Appendix B – Tribal Consultation Notices Index

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Good morning,

This is a follow up to the quarterly Tribal Consultation call on January 14, 2016. Below is a list of items that we discussed on the call. Please let me know if you have any advice, feedback, questions or concerns about any of these items.

**MassHealth and Connector Update**

We reviewed slides 3-9 from the MassHealth Updates slide deck, presented at the quarterly MA Health Care Training Forum (MTF) on January 11, 2016. The topics presented at the MTF included updates on the latest MassHealth operational and program updates, updates on the Premium Assistance program, Health Safety Net Updates, the Health Connector Learning Series and MassHealth Provider updates.

Please visit the websites below for additional information that was discussed on the call.

http://www.masshealthmtf.org/meeting-information/agendas-presentations-qa/january-2016-meeting-materials


MassHealth is hosting four enrollment events throughout January and February. In collaboration with local Community Health Centers (CHCs) and other community partners, the events are FREE and provide opportunities for individuals and families to get help renewing their health benefits. This is an opportunity for individuals and families to ask questions and get help from trained experts. Please see the attached flyer for additional details.

**ACA Section 1332 Waiver** - the Health Connector is preparing to submit an application for a Section 1332 State Innovation Waiver. Under Section 1332 of the Affordable Care Act, states may request flexibility to modify specific portions of the federal law and instead pursue alternative paths to the overall goals of the law. States can seek federal permission to implement a waiver starting January 1, 2017 or later. A state’s waiver must meet federal standards, including: (1) ensuring that health coverage is at least as widely available, affordable, and comprehensive as it would have been without the waiver, and (2) ensuring that the waiver is deficit neutral to the federal government.

At the direction of the Baker-Polito administration and the General Court, the Health Connector is leading an interagency effort to explore a possible Innovation Waiver. In fall 2015, the Health Connector launched a policy exploration process and began holding a series of open public stakeholder meetings to hear feedback from the public. Based on this feedback, the Health Connector is preparing to submit a request for waiver authority to narrowly modify the federal definition of a merged market to retain two characteristics of small group plans, while retaining the shared risk pool that is the foundation of the Commonwealth’s merged market. Specifically, the proposed waiver would include:
- **Rolling enrollment** – Currently, Massachusetts allows health insurance issuers to offer enrollment and renewal to small groups on a rolling basis throughout the year. Massachusetts will request permission to continue this long-standing practice, which offers flexibility for small employers and prevents the market disruption that could occur with a transition to a calendar-year approach.

- **Quarterly rate filing** – Currently, Massachusetts allows health insurance issuers to refresh their premium rates for small group plans quarterly, in addition to the annual filings of the broader merged market. Massachusetts will request permission to continue this long-standing practice, which helps promote greater affordability for employers than a calendar-year approach and supports rolling enrollment.

The Health Connector is holding two dates in anticipation of possible public hearings on a forthcoming 1332 waiver application:

- Friday, February 5, 2016 from 2:30 p.m. through 3:30 p.m. One Ashburton Place, Boston, MA on the 21st Floor.
- Friday, February 19, 2016 from 11:00 a.m. through 12:00 p.m. Springfield Technical Community College, One Armory Square, Building 2 (Scibelli Hall), Springfield, MA in the Top of Our City Conference Center, Rooms 703-704.

https://betterhealthconnector.com/about/policy-center/state-innovation-waiver

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**Updates on Major MassHealth Initiatives**

**Home and Community Based Services (HCBS) Waivers** – The state received feedback from CMS on its Statewide Home and Community Based Services Transition Plan for demonstrating compliance with the CMS Community Rule. We are in the process of completing revisions to the plan as requested by CMS and there will subsequently be public forums to gather input on the revised plan. We will let you know when the public forums are scheduled. We are pleased to note that CMS approved the renewal of the Children’s Autism Waiver.

**Money Follows the Person (MFP)** – The Money Follows the Person (MFP) Demonstration Grant is a voluntary program designed to help individuals who live in facility based settings, such as nursing homes, hospitals, and intermediate care facilities for people with intellectual disabilities, to return to their homes and communities with the appropriate supports.

As of 1/14/16 a total of 549 people were transitioned out of facilities in Calendar Year 2015 under the MFP demonstration, bringing to 1,529 the total transitions under this demo. The Demonstration will continue to transition individuals through 12-31-17 and serve anyone who has transitioned for 365 days in the community following discharge.

The MFP Sustainability Plan, required to be submitted to CMS last spring, is available on the MassHealth website. See link below:

**MassHealth Innovations** – MassHealth plans to submit an 1115 waiver proposal to CMS soon, which will primarily focus on incorporating the Accountable Care Organization (ACO) payment and care delivery reform strategy into the 1115 waiver. As discussed in the Mass Health Innovations stakeholder workgroups, a key component of the waiver proposal will be to seek new federal investment to support providers in the transition to a new system that shifts from volume-driven to value-driven with payments based on quality and total costs. We will plan to provide further updates as we get closer to submission of the 1115 waiver proposal, and we may schedule an ad-hoc call to provide details on this initiative.

