

## **Medicaid 1115 Eligibility and Coverage (E&C) Demonstration Monitoring Report**

*Note: PRA Disclosure Statement to be added here*

### PRA Disclosure Statement

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**1. Title page for Montana HELP Demonstration**

*The state should complete this title page for all monitoring reports. The content of this table should stay consistent over time. Definitions for certain rows are below the table.*

<b>State</b>	<i>Montana</i>
<b>Demonstration name</b>	<i>Section 1115 Demonstration (Project Number 11-W-00300/8) Montana Health and Economic Livelihood Partnership (HELP)</i>
<b>Approval period for section 1115 demonstration</b>	<i>01/01/2022 – 12/31/2022</i>
<b>E&amp;C demonstration start date<sup>a</sup></b>	<i>01/01/2022</i>
<b>Implementation date of E&amp;C demonstration, if different from demonstration start date<sup>b</sup></b>	<i>01/01/2022</i>
<b>E&amp;C (or if broader demonstration, then E&amp;C-related) demonstration goals and objectives</b>	<i>Increasing the availability of high-quality health care to Montanans.  Providing greater value for the tax dollars spent on the Montana Medicaid program.  Reducing health care costs.  Providing incentives that encourage Montanans to take greater responsibility for their personal health.  Boosting Montana’s economy; and  Reducing the costs of uncompensated care and the resulting cost-shifting to patients with health insurance.</i>
<b>E&amp;C demonstration year and quarter</b>	<i>Demonstration Year 7, Quarter 3</i>
<b>Reporting period</b>	<i>07/01/2022 – 09/30/2022</i>

<sup>a</sup> **E&C demonstration start date:** For monitoring purposes, CMS defines the start date of the demonstration as the *effective date* listed in the state’s STCs at the time of E&C demonstration approval. For example, if the state’s STCs at the time of E&C demonstration approval note that the E&C demonstration is effective January 1, 2021 – December 31, 2026, the state should consider January 1, 2021 to be the start date of the E&C demonstration. Note that the effective date is considered to be the first day the state may begin its E&C demonstration. In many cases, the effective date is distinct from the approval date of a demonstration; that is, in certain cases, CMS may approve a section 1115 demonstration with an effective date that is in the future. For example, CMS may approve an

extension request on December 15, 2021, with an effective date of January 1, 2022 for the new demonstration period. In some cases, the effective date also differs from the date a state begins implementing its demonstration.

<sup>b</sup> **Implementation date of E&C demonstration:** The date of implementation for each E&C policy in the state’s demonstration.

## 2. Executive summary

*The state should provide a brief, targeted executive summary to communicate key achievements, highlights, issues, and/or risks identified during the current reporting period for the E&C demonstration or the E&C component of a broader section 1115 demonstration. This summary should also identify: (1) key changes since the last monitoring report, including the implementation of new program components; (2) programmatic improvements (e.g., increased outreach or any beneficiary or provider education efforts); and (3) highlights of unexpected changes (e.g., unexpected increases or decreases in enrollment or complaints, etc.). Historical background or general descriptions of the waiver components should not be included. The recommended word count is 500 words or less.*

- (1) No changes since the last monitoring report. Changes are anticipated beginning 01/01/2023.*
- (2) A quarterly member newsletter (Montana Health Care Programs “Messenger”) was published on the Montana Medicaid and Healthy Montana Kids (HMK) Plus member education webpage on 11/07/2022. A monthly provider newsletter (The Claim Jumper) was published the end of each month and emailed to all providers who registered to receive it. Provider notices were issued each month of the quarter, as needed, to notify providers of changes to coverage requirements, claims codes, fee schedules, support services holiday closures, and other significant changes. The annual public forum to solicit comments on the progress of the demonstration is scheduled for November 29, 2022.*
- (3) The single unexpected change we’ve recorded is the 63.4% increase in beneficiaries in long term arrears which is a requested measure that appears on the Metrics Data tab but does not appear in the body of this Monitoring Report template, Part B. This increase from 2022 Q2 to Q3 follows an also unexpected decrease of 27.3% from 2022 Q1 to Q2. One would think a 2+-year moratorium on penalties for non-payment of premiums would slowly increase the number of members in long term arrears but in fact the number has zig-zagged first by dipping by 7% from 2021 Q4 to 2022 Q1, then dipping again the next quarter over 27% then by rising over 63%. Montana will monitor this continued unexpected volatility.*

