



## Public Notice

### **Maryland's Section 1115 HealthChoice Demonstration Waiver Amendments**

**The Maryland Department of Health (the Department) is providing public notice of its intent to submit to the Centers for Medicare and Medicaid Services (CMS) a written request to amend Maryland's section 1115 HealthChoice Demonstration Waiver and to receive comments on the planned amendments between May 25, 2022 and June 25, 2022.**

#### **Introduction**

The Maryland Department of Health intends to transition and phase-out two programs from the 2021 §1115 Waiver Renewal due to legislative changes at the state level: the Adult Dental Pilot and the Alternative Destination Pilot, aligned with the Emergency Treat, Triage, and Transport (ET3) Program. This document serves as the Department's notice to the Centers for Medicare and Medicaid Services that these programs are to be phased out effective January 1, 2023 and July 1, 2022, respectively, consistent with Special Terms and Conditions (STC) 9. Legislation passed by Maryland's General Assembly in 2022 requires expansion of these benefits, in terms of both the number of participants eligible for services as well as the benefits covered. The Department plans to cover both benefits through its State Plan going forward.

#### **History of the Waiver**

Now in its twenty-fifth year, Maryland implemented the HealthChoice program and moved its fee-for-service (FFS) enrollees into a managed care payment system following federal approval in 1997. The Department enrolls individuals eligible through the demonstration into a managed care organization (MCO) for comprehensive primary and acute care or one of the demonstration's authorized health care programs.

The Department's goal in implementing and continuing the demonstration is to improve the health status of low-income Marylanders by:

- Improving access to health care for the Medicaid population;
- Improving the quality of health services delivered;
- Providing patient-focused, comprehensive, and coordinated care designed to meet healthcare needs by providing each member a single "medical home" through a primary care provider (PCP);
- Emphasizing health promotion and disease prevention by providing access to immunizations and other wellness services, such as regular prenatal care; and
- Expanding coverage to additional low-income Marylanders with resources generated through managed care efficiencies.

Effective January 1, 2019, CMS approved Maryland's request to implement an Adult Dental Pilot. This authority allows the Department to cover dental services for participants between the ages of 21 and 64, who receive full Medicaid and Medicare Benefits. Benefits are subject to an \$800 per year cap. The Department implemented coverage on June 1, 2019.

Effective January 1, 2022, in addition to reauthorizing the Adult Dental Pilot, the Centers for Medicare & Medicaid Services (CMS) approved and renewed Maryland's §1115 demonstration waiver, known as HealthChoice, for a period of five years. The 2021 renewal made the following changes to the demonstration:

- Created the MOM Model pilot initiative to reduce the burden of neonatal abstinence syndrome (NAS) and its associated costs, and improve maternal health outcomes, by providing case management along with somatic and behavioral care to pregnant people diagnosed with an opioid use disorder (OUD);
- **Created a voluntary, five-year payment model in Annapolis, Baltimore City, and Montgomery Counties, that provides greater flexibility to ambulance care teams to address emergency health care needs following a 911 call by allowing for payment for ground transports to alternative destinations such as urgent care providers in addition to the ED;**
- Created an expenditure authority to cover Medicaid adults aged 21 to 64 that have an Severe Mental Illness diagnosis who are residing in a private Institution of Mental Disease;
- Modified Maryland's coverage of ASAM Level 4.0 to include not only providers located in Maryland, but also those based in contiguous states;
- Raised the participant spaces for the Assistance in Community Integration Services (ACIS) Pilot from 600 to 900; and
- Expanded the allowable time-frame of eligibility in the Healthy Families America (HFA) evidence-based Home Visiting Services (HVS) Pilot from age two to age three.

