Wisconsin BadgerCare Reform 1115 Waiver Demonstration Section 1115 Annual Report

Section 1115 Annual Report Summary

Demonstration Year: 4 (1/1/2017 – 12/31/2017)

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Introduction

The Wisconsin BadgerCare Reform demonstration provides state plan benefits to childless adults who have family incomes up to 95 percent of the Federal Poverty Level (FPL) (effectively 100 percent of the FPL considering a disregard of 5 percent of income), and permits the state to charge premiums to adults who are only eligible for Medicaid through the Transitional Medical Assistance eligibility group (hereinafter referred to as "TMA Adults") with incomes above 133 percent of the FPL starting from the first day of enrollment and to TMA Adults from 100-133 percent of the FPL after the first 6 calendar months of TMA coverage.

The demonstration will allow the state to provide health care coverage for the childless adult population at or below an effective income of 100 percent of the FPL with a focus on improving health outcomes, reducing unnecessary services, and improving the cost-effectiveness of Medicaid services. Additionally, the demonstration will enable the state to test the impact of providing TMA to individuals who are paying a premium that aligns with the insurance affordability program in the Marketplace based upon their household income when compared to the FPL.

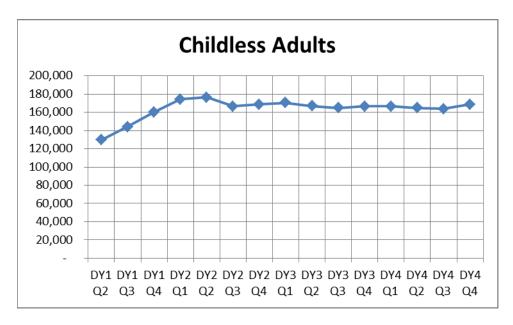
The state's goals for the program are to demonstrate whether the program will:

- Ensure every Wisconsin resident has access to affordable health insurance and reduce the state's uninsured rate.
- Provide a standard set of comprehensive benefits for low income individuals that will lead to improved healthcare outcomes.
- Create a program that is sustainable so Wisconsin's healthcare safety net is available to those who need it most.

The DHS has contracted, through an interagency agreement, with the UW Population Health Institute (including the Scope of Work, Workplan, and Budget) for conducting the BadgerCare Reform Demonstration Evaluation. The DHS and UW began work starting on September 1, 2015. A copy of the demonstration evaluation scope of work and workplan are included as Attachment E.

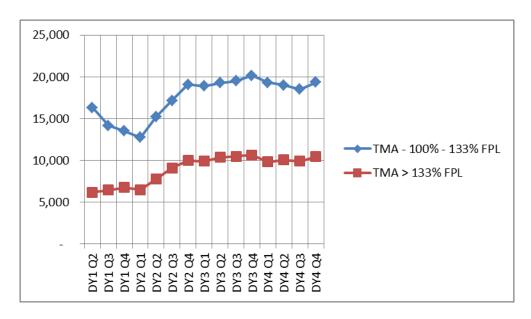
Enrollment and Benefits Information

Childless Adults (Population Group 2) - In demonstration year 4 the number of unique program participants increased, while the total number of childless adults enrolled in the program decreased slightly. From the beginning to the end of demonstration year 4 the total number of unique program participants increased from 166,661 to 168,515. Total monthly enrollment decreased from the start to the end of the demonstration year with 150,950 childless adults in January 2017 and 150,799 childless adults in December 2017. The following graph shows the childless adults enrollment trend over the first 4 years of the demonstration:



Transitional Medical Assistance (TMA) Adults (Population Group 1) - In demonstration year 4 the number of unique program participants increased, while the total number of TMA adults enrolled in the program decreased. From the beginning to the end of the demonstration year the total number of unique program participants increased from 29,138 to 29,822. Total monthly enrollment decreased during the demonstration year with 22,631 TMA adults in January 2017 and 20,403 TMA adults in December 2017. The following graph shows the TMA enrollment trends over the first 4 years of the demonstration:

TMA Enrollment

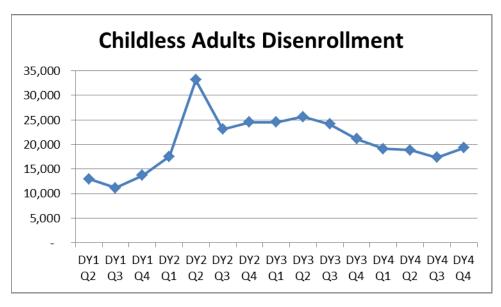


Following is an enrollment summary for the unique program participants in both demonstration groups over the first 4 years of the demonstration:

