



CENTER FOR MEDICAID & CHIP SERVICES (CMCS) SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE

This document serves as a template for Monitoring Leads to summarize and capture key content of section 1115 Demonstration Monitoring Reports (MRs) submitted by states for approved section 1115 Demonstrations on quarterly and annual basis. For additional guidance, please refer to [Section 1115 Monitoring Report Review Guide.pdf](#).

Instructions: During your review of an 1115 quarterly/annual monitoring report, consider the following:

- (1) Engage the internal demonstration team in reviewing monitoring reports (especially for the first one or two reports submitted).
- (2) Discuss with the PO and others (where applicable) any issues or “high risk” areas identified during the initial review and approval of the 1115 demonstration or through previous monitoring reports (e.g. potential beneficiary access to care issues, financing arrangements, “grandfathered” IMD authority). This information will assist in identifying any issues that need to be monitored closely; documented in summary report; and/or entered into the Issue Register.
- (3) If the data provided in the report is unstructured, please work with your internal demonstration team to assess and ensure that any significant changes to enrollment, eligibility, grievances, appeals, and denial of services are identified and captured in the summary template.
- (4) If a Demonstration has different policy areas, clarify applicability of reported information (i.e. if information is applicable to the entire Demonstration or only a portion of the Demonstration, such as SUD, managed care, etc.).
- (5) If the MR does not include information for any of the elements below, state “Not included in MR” under the “Summary of Information” column below. Identify whether that particular element was a required MR element in the Demonstration Special Terms and Conditions (STCs) and include that information in the summary column.
- (6) For demonstration deliverables that include home and community-based (HCBS) and/or managed care authority, ensure that the DHCBSO and/or DCMO SME enters feedback in the sections at the end of the template.

Complete the following fields:

Monitoring Report Information	Summary of Information
State and Demonstration Name	<i>Massachusetts - MassHealth</i>
Monitoring Lead reviewing MR	<i>Marie DiMartino</i>



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

MR Time Period (please specify quarterly vs. annual report and time period covered by MR)	<i>Quarterly Report Demonstration Year: 25 (7/1/2021 – 6/30/2022) & Quarter 1: (7/01/21 – 9/30/21)</i>
Did the State submit the MR timely? If not, please note length of delay and reasons for delay (if known)	Yes
Please specify if there are any required elements missing in the MR per STCs	No
Summary of key accomplishments and activities during reporting period	<p>This quarter, CAC outreach and educational activities focused on ensuring our 1,344 CACs continued to be well informed about new and ongoing activities across both MassHealth and the Health Connector. This was accomplished through “Assister Update” emails, five Assister conference calls and webinars, and statewide educational Massachusetts Health Care Training Forum (MTF) sessions, held virtually due to the COVID-19 public health emergency (PHE).</p> <p>The member and provider education and communication focus this quarter continued to be on supporting our members and providers with the latest updates and guidance from MassHealth to respond to the COVID-19 emergency. COVID-19 continues to impact all providers in various ways. Any information that MassHealth can provide will help ease administrative burden and delays in payment. The goal was to make sure all communications were able to support providers as they continue to serve our members during this challenging time.</p> <p>During this quarter, MassHealth’s ombudsman program (called My Ombudsman (MYO)) continued to operate</p>



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

	<p>without disruption throughout the COVID-19 pandemic. MYO participated in 16 virtual and in-person outreach events, reaching more than 700 participants in locations all over the state.</p> <p>During Q1, in response to the coronavirus disease (COVID-19) outbreak, MassHealth announced certain policy changes to provide greater flexibility in providing care to MassHealth members. These included telehealth updates, MCO coverage of third dose vaccines, updates following state PHE ending, adjustments to cost sharing aggregate cap and ARPA related rate increases.</p> <p>Budget neutrality workbook will be submitted</p>
Enrollment numbers for MR period	1,644,950
Enrollment numbers for past MR period (for quarterly MR please refer to previous quarter; for annual MR please refer to previous year)	1,605,142
Did the state provide context/explanation for enrollment increases or decreases? If yes, please provide detail here. If no, please consider whether to include as a discussion item in an upcoming monitoring call.	No.
For eligibility and coverage demonstrations, please enter disenrollment numbers for report period.	Not included
Did the state provide context/explanation for increases or decreases in grievances? If yes, please provide detail here. If no,	<p>During this quarter, MassHealth’s ombudsman program (called My Ombudsman (MYO)) continued to operate without disruption throughout the COVID-19 pandemic.</p> <p>During this quarter, the top two complaint topics from</p>