[www.mass.gov/hhs/masshealth-innovations](http://www.mass.gov/hhs/masshealth-innovations)

**State Plan Amendments (SPAs) that we plan to submit by March 31, 2016:**

- a. An amendment to the Children’s Health Insurance Program (CHIP) State Plan to add Applied Behavior Analysis services to the benefits available for children eligible through CHIP.

- b. An amendment to the Medicaid State Plan to update language regarding supplemental rebates for drugs and the State’s form of supplemental rebate agreement.

- c. An amendment to the Medicaid State Plan to reflect new effective dates for fee-for-service rates for Children’s Behavioral Health Initiative (CBHI) program.

- d. An amendment to the Medicaid State Plan to clarify that overtime is available for Personal Care Attendants.

- e. An amendment to the Medicaid State Plan to update the payment methodology for hospice services.

- f. An amendment to the Medicaid State Plan regarding qualified Medicaid practitioner supplemental or enhanced payments.

- g. An amendment to the Medicaid State Plan to update the payment methodology for home health services to include Telehealth monitoring for nursing home health and the addition of a new medication administration rate.

- h. An amendment to the Medicaid State Plan to add prior authorization process for home health nursing and home health aide services.

We also may file an amendment to the Medicaid State Plan in the 2nd calendar quarter of 2016 to clarify clinic services in response to a Companion Letter from CMS.

Please let me know if you have any advice, feedback, questions or concerns about these State Plan Amendments by February 5, 2016.

Thank you,

Alison Kirchgasser
Director of Federal Policy Implementation
From: Kirchgasser, Alison (EHS)
To: "kfrye@mwtribe.com"; HShwom@mwtribe.com; "ljonas@mwtribe.com"; "dhill@mwtribe.com"; "wpocknett@mwtribe.com"; crystal@nativelifelines.org; nena@nativelifelines.org; janelle@nativelifelines.org; judith@wampanoagtribe.net; rmalonson@wampanoagtribe.net; "richard@wampanoagtribe.net"; stephani@wampanoagtribe.net; "todd@wampanoagtribe.net"; "chairmanTJV@wampanoagtribe.net"; "taylor@wampanoagtribe.net"; "stephanie@wampanoagtribe.net"; "ChairmanTJV@wampanoagtribe.net"; Gonsalves, Rita (IHS/NAS/MSH); Reels-Pearson, Lorraine (IHS/NAS/MSH) (Lorraine.Reels-Pearson@ihs.gov); Hilary Andrews (HAndrews@USETINC.ORG); Elizabeth Neptune
Cc: Doherty, Griffin (EHS); Chiev, Sokmeakara (EHS); Conte, Niki (CCA); Brice, Emily (CCA); Spicer, Kenneth (EHS); State Plan Amendments (EHS); Capone, Tracy (EHS); Tierney, Laxmi (EHS); Goody, Michele (EHS)
Subject: Follow up to the 4/27/16 quarterly Tribal Consultation call
Date: Friday, May 06, 2016 1:05:02 PM
Attachments: DRAFT MCO Open and Closed Enrollment Period Exceptions.docx; MassHealth Enrollment Event_4.2016.pdf; FACT SHEET Am Ind final draft 070214.docx

Good afternoon,

This is a follow up to the quarterly Tribal Consultation call on April 27, 2016. Below is a list of items that we discussed on the call. Please let me know if you have any advice, feedback, questions or concerns about any of these items.

**MassHealth Update**

On April 21, 2016 MassHealth began the renewal process for eligible members in MassHealth only households. MassHealth will coordinate with the Health Connector on mixed households in the fall. The renewal process for members over 65 will not change.

Applications will be selected for renewal if the application date is older than twelve months. Our online system will determine which applications are eligible for MassHealth renewals and attempt to verify information based on federal and state data sources.

Please visit the website below to see the Learning Series Slides for additional information on the renewal process and other information that was discussed on the call.


MassHealth is hosting a series of enrollment events throughout Massachusetts during the month of May. Attached to this email is an enrollment event flyer that has additional information for these events. Please contact Tracy Capone – Tracy.Capone@MassMail.State.MA.US if anyone is interested in partnering with MassHealth to hold an Enrollment event in your area.

MassHealth is considering an open enrollment period where members in MCOs or ACOs would remain connected to their plan for nine months following a three month try-out period. Attached to this e-mail is a draft list of open and closed enrollment period exceptions for enrollees, please review and let us know of any comments or questions regarding this list.