	CY 2014)													
	CY 2014)													
				DY2 (C	Y 2015)		DY3 (CY 2016)				DY4 (CY 2017)			
DY1 Q2	DY1 Q3	DY1 Q4	DY2 Q1	DY2 Q2	DY2 Q3	DY2 Q4	DY3 Q1	DY3 Q2	DY3 Q3	DY3 Q4	DY4 Q1	DY4 Q2	DY4 Q3	DY4 Q4
129,712	144,102	160,095	174,320	176,378	166,401	168,756	170,266	166,971	164,761	166,740	166,661	164,748	163,596	168,515
16,311	14,170	13,508	12,741	15,214	17,173	19,082	18,903	19,261	19,517	20,164	19,305	19,001	18,491	19365
6,191	6,456	6,778	6,477	7,778	9,118	9,998	9,903	10,354	10,485	10,637	9,833	10,075	9,912	10457
22,502	20,626	20,286	19,218	22,992	26,291	29,080	28,806	29,615	30,002	30,801	29,138	29,076	28,403	29,822
	16,311 6,191 22,502	16,311 14,170 6,191 6,456 22,502 20,626	16,311 14,170 13,508 6,191 6,456 6,778 22,502 20,626 20,286	16,311 14,170 13,508 12,741 6,191 6,456 6,778 6,477	16,311 14,170 13,508 12,741 15,214 6,191 6,456 6,778 6,477 7,778 22,502 20,626 20,286 19,218 22,992	16,311 14,170 13,508 12,741 15,214 17,173 6,191 6,456 6,778 6,477 7,778 9,118 22,502 20,626 20,286 19,218 22,992 26,291	16,311 14,170 13,508 12,741 15,214 17,173 19,082 6,191 6,456 6,778 6,477 7,778 9,118 9,998 22,502 20,626 20,286 19,218 22,992 26,291 29,080	16,311 14,170 13,508 12,741 15,214 17,173 19,082 18,903 6,191 6,456 6,778 6,477 7,778 9,118 9,998 9,903 22,502 20,626 20,286 19,218 22,992 26,291 29,080 28,806	16,311 14,170 13,508 12,741 15,214 17,173 19,082 18,903 19,261 6,191 6,456 6,778 6,477 7,778 9,118 9,998 9,903 10,354 22,502 20,626 20,286 19,218 22,992 26,291 29,080 28,806 29,615	16,311 14,170 13,508 12,741 15,214 17,173 19,082 18,903 19,261 19,517 6,191 6,456 6,778 6,477 7,778 9,118 9,998 9,903 10,354 10,485 22,502 20,626 20,286 19,218 22,992 26,291 29,080 28,806 29,615 30,002	16,311 14,170 13,508 12,741 15,214 17,173 19,082 18,903 19,261 19,517 20,164 6,191 6,456 6,778 6,477 7,778 9,118 9,998 9,903 10,354 10,485 10,637 22,502 20,626 20,286 19,218 22,992 26,291 29,080 28,806 29,615 30,002 30,801	16,311 14,170 13,508 12,741 15,214 17,173 19,082 18,903 19,261 19,517 20,164 19,305 6,191 6,456 6,778 6,477 7,778 9,118 9,998 9,903 10,354 10,485 10,637 9,833 22,502 20,626 20,286 19,218 22,992 26,291 29,080 28,806 29,615 30,002 30,801 29,138	16,311 14,170 13,508 12,741 15,214 17,173 19,082 18,903 19,261 19,517 20,164 19,305 19,001 6,191 6,456 6,778 6,477 7,778 9,118 9,998 9,903 10,354 10,485 10,637 9,833 10,075 22,502 20,626 20,226 19,218 22,992 26,291 29,080 28,806 29,615 30,002 30,801 29,138 29,076	16,311 14,170 13,508 12,741 15,214 17,173 19,082 18,903 19,261 19,517 20,164 19,305 19,001 18,491 6,191 6,456 6,778 6,477 7,778 9,118 9,998 9,903 10,354 10,485 10,637 9,833 10,075 9,912 22,502 20,626 20,286 19,218 22,992 26,291 29,080 28,806 29,615 30,002 30,801 29,138 29,076 28,403

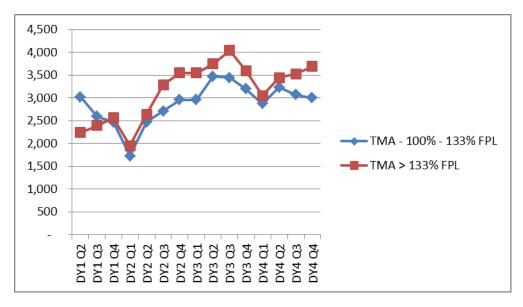
The rate of disenrollment for non-payment of premiums for the TMA Adult population 100% to 133% FPL was 5%, compared to 21% for the TMA Adult population over 133% FPL, and this rate of disenrollment remained constant throughout the demonstration year. We will attempt to learn more about the reasons behind the variances between the two populations through the formal evaluation.