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

<p>please consider whether to include as a discussion item in an upcoming monitoring call agenda.</p>	<p>managed care members (excluding individuals enrolled in integrated care programs serving dual members) involved requests for help accessing certain medical procedures (some being non-covered elective surgeries) and dental care providers. Outreach activities continued virtually, with MYO participating in 17 virtual outreach events, reaching nearly 700 participants in locations all over the state. MYO has also been working on developing a new, more accessible website and strengthening their overall virtual presence. Also during this quarter, MYO began offering information about the COVID-19 vaccine (and assistance with booking appointments). After members complete their initial complaint intake with MYO, they are asked to participate in a 9-question vaccine survey. Thus far, the survey has shown that most callers planned on getting vaccinated when they became eligible. For those who had already received the vaccine, only a few reported issues with access.</p>
<p>Did the state provide context/explanation for increases or decreases in appeals? If yes, please provide detail here. If no, please consider whether to include as a discussion item in an upcoming monitoring call agenda.</p>	<p>Not included</p>
<p>Did the state provide context/explanation regarding increases or decreases in denial of services? If yes, please provide detail here. If no, please consider whether to include as a discussion</p>	<p>Not included</p>



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

<p>item in an upcoming monitoring call agenda.</p>	
<p>Did number of providers for MR period increase or decrease significantly from the previous MR period? If yes, please enter reason if identified in report. If no reason provided, please review with state in an upcoming Monitoring Call.</p>	<p>Not included</p>
<p>Operational, implementation and beneficiary Issues identified in MR (Note: Discuss with team and determine whether these should be entered in Monitoring Issue Register)</p>	<p>None reported</p>
<p>Any notable policy, operational and implementation updates or changes included in MR</p>	<p>None</p>
<p>Were there any evaluation updates included in MR? If yes, please summarize here.</p>	<p>I. Goals 1 and 2 DSRIP Evaluation Updates A. Overall</p> <ul style="list-style-type: none"> • Prepared interim report findings for Goals 1 and 2 • Analyzed ACO provider and CP staff surveys • Analyzed member experience surveys • Analyzed hybrid quality measure data • Continued coding and analysis of MassHealth administrative data • Integrated data and drafted sections of the interim report • Reviewed DSRIP program documentation • Revised materials in preparation for the second round of ACO and CP KIIs



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

	<p>B. <u>Evaluation components involving primary data collection:</u></p> <ul style="list-style-type: none">• Continued analyzing the 4 ACO case studies and incorporated initial results in Interim Report• Continued analyzing the 4 CP case studies and included initial results in Interim Report• Initiated analysis of the ACO Provider Survey and incorporated initial results in Interim Report• Initiated analysis of the CP Staff Survey and incorporated initial results in Interim Report• Continued analyzing KII data from the first round of interviews• Updated the ACO and CP KII materials for the next wave of interviews <p>C. <u>Quantitative Evaluation of administrative and other secondary data sources:</u></p> <ul style="list-style-type: none">• Coordinated with MassHealth to facilitate availability and transfer of data needed for the evaluation• Coded and analyzed measures relying on MassHealth administrative claims and encounter data for calendar years 2015-2019• Performed analyses for hybrid quality measures• Performed analyses for member experience surveys
--	--



