



**Maryland**  
DEPARTMENT OF HEALTH

# 2021 Medicaid §1115 HealthChoice Waiver Renewal & Post-Award Forum Public Hearing

Office of Innovation, Research and Development

May 27, 2021



# Agenda

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- Welcome
- HealthChoice Overview
- §1115 Waiver Renewal
- Public Comment

# Housekeeping

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- Please join the meeting audio via phone and enter your audio PIN, which will enable you to speak during public comment.
- We will keep lines muted during the presentations; please also self-mute.
- Please indicate your name, title, organization, and email in the chat.
  - Please indicate if you will be submitting written comments or present verbal comments or questions during today's webinar.
- Send any questions you have through the webinar's question function; you may also utilize this function to sign up for public comment.
- Additional comments, letters, and questions can be submitted via email to [mdh.healthchoicerenewal@maryland.gov](mailto:mdh.healthchoicerenewal@maryland.gov)

# HealthChoice Overview

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# History of HealthChoice

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- HealthChoice, first implemented in 1997 under the authority of §1115 of the Social Security Act, is Maryland's statewide mandatory managed care program for Medicaid enrollees.
- The HealthChoice §1115 demonstration waiver was last renewed in 2016; the current waiver term extends for five years (calendar years (CY) 2017-2021).
- The HealthChoice program is a mature demonstration that has been proven to increase access to quality health care and reduce overall health care spending.

# History of HealthChoice

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- In December 2016, CMS approved Maryland's application for a sixth extension of the HealthChoice demonstration.
- This waiver renewal period is particularly focused on testing cost-effective, innovative programs that target the significant, complex health needs of individuals enrolled in Medicaid.
- CMS approved two amendments during the waiver period, in 2019 and 2020.
- The current waiver application will be submitted to CMS in June for approval by and implementation on January 1, 2022.

# COVID-19 Impact

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- Cannot disenroll members from Medicaid as a result of the Public Health Emergency, creating a significant impact on eligibility numbers compared to last year
- Expansion of services delivered via telehealth, including audio-only telehealth visits
- Waived enforcement of monthly premium payments for the Maryland Children's Health Program Premium and Employed Individuals with Disabilities, and introduced other flexibilities surrounding the delivery of long-term services and supports.
- Relaxed provider enrollment and registration requirements and collaborated with the MCOs to establish a global risk corridor as a fiscal safeguard

# Current Enrollment

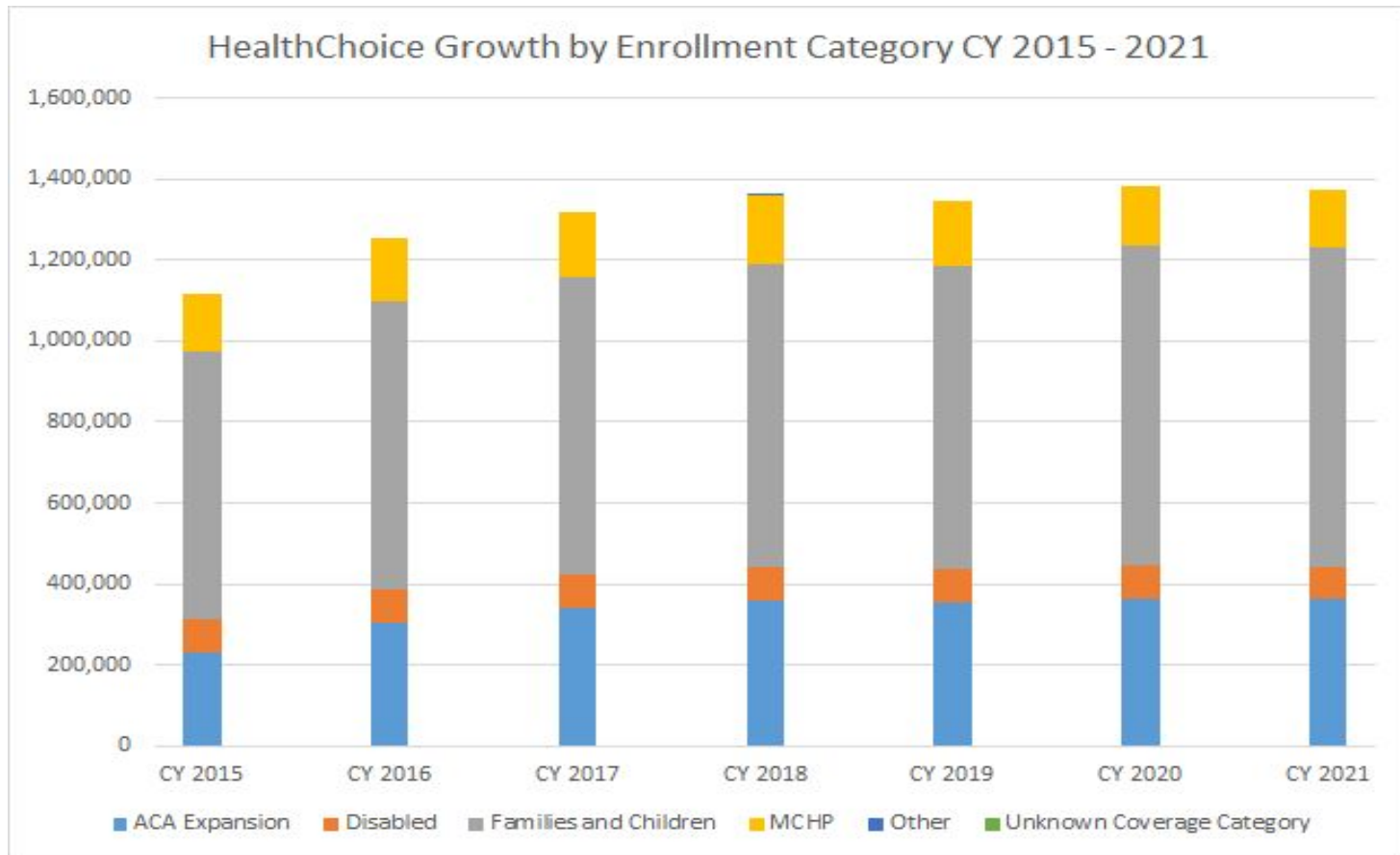
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As of March 2021...