Following is the disenrollment summary for the unique program participants in both demonstration groups over the first 4 years of the demonstration:



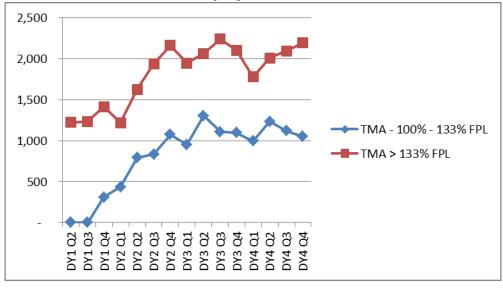
BadgerCare Reform Den	nonstratio	on - CLA [Disenrolli	ment Sur	nmary*											
Demonstration Year		DY1 (C	Y 2014)			DY2 (C	Y 2015)			DY3 (C	Y 2016)			DY4 (C	Y 2017)	
	DY1 Q1	DY1 Q2	DY1 Q3	DY1 Q4	DY2 Q1	DY2 Q2	DY2 Q3	DY2 Q4	DY3 Q1	DY3 Q2	DY3 Q3	DY3 Q4	DY4 Q1	DY4 Q2	DY4 Q3	DY4 Q4
CLA Disenrollment	N/A	13,019	11,165	13,744	17,565	33,147	23,109	24,579	24,579	25,643	24,166	21,166	19,150	18,846	17,376	19,358
Reflects total unduplicated count of members enrolled during the demonstration qua					ration quai	ter										

TMA Disenrollment



BadgerCare Reform Dem	onstration - TM	A Disenrolln	nent Summa	ary*												
Demonstration Year		DY1 (C	Y 2014)			DY2 (C	Y 2015)			DY3 (C	Y 2016)			DY4 (C	Y 2017)	
	Q1	DY1 Q2	DY1 Q3	DY1 Q4	DY2 Q1	DY2 Q2	DY2 Q3	DY2 Q4	DY3 Q1	DY3 Q2	DY3 Q3	DY3 Q4	DY4 Q1	DY4 Q2	DY4 Q3	DY4 Q4
TMA - 100% - 133% FPL	N/A	3,021	2,595	2,475	1,724	2,473	2,713	2,955	2,955	3,474	3,443	3,195	2876	3230	3071	3002
TMA > 133% FPL	N/A	2,240	2,397	2,560	1,954	2,641	3,286	3,546	3,546	3,743	4,039	3,597	3050	3441	3525	3689
*Reflects total undunlicated cou	effects total undunlicated count of members enrolled during the demonstration quarter															

TMA Disenrollment Due to Non-payment of Premium



BadgerCare Reform Dem	onstration - TM	A Disenrolln	nent Summa	ary*; Non-pa	ayment of P	remium										
Demonstration Year														DY4 (C	Y 2017)	
	Q1	DY1 Q2	DY1 Q3	DY1 Q4	DY2 Q1	DY2 Q2	DY2 Q3	DY2 Q4	DY3 Q1	DY3 Q2	DY3 Q3	DY3 Q4	DY4 Q1	DY4 Q2	DY4 Q3	DY4 Q4
TMA - 100% - 133% FPL	N/A			309	436	791	833	1,071	951	1,304	1,108	1,094	995	1,234	1,118	1,050
TMA > 133% FPL	N/A	1,219	1,234	1,414	1,216	1,623	1,938	2,158	1,944	2,063	2,238	2,101	1,775	2,005	2,092	2,192
*Reflects total unduplicated co	unt of members enr	olled during the	demonstration	n quarter												

The DHS has not identified any issues related to access to care or delivery of benefits given the current enrollment trends and will continue to monitor.

Enrollment Counts for	Quarter and Year to Date			
Demonstration Populations	Total Number of Demonstration Participants Quarter Ending – 03/31/2017*	Current Enrollees (year to date)**	Disenrolled in Current Ouarter	TMA Adults Disenrolled Due to Non-Payment of Premiums (current quarter)***
BC Reform Adults	166,661	166,661	19,150	N/A
TMA Adults – 100% to 133% FPL	19,305	19,305	2,876	995
TMA Adults – Over 133% FPL	9,833	9,833	3,050	1,775

Demonstration Populations	Total Number of Demonstration Participants Quarter Ending – 06/30/2017*	Current Enrollees (year to date)**	Disenrolled in Current	TMA Adults Disenrolled Due to Non-Payment of Premiums (current quarter)***
BC Reform Adults	164,748	187,348	18,846	N/A
TMA Adults – 100% to 133% FPL	19,001	26,892	3,230	1,234
TMA Adults – Over 133% FPL	10,075	15,147	3,441	2,005

Demonstration Populations	Participants Quarter Ending –		Disenrolled in Current	TMA Adults Disenrolled Due to Non-Payment of Premiums (current quarter)***
BC Reform Adults	163,596	206,605	17,376	N/A
TMA Adults – 100% to 133% FPL	18,491	33,614	3,071	1118
TMA Adults – Over 133% FPL	9,912	19,933	3,525	2,092

Demonstration Populations	IParticinants Quarter Ending –		Disenrolled in Current	TMA Adults Disenrolled Due to Non-Payment of Premiums (current quarter)***
BC Reform Adults	168,515	228,824	19,358	
TMA Adults – 100% to 133% FPL	19,365	40,495	3,002	1,050
TMA Adults – Over 133% FPL	10,457	25,050	3,689	2,192
*Reflects total unduplicated cou	int of members enrolled during the de	monstration quarter		
** Reflects total unduplicated co	ount of members enrolled during the o			
***Disenrollment does not refle	ct those who maintained eligibility aft	er the closure month for any ben	efit plan	

Member Month Report	ing			
Eligibility Group	Month 1 (January 2017)	Month 2 (February 2017)	Month 3 (March 2017)	Total for Quarter Ending 03/2017
BC Reform Adults	150,950	150,961	150,238	452,149
TMA Adults – 100% to 133% FPL	14,268	13,566	13,498	41,332
TMA Adults - Over 133% FPI	8 363	6 359	6 100	20.822