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

	<ul style="list-style-type: none">• Analyzed ACO financial performance for 2018 based on MassHealth reconciliation reports• Analyzed preliminary data on the Flexible Services Program and summarized findings for the interim report• Drafted sections for the interim report <p>II. Goals 3-7 Non-DSRIP Evaluation Updates</p> <p>A. <u>Goals 3, 4, 6, 7</u> – MassHealth Program updates for universal coverage, Student Health Insurance Program, sustaining safety net hospitals, covering former foster care youth, and updated provisional eligibility requirements</p> <ul style="list-style-type: none">• Continued to refine and update summaries of relevant literature for each goal• Continued research of policy developments relevant to each goal• Refined timeline and work plan for interim report planning• Continued to collaborate with MassHealth and other entities to acquire data for population-based measures related to Massachusetts uninsurance rate• Continued communicating with data system teams about transferring MH data to UMMS for analyses• Continued work on data compilation, analysis, and displays of data for the Massachusetts uninsurance rate and other population-based measures
--	---



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

	<ul style="list-style-type: none">• Continued analyses of uninsurance rate for each comparison state• Continued work on data compilation, analysis, and displays of data for uncompensated care cost measures• Continued review of and data compilation from cost reports related to safety-net hospitals• Continued reviewing and analyzing data for HEDIS based quality measures for Goal 4, in collaboration with DSRIP quantitative evaluation team• Continued data analyses for all goals using program data and MassHealth administrative data• Continued to develop and refine the contents of goal-specific sections of the interim report• Continued to receive and capture updates from MassHealth about potential new Demonstration amendments• Continued regular monthly meetings with MassHealth <p>B. <u>Goal 5 – Expanding Substance Use Disorder (SUD) services:</u></p> <ul style="list-style-type: none">• Completed coding and calculation of 2015-2019 claims-based measures• Completed analysis and summarized findings for the interim report• Completed draft interim report• Linked Massachusetts death data with MassHealth enrollment data
--	---



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

	<ul style="list-style-type: none">Continued monthly meetings with MassHealth program contacts
--	---

The following sections are only completed for demonstrations that include HCBS and/or managed care authority:

For 1115 Demonstrations authorizing managed care, the DMCO SME will complete the following fields (add as many rows as needed):



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

Monitoring Report/Issue/Requirement Information	Summary of Information
<p>STC 63.c - Accountable Care Organizations - Limitations on FFP for Flexible Services:</p> <p>The state must provide detailed information, as part of its quarterly report, on the exact flexible service, number and dollar amounts provided by each ACO during the quarter.</p>	<p>See Monitoring Report page 11 for a description of Flexible Services related activities. Detailed information, such as the exact flexible service, number and dollar amounts provided by each ACO during the quarter, were not provided.</p>
<p>STC 74 - Independent Assessor:</p> <p>The state will identify independent entities with expertise in delivery system improvement to assist with DSRIP administration, oversight and monitoring, including an independent assessor and/or evaluator. An independent assessor will review ACO and CP proposals, progress reports and other related documents, to ensure compliance with approved STCs and Protocols, provided that initial ACO and CP proposals are not subject to review from the independent assessor.... The state must describe the functions of each independent entity and their relationship with the state as part of its Quarterly report requirements.</p>	<p>See Monitoring Report pages 9, 17 and 18.</p> <p>Requirement is partially met. The Independent Assessor is identified as Public Consulting Group. The IA's functions are not described, nor is the relationship with the State.</p> <p>The IA worked with MA in reviewing CY21 Semiannual Progress Reports submitted by ACOs, CPs, and Community Services Agencies (CSA). The IA also worked with the IE (UMass Chan Medical School) as part of the Demonstration Evaluation to update the practice site administrator (PSA) survey tool and plan the implementation of the second wave of the PSA survey, as part of Goals 1-2 of the approved Evaluation Design Document (see p15 of 1115 Attachment S - timeline of PSA in chart).</p>



**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**

For 1115 Demonstrations authorizing HCBS services, the DHCBSO SME will complete the following fields (add as many rows as needed):

Monitoring Report/Issue/Requirement Information	Summary of Information