**Connector Update**

In addition to the information in the Learning Series Slides, we also wanted to provide the group with a direct link to some helpful consumer materials on MAHealthconnector.org.

https://www.mahealthconnector.org/help-center/resource-download-center

As was mentioned on the conference call, there are 194 American Indian/Alaska Native (AI/NA) individuals enrolled in a Health Connector QHP. Our systems indicate that there are a further 560 AI/NA who are eligible but not currently enrolled in a health connector plan. Based on that number, we are interested in planning and executing some type of Outreach for these consumers and should consider what methods the group thinks might be most effective. Please share feedback directly with Niki Conte at niki.conte@state.ma.us or call 617.933.3046.

In response to a question about whether there is information available for AI/NA individuals on QHP cost sharing protections, we are attaching a draft Fact Sheet that was developed in 2014. This was never finalized as we did not receive feedback on the draft from the Tribal Consultation group and we did not want to finalize the document if it wouldn’t meet the needs of Tribal members. Please review the attached draft and let us know if you think this would be helpful to Tribal members or if you have any suggested edits so that we can finalize.

**ACA Section 1332 Waiver**

The Health Connector continues to pursue a State Innovation Waiver under Section 1332 of the Affordable Care Act. As discussed at the last workgroup call in January and in subsequent e-mails, the Health Connector is working with sister agencies and stakeholders to seek permission from the Department of Health and Human Services to continue its merged market structure, specifically quarterly rating and rolling enrollment for small groups within the merged market. The Health Connector will continue to provide updates to the workgroup as this process progresses. Feedback or questions may be directed at any time to Emily.brice@state.ma.us.

**Updates on Major MassHealth Initiatives**

**Home and Community Based Services (HCBS) Waivers** – MassHealth will be amending its three waivers serving adults with Intellectual
Disability to revise performance measures and allow cross-waiver reporting. Additional changes in these amendments include: 1) incorporating waiver-specific plans for ensuring compliance with the CMS Community Rule; 2) Updating financial eligibility for married waiver participants in accordance with requirements to set a maximum asset limit of $119,220 for the spouse of a waiver applicant; and 3) including information about the existing prohibition on the use of seclusion in a new section of the waiver application.

These amendments will be posted for a 30-day public comment period beginning later this month. We will send an email notifying you when the waiver amendment documents have been posted on the MassHealth website and providing details for the submission of any comments.

MassHealth will also be amending its Money Follows the Person (MFP) waivers in order to add Transitional Assistance Services, alter the clinical eligibility criteria, and make other changes to address the wind down of the MFP Demonstration grant. We are just beginning to work on these amendments and will provide additional details at a later date. Prior to submission to CMS these amendments will be posted for a 30-day public comment period.

Money Follows the Person (MFP) – The Money Follows the Person (MFP) Demonstration Grant is a voluntary program designed to help individuals who live in facility based settings, such as nursing homes, hospitals, and intermediate care facilities for people with intellectual disabilities, to return to their homes and communities with the appropriate supports. The MFP Demonstration grant will be winding down earlier than previously planned, due to the fact that CMS has cut funding for this program to each of the 44 grantee states. MassHealth expects to wind down the MFP Demo approximately a year earlier than originally planned. Therefore:
   - Aug 31, 2016: last date to enroll new enrollees into the MFP Demo
   - Dec 31, 2016: last date to transition and receive MFP Demo Services
   - Dec 31, 2017: last date of MFP demo service provision (with exceptions)

The MFP Demo has achieved great success in Massachusetts, having transitioned 1,680 individuals to the community, through March 2016. We would like to especially note that the MFP Waivers will continue to operate and to accept transitioning individuals after the grant eventually ends.

We will also continue to have the HUD 811 Project Rental Assistance program available for individuals transitioning from facilities, and will:
   - identify developers and housing for transitioning individuals;
   - provide up to 197 units of project-based housing, and
   - 50 additional units through state-provided vouchers

The MFP Sustainability Plan, required to be submitted to CMS last spring, is available on the MassHealth website. See link below:


MassHealth Restructuring
   - We are committed to a sustainable, robust MassHealth program for our 1.8M members
   - We have an urgent window of opportunity to renegotiate our federal 1115 waiver to support MassHealth restructuring
   - Our delivery system reforms transitions from fee-for-service, siloed care into integrated, accountable care (ACO) models
   - We have proposed ~$1.5B of upfront investment (through 1115 waiver) to support ACOs, investments in Behavioral Health/Long Term Services and Supports community capacity, and address health-related social needs
   - The 1115 waiver release for public comment is planned for May and we will notify you once it is posted

State Plan Amendments (SPAs) that we plan to submit by June 30, 2016:

An amendment to the Medicaid State Plan to change copayments for medications used to directly treat addictions.

