MaineCare for Childless Adults section 1115(a) Demonstration FACT SHEET

Name of Section 1115 Demonstration:	MaineCare for Childless Adults section 1115(a) Demonstration
Date Proposal Submitted:	February 21, 2002
Date Proposal Approved:	September 13, 2002
Date Implemented:	October 1, 2002
Date Extension Submitted:	January 31, 2007
Date Extension Approved:	September 28, 2007
Date Expired:	September 30, 2010
Date 2 nd Extension Approved:	September 27, 2010
Date Expired:	December 31, 2013

SUMMARY

The Childless Adults section 1115(a) demonstration expands health care access to childless adults at or below 100 percent of the federal poverty level (FPL) by redirecting a portion of its disproportionate share hospital (DSH) allocation. The current demonstration is capped at 20,000 individuals with a maximum DSH diversion of \$90 million total computable.

AMENDMENTS

Multiple amendments were submitted, and approved at the same time. Amendments were submitted on April 2, 2004, August 2, 2004, February 22, 2005, and April 19, 2005. All four amendments were approved on September 6, 2005.

Due to State budget shortfalls, Maine requested to amend its HIFA waiver for its childless adult population by reducing the current demonstration benefit package¹ and eliminating retroactive coverage² for demonstration populations. Maine also proposed to add the TEFRA Section 134 children to the HIFA demonstration by removing them from the state plan in order to impose premium payment requirements for families of the TEFRA Section 134 children.

ELIGIBILITY

Childless Adults up to 100 percent of the FPL

DELIVERY SYSTEM

The Childless Adults demonstration utilizes a PCCM delivery system.

¹ Maine amendment submitted August 2, 2004 and April 19, 2005.

² Maine amendment submitted August 2, 2004.

BENEFITS

Childless Adults up to 100 percent of the FPL are eligible to receive a comprehensive benefits package as specified under the demonstration (refer to Section IV of the Special Terms and Conditions for the specific benefits and specification in the MaineCare Benefits Manual).

QUALITY AND EVALUATION PLAN

Evaluations provided by the state on the demonstration have corroborated that the cost of providing comprehensive health care services decreases over the life of the demonstration consequent of proper early utilization of primary health care services and the avoidance of more expensive urgent care. This demonstration also succeeded in dropping the uninsured rate for this population without substituting public coverage for privately financed employer-sponsored insurance.

COST-SHARING

Allowable premiums and cost-sharing are as follows:

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Childless Adults up to and including 100% of the FPL	None	Same as Medicaid	Same as Medicaid; nominal; Rx Amt: Generic \$2; Brand \$3; and Services \$1-\$3

CURRENT STATUS

This demonstration expired on December 31, 2013.

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