## Legislative Updates

The Maryland General Assembly convened its 2022 session on January 12, 2022 and adjourned on April 11, 2022. The two bills that have been passed by the Maryland General Assembly are as follows:

### **1. HB6/SB150 Maryland Medical Assistance Program – Dental Coverage for Adults**

HB6/SB150 requires the Department to provide dental services, including diagnostic, preventive, restorative, and periodontal services, for adults whose annual household income is at or below 133 percent of the federal poverty level. The effective date of this bill is January 1, 2023.

### **2. SB295 Maryland Medical Assistance Program - Emergency Service Transporters - Reimbursement**

The Maryland General Assembly also passed *SB 295: Maryland Medical Assistance Program – Emergency Service Transporters – Reimbursement* during the 2022 legislative session. The bill goes into effect July 1, 2022. In addition to other requirements, SB 295 requires Medicaid to reimburse EMS for mobile integrated health as well as “transportation provided by the emergency service transporter to a program recipient with a low-acuity health condition to a location in which urgent health care services are provided to individuals.”

## **Transition of Services from the §1115 Waiver to the State Plan**

In both cases, implementing the requirements of the legislation passed by the General Assembly will result in a larger number of Medicaid participants being able to access benefits previously authorized as pilots. The Department's plans to transition coverage for dental benefits and transport to alternative destinations by EMS providers from the §1115 Waiver to the State Plan are discussed in more detail below.

### **1. Dental Coverage for Adults**

The Governor's state fiscal year 2023 (FY23) budget includes \$82.3M TF (\$32.9M GF, \$49.4M FF) to support implementation of coverage for adult dental services effective January 1, 2023. The Department is in the process of developing a workplan to implement the bill's requirements, including modifications to regulations and the State Plan.

Notably, the State Plan benefit will be more expansive and available to more participants than the existing Adult Dental Pilot. The Adult Dental Pilot is limited to full dual eligibles between the ages of 21 and 64, and subject to an \$800 annual cap on services. Following the expansion of coverage on January 1, 2023, the benefit will be extended to *all* adult enrollees with full Medicaid coverage.<sup>1</sup> In addition, the benefit package is more generous than the one available to Adult Dental Pilot enrollees today. The benefit will include access to a wide range of expanded benefits such as enhanced restorative services including crowns, more comprehensive oral and maxillofacial surgery services, as well as endodontic and periodontic services. Finally, the benefit will not be subject to cost sharing or any type of annual cap, and the \$800 annual cap imposed by the Adult Dental Pilot will be eliminated. As a result, the transition and phase-out of the Adult Dental Pilot will not eliminate or reduce the services provided to adults who access dental benefits today.

The Department has begun working with stakeholders to engage dental providers and members of the community regarding these changes. Passage of the bill and initial announcements regarding the planned expansion were made to the Maryland Medicaid Advisory Committee (MMAC) during the April 28, 2022 meeting. The transition will also be addressed as part of the annual post-award forum scheduled during the MMAC meeting on May 26, 2022 and regular updates will be provided to the MMAC in advance of implementation of the benefit expansion. The Department is also working closely with the Maryland Dental Action Coalition (MDAC) and other stakeholders, to engage dental providers and members of the community regarding these changes. Meetings hosted by MDAC, regarding this process and the transition from the Adult Dental Pilot to expanded adult dental coverage, will be held in May 2022. The Department also plans to make information regarding the expansion available to consumers through its website and will also inform providers by way of its standard provider transmittal process.

Stakeholders will have the opportunity to comment during the 30-day public comment period indicated on the Department's website, beginning May 25, 2022 and ending June 25, 2022 for the 1115 waiver transition. Stakeholders will also have the opportunity to submit public comments

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<sup>1</sup> Participants who are not eligible for full benefits, including partial dual eligibles (e.g., QMBs and SLMBs) and those enrolled in limited benefit programs such as the Family Planning Program, will not be eligible for dental services through this expansion. These populations are *not* eligible for dental services today, so this does not represent a reduction in services for any enrollees.

when necessary regulatory changes are posted in the Maryland Register prior to promulgation, as well as part of the State Plan submission requirements.