An amendment to the Medicaid State Plan to allow the state to receive 1% increase in federal matching funds for preventive services.

Additional Information on a SPA that was submitted during the March 31, 2016 quarter:

In the January 22, 2016 email follow up to the January 14, 2016 quarterly consultation call, MassHealth provided a summary of certain proposed amendments to the Medicaid State Plan related to the MassHealth Personal Care Attendant program. The proposed amendments were submitted to CMS on March 31, 2016. The following summary is a clarification of the contents of the proposed amendments:
The proposed amendments to the Medicaid State Plan update rates of payment to Personal Care Attendants, including payment for travel time in accordance with the federal Fair Labor Standards Act (FLSA), and payment for sick leave in accordance with the Massachusetts Earned Sick Time law (M.G.L. c. 149, § 148C). The proposed amendments also include updates to the rates of payment to Transitional Living Providers.

Please let me know if you have any advice, feedback, questions or concerns about any of these State Plan Amendments by May 20, 2016.

Thanks,
Alison

Alison Kirchgasser
Director of Federal Policy Implementation
Massachusetts Office of Medicaid
617-573-1741
Dear Tribal Representatives,

The Massachusetts Executive Office of Health and Human Services (EOHHS) announces its intent to submit a request to amend and extend the MassHealth Section 1115 Demonstration ("Request") to the Centers for Medicare and Medicaid Services.

The MassHealth 1115 Demonstration provides federal authority for Massachusetts to expand eligibility to individuals who are not otherwise Medicaid or CHIP eligible, offer services that are not typically covered by Medicaid, and use innovative service delivery systems that improve care, increase efficiency, and reduce costs as a part of MassHealth restructuring. Federal authorization and funding for key aspects of the current 1115 Demonstration are only approved through June 30, 2017.

MassHealth plans to advance alternative payment methodologies and delivery system reform through accountable care organizations and community partners for behavioral health and long term services and supports. A significant focus will be placed on improving integration and delivery of care for members with behavioral health needs and those with dual diagnoses of substance abuse disorder; as well as integration of long term services and supports and health-related social services. In addition, MassHealth plans to expand treatment for individuals affected by substance use disorder and opioid addiction.

The Request does not affect eligibility for MassHealth. A more detailed public notice can be found at MassHealth’s home page: MassHealth, and the Request documents can be found at the MassHealth Innovations web site: MassHealth Innovations

Public Comment Period

EOHHS will host two public listening sessions in order to hear public comments on the Request. Stakeholders are invited to review the Request in advance and share with program staff at the listening sessions any input and feedback, or questions for future clarification. The listening sessions are scheduled as follows:

**Listening session #1, in conjunction with a meeting of the MassHealth Medical Care Advisory Committee and the MassHealth Payment Policy Advisory Board:**

Date:  Friday, June 24, 2016
Time:  2:30 pm – 4:00 pm
Location:  1 Ashburton Place, 21st Floor, Boston MA
Conference Line:  1-866-565-6580, Passcode: 9593452

**Listening session #2:**
Date: Monday, June 27, 2016
Time: 2:00 – 3:30 pm
Location: Auditorium, Fitchburg Public Library, 610 Main Street, Fitchburg, MA

Communication Access Realtime Translation (CART) services and American Sign Language (ASL) interpretation will be available at both meetings. Please contact Donna Kymalainen at Donna.Kymalainen@state.ma.us or 617-886-8247 to request additional accommodations.

EOHHS will accept comments on the proposed Request through July 15, 2016. Written comments may be delivered by email or mail. By email, please send comments to MassHealth.Innovations@state.ma.us and include “Comments on Demonstration Extension Request” in the subject line. By mail, please send comments to: EOHHS Office of Medicaid, Attn: 1115 Demonstration Comments, One Ashburton Place, 11th Floor, Boston, MA 02108. Comments must be received by 5 pm on July 15, 2016 in order to be considered. Paper copies of submitted comments may be obtained in person by request from 9 am to 5 pm at EOHHS, One Ashburton Place, 11th Floor, Boston, MA 02108.

Comments will be posted on the MassHealth 1115 Demonstration website: MassHealth and State Health Care Reform

The public comment period is now open and will close at 5:00 p.m. on Friday, July 15, 2016.

Alison Kirchgasser
Director of Federal Policy Implementation
Massachusetts Office of Medicaid
617-573-1741
Please see updates below regarding the date by which comments will be accepted.

Alison Kirchgasser  
Director of Federal Policy Implementation  
Massachusetts Office of Medicaid  
617-573-1741

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Comments will be posted on the MassHealth 1115 Demonstration website: MassHealth and State Health Care Reform

The public comment period is now open and will close on Sunday, July 17, 2016.

Alison Kirchgasser
Director of Federal Policy Implementation
Massachusetts Office of Medicaid
617-573-1741