Eligibility Group	Month 1 (April 2017)	Month 2 (May 2017)	Month 3 (June 2017)	Total for Quarter Ending 06/2017
BC Reform Adults	149,627	148,428	146,762	444,817
TMA Adults – 100% to 133% FPL	13,602	13,477	13,436	40,515
TMA Adults – Over 133% FPL	8,085	6,308	6,630	21,023

Eligibility Group	Month 1 (July 2017)	Month 2 (August 2017)	Month 3 (September 2017)	Total for Quarter Ending 09/2017
BC Reform Adults	148,225	148,192	147,550	443,967
TMA Adults – 100% to 133% FPL	13,150	13,154	13,357	39,661
TMA Adults – Over 133% FPL	8,214	6,302	6,339	20,855

Eligibility Group	Month 1 (October 2017)	Month 2 (November 2017)	Month 3 (December 2017)	Total for Quarter Ending 12/2017
BC Reform Adults	149,410	150,799	150,799	451,008
TMA Adults – 100% to 133% FPL	13,644	13,800	13,800	41,244
TMA Adults – Over 133% FPL	8,574	6,603	6,603	21,780

Childless Adult and TMA Re-Enrollment Statistics

During the second demonstration year CMS requested that Wisconsin analyze the demonstration groups to identify how many members had been disenrolled and subsequently regained program eligibility.

In providing these statistics we included those members that regained full-benefit eligibility within 12 months of the current reporting quarter. The statistics provided below include those childless adult and TMA members who were disenrolled since April 2014 (the start of the demonstration) and were enrolled through the fourth quarter of demonstration year 4.

The table below shows that the percentage of childless adults who were disensolled in demonstration year 3 and (population group 2) regained eligibility in demonstration year 4 was at 40%, and for TMA adults (population group 1) nearly 65% had regained eligibility by the end of demonstration year 4.

			Number re-enrolled within one year by benefit plan									
Quarter of	Waiver									All Benefit	Total	% Re-enrolled
Disenrollment	Group	BCSP	FSTMA	MAP	MAPW	MCD	MCDW	SSIMA	WWMA	Plans	Disenrolled	within one year
04/14 - 06/14	CLA	4,962	1	260	16	399	97	155	8	5,898	16,291	36.20%
04/14 - 06/14	TMA	6,289	0	7	1	25	4	15	2	6,343	10,551	60.12%
07/14 - 09/14	CLA	5,686	1	229	14	386	95	142	3	6,556	14,478	45.28%
07/14 - 09/14	TMA	5,691	0	6	0	15	4	13	3	5,732	9,531	60.14%
10/14 - 12/14	CLA	6,890	1	277	13	412	101	121	2	7,817	17,310	45.16%
10/14 - 12/14	TMA	5,733	0	3	0	14	3	9	1	5,763	9,334	61.74%
01/15 - 03/15	CLA	8,346	0	261	10	470	94	146	5	9,332	20,828	44.81%
01/15 - 03/15	TMA	5,237	0	5	0	10	3	6	0	5,261	7,719	68.16%
04/15 - 06/15	CLA	13,240	2	323	16	478	108	185	1	14,353	37,233	38.55%
04/15 - 06/15	TMA	6,136	1	3	0	4	4	9	2	6,159	9,314	66.13%
07/15 - 09/15	CLA	10,843	0	270	16	425	113	149	5	11,821	27,122	43.58%
07/15 - 09/15	TMA	6,778	0	3	0	13	3	9	1	6,807	10,482	64.94%
10/15 - 12/15	CLA	11,118	1	312	16	463	120	177	6	12,213	28,270	43.20%
10/15 - 12/15	TMA	7,622	0	3		7	1	5	2	7,640	11,583	65.96%
01/16 - 03/16	CLA	10,906	0	272	14	442	107	141	5	11,887	28,608	41.55%
01/16 - 03/16	TMA	5,099	0	4	0	8	4	5	0	5,120	7,943	64.46%
04/16 - 06/16	CLA	11,659	0	260	11	426	97	162	5	12,620	29,221	43.19%
04/16 - 06/16	TMA	7,936	0	7	0	9	1	8	0	7,961	12,477	63.81%
07/16 - 09/16	CLA	10,673	0	392	28	491	132	168	7	11,891	27,954	42.54%
07/16 - 09/16	TMA	7,831	0	3	1	11	3	9	5	7,863	12,602	62.39%
10/16 - 12/16	CLA	10,651	0	320	28	474	122	166	8	11,770	28,968	40.63%
10/16 - 12/16	TMA	8,310	0	7	1	9	9	8	2	8,346	12,848	64.96%
	CLA = Childless Adults TMA = Transitional Medical Assistance											

Outreach/Innovative Activities to Assure Access

All HMOs serving BadgerCare Plus members, which includes members of this demonstration waiver population, but are not limited to the demonstration population, are required to submit their member communication and outreach plans to the DHS for review. All materials are reviewed and approved by the DHS prior to distribution to members. Such materials include HMO-developed member handbooks, HMO-developed new member enrollment materials, and HMO-developed brochures.

