



MISSISSIPPI DIVISION OF  
**MEDICAID**

February 29, 2016

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 December 31, 2015.

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

Sincerely,

A black rectangular redaction box covering the signature of Margaret Wilson.

Margaret Wilson, MBA, BSN, RN  
Nurse Office Director, Office of Policy

MLW/mgp

Enclosure

# Healthier Mississippi

## Section 1115 Quarterly Report

### Demonstration/Quarter Reporting Period:

Demonstration Years: 1-12 (10/01/2004 – 9/30/2016)

Federal Fiscal Quarter: 1/2016 (10/01/2015 – 12/31/2015)

### Introduction:

The Healthier Mississippi Waiver (HMW) 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 July 23, 2015. Currently the demonstration has been approved for renewal effective July 24, 2015, through September 30, 2018 with the following changes: (1) an increase in the enrollment cap from 5,500 to 6,000 and (2) coverage of podiatry, eyeglasses, dental, and chiropractic services which were excluded from previous demonstration years.

The HMW demonstration project allows Mississippi to provide state plan benefits to individuals with income up to 135 percent of the federal poverty level who are aged or disabled and are not eligible for Medicare or Medicaid state plan benefits.

### 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	Number of Voluntary Disenrolled in Current Quarter	Number of Involuntary Disenrolled in Current Quarter
Population 1 – Medicaid Only	4,814	175	745

### Outreach/Innovative Activities

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

### Operational/Policy Developments/Issues

Changes were made to the CMS-064 report and other in-house reports beginning September 30, 2015, to report only Population 1 "Medicaid Only" as instructed by CMS.

1. **Demonstration Population 1 "Medicaid Only"**: Aged or disabled individuals enrolled in the demonstration with income up to 135 percent of the FPL who are not eligible for Medicare, and not eligible under the Medicaid state plan.

### **Consumer Issues**

There have been no consumer issues reported.

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 to ensure only beneficiaries meeting the qualifications for the HMW are enrolled.

### **Demonstration Evaluation**

On November 10, 2015, the HMW Draft Evaluation Design was submitted to CMS for approval.

### **Financial/Budget Neutrality Development/Issues**

No issues have been identified.

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.

<b>Demonstration Year</b>	<b>Cumulative Budget Neutrality Expenditure Limit</b>	<b>Expenditures for current enrollees and those disenrolled within one year</b>
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
Year 12	\$1,178,961,321	\$769,414,577

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 July 23, 2015. Beginning in demonstration Year 11, prior year enrollees will not be reported in the cumulative expenditures. The cumulative expenditures for Healthier Mississippi enrollees for 1<sup>st</sup> quarter ending, December 31, 2015 is \$14,948,247. The cumulative variance is (\$409,546,943). As of December 31, 2015, expenditures had not exceeded the cumulative target.

**State Contact(s)**

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**Date Prepared**

02/29/2016