DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26- 12 Baltimore, Maryland 2 1244-1850

**CMS**

CENTERS fOR MEDICARE

& MEDICAID SERVICES

CENTER FOR MEDICAID & CHIP SERVICES

State Demonstrations Group

Daniel Tsai

Assistant Secretary and Director ofMassHealth Executive Office of Health and Human Services One Ashburton Place

Boston , MA 02108 Dear Mr. Tsai:

This letter is to inform you that the Centers for Medicare & Medicaid Services (CMS) has approved the technical corrections to Massachusett s' section 1115(a) Medicaid demon stration , entitled "MassHealth" (Project Number 11-W-00030/1). These technica l corrections include a number of formatting and grammatical changes, and clarification of various programmatic operations, including:

*Thefollowing technical corrections are effective no earlier than Janu ary 1, 2019 to allow for the*

*implementation of necessary updates to the Commonwealth's operational processes:*

* Clarifying edits in Expend iture Authority 11 and STCs 20 and 26 related to the treatment of annuity payment s to disabled adults and language that was inadvertently removed in the approved version.

*Thefollowing technical corrections are effective as of the date of this letter through the*

*remainder of the Demonstration Extension period (10123118* - *6/ 30/22):*

* Clarifying in STC 63(b) that Delivery System Reform Incentive Payment (DSRIP) funding associated with the Flexible Services program may be used to support infrastructure for social service organizations delivering Flexible Services
* Clarifying in STC 73(b) that the DSRIP Final Evaluation will be a component of the Summative Evaluation
* Clarifying in STC 74 that the final DSRIP Midpoint Assessment report is due by the end

of September 2020

*Thefollowing technical corrections are effectivefor the 2017 Extension approved November 4, 2016 (7/ 1117-6/30/22):*

* Clarifying in STCs 54(a) and 56 that payments to Community Health Centers are neither limited to uncompensat ed care costs incurred by Communi ty Health Centers nor otherwise subject to the provisions of the Cost Limit Protocol
* Clarifying in STC 63(c) that ACOs, not Community Partners, are responsible for

providin g Flex Services

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*Thefo llowing technical corrections are effective January 1, 2014 through the current*

*Demonstration Extension period (711114 - 6/ 30122):*

* Clarifying in Waiver Authority for Financial Responsibility/Deeming the state's existing

financial determination methodology for disabled adults

* Clarifying in the Expenditure Authority the Income Disregards under Section 1902(r)(2)(A) have been an approved non-applicab le authority for the CommonHea lth Expenditurepopulation

Your project officer for this demon stration is Mr.Eli Greenfield. He is available to answer any questions concerning your section 1115 demonstration. Mr. Greenfield 's contact information is as follows:

Centers for Medicare & Medicaid Services Center for Medicaid & CHIP Services

Mail Stop: S2-26-12

7500 Security Boulevard

Baltimore, MD 21244-1850

Telephone: (410) 786-6157

E-mail: Eli.Greenfield @cms.hhs.gov

Official communications regarding this demonstration should be sent simultaneously to Mr. Greenfield and Mr. Richard McGrea l, Associate Regional Admini strator (ARA) in our Boston Regional Office. Mr. McGreal's contact information is as follows:

Centers for Medicare & Medicaid Services JFK Federal Building

Room 2325

Boston, MA 02203

Telephone: (617) 565-1226

E-mail:Richard.McGr [eal@cms.hhs.gov](mailto:eal@cms.hhs.gov)

Sincerely,



Angela D. Gamer Director

Division of System Reform Demonstrations

Enclosure

cc: Richard McGreal, Associate Regional Administrator , Boston Regiona l Office Julie McCarthy, Boston Regional Office