The Department's dental benefits administrator, Skygen USA, will also be required to contact enrollees and inform them of this change in benefits prior to the January 1, 2023 start date. The Adult Dental Pilot enrollees will be informed that not only will they continue to be eligible for dental services, but also that the benefits package will be enhanced and that the \$800 annual cap on services imposed by the Adult Dental Pilot will be eliminated. Outreach to providers by Skygen USA is also underway to ensure adequacy of the network following the expansion. Additionally, the Governor's budget included approval of a \$20M over-the-target request to increase dental reimbursement rates of yet to-be-determined service codes (\$9,050,000 GF/\$19,642,857 TF). Enhancing rates for providers is anticipated to help support network capacity going forward.

## **2. Transportation to Alternative Destinations**

Emergency Triage, Treat, and Transport (ET3) is a voluntary, five-year payment model that provides greater flexibility to ambulance care teams to address emergency health care needs of Medicare Fee-for-Service (FFS) participants following a 911 call. Under the ET3 model, the Centers for Medicare & Medicaid Services (CMS) pays participating ambulance providers to transport triaged individuals to an alternative destination partner, such as an urgent care clinic (UCC). Starting in 2020, CMS awarded funding through the ET3 Model to three jurisdictions in Maryland: Baltimore City, City of Annapolis, and Montgomery County.

In an effort to further align Medicare and Medicaid within the state, Maryland included the Alternative Destination Pilot in its most recent §1115 waiver renewal. Under the Pilot, the three jurisdictions participating in ET3 would be eligible to receive reimbursement for transporting Medicaid participants to UCCs in lieu of the emergency department (ED), when clinically appropriate. This reimbursement would be the same fee-for-service rate set for transports to an ED or hospital.

Based on the approval of the §1115 waiver in December 2021, the Department kicked off its planning process in January 2022 with the intent to implement the Alternative Destination Pilot program July 1, 2022. The Department has already been working with internal and external stakeholders and began engagements for implementation. Stakeholders include, MIEMSS, participating EMS agencies, MCOs and UCCs. The Department plans to continue to engage with these stakeholders to implement statewide expansion of the program. Communications will focus on raising awareness with all EMS agencies about the planned expansion, availability of new billing codes, and enhancement of reimbursement rates from \$100 to \$150 as required by SB 295, as well as the benefits of in-network participation by UCCs with the MCOs.

As the pilot program has not yet been implemented, transitioning of this benefit from the §1115 waiver to the State Plan will not impact participants in any way as the benefit has not yet been implemented. In addition, by expanding coverage on a statewide basis, rather than limiting it to the three participating ET3 sites will enable Medicaid participants to access this service statewide. Passage of the bill and initial announcements regarding the planned expansion were made to the Maryland Medicaid Advisory Committee (MMAC) during the April 28, 2022, meeting. The transition will also be addressed as part of the annual post-award forum scheduled as part of the MMAC meeting on May 26, 2022 and regular updates will be provided to the MMAC in advance of implementation of the benefit expansion.

In addition to the 30-day public comment period listed on the Department's website beginning May 25, 2022 and ending June 25, 2022 for the 1115 waiver transition, stakeholders will also have the opportunity to submit public comments when necessary regulatory changes are posted in the Maryland Register prior to promulgation, as well as part of the State Plan submission requirements.

### **Availability of the Demonstration Application and Submission of Comments**

As of May 25, 2022, the State's 30-day public comment period is open. The Department will accept comments through June 25, 2022.

The Department's draft section 1115 demonstration amendment is available on the following website: <https://mmcp.health.maryland.gov/Pages/1115-HealthChoice-Waiver-Renewal.aspx>.

Hard copies of the application may be obtained by calling (410) 767-5208.

Interested parties may send written comments concerning the waiver amendment via email to [mdh.healthchoicerenewal@maryland.gov](mailto:mdh.healthchoicerenewal@maryland.gov) or via hard copy to:

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