### 3. Narrative information on E&C implementation, by reporting topic

The state should report narrative information in this table following the detailed prompts for each reporting topic. Any narrative/summary text provided in Section 3 should be brief and not exceed 250 words (2-3 paragraphs). Grey cells do not need to be filled out, as they are not applicable. If a state has not made any changes since the last report, and does not plan to make any changes, or if the implementation prompt does not apply to the state’s demonstration, it should put an “X” in the “State has no trends/update to report” column and should not enter any text in the “State response” column. The state should provide a response in either the “State has no trends/update to report” column or the “State response” column for each reporting topic. The state should remove the provided example text.

**Metric Trends.** In some instances, the metric specifications for a given metric may have changed substantially relative to the last time the state reported the metric. Examples of substantial changes may include the state adding state-specific codes to reflect newly covered services,<sup>1</sup> or a measure steward updating the rate calculation for an established quality measure. If a metric changed substantially, the state should describe the effect on the data relative to the previous report, as well as on trends over time.

**Implementation Update.** The state should briefly describe changes made in the current reporting period regarding the demonstration design and operational details since submitting its original implementation plan, including any changes due to the COVID-19 pandemic.

<sup>1</sup> If the state plans to make modifications or changes to monitoring metrics, the state should discuss the proposed changes with the state’s CMS demonstration team.

Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>1. Enrollment in the E&amp;C Demonstration</b>			
<b>1.1. Metric trends</b>			

<sup>1</sup> If the state plans to make modifications or changes to monitoring metrics, the state should discuss the proposed changes with the state’s CMS demonstration team.

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Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
1.1.1. The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to enrollment in the E&C demonstration.	X		
<b>1.2. Implementation update</b>			
1.2.1. Compared to the demonstration design and operational details, the state expects to make the following changes to: 1.2.1.a. The target population(s) of the demonstration and eligibility criteria (e.g., qualifying income level or other criteria)			<i>Montana has informed members that future premium requirements will cease as of 01/01/2023 as directed by CMS. Plans are also underway to unwind much of the PHE flexibilities when the PHE ends.</i>
1.2.a.b. The application and eligibility determination process			<i>Montana plans to end continuous enrollment and begin coverage terminations for those who no longer qualify as soon as is practicable following the end of the PHE.</i>
1.2.2. The state expects to make other program changes that may affect metrics related to enrollment			<i>Montana has informed members that future premium requirements will cease as of 01/01/2023 as directed by CMS.</i>

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Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>2. Appeals &amp; Grievances</b>			
<b>2.1. Metric trends</b>			
2.1.1. The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to appeals.		<i>AD_24, Appeals, eligibility AD_25, Appeals, denial of benefits</i>	<i>-56.9% -40.6% Montana’s appeals history for both eligibility and denial of benefits vary a great deal quarter to quarter. This quarter, both measures dropped significantly but radical differences from quarter to quarter are not unexpected. Montana will continue to monitor.</i>
<b>2.2. Implementation update</b>			
2.2.1. Compared to the demonstration design and operational details, the state expects to make the following changes to: 2.2.1.a. Appeals related to eligibility	<i>X</i>		
2.2.1.b. Appeals related to denial of benefits	<i>X</i>		
2.2.2. The state expects to make other program changes that may affect metrics related to appeals.	<i>X</i>		