The DHS also contracts with the City of Milwaukee Health Department to focus on outreach to current and prospective BadgerCare Plus members in Milwaukee County. As part of this agreement, staff is available at multiple locations throughout the county, including Milwaukee Health Department sites, in order to provide assistance with ACCESS applications and renewals, as well as with other enrollment and eligibility troubleshooting.

Collection and Verification of Encounter Data and Enrollment Data

Following is a summary of the demonstration year 4 annual managed care enrollment. Managed care enrollment for demonstration year 4 shows relatively stable enrollment with approximately 85% of all childless adults enrolled in managed care which is comparable with managed care enrollment for other BadgerCare Plus populations.

BadgerCare Plus HMO Childless Adult Enrollment	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Anthum Blue Cross Blue Shield	14,371	14,935	15,704	15,868	15,808	15,907	15,883	15,941	16,154	16,186	16,208	16,221
Childrens Community Health Pl	10,684	11,066	11,171	11,135	11,043	11,104	11,009	11,128	11,262	11,214	11,220	11,246
Compcare	3663	3795	3775	3759	3689	3542	3387	3274	3171	3050	2970	2796
Dean Health Plan	4530	4480	4722	4711	4608	4556	4507	4506	4554	4487	4516	4475
Group Health Eau Claire	6634	6805	6818	6909	6815	6827	6720	6693	6738	6595	6603	6591
Group Health South Central	1832	1860	1866	1851	1778	1749	1696	1689	1662	1632	1593	1600
Gundersen	2452	2508	2532	2574	2489	2453	2468	2450	2418	2407	2399	2379
Health Tradition	1122	1168	1184	1193	1155	1141	1120	1124	1126	1072	1056	985
iCare	6191	6370	6587	6516	6527	6546	6401	6359	6405	6408	6419	6462
Managed Health Services	7678	7927	7982	7897	7714	7633	7443	7494	7561	2200	2203	2208
Mercy	2275	2347	2384	2390	2369	2340	2246	2227	2226	7534	7611	7691
Molina	8678	8875	9011	8893	8685	8672	8477	8489	8509	8450	8370	8405
Network	7805	7980	8049	7916	7800	7841	7703	7737	7788	7835	7872	7945
Physicians Plus	2680	2753	2801	2806	2678	2646	2569	2599	2619	2629	2603	2628
Security	8728	9008	9099	9185	9142	9078	8975	8933	8914	8860	8816	8784
Trilogy	3545	3787	3834	3875	3735	3794	3714	3728	3798	3792	3808	3833
UnitedHealthcare	29,654	30,576	31,227	31,143	30,884	30,804	30,303	30,236	30,216	30,062	30,135	30,103
Unity	1318	1325	1314	1279	1255	1282	1278	1278	1256	1280	1265	1262
Total	123,840	127,565	130,060	129,900	128,174	127,915	125,899	125,885	126,377	125,693	125,667	125,614

Operational/Policy/Systems/Fiscal Developments/Issues

The state did not identified program developments/issues/problems that have occurred in demonstration year 4 and does not anticipate to occur in the near future that affect health care delivery, quality of care, approval and contracting with new plans, health plan contract compliance and financial performance relevant to the demonstration, fiscal issues, systems issues, and pertinent legislative or litigation activity.

Financial/Budget Neutrality Development/Issues

The state has not identified any significant developments/issues/problems with financial accounting, budget neutrality, and CMS 64 and budget neutrality reporting for the current quarter.

Please see Attachment A for a copy of the budget neutrality workbook.

The chart provides monthly and quarterly enrollment and expenditure data for the BadgerCare Plus Reform Adult Waiver since its inception in April 2014 through December 2017. This data is compared to the childless adult CORE baseline from April 2013 through March 2014 for budget neutrality purposes.

The data shows waiver enrollment increasing each month from April 2014 to March 2015. From January 2016 to December 2016 waiver enrollment remains relatively stable.

The monthly managed care enrollment growth rate peaked in March 2015, reflecting the systematic transition of enrollees from FFS to managed care. Managed care enrollees also declined starting in April 2015.

Since the waiver's April 2014 inception, per-member-per-month (PMPM) costs have increased, but are well below the budget neutrality limits established with the waiver and we do not have any concerns or issues to report at this time.

Consumer Issues

Consumers have not reported any significant issues related to coverage and/or access to the program and benefits in the current quarter.

Quality Assurance/Monitoring Activity

The DHS consistently monitors activities using a systematic approach that ensures services for all BadgerCare Plus populations are reviewed for quality assurance.

