CENTERS FOR MEDICARE & MEDICAID SERVICES
WAIVER LIST

NUMBER: **11-W-00030/1**

TITLE: **MassHealth Medicaid Section 1115 Demonstration**

AWARDEE: **Massachusetts Executive Office of Health and Human Services (EOHHS)**

All requirements of the Medicaid program expressed in law, regulation and policy statement, not expressly waived in this list, shall apply to the demonstration project beginning on July 1, 2017 through June 30, 2022, unless otherwise specified. In addition, these waivers may only be implemented consistent with the approved Special Terms and Conditions (STCs).

All previously approved waivers for this demonstration are superseded by those set forth below for the state's expenditures relating to dates of service during this demonstration extension.

Under the authority of section 1115(a)(1) of the Social Security Act (the Act), the following waivers of state plan requirements contained in section 1902 of the Act are granted in order to enable the Commonwealth of Massachusetts (State/Commonwealth) to carry out the MassHealth Medicaid section 1115 demonstration.

1. Statewide Operation **Section 1902(a)(1)**

To enable Massachusetts to provide managed care plans or certain types of managed care plans, only in certain geographical areas of the Commonwealth.

2. Comparability/Amount, Duration, and Scope **Section 1902(a)(10)(B)**

To enable Massachusetts to implement premiums and copayments that vary by eligibility group, income level and service, and delivery system as described in Attachment B.

To enable the Commonwealth to provide benefits that vary from those specified in the State plan, as specified in Table B and which may not be available to any categorically needy individuals under the Medicaid state plan, or to any individuals in a statutory eligibility group.

3. Eligibility Procedures and Standards **Section 1902(a)(10)(A),**

		Section 1902(a)(10)(C)(i)-(iii), and Section 1902(a)(17)

To enable Massachusetts to use streamlined eligibility procedures including simplified eligibility redeterminations for certain individuals who attest to no change in circumstances and streamlined redeterminations for children, parents, caretaker relatives, and childless adults.

4.	**Disproportionate Share Hospital (DSH) Requirements insofar as it incorporates Section 1923**	**Section 1902(a)(13)**

To exempt Massachusetts from making DSH payments to hospitals which qualify as a Disproportionate Share Hospital in any fiscal year or part of a fiscal year in which Massachusetts is authorized to make provider payments from the SafetyNet Care Pool (the amount of any DSH payments made during a partial fiscal year must be prorated if necessary so that DSH payments will not exceed the percentage of the DSH allotment corresponding to the percentage of the federal fiscal year for which payment of DSH payments is required).

5.	**Financial Responsibility/Deeming**	**Section 1902(a)(17)**

To enable Massachusetts to use family income and resources to determine an applicant's eligibility even if that income and resources are not actually made available to the applicant, and to enable Massachusetts to deem income from any member of the family unit (including any Medicaid-eligible member) for purposes of determining income.

6.	**Freedom of Choice**	**Section 1902(a)(23)(A)**

To enable Massachusetts to restrict freedom of choice of provider for individuals in the demonstration, including to require managed care enrollment for certain populations exempt from mandatory managed care under section 1932(a)(2). Freedom of choice of family planning provider will not be restricted.

To limit primary care clinician plan (PCC) plan and Primary Care ACO enrollees to a single Prepaid Insurance Health Plan (PIHP) for behavioral health services, to limit enrollees who are clients of the Departments of Children and Families or Youth Services and who do not choose a managed care option to the single PIHP for behavioral health services, requiring children with third party insurance to enroll into a single PIHP for behavioral health services; in addition to limiting the number of providers within any provider type as needed to support improved care integration

for MassHealth enrollees, and to permit the state to limit the number of providers who provide Anti-Hemophilia Factor drugs.

To permit the state to mandate that Medicaid eligibles with access to student health plans enroll into the plan, to the extent that it is determined to be cost effective, as a condition of eligibility as outlined in section IV and Table E. No waiver of freedom of choice is authorized for family planning providers.

7. Payment for Care and Services Section 1902(a)(30)(A)

To permit the state to pay providers using rates that vary from those set forth under the approved state plan to the extent that the payment varies based on shared savings or shared losses in an incentive arrangement.

8. Direct Provider Reimbursement Section 1902(a)(32)

To enable Massachusetts to make premium assistance payments directly to individuals who are low-income employees, self-employed, or unemployed and eligible for continuation of coverage under federal law, in order to help those individuals access qualified employer-sponsored insurance (where available) or to purchase health insurance (including student health insurance) on their own, instead of to insurers, schools or employers providing the health insurance coverage.

9. Retroactive Eligibility Section 1902(a)(34)

To enable the Commonwealth not to provide retroactive eligibility for up to 3 months prior to the date that the application for assistance is made and instead provide retroactive eligibility as outlined in Table E.

10. Extended Eligibility Section 1902(a)(52)

To enable Massachusetts to not require families receiving Transitional Medical Assistance to report the information required by section 1925(b)(2)(B) absent a significant change in circumstances, and to not consider enrollment in a demonstration- only eligibility category or CHIP (title XXI) eligibility category in determining eligibility for Transitional Medical Assistance.