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Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
<b>3. Eligibility &amp; Payment Amounts</b>			
<b>3.1. Metric trends</b>			
3.1.1. The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to beneficiaries subject to premiums or account payments.	X		
3.1.2. The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to beneficiaries who are granted exemptions from premiums or account payments.	X		
3.1.3. The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to beneficiaries who paid a premium or account payment.	X		
<b>3.2. Implementation update</b>			
3.2.1. Compared to the demonstration design and operational details, the state expects to make the following changes to: 3.2.1.a. Beneficiaries subject to premiums or account payments			<i>Montana has informed members that future premium requirements will cease as of as of 01/01/2023 as directed by CMS.</i>
3.2.1.b. Beneficiaries exempt from premiums or account payments	X		
3.2.1.c. Process for determining premium or account contribution amounts beneficiaries will pay			<i>Montana has informed members that future premium requirements will cease as of as of 01/01/2023 as directed by CMS</i>
3.2.2. The state expects to make other program changes that may affect metrics related to eligibility & payment amounts.			<i>Montana has informed members that future premium requirements will cease as of as of 01/01/2023 as directed by CMS Plans are also underway to unwind much of the PHE flexibilities when the</i>



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Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
			<i>PHE ends. The unwinding of the PHE flexibility of a moratorium on disenrolling members for non-payment of premiums or failure to meet redetermination criteria, will impact future metrics related to eligibility &amp; payment amounts.</i>



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Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
			<p><i>from 2022 Q1 to 2022 Q2 was curious. However, now this 63% rapid increase from Q2 to Q3 adds to the befuddlement. Montana will investigate and continue to monitor this unexpected trend.</i></p>
<p>4.1.2. The state reports the following metric trends, including all changes (+ or -) greater than 2 percent related to disenrollment for failure to pay premiums.</p>	<p>X</p>		
<p><b>4.2. Implementation update</b></p>			
<p>4.2.1. Compared to the demonstration design and operational details, the state expects to make the following changes to:                      4.2.1.a. Implementation of compliance actions</p>			<p><i>Montana has informed members that future premium requirements will cease as of 01/01/2023 as directed by CMS. Plans are also underway to unwind much of the PHE flexibilities when the PHE ends.</i></p> <p><i>Montana plans to end continuous enrollment and begin coverage terminations for those who no longer qualify as soon as is practicable following the end of the PHE.</i></p>
<p>4.2.1.b. Processes for identifying and tracking beneficiaries at risk of noncompliance</p>			<p><i>Montana has informed members that future premium requirements will cease as of 01/01/2023 as directed by CMS. Plans are also underway to unwind much of</i></p>

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Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
			<p><i>the PHE flexibilities when the PHE ends.</i></p> <p><i>Montana plans to end continuous enrollment and begin coverage terminations for those who no longer qualify as soon as is practicable following the end of the PHE.</i></p>
<p>4.2.1.c. Process for providing advance notice to beneficiaries at risk of suspension or disenrollment for noncompliance</p>			<p><i>Montana has informed members that future premium requirements will cease as of as of 01/01/2023 as directed by CMS. Plans are also underway to unwind much of the PHE flexibilities when the PHE ends.</i></p> <p><i>Montana plans to end continuous enrollment and begin coverage terminations for those who no longer qualify as soon as is practicable following the end of the PHE.</i></p>
<p>4.2.2. The state expects to make other program changes that may affect metrics related to operationalizing strategies for noncompliance.</p>			<p><i>Montana has informed members that future premium requirements will cease as of as of 01/01/2023 as directed by CMS. Plans are also underway to unwind much of the PHE flexibilities when the PHE ends.</i></p>

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Reporting Topic	State has no trends/update to report (place an X)	Related metric(s) (if any)	State response
			<p><i>Montana plans to end continuous enrollment and begin coverage terminations for those who no longer qualify as soon as is practicable following the end of the PHE.</i></p>