Following is a summary of the activities DHS conducted in demonstration year 4 by quarter:

Quarter One

In quarter one of demonstration year 4, DHS conducted the following activities:

- a) Health Needs Assessment (HNA) for Childless Adults Per the 2016-2017 BadgerCare Plus and SSI HMO contract, HMOs are required to conduct a Health Needs Assessment (HNA) screening of newly enrolled childless adult (CLAs) members within two months of enrollment. In the first quarter of 2017, DHS worked with HMOs to define how to operationalize the penalty for HMOs that do not meet their 2017 HNA targets. DHS had several conference calls with HMOs to discuss the HNA penalty methodology and shared a draft of the 2017 HNA Guide.
- b) Pay-for-Performance (P4P) Since 2009, DHS has successfully implemented a pay-for-performance program in which HMOs are held accountable to key metrics. For 2017, the P4P program is funded through a withhold of 2.5% of each HMO monthly capitation payments which is earned back by HMOs that meet targets on 14 different measures. The measures include a combination of preventive screenings (e.g. HEDIS Breast Cancer Screening, Childhood

Immunizations), management of certain chronic conditions (e.g. Comprehensive Diabetes Care, Controlling High Blood Pressure), as well as behavioral health (e.g. Follow-Up After Mental Health Hospitalization, Antidepressant Medication Management) and dental measures (e.g. Annual Dental Visit).

In the first quarter of 2017, DHS issued payments to the HMOs that meet their 2015 HMO P4P targets. DHS shared a draft of the 2017 HMO P4P Guide and scheduled a conference call with HMOs to walk them through the guide and answered their questions.

Following are the current activities for the fourth quarter of the demonstration completed by the External Quality Review Organization (EQRO) – MetaStar for the HMOs operating the BadgerCare Plus program.

- Conducted and delivered results of SSI Care Management Review for five organizations.
- Conducted Comprehensive Review and Information Systems Capabilities Assessment for HTHP.
- Completed OBMH record reviews for Selection 21.
- Met with DHS to discuss developing record review for FCMH.
- Participated in discussions with DHS surrounding the development of measures for SSI care management changes.

Quarter Two

In quarter two of demonstration year 4, DHS conducted the following activities:

- a) Health Needs Assessment (HNA) for Childless Adults Per the 2016-2017 BadgerCare Plus and SSI HMO contract, HMOs are required to conduct a Health Needs Assessment (HNA) screening of newly enrolled childless adult (CLAs) members within two months of enrollment. In the second quarter of 2017, our EQRO, MetaStar, started to conduct reviews of HMO's care management records to assess whether or not HMOs met their 2016 HNA performance targets. In this quarter, DHS finalized the 2017 HNA guide that operationalized the penalty for HMOs that do not meet their 2017 HNA targets.
- b) Pay-for-Performance (P4P) Since 2009, DHS has successfully implemented a pay-for performance program in which HMOs are held accountable to key metrics. For 2017, the P4P program is funded through a withhold of 2.5% of each HMO monthly capitation payments which is earned back by HMOs that meet targets on 14 different measures. The measures include a combination of preventive screenings (e.g. HEDIS Breast Cancer Screening, Childhood Immunizations), management of certain chronic conditions (e.g. Comprehensive Diabetes Care, Controlling High Blood Pressure), as well as behavioral health (e.g. Follow-Up After Mental Health Hospitalization, Antidepressant Medication Management) and dental measures (e.g. Annual Dental Visit).

In the second quarter of 2017, DHS shared a final draft of the 2017 HMO P4P Guide. DHS also presented to HMOs in a monthly meeting about Advanced Payment Methodologies and the future of quality initiatives in Medicaid Managed Care.

Following are the current activities for the fourth quarter of the demonstration completed by the External Quality Review Organization (EQRO) – MetaStar for the HMOs operating the BadgerCare Plus program.

Wisconsin BadgerCare Reform section 1115 demonstration Approval Period: January 1, 2014 through December 31, 2018

- Conducted and delivered results of SSI Care Management Review for five organizations.
- Conducted Comprehensive Review and Information Systems Capabilities Assessment for HTHP.
- Completed OBMH record reviews for Selection 21.
- Met with DHS to discuss developing record review for FCMH.
- Participated in discussions with DHS surrounding the development of measures for SSI care management changes.

Quarter Three

Following are the current activities for the third quarter of the demonstration completed by the External Quality Review Organization (EQRO) – MetaStar for the HMOs operating the BadgerCare Plus program.

- Conducted Childless Adult-Health Needs Assessment review for eleven HMOs.
- Began OBMH record reviews for Selection 23.
- Conducted care management review of 30 records for the Foster Care Medical Home (C4K) program.
- Continued discussions with DHS surrounding the identification of measures for SSI care management changes.
- Participated in the DHS sponsored Best Practice Seminar based on the results of the SSI focused reviews conducted in May.

Quarter Four

Following are the current activities for the fourth quarter of the demonstration completed by the External Quality Review Organization (EQRO) – MetaStar for the HMOs operating the BadgerCare Plus program.

- Finished Selection 23 and completed Selection 24 of OBMH record reviews.
- Supported DHS with the development of the PIP proposal template for the SSI Needs Stratification PIPs.
- Reviewed PIP proposals for all SSI, BC+, SMCPs.
- Reviewed and updated the NCQA Accreditation Crosswalk (NCQA Standards, Code of Federal Regulations, and DHS-HMO Contract) and delivered to DHS.

Managed Care Reporting Requirements

Starting April 1, 2014 childless adults were enrolled in BadgerCare Plus fee-for-service benefits. Starting in July 2014 the state began enrolling childless adults into managed care with an average of 20,000 members in each month until all new members have been enrolled in managed care as applicable. HMOs are required to report to the DHS on the status of quality infinitives, PIPs, and other programmatic requirements.

