

# Final Evaluation of the Impact of the Demonstration

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## Montana Plan First Section 1115 Family Planning Demonstration Waiver Period Covering 06/01/2012 – 03/31/2019 (Submitted 05/29/2020)

### Baseline Data

Data is reported for State Fiscal Year (SFY) 2012 which coincides with demonstration year (DY) 1, SFY2013 which coincides with DY2, and SFY2014 which coincides with DY3. Beginning 2015, the demonstration year changed from Montana's State Fiscal Year (SFY) (July 1-June 30), to a calendar year. This means that SFY 2015 consists of the last two quarters of DY4 and the first two quarters of CY2015. SFY 2016 consists of the last two quarters of CY2015 and the first two quarters of CY2016. For consistency, the data is reported below by State Fiscal Year (July 1-June 30) for each of the years reported. DY1 only consists of June 2012, the first month of the demonstration. This this year is used as a baseline.

**Hypothesis 1:** The demonstration will result in an increase in the number of female Medicaid members ages 19 through 44 receiving family planning services paid by Medicaid.

- The Medicaid Management Information System (MMIS) was queried to determine if a female Montana Medicaid member, aged 19 through 44, received a service with one of the following characteristics: a family planning indicator diagnosis, a diagnosis for contraceptive management, a contraceptive prescription, or a service designated as family planning related for a Plan First member. The results are compared with the female Montana Medicaid enrollment for the demonstration years described above.
- Similarly, the MMIS was queried to determine the number of Plan First Members who obtained one or more covered family planning services through the Demonstration. These Plan First Members (group C.) would be a sub-set of group B., which is a subset of group A.

N/A	DY1 (SFY2012)	DY2 (SFY2013)	DY3 (SFY2014)	DY4 & CY2015 (SFY2015)	CY2015 & CY2016 (SFY2016)	CY2016 & CY2017 (SFY2017)	CY2017 & CY2018 (SFY2018)	CY2018 & short CY2019 (short SFY 2019: 07/01/18- 03/31/19) <i>9 months or 75% of a year</i>	Analysis/ Notes
(Group A.) Female Medicaid Members aged 19-44 years	22,616	24,581	28,339	32,085	47,139	58,190	63,254	63,249  (If increased by 1/3 for 100% of a year then <b>84,332</b> )	Expected yearly increase, especially following Medicaid Expansion in CY2016
(Group B.) Female Medicaid Members aged 19-44 years receiving Family Planning Services	3,747	6,563	9,713	8,060	10,021	14,666	17,174	14,767  (If increased by 1/3 for 100% of a year then <b>19,689</b> )	Expected yearly increase, especially following Medicaid Expansion in CY2016
<b>(Group C.) Female Plan First Members aged 19-44 years receiving Family Planning Services</b>	36	1,795	1,734	2,173	1,776	1,172	771	515  (If increased by 1/3 for 100% of a year then <b>687</b> )	Expected increase at beginning of waiver offering, then expected decrease when Expansion began, then trend begins to flatten

Utilization of family planning services by all Female Medicaid Members in the 19-44 years age group increased from 16.6% in DY1 to 23.3% in the short final SFY2019. However, the year to year utilization shows a more detailed picture.

SFY2012 = 16.6% utilization  
 SFY2013 = 26.7% utilization  
 SFY2014 = 34.3% utilization  
 SFY2015 = 25.1% utilization

SFY2016 = 21.3% utilization  
SFY2017 = 25.2% utilization  
SFY2018 = 27.2% utilization  
SFY2018 = 23.3% utilization

In the seven state fiscal years following the baseline year, the average utilization of family planning service from female Members aged 19-44 years was 26.2%.

Montana expanded Medicaid effective January 1, 2016, which explains the significant increase in Female Medicaid Members in CY2016, and the decrease of Plan First Members receiving family planning services as many prior members now qualify for more comprehensive coverage. However, the data shows that, even after Medicaid expansion, there has been and remains an isolated block of low-income Montana women age 19-44 years who access family planning services through the Montana Plan First 1115 Waiver. Even though this block of women is decreasing in number, it does add to the number of female Medicaid members ages 19 through 44 receiving family planning services paid by Medicaid.