**4. Narrative information on other reporting topics**

*The state should report narrative information in the table on five other reporting topics: financial/budget neutrality, demonstration operations and policy, demonstration evaluation updates, other demonstration reporting updates, and notable state achievements and/or innovations. Any narrative/summary text provided in the monitoring report should be brief and not exceed 250 words (2-3 paragraphs). If a state has no update to report on the requested prompt, it should put an “X” in the “State has no update to report” column and should not enter any text in the “State response” column in the table indicating there is no update.*

*A narrative update for certain reporting topics and subtopics (i.e., budget neutrality (5), E&C demonstration evaluation updates (7), grievances and appeals (8.1), and the annual post-award public forum (8.2)) is required per 42 Code of Federal Regulations (CFR) 431.428(a) for annual monitoring reports. For quarterly monitoring reports where the state is not expected to report for these reporting topics, the state should put an X in the column “State has no update to report.” The state should provide a response in either the “State has no trends/update to report” column or the “State response” column for each reporting topic.*

Reporting Topic	State has no update to report (Place an X)	State response
<b>5. Budget neutrality</b>		
<b>5.1. Current status and analysis</b>		
5.1.1. If the E&C component is part of a broader demonstration, the state should provide an analysis of the E&C-related budget neutrality and an analysis of budget neutrality as a whole. Describe the current status of budget neutrality and an analysis of the budget neutrality to date.		<i>Montana continues to meet the requirements of Budget Neutrality and no CAP is needed.</i>
<b>5.2. Implementation update</b>		
5.2.1. The state expects to make other program changes that may affect budget neutrality	X	

Reporting Topic	State has no update to report (Place an X)	State response
<b>6. E&amp;C-related demonstration operations and policy</b>		
<b>6.1. Considerations</b>		
6.1.1. The state should highlight significant E&C (or if broader demonstration, then E&C-related) demonstration operations or policy considerations that could positively or negatively affect beneficiary enrollment, access to services, timely provision of services, budget neutrality, or any other provision that has potential for beneficiary impacts. Also note any activity that may accelerate or create delays or impediments in achieving the E&C demonstration’s approved goals or objectives, if not already reported elsewhere in this document.		<p><i>Montana has informed members that future premium requirements will cease as of as of 01/01/2023 as directed by CMS. Plans are also underway to unwind much of the PHE flexibilities when the PHE ends.</i></p> <p><i>Montana plans to end continuous enrollment and begin coverage terminations for those who no longer qualify as soon as is practicable following the end of the PHE.</i></p>
<b>6.2. Implementation update</b>		
6.2.1. Compared to the demonstration design and operational details, the state expects to make the following changes to: 6.2.1.a. How the delivery system operates under the demonstration (e.g., through the managed care system or fee for service)		<p><i>Change from 1115 Demonstration Waiver coverage to State Plan coverage is expected to implement 01/01/2023.</i></p>
6.2.1.b. Delivery models affecting demonstration participants (e.g., Accountable Care Organizations, Patient Centered Medical Homes)	X	
6.2.1.c. Partners involved in service delivery	X	
6.2.2. The state experienced challenges in partnering with entities contracted to help implement the demonstration (e.g., health plans, credentialing vendors, private sector providers) and/or noted any performance issues with contracted entities	X	