Demonstration Evaluation

On November 12, 2014, the Centers for Medicare and Medicaid Services (CMS) approved the Department of Health Services (DHS) evaluation plan. The DHS has incorporated the approved evaluation plan as Attachment C.

The DHS signed an interagency agreement and contracted with the UW Population Health Institute to conduct the evaluation. DHS and the UW began work on the evaluation September 1, 2015. The UW's Scope of Work and Workplan are included as Attachment E.

During the third quarter of demonstration year 2 DHS and the UW Population Health Institute discussed suggested modifications to the CMS approved evaluation design. Included in Attachment C are the following documents:

- Suggested Modifications to Approved Evaluation Design
- Evaluation Design Change Summary Crosswalk
- CMS Comments and Questions on Suggested Modifications
- Wisconsin Response to CMS Comments and Questions

DHS and the UW Population Health Institute are incorporating these modifications into the second survey and final evaluation report.

During the fourth quarter of demonstration year 4 the UW Population Health Institute completed the annual interim evaluation report. The report has been uploaded with this annual report.

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Attachment A - Budget Neutrality Monitoring Workbook

Childless Adults Draft Financial Statistics - Waiver Reporting for Quarter Ending Dec 2017

Childess Adult Quarterly Comparison	Claim Expenditures (\$ in AF)	Prior Year QE Expenditures (\$ in AF)	Ave Monthly Enrollment	Prior Year QE Ave Monthly Enrollment	Ave Monthly PMPM	Prior Year QE Ave Monthly PMPM
QE June 2014	101,210,605	22,157,735	111,187	18,660	302.75	395.80
QE Sept. 2014	137,243,424	21,246,908	130,036	17,487	351.42	404.97
QE Dec. 2014	167,024,246	20,296,922	143,883	16,288	386.86	415.43
QE Mar. 2015	190,022,630	18,692,247	160,613	14,762	394.29	422.27

Adult Waiver Quarterly Trends	Claim Expenditures (\$ in AF)	Quarter-over- Quarter Percent Change	Ave Monthly Enrollment	Quarter-over- Quarter Percent Change	Ave Monthly PMPM	Quarter-over- Quarter Percent Change
QE June 2015	194,501,401	-	155,823	-	416.22	-
QE Sept. 2015	195,525,111	0.53%	150,708	-3.28%	432.46	3.90%
QE Dec. 2015	195,787,397	0.13%	151,100	0.26%	431.92	-0.12%
QE Mar. 2016	203,349,273	3.86%	154,108	1.99%	439.84	1.83%
QE June 2016	207,432,111	2.01%	149,978	-2.68%	461.06	4.82%
QE Sept 2016	208,783,312	0.65%	148,851	-0.75%	463.78	0.59%
QE Dec 2016	209,562,741	0.37%	148,313	-0.36%	470.99	1.55%

CORE Baseline (Childless Adults)	Claim Expenditures (\$ in AF)	Fee for Service Enrollees	CAP Expenditures	CAP Members	Total Expenditures	Total Enrollees	Overall PMPM
Apr-13	2.624.273	2.383	4.956.173	16.741	7.580.446	19.124	396.38
May-13	2,582,125	2.333	4.832.357	16.330	7.414.482	18.663	397.28
Jun-13	2.409.378	2.203	4.753.430	15.989	7.162.808	18,192	393.73
Jul-13	2,553,051	1.926	4,721,124	15.922	7,274,175	17.848	407.56
Aug-13	2,395,752	1,832	4,671,819	15,674	7,067,571	17,506	403.72
Sep-13	2,359,752	1,836	4,545,410	15,272	6,905,162	17,108	403.62
Oct-13	2,568,860	1,898	4,411,923	14,809	6,980,783	16,707	417.84
Nov-13	2,222,150	1,657	4,372,572	14,633	6,594,722	16,290	404.83
Dec-13	2,444,132	1,579	4,277,285	14,288	6,721,417	15,867	423.61
Jan-14	2,372,043	1,519	4,069,353	13,844	6,441,396	15,363	419.28
Feb-14	2,153,802	1,403	3,929,873	13,330	6,083,675	14,733	412.93
Mar-14	2,373,347	1,360	3,793,829	12,830	6,167,176	14,190	434.61

