



**Department
of Health**

**Office of
Health Insurance
Programs**

1115 Medicaid Redesign Team (MRT) Waiver Public Forum

June 2018



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1115 MRT Waiver Overview

June 2018

1115 Demonstration Waiver

- Section 1115 of the Social Security Act gives the Secretary of Health and Human Services the authority to waive certain provisions and regulations to allow Medicaid funds to be used in ways that are not otherwise allowed under federal rules.
- 1115 Demonstration Waivers grant flexibility to states for innovative projects that advance the objectives of Title XIX of the Medicaid program by waiving certain compliance requirements of federal Medicaid laws.
- A State can be approved for five years and can request an extension.

General 1115 Demonstration Waiver Overview

- Special Terms and Conditions (STCs) outlines the basis of an agreement between the State and the Centers for Medicare and Medicaid Services (CMS). STCs specify the State's obligation to CMS during the life of the demonstration, including general and financial reporting requirements and the timetable of State deliverables.
- Quarterly and annual reports are required and an Independent Evaluation is completed at the end of a Demonstration program.
- Budget Neutrality must be demonstrated. Federal Medicaid Expenditures with the Waiver cannot be more than Federal expenditure without the waiver during the course of the Demonstration.

New York State's 1115 Waiver

- The **NYS Medicaid Redesign Team (MRT) Waiver** (formerly the Partnership Plan) has been in operation since 1997.
- New York's 1115 MRT Waiver was again renewed on December 6, 2016 effective through March 31, 2021.
- Goals for the waiver are to:
 - Improve access to health care for the Medicaid population;
 - Improve the quality of health services delivered; and
 - Expand coverage with resources generated through managed care efficiencies to additional low-income New Yorkers.

1115 MRT Waiver Programs

- **Medicaid Managed Care**

Provides comprehensive health care services (including all benefits available through the Medicaid State Plan) to low-income, uninsured individuals. It provides an opportunity for enrollees to select a Managed Care Organization (MCO) whose focus is on preventive health care.

- **Programs Under the 1115 MRT Waiver:**

- Mainstream Medicaid Managed Care (MMMC)
- Health and Recovery Plans (HARPs) and Home and Community Based Services (HCBS)
- Managed Long Term Care (MLTC) and Long Term Services and Supports (LTSS)
- Delivery System Reform Incentive Program (DSRIP)

1115 MRT Waiver Pending Amendments

- **Children's System Transformation**

- Transition six children's 1915(c) waivers to the 1115 Waiver and Managed Care
- Provide an aligned HCBS service array and phase in the expansion of children eligible for HCBS
- Provide comprehensive Health Home care management for children receiving HCBS
- Transition behavioral health benefits to Managed Care
- Transition foster care population to Managed Care
- Transformation also includes six new State plan services that will be implemented under separate state plan amendments

1115 MRT Waiver Pending Amendments

- **OPWDD 1915c Transition**

- Transformation of the State's system of services for people with intellectual and/or developmental disabilities (I/DD) to better integrate services, promote the better use of resources to meet growing and changing needs, and become truly person-centered
- Provide comprehensive Health Home care management for individuals with I/DD provided by Care Coordination Organizations/Health Homes (CCO/HHs)
- Move the Federal authorization for Home and Community-Based Services (HCBS), now provided under the OPWDD Comprehensive 1915(c) Waiver, to New York State's 1115 MRT Waiver
- Initiate the transition to Managed Care for individuals with I/DD



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DSRIP Progress Update

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Statewide Accountability Milestones

The STCs identify four measures for which statewide performance is evaluated, beginning in DY3

| Statewide Milestone | Performance Goal | Pass/Fail |
|---|--|--------------|
| 1. Statewide metrics performance | At least 50% of measures are improving/maintaining vs. worsening (minimum of 9 out of 16 measures) | PASS! |
| 2. Success of projects statewide² | At least 50% of eligible measures trigger an award (minimum of 1,352 out of 2,702 measures) | PASS! |
| 3. Total Medicaid spending³ | Total Statewide IP and ER Spending < \$206.24 PMPM | PASS! |
| 4. Managed care plan | At least 10% of total MCO expenditures are captured in Level 1 or above. | PASS! |
| Statewide Performance | Must pass all four milestones | PASS! |

Notes: 1. Based on previous year and baseline comparisons

2. Based on project-specific and population-wide quality metrics

3. At or below target based on trend rate

1115 MRT Waiver Resources

1115 MRT Waiver Website

http://www.health.ny.gov/health_care/medicaid/redesign/medicaid_waiver_1115.htm

Managed Care

https://www.health.ny.gov/health_care/managed_care/index.htm

DSRIP

http://www.health.ny.gov/health_care/medicaid/redesign/dsrip/

OPWDD Webpage

<https://opwdd.ny.gov/>

1115 MRT Waiver Resources

01/19/2017 STCs DOH website

https://www.health.ny.gov/health_care/managed_care/appextension/docs/2017-01-19_renewal_stc.pdf

Quality Strategy

https://www.health.ny.gov/health_care/medicaid/redesign/docs/rev_quality_strategy_program_sept2015.pdf

CMS Homepage

<http://www.cms.gov/>

Medicaid Homepage

<http://medicaid.gov/>