - Expansion adults that are medically frail, age 19-20, or who become pregnant also receive Prime benefits which include dental, vision, and over-the-counter medications
- As of January 20, 2021 we have 30,616 adults enrolled in HHA Expansion:
  - 23,923 Basic beneficiaries
  - 6,693 Prime beneficiaries

1115 HHA Waiver Overview

- In December 2019 MLTC applied for an 1115 HHA Demonstration Waiver
  - The COVID-19 pandemic impacted the original timeline for CMS approval of the 1115 HHA Waiver. CMS approved the 1115 HHA Waiver on October 20, 2020
- The Expansion (HHA) 1115 Waiver Program will be implemented in two phases:
  - **(Phase 2) Demonstration Year 1:** Allow HHA beneficiaries in the Basic Benefit Tier to qualify for Prime benefits by completing Wellness Initiatives and Personal Responsibility Activities
  - **(Phase 3) Demonstration Year 2:** Adds Community Engagement Activities to the Demonstration requirements. HHA beneficiaries in the Basic Benefit Tier will also need to complete these activities to qualify for Prime benefits.
- HHA beneficiaries that are medically frail, age 19-20, or who become pregnant **are exempt** from participating in the Demonstration until their eligibility status changes

1115 Waiver Program - HHA Phase 2

- On April 1, 2021 MLTC will begin implementation of the Waiver Program
- MLTC will conduct benefit tier reviews for each participant every six months to determine if a participant has completed the Wellness Initiatives and Personal Responsibility Activities
  - **Wellness Initiatives** include completing an Annual Health Visit (AHV) and Health Risk Screening (HRS)
  - **Personal Responsibility Activities** include maintaining employer sponsored health coverage and keeping scheduled appointments
- Participants that complete the Wellness Initiatives and Personal Responsibility Activities will qualify for Prime benefits
  - Participants that do not complete Wellness Initiatives will remain in the Basic Benefit Tier for a subsequent six-month period
  - Participants that do not complete Personal Responsibility Activities will remain in the Basic Benefit Tier for two consecutive six-month periods

1115 Waiver Program Phase 2

- Health Risk Screening (HRS) – the HRS is a series of 18 questions that helps gather the individual's health information
  - This survey will be administered to all individuals at the start of HHA Phase 2 and annually thereafter
  - The individual's Health Plan (MCO) is responsible for administration of the HRS and for reporting it to DHHS

1115 Waiver Program Phase 2

- Annual Health Visit (AHV) – the AHV is a visit with a health care provider for a comprehensive evaluation and examination
  - Participants will have ten months to complete their initial AHV and AHVs completed in the 2 months prior to entering the Demonstration will be counted for the initial AHV
  - Thereafter participants will have 12 months from the date of their last AHV to complete each subsequent AHV

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1115 Waiver Program Phase 2

- Employer sponsored health coverage (ESC)
  - If an individual has affordable employer-sponsored health coverage upon entering the 1115 Waiver Program, they must keep it to qualify for Prime benefits
  - MLTC does operate a Health Insurance Premium Payment (HIPP) program and can evaluate members for potential eligibility

1115 Waiver Program Phase 2

- Keeping scheduled appointments
  - Participants must keep scheduled appointments or give their providers adequate notice that they will be unable to keep appointments
  - To qualify for Prime benefits, Participants cannot miss three or more scheduled appointments in a 6-month benefit tier period without good cause
  - The provider may apply their clinic's timely notification of cancellation policy by notifying the Health Plan
  - Providers are encouraged, but not required to report missed appointments to the Health Plan

1115 Waiver Program Phase 2

- Good cause – Participants that have a good reason for failing to complete a Wellness Initiative or Personal Responsibility Activity can submit a good cause exepmption request
  - Good cause examples:
    - Physical or mental health emergency
    - Transportation issues
    - Family emergencies
  - Participants will submit good cause requests to DHHS

HHA Project – Phase 2 Communication Overview

- MLTC has developed a comprehensive communication plan that targets HHA beneficiaries that will be participating in the 1115 Waiver Program, and engage other impacted DHHS partners
- MLTC will mail a letter and handbook to each (existing) HHA beneficiaries that will enter on April 1, 2021
  - HHA beneficiaries that enter the program after April 1 will also receive the handbook and required notices
- MLTC is developing a series of training videos targeting HHA beneficiaries as well

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HHA Project – Phase 2 Communication Overview

- MLTC will also continue to partner with the contracted Managed Care Entities (MCEs), Member Enrollment Broker, Community Partners, Health Care Providers, Native American Tribes, and Nebraska State Agencies to conduct targeted outreach and education for participants prior to and during the 1115 Waiver program
  - The MCE and Enrollment Broker member communication material will be updated
  - MLTC is developing a Program Fact Sheet and FAQ for partner engagement
  - MLTC will continue to conduct presentations for Health Care Providers, Native American Tribes, Community Partners, and State Agency partners

1115 Waiver Program Phase 3

- On April 1, 2022 MLTC will implement Phase 3 which includes the Demonstration Program Community Engagement Activities
  - Participants who are not exempt from Community Engagement Activities must complete at least 80 hours per month in any combination of the following:
    - Employment, Education, Skill building, Apprenticeship, Volunteering, Job seeking
  - DHHS-sponsored programs will also qualify as Community Engagement Activities

Questions and Discussion

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