

**Montana Section 1115 Waiver for Additional Services and Populations  
FACT SHEET**

**Name:** Section 1115 Waiver for Additional Services and Populations

<b>Waiver Number:</b>	11-W-00181/8
<b>Date Renewal Submitted:</b>	August 25, 2017
<b>Date Renewal Approved:</b>	December 15, 2017
<b>Date Demonstration Expires:</b>	December 31, 2022

**Number of Amendments:** 3

**BACKGROUND**

On November 20, 1995, the State of Montana’s welfare reform demonstration, entitled “Families Achieving Independence in Montana” (FAIM), was approved under the authority of section 1115 of the Social Security Act. The demonstration was in effect from February 1, 1996, through January 31, 2004. On January 29, 2004, Montana’s request for a statewide section 1115 Medicaid demonstration was granted. The FAIM demonstration expired on January 31, 2004, and was replaced (without change) with the Montana Basic Medicaid for Able Bodied Adults demonstration, which was approved for the period of February 1, 2004, through January 31, 2009. Parents and/or caretaker relatives of dependent children were covered with a reduced Medicaid state plan benefit package if they were eligible under section 1925 or 1931 of the Act, aged 21 to 64, and neither pregnant nor disabled. This was the first Medicaid section 1115 demonstration designed solely to reduce state plan optional services for a mandatory population. The demonstration was then continued through a series of Temporary Extensions through November 30, 2010.

On November 24, 2010, CMS approved an extension of the demonstration to provide coverage for an additional population titled the Waiver Mental Health State Plan (WMHSP), which included up to 800 beneficiaries aged 18 through 64, with incomes at or below 150 percent of the federal poverty level (FPL) diagnosed with a severe disabling mental illness (SDMI), including schizophrenia, severe depression, or bipolar disorder. Prior to enrollment in the demonstration these beneficiaries received a very limited mental health benefit through enrollment in a state-financed Mental Health Service Plan (MHSP).

On November 8, 2013, the demonstration was extended for a three-year period and the state increased the enrollment cap from 800 to 2,000. The demonstration was renewed again for three years from January 1, 2014 through December 31, 2016. CMS provided Montana with a temporary extension of the demonstration from January 1, 2017 through December 31, 2017. Most recently, on December 15, 2017, CMS renewed the demonstration with no changes for five years from January 1, 2018 through December 31, 2022.

## **AMENDMENTS**

Amendment 1: In December 2014, the demonstration was amended to increase the enrollment cap for the WMHSP population from 2,000 to 6,000 beneficiaries. This amendment also allowed the state to update eligibility diagnoses, created a new mechanism for selecting beneficiaries based on diagnostic severity, updated the waiver population per member per month and cost data, and updated the maintenance of effort allocation needed for benefits for persons in the MHSP.

Date Amendment #1 Submitted: June 30, 2014

Date Amendment #1 Approved: December 16, 2014

Amendment 2: On November 2, 2015, CMS approved a section 1115 demonstration and 1915(b)(4) waiver in Montana that expanded health coverage to beneficiaries in the new adult group. To align with the state's expansion, on July 19, 2016, CMS approved Montana's amendment request to reduce the enrollment limit, remove the state's waiver of amount duration and scope to offer a full state plan benefit package, and change the populations eligible for benefits only under the demonstration. The demonstration provides benefits to the WMHSP population, which consists of beneficiaries who have been diagnosed with a SDMI, are age 18 and older, either: 1) have income between 133 and 150 percent of the FPL, or 2) have income at or below 133 percent of the FPL and are eligible for Medicare, and qualify for or are enrolled in the state-financed mental health service plan. In addition, the demonstration will provide twelve months of continuous eligibility for the WMHSP population and parents and other caretaker relative adults initially determined eligible under the state plan based on modified adjusted gross income (MAGI).

Date Amendment #2 Submitted: November 15, 2015

Date Amendment #2 Approved: July 19, 2016

Amendment 3: On December 5, 2016, the name of the demonstration was changed from "Montana Basic Medicaid for Able Bodied Adults," to "Montana Section 1115 Waiver for Additional Services and Populations." The amendment provides unlimited dental services above the state plan's current \$1,125 dental services annual limit to beneficiaries determined categorically eligible as aged, blind, and disabled (ABD).

Date Amendment #3 Submitted: March 7, 2016

Date Amendment #3 Approved: December 5, 2016

## **ELIGIBILITY**

Through this demonstration, Montana provides health coverage for up to 3,000 WMHSP beneficiaries age 18 and older and diagnosed with a SDMI, and how qualify for or are enrolled in the state-financed Mental Health State Plan program. These beneficiaries with SDMI are otherwise ineligible for Medicaid by either having an income above 133

up to and including 150 percent of the FPL, or by having an income at or below 133 percent of the FPL but are eligible for or enrolled in Medicare.

In order to promote continuity and access to health care, the state also provides twelve month continuous eligibility for parents who are eligible for Medicaid under Section 1925 or 1931 of the Social Security Act.

### **BENEFITS**

The state provides a full state plan benefit package to WMHSP beneficiaries in the demonstration. This coverage is considered Minimal Essential Coverage (MEC).

Beneficiaries categorically ABD receive unlimited dental treatment services above the state plan's current \$1,125 dental services annual limit.

### **COST SHARING**

Cost sharing requirements for demonstration enrollees are the same as those specified in the state plan. Tribal members are not subject to cost sharing when receiving services from the Indian Health Services.

### **DELIVERY SYSTEM**

WMHSP beneficiaries enrolled in the demonstration may receive care through a managed care program (PASSPORT to Health or enhanced primary case management), a participating Medicaid fee-for-service provider, or a disease management program.

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