***Hypothesis 2:*** The demonstration will result in a decrease in births paid by Medicaid for women aged 19 through 44.

- The Medicaid Management Information System (MMIS) was queried to determine the number of Female Medicaid Members aged 19-44 years in each of the completed State fiscal years and the number of births paid by Medicaid in the corresponding State fiscal years.
- The number of births to Female Medicaid Members in that age range compared to all Female Medicaid Members in that same age range gives us an approximate ratio of births to potential child-bearer per demonstration year.

N/A	DY1 (SFY2012)	DY2 (SFY2013)	DY3 (SFY2014)	DY4 & CY2015 (SFY2015)	CY2015 & CY2016 (SFY2016)	CY2016 & CY2017 (SFY2017)	CY2017 & CY2018 (SFY2018)	CY2018 & short CY2019 (short SFY 2019: 07/01/18- 03/31/19) <i>9 months or 75% of a year</i>	Analysis/ Notes
Female Medicaid Members aged 19-44 years	22,616	24,581	28,339	32,085	47,139	58,190	63,254	63,249  (If increased by 1/3 for 100% of a year then <b>84,332</b> )	Expected yearly increase, especially following Medicaid Expansion in CY2016
Births paid by Medicaid	4,341	4,405	4,922	5,167	5,284	5,217	4,861	3,468  (If increased by 1/3 for 100% of a year then <b>4642</b> )	Decreasing trend since Expansion
Approximate Ratio of Births paid by Medicaid to Female Medicaid Members aged 19-44 years	1: 5.2	1: 5.8	1: 5.8	1: 6.2	1: 8.9	1: 11.2	1: 13.0	1: 18.2	Level or decreasing trend all seven years

The number of Female Medicaid Members aged 19-44 years has increased by nearly 273% between SFY2012 and SFY2019 if we use the adjusted SFY2019 count for twelve-months to twelve-months comparison. Births paid by Medicaid in that same timeframe increased by only 6.9%. Additionally, the ratio of births per Female Medicaid Member in the applicable age range slowly dropped from SFY2012 through SFY2015, then began dropping significantly in the last four years, concurrently with Medicaid Expansion. It is difficult to isolate the reasons for this decrease, but we believe it is due in large part to Montana’s implementation of Medicaid expansion, the long acting reversible contraceptive (LARC) initiative (both implemented in January of 2016) and the ongoing utilization of the Plan First 1115 Waiver services.

**Hypothesis 3:** The demonstration will reduce annual Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care.

- The method used to determine the annual Federal and State Medicaid cost reduction for prenatal, delivery, and newborn/infant care is thus: Estimated Medicaid savings from births averted by the family planning waiver less the cost of family planning services paid under the waiver, and the percent decrease in Medicaid births.

N/A	DY1 (SFY2012)	DY2 (SFY2013)	DY3 (SFY2014)	DY4 & CY2015 (SFY2015)	CY2015 & CY2016 (SFY2016)	CY2016 & CY2017 (SFY2017)	CY2017 & CY2018 (SFY2018)	CY2018 & short CY2019 (short SFY 2019: 07/01/18- 03/31/19) 9 months or 75% of a year	Analysis
Female Medicaid Members aged 19-44 years	22,616	24,581	28,339	32,085	47,139	58,190	63,254	63,249  (If increased by 1/3 for 100% of a year then <b>84,332</b> )	Expected yearly increase, especially following Medicaid Expansion in CY2016
Total Medicaid expenditures for births and newborn care.	\$30,185,053	\$36,158,716	\$38,090,779	\$31,548,766	\$45,041,418	\$44,271,561	\$49,771,000	\$40,365,306  (If increased by 1/3 for 100% of a year then <b>\$53,820,408</b> )	Overall steady increase in total birth and newborn cost over the life of the demonstration.
Approximate Medicaid expenditures for pregnancy, birth and newborn care, per Female Medicaid Member aged 19-44 years.	\$1,334	\$1,471	\$1,344	\$983	\$955	\$760	\$787	\$638	Per member pregnancy, birth and newborn cost over the life of the demonstration has varied, with overall declining cost per birth.

