



February 24, 2021

Elizabeth Richter  
Acting Administrator  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244-1850

Dear Ms. Richter:

The Nebraska Department of Health and Human Services, Division of Medicaid & Long-Term Care is writing in response to the Centers for Medicare and Medicaid Services' (CMS) letter, dated February 12, 2021, regarding Nebraska's adult expansion section 1115 demonstration waiver. Specifically, CMS notified Nebraska that it was commencing a process to determine whether to withdraw authorities previously approved as part of this waiver, known as the Heritage Health Adult (HHA) demonstration program, related to community engagement activities, as well as other previously approved authorities. We believe that these innovations are important in furthering coverage, encouraging active and appropriate utilization of services, and improving health outcomes for eligible Nebraskans.

While your letter correctly notes that this demonstration has not yet been implemented, the planned implementation date for the wellness and personal responsibility activities outlined in the demonstration is April 1, 2021. Per the requirements of the special terms and conditions of the HHA demonstration approval, Nebraska submitted a draft implementation plan on December 18, 2020, and a final implementation plan on January 15, 2021. Nebraska has provided verbal and written responses to all questions posed by CMS regarding that plan. We have yet to hear a final decision from your office on that submission. Further delay in that review process by CMS will negatively impact participating beneficiaries by keeping them from moving from the basic benefit tier into the prime benefit tier. It is important to note that this phase of implementation does not include the community engagement activity – allowing review of that component to continue after approval of the current plan. We request that CMS complete its review of the Nebraska implementation plan as quickly as possible in order to avoid delays in those beneficiaries accessing additional benefits.

We believe that the wellness, personal responsibility, and community engagement activities of Nebraska's demonstration promote a more holistic view of individual health by incorporating social determinants of health. The wellness initiatives include a health risk screening that allows Nebraska and contracted health plans to assess a broad range of needs, including food scarcity, housing insecurity, employment, and education, in addition to general health concerns. Incentivizing the provision of this information allows for better care coordination and improved collaboration between Medicaid and other assistance programs. The wellness activity of an annual health visit, coupled with the personal responsibility activities, promotes efficient use of the healthcare delivery system, decreasing costs and improving outcomes for

patients<sup>1</sup>. Finally community engagement activities promote education, training, and employment, which have been shown to promote individual wellness<sup>2</sup>.

We believe the wellness, personal responsibility, and community engagement activities outlined in the demonstration strengthen the Medicaid program and improve access to services, while also promoting the holistic health of the individual. The intent of these voluntary activities is to promote healthy behaviors and a culture that fosters these behaviors. These activities align with national goals to promote effective prevention and treatment of chronic disease, and to help people live healthy lives.

Nebraska has focused on ensuring the participant experience will be as simple as possible. The implementation plan outlines a process that allows participating beneficiaries who cannot complete a specific activity to request that we temporarily waive that activity when they can provide a reasonable explanation for why they could not complete it. Further, the Medicaid health plans with which participants already have an established relationship will track the completion of these activities and report this information so that participants do not need to report this information.

Nebraska has taken a unique and purposeful approach in its program design by determining that participation in the demonstration does not affect a participant's Medicaid eligibility. Individuals who choose not to complete wellness, personal responsibility and community engagement activities will continue to receive the Basic benefit plan, which includes a comprehensive package of physical health, behavioral health, and prescription drugs.

Nebraska has provided CMS all of the information necessary to allow Nebraska to proceed with the implementation of the wellness and personal responsibility activities. We respectfully request an expedited review and approval of the implementation plan related to the wellness and personal responsibility activities, and continued approval of our community engagement activity.

Thank you for your consideration. Please contact my office with any questions.

Sincerely,



Kevin Bagley, Director  
Division of Medicaid & Long-Term Care  
Nebraska Department of Health & Human Services

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<sup>1</sup> Rose, Adam J, Rose, Adam J, Timbie, Justin W, Timbie, Justin W, Setodji, Claude, Setodji, Claude, Friedberg, Mark W, Friedberg, Mark W, Malsberger, Rosalie, Malsberger, Rosalie, Kahn, Katherine L, & Kahn, Katherine L. (2019). Primary Care Visit Regularity and Patient Outcomes: an Observational Study. *Journal of General Internal Medicine* : JGIM, 34(1), 82–89. <https://doi.org/10.1007/s11606-018-4718-x>

<sup>2</sup> Hergenrath, Kenneth C, Zeglin, Robert J, McGuire-Kuletz, Maureen, & Rhodes, Scott D. (2015). Employment as a Social Determinant of Health: A Systematic Review of Longitudinal Studies Exploring the Relationship Between Employment Status and Physical Health. *Rehabilitation Research, Policy, and Education*, 29(1), 2–26. <https://doi.org/10.1891/2168-6653.29.1.2>