BC Reform Adult Waiver (Childless Adults)	Claim Expenditures (\$ in AF)	Fee for Service Enrollees	CAP Expenditures	CAP Members	Total Expenditures	Total Enrollees	Overall PMPM
Apr-14	26.293.463	96.182	3,144,558	9,532	29,438,021	105.714	278.47
May-14	31,276,064	100,972	2,951,909	8,878	34,227,973	109,850	311.59
Jun-14	33,724,699	105,854	3,819,912	12.144	37.544.611	117,998	318.18
Jul-14	34.866.576	100,968	7,541,232	23.898	42.407.808	124.866	339.63
Aug-14	31,278,043	86.034	13.633.326	44.239	44.911.369	130,273	344.75
Sep-14	31,688,502	73.344	18,235,745	61.625	49.924.247	134.969	369.89
Oct-14	30,266,965	56,976	23,979,739	82,485	54,246,704	139,461	388.97
Nov-14	25,478,921	44,182	28,569,601	99,066	54,048,522	143,248	377.31
Dec-14	26,403,009	35.918	32.326.011	113.022	58,729,020	148,940	394.31
Jan-15	26,394,875	33,569	34,803,062	121,838	61,197,937	155,407	393.79
Feb-15	25,007,418	33.697	36,623,234	128.387	61,630,652	162.084	380.24
Mar-15	29,129,303	30.584	38.064.738	133.765	67.194.041	164.349	408.85
Apr-15	29,456,121	29,722	37,519,234	132,317	66,975,355	162,039	413.33
May-15	27,360,880	28,230	36,302,788	127,131	63,663,669	155,361	409.78
Jun-15	28,891,476	28,546	34,970,901	121,523	63,862,377	150,069	425.55
Jul-15	29,659,951	26,494	35,844,716	124,332	65,504,667	150,826	434.31
Aug-15	28.853.707	25.755	36,152,405	125.021	65.006.112	150,776	431.14
Sep-15	28,864,462	25,540	36,149,870	124,981	65,014,332	150,521	431.93
Oct-15	29,296,944	25,971	36,168,361	124,108	65,465,305	150,079	436.21
Nov-15	28,427,953	27,012	36,052,707	123,951	64,480,661	150,963	427.13
Dec-15	29,971,594	29.061	35,869,837	123,196	65.841.431	152.257	432.44
Jan-16	30,567,954	31,712	35,272,857	122,417	65,840,812	154,129	427.18
Feb-16	31.560.039	29.849	36,205,235	124,302	67.765.274	154,151	439.60
Mar-16	32,520,154	25,876	37,223,033	128,168	69,743,187	154,044	452.75
Apr-16	32,107,251	25,105	36,595,146	126,197	68,702,397	151,302	454.07
May-16	32,863,416	24,691	36,344,300	125,201	69,207,716	149.892	461.72
Jun-16	33,363,798	24,483	36,158,201	124,258	69,521,999	148,741	467.40
Jul-16	32,056,984	23,478	36.315.576	124,442	68,372,559	147,920	462.23
Aug-16	35,289,122	24.025	36,379,061	124.254	71,668,183	148,279	483.33
Sep-16	32,179,935	23,541	36,562,634	124,658	68,742,569	148,199	463.85
Oct-16	32,637,451	24,033	36,117,486	123,296	68,754,937	147,329	466.68
Nov-16	32,466,950	24.757	36,139,367	123,308	68,606,316	148,065	463.35
Dec-16	32,697,705	26,137	35,947,933	122,492	68,645,638	148,629	461.86
Jan-17	34,790,635	29.033	36.733.934	121,647	71,524,569	150,680	474.68
Feb-17	31,548,016	26,294	37,651,889	124,813	69,199,905	151,107	457.95
Mar-17	35,912,236	23,632	38,311,009	127,222	74,223,246	150,854	492.02
Apr-17	32,691,691	22,188	38,255,202	127,204	70,946,893	149,392	474.90
May-17	36,535,340	22,241	37,980,190	126,296	74,515,530	148.537	501.66
Jun-17	35,900,235	22,042	37,709,725	125,315	73,609,960	147,357	499.53
Jul-17	34,441,491	22,060	38,019,173	126,385	72,460,664	148,445	488.13
Aug-17	37,955,284	22,056	38,072,922	126,406	76,028,206	148,462	512.11
Sep-17	35,201,070	20,737	38,158,299	126,886	73,359,369	147,623	496.94
Oct-17	38,330,464	22,854	37,950,047	126,282	76,280,510	149,136	511.48
Nov-17	36,063,842	24,541	37,949,514	126,261	74,013,356	150,802	490.80
Dec-17	33,910,588	25,781	37,999,167	126,257	71,909,755	152,038	472.97

Attachment B - Summary of Cost-Sharing for TMA Adults Only

Individuals affected by, or eligible under, the demonstration with the co-payments below

TMA Adults (Demonstration Population 1)

Monthly Premium Amount Based on FPL Percentage	Monthly Premium Amount as Percentage of Income
100.01 – 132.99%	2.0%
133 - 139.99%	3.0%
140 - 149.99%	3.5%
150 – 159.99%	4.0%
160 – 169.99%	4.5%
170 – 179.99%	4.9%
180 – 189.99%	5.4%
190 – 199.99%	5.8%
200 – 209.99%	6.3%
210 – 219.99%	6.7%
220 – 229.99%	7.0%
230 – 339.99%	7.4%
240 – 249.99%	7.7%
250 – 259.99%	8.05%
260 – 269.99%	8.3%
270 – 279.99%	8.6%
280 – 289.99%	8.9%
290 – 299.99%	9.2%
300% and above	9.5%

Attachment C – Demonstration Evaluation Plan & Approved Modifications













WI BadgerCare BadgerCare Reform Suggested Evaluation Design CMS Comments and Wisconsin Response Reform Final Approve Demonstration Evalua Modifications to AppriChange Summary CrcQuestions on Suggesto CMS Comments an

Attachment D - BadgerCare Plus Reform Waiver Project Work Plan



Attachment E – University of Wisconsin Scope of Work & Project Work Plan