Even though all claims for SFY2019 services have not yet been paid, it appears the costs for Medicaid births for our adjusted SFY2019 have increased from SFY2018 after showing a decrease in SFY2017. However, the adjusted SFY2019 expenditures for pregnancy, birth and newborn care, per female Medicaid member ag 19-44 appears to be the lowest in the full eight years of the demonstration. The Medicaid expenditure for pregnancy and birth per Female Medicaid Member in the applicable age range decreased by 18.9% in the adjusted SFY2019 (with all claims not yet paid). The expenditures for pregnancy, birth and newborn care per applicable member have decreased by 52% since the beginning of the demonstration. The precise reasoning

for this decline is difficult to isolate but we believe it is due in large part to Montana’s implementation of Medicaid expansion, the long acting reversible contraceptive (LARC) initiative (both implemented in January of 2016) and the ongoing utilization of the Plan First 1115 Waiver services.

**Hypothesis 4:** The demonstration will improve birth outcomes and the health of women by increasing the child spacing interval among women in the target population. The measure is the number of women ages 19 through 44 with a Medicaid paid birth in a waiver year with a subsequent Medicaid paid birth within 18 months.

- The Medicaid Management Information System (MMIS) was queried to determine the number of women ages 19 – 44 with a Medicaid paid birth in a waiver year that have a subsequent Medicaid paid birth within 18 months.

N/A	SFY 2010	SFY 2011	DY1 SFY 2012	DY2 SFY 2013	DY3 SFY 2014	DY4 & CY2015 SFY2015	CY2015 & CY2016 SFY2016	CY2016 & CY2017 SFY2017	CY 2017 & CY2018 SFY2018	CY 2018 & short CY2019 (short SFY 2019) (7/1/18-3/31/19) 9 months or 75% of a year	Analysis
Female Medicaid Members aged 19-44 years	23,004	23,538	22,616	24,581	28,339	32,085	47,139	58,190	63,254	63,249  (If increased by 1/3 for 100% of a year then <b>84,332</b> )	Expected yearly increase, especially following Medicaid Expansion in CY2016
Number of women with a Medicaid paid birth that had a subsequent Medicaid paid birth within 18 months of the previous birth.	307	303	318	362	367	300	325	279	134	205  (If increased by 1/3 for 100% of a year then <b>273</b> )	Numbers vary up and down yearly
Approximate Ratio of women with a Medicaid paid birth within 18 months of the previous Medicaid paid birth to number of Female Medicaid Members aged 19-44 years.	1: 75	1: 78	1: 71	1: 68	1: 77	1: 106	1: 145	1: 209	1: 472	1: 309	Overall ratio of close births declined sharply since Expansion though rose again in SFY2019

All the SFY2019 claims have not all been processed yet so the 1 :309 birth spacing ratio for that year may be slightly off. However, if we look at SFY2015, and the following four-year span, we see significant success in Medicaid women spacing their births by 18 months or more. The desired spacing trend seems to have improved from SFY2010 to SFY2015, and then again from SFY2015 to adjusted SFY2019. Not every year was better than the year before, but the overall progression towards fewer close births per woman seems to have been accomplished. We believe this desired outcome is due in large part to Montana's implementation of Medicaid expansion, the long acting reversible contraceptive (LARC) initiative (both implemented in January of 2016) and the ongoing utilization of the Plan First 1115 Waiver services.

Montana asserts that our four evaluation goals for this period have been met, or at least partially met:

- **Hypothesis 1:** The demonstration will result in an increase in the number of female Medicaid members ages 19 through 44 receiving family planning services paid by Medicaid.
  - Even in our smallest year (SFY2019) approximately 687 more women were able to receive Medicaid covered Family Planning Services than there would have been without the Plan First waiver.
- **Hypothesis 2:** The demonstration will result in a decrease in births paid by Medicaid for women aged 19 through 44.
  - The ratio of female Medicaid members in this age group to the births paid for by Medicaid in the years covered by this demonstration have dropped from 1 birth to every 5 women to 1 birth to every 18 women. This is due to many different efforts by the state to slow the rate of Medicaid births, but we believe Plan First has been a significant component.
- **Hypothesis 3:** The demonstration will reduce annual Federal and State Medicaid expenditures for prenatal, delivery, and newborn and infant care.
  - Overall, the costs have increased even though the number of paid births had decreased. We believe this is largely due to the increased survival rate of babies born with complex care needs, and therefore increased cost of their care. This appears to be supported by the overall decrease in cost per Medicaid woman for pregnancy, birth and newborn care.
- **Hypothesis 4:** The demonstration will improve birth outcomes and the health of women by increasing the child spacing interval among women in the target population. The measure is the number of women ages 19 through 44 with a Medicaid paid birth in a waiver year with a subsequent Medicaid paid birth within 18 months.
  - This appears to be the goal where we've had the most marked success. The desired child spacing interval of 18 months or more has increased four-fold over the life of this demonstration period. We don't assert that this success is due to Plan First only, but we believe this family planning waiver has been an important piece of Montana's efforts to promote healthier child spacing intervals.

**MONTANA PLAN FIRST BUDGET NEUTRALITY REPORT**  
**Covering Demonstration Period 06/01/2012 – 03/31/2019**  
 (Based on State Fiscal Years)

**With Waiver and Without Waiver**

n/a	<b>DY1 (SFY2012)</b>  <i>6/1/2012- 6/30/2012 (single month DY)</i>	<b>DY2 (SFY2013)</b>  <i>7/1/2012- 6/30/2013</i>	<b>DY3 (SFY2014)</b>  <i>7/1/2013- 6/30/2014</i>	<b>DY4 &amp; CY2015 (SFY2015)</b>  <i>7/1/2014- 6/30/2015</i>	<b>CY2015 &amp; CY2016 (SFY2016)</b>  <i>7/1/2015- 6/30/2016</i>	<b>CY2016 &amp; CY2017 (SFY2017)</b>  <i>7/1/2016- 6/30/2017</i>	<b>CY2017 &amp; CY2018 (SFY2018)</b>  <i>7/1/2017- 6/30/2018</i>	<b>CY2018 &amp; short CY2019 (short SFY 2019)</b>  <i>7/1/2018- 3/31/2019 (9 months or 75% of a year)</i>
Member Months	36,000	36,000	36,000	36,000	36,000	36,000	36,000	27,000
Medicaid Services PMPM	\$46.81	\$49.27	\$51.99	\$53.29	\$55.98	\$58.83	\$60.29	\$60.29
Total Expense	\$1,685,160	\$1,773,720	\$1,871,640	\$1,918,440	\$2,015,280	\$2,117,880	\$2,170,440	\$1,627,830

**Actual Expenditures and Enrollment**

n/a	<b>DY1 (SFY2012)</b>  <i>6/1/2012- 6/30/2012 (single month DY)</i>	<b>DY2 (SFY2013)</b>  <i>7/1/2012- 6/30/2013</i>	<b>DY3 (SFY2014)</b>  <i>7/1/2013- 6/30/2014</i>	<b>DY4 &amp; CY2015 (SFY2015)</b>  <i>7/1/2014- 6/30/2015</i>	<b>CY2015 &amp; CY2016 (SFY2016)</b>  <i>7/1/2015- 6/30/2016</i>	<b>CY2016 &amp; CY2017 (SFY2017)</b>  <i>7/1/2016- 6/30/2017</i>	<b>CY2017 &amp; CY2018 (SFY2018)</b>  <i>7/1/2017- 6/30/2018</i>	<b>CY2018 &amp; short CY2019 (short SFY 2019)</b>  <i>7/1/2018- 3/31/2019 (9 months or 75% of a year)</i>
Member Months	184	15,856	34,423	27,542	29,131	23,626	19,865	13,921
Medicaid Services PMPM	\$2.16	\$50.32	\$36.24	\$30.37	\$29.19	\$19.67	\$15.90	\$14.17
Total Expense	\$ 397	\$ 797,820	\$ 1,247,636	\$ 836,586	\$ 850,301	\$ 464,700	\$ 315,873	\$ 197,302