



MISSISSIPPI DIVISION OF
MEDICAID

November 30, 2015

Ms. Julie Sharp
Division of State Demonstrations and Waivers
Centers for Medicaid, CHIP and Survey & Certification, CMS
7500 Security Blvd.
Mail Stop S2-01-16
Baltimore, MD 21244-1850

Dear Ms. Sharp:

The enclosed Progress Report for the Healthier Mississippi Demonstration Project includes a full reporting of beneficiary enrollment and expenditure information through September 30, 2015.

If you have questions or need additional information, do not hesitate to contact me at (601) 359-5248.

Sincerely,



Margaret Wilson
Nurse Office Director, Office of Policy

Healthier Mississippi

Section 1115 Quarterly Report

Demonstration/Quarter Reporting Period:

Demonstration Years: 1-10 (10/01/2004 – 9/30/2014)

Federal Fiscal Quarter 4/2015 (07/01/2015 – 09/30/2015)

Introduction:

The Healthier Mississippi demonstration project was originally approved for a 5-year period beginning on October 1, 2004, through September 30, 2009. Since then, the demonstration was approved for renewal and under a series of temporary approvals for an additional 5-year period beginning October 1, 2009, through September 30, 2014. Currently the demonstration has been approved for renewal effective July 24, 2015, through September 30, 2018. The renewal includes an increase in the enrollment cap from 5,500 to 6,000. It also allows coverage of podiatry, eyeglasses, dental, and chiropractic services which were excluded from previous demonstration years.

The approval of this demonstration project allows Mississippi to provide a full benefit package to individuals with income up to 135 percent of the federal poverty level who are aged or disabled, and who are not eligible for Medicare.

Enrollment Information

Enrollment counts are person counts, not member months. The enrollment cap is 6,000.

Participant Populations	Total as of end of Current Quarter	Voluntary Disenrolled in Current Quarter	No. Involuntary Disenrolled in Current Quarter
Population 1 – Medicaid Only	4,934	179	708

Outreach/Innovative Activities

The Division of Medicaid has published brochures and other outreach materials which include a description of the Healthier Mississippi waiver qualifications and benefits. These are made available to the public in various sites throughout the state and are posted on the agency's website.

Operational/Policy Developments/Issues

Changes to the CMS-064 report and other in-house reports were made to reflect the new instructions from CMS to reports beginning September 30, 2015, to report only Population 1 "Medicaid Only" as noted below.

1. **Demonstration Population 1 "Medicaid Only"**: Aged or disabled individuals enrolled in the demonstration below 135 percent of the FPL who are not eligible for Medicare and do not otherwise qualify for Medicaid.

Consumer Issues

There have been no consumer issues.

Appeals of denials, terminations or other adverse changes are granted by the Division of Medicaid upon receipt of the written request provided the appeal is requested within the specified deadline of thirty (30) days. Both local and/or state level appeals are granted and continuation of benefits applies for adverse changes to active beneficiaries requesting an appeal within a ten (10) day deadline.

Quality Assurance/Monitoring Activity

The Office of Eligibility staff continues to monitor the waiver enrollment process.

Demonstration Evaluation

The Healthier MS Wavier Draft Evaluation Design was submitted to CMS for feedback and approval on November 10, 2015.

Financial/Budget Neutrality Development/Issues

In working through this current renewal process with CMS Central and Regional staff, CMS provided revised budget neutrality cumulative targets (below). Also, the State has revised its financial/budget neutrality reporting format to provide statistics for the distinct population defined in the demonstration.

In accordance with the “Special Terms and Conditions”, Section VIII, *Monitoring Budget Neutrality*, CMS shall enforce budget neutrality over the life of the demonstration, rather than on an annual basis. The following table includes the reporting of expenditures for those currently enrolled in the waiver.

Demonstration Year	Cumulative Budget Neutrality Expenditure Limit	Expenditures for current enrollees and those disenrolled within one year
Years 1 – 5	\$350,250,000	\$213,905,091
Year 6	\$448,787,000	\$289,909,421
Year 7	\$552,743,535	\$377,640,601
Year 8	\$662,417,679	\$473,168,820
Year 9	\$778,123,901	\$575,717,085
Year 10	\$893,830,123	\$690,331,933
Year 11	\$1,029,989,323	\$754,466,330*

*Note: Prior year enrollees were removed starting this reporting period as noted in the STCs

This quarterly report reflects the first five (5) years of the initial demonstration period, four (4) years of the renewal period effective November 1, 2010, and the extension period granted through December 31, 2014. Beginning this quarter of demonstration Year 11, prior year enrollees will not be reported in the cumulative expenditures. The cumulative expenditures for Healthier Mississippi enrollees for 4th quarter ending, September 30, 2015 is \$754,466,330. The cumulative variance is (\$275,523,192). As of September 30, 2015, expenditures had not exceeded the cumulative target.

State Contact(s)

Margaret Wilson, Office Director of Policy
E-mail: margaret.wilson@medicaid.ms.gov
Telephone Number: (601) 359-5248

Tara S. Clark, J.D., Deputy Administrator
E-mail: tara.clark@medicaid.ms.gov

Walters Sillers Building, Suite 1000
550 High Street
Jackson, MS 39201-1399

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11/30/2015