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Reporting Topic	State has no update to report (Place an X)	State response
6.2.3. The state is working on other initiatives related to E&C or E&C-related services		<p><i>Montana has informed members that future premium requirements will cease as of as of 01/01/2023 as directed by CMS. Plans are also underway to unwind much of the PHE flexibilities when the PHE ends.</i></p> <p><i>Montana plans to end continuous enrollment and begin coverage terminations for those who no longer qualify as soon as is practicable following the end of the PHE.</i></p>
6.2.4. The initiatives described above are related to the E&C or E&C-related demonstration.		<p><i>Eligibility and Coverage are expected to remain much the same with the exceptions of the cessation of premium requirements, the cessation of 12-month continuous eligibility and the unwinding of most PHE flexibilities.</i></p>
<b>7. E&amp;C demonstration evaluation update</b>		
<b>7.1. Narrative information</b>		
7.1.1. Provide updates on E&C evaluation work and timeline (e.g., evaluation design, procurement, implementation, deliverables). Annual monitoring reports should include available preliminary evaluation results related to areas of focus in the approved evaluation design as outlined by 42 CFR 431.428(a)10.		<p><i>Montana’s HELP evaluation is a part of the CMS contract with Social and Scientific Systems and is currently exempt from the obligation to perform an independent evaluation.</i></p>
7.1.2. Provide status updates on deliverables related to the demonstration evaluation and indicate whether the expected timelines are being met and/or if there are any real or anticipated barriers in achieving the goals and timeframes agreed to in the STCs		<p><i>Montana’s HELP evaluation is a part of the CMS contract with Social and Scientific Systems and is currently exempt from the obligation to perform an independent evaluation.</i></p>
7.1.3. List anticipated evaluation-related deliverables related to this demonstration and their due dates		<p><i>Montana’s HELP evaluation is a part of the CMS contract with Social and Scientific Systems and is currently exempt from the obligation to perform an independent evaluation.</i></p>



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Reporting Topic	State has no update to report (Place an X)	State response
<b>8. Other E&amp;C demonstration reporting</b>		
<b>8.1. General reporting requirements</b>		
8.1.1. The state reports changes in its implementation of the demonstration that might necessitate a change to approved STCs or implementation plan	X	
8.1.2. The state anticipates the need to make future changes to the STCs, or implementation plan based on expected or upcoming implementation changes		<i>The 01/01/2023 movement from 1115 Demonstration Waiver to State Plan services will eliminate the need for STCs.</i>
8.1.3. Compared to the demonstration design and operational details, the state expects to make the following changes to: 8.1.3.a. The schedule for completing and submitting monitoring reports	X	
8.1.3.b. The content or completeness of submitted reports and/or future reports	X	
8.1.4. The state identified real or anticipated issues submitting timely post-approval demonstration deliverables, including a plan for remediation		<i>Occasional data, staffing issues, or unexpected requests have caused delays in the past. Alternative deadlines were granted because of good and timely communication about delays. No out-of-the-ordinary delays to deliverables are anticipated and no plan for remediation is requested if the current good communication (and grace) about unexpected delays continues.</i>
8.1.5. Provide updates on the results of beneficiary satisfaction surveys, if conducted during the reporting year, including updates on grievances and appeals from beneficiaries, per 42 CFR § 431.428(a)(5)		<i>Montana's HELP evaluation is a part of the CMS contract with Social and Scientific Systems and is currently exempt from the obligation to perform an independent evaluation.</i>

Reporting Topic	State has no update to report (Place an X)	State response
<b>8.2. Post-award public forum</b>		
<b>8.3.</b> If applicable within the timing of the demonstration, provide a summary of the annual post-award public forum held pursuant to 42 CFR § 431.428(a)(11) indicating any resulting action items or issues. A summary of the post-award public forum must be included here for the period during which the forum was held and in the annual report.		<i>No annual post-award public forum was held this quarter. The 2022 post-award public forum is planned for November 29, 2022.</i>
<b>9. Notable state achievements and/or innovations</b>		
<b>9.1. Narrative information</b>		
9.1.1. Provide any relevant summary of achievements and/or innovations in demonstration enrollment, benefits, operations, and policies pursuant to the hypotheses of the E&C (or if broader demonstration, then E&C-related) demonstration or that served to provide better care for individuals, better health for populations, and/or reduce per capita cost. Achievements should focus on significant impacts to beneficiary outcomes. Whenever possible, the summary should describe the achievement or innovation in quantifiable terms, e.g., number of impacted beneficiaries.	X	