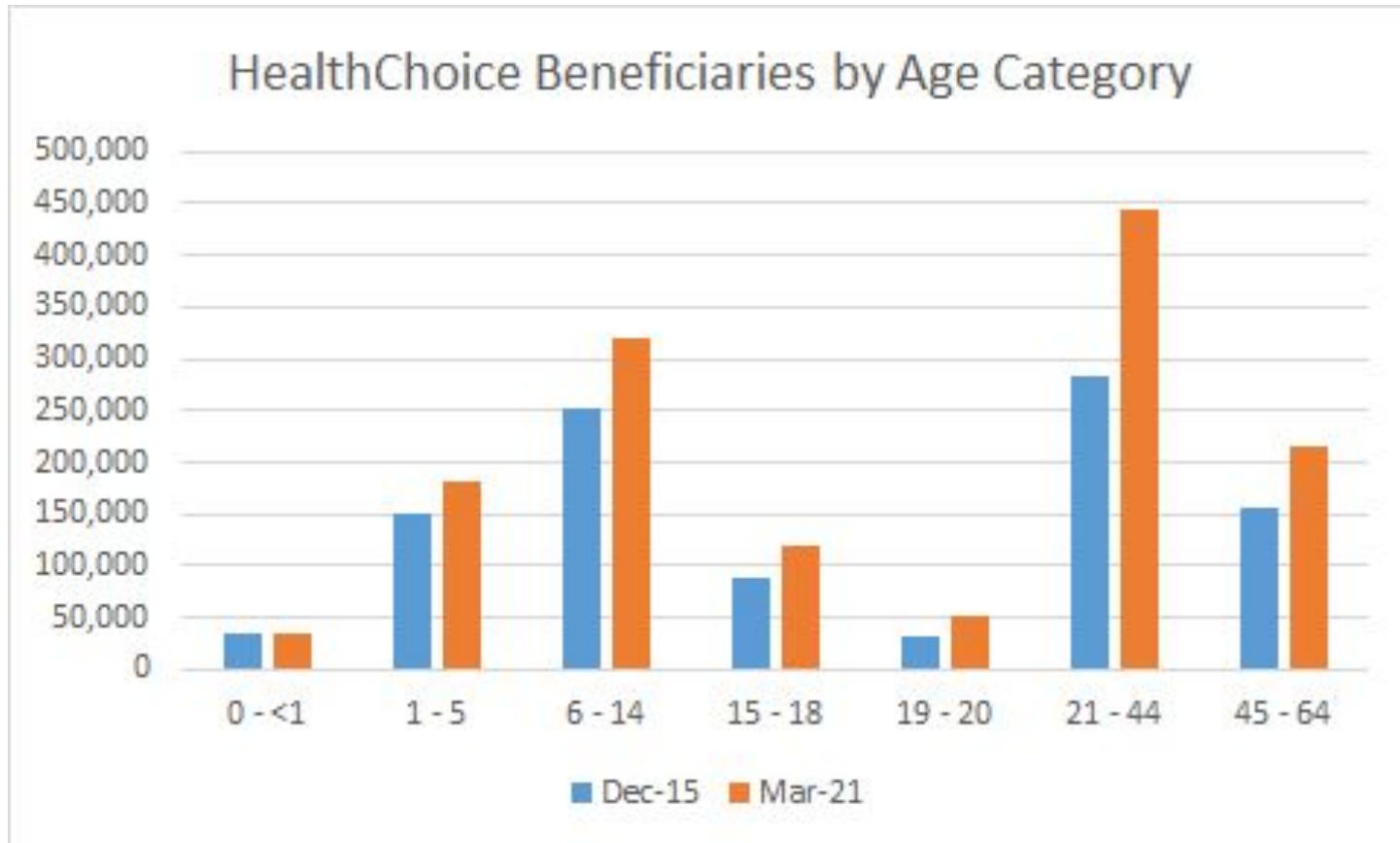
- There were 1,368,070 individuals enrolled in HealthChoice—representing 85.8 percent of total Maryland Medicaid enrollment and an increase of more than 155,752 in the past year.
- 360,023 adults were enrolled through the ACA Medicaid expansion, an increase of 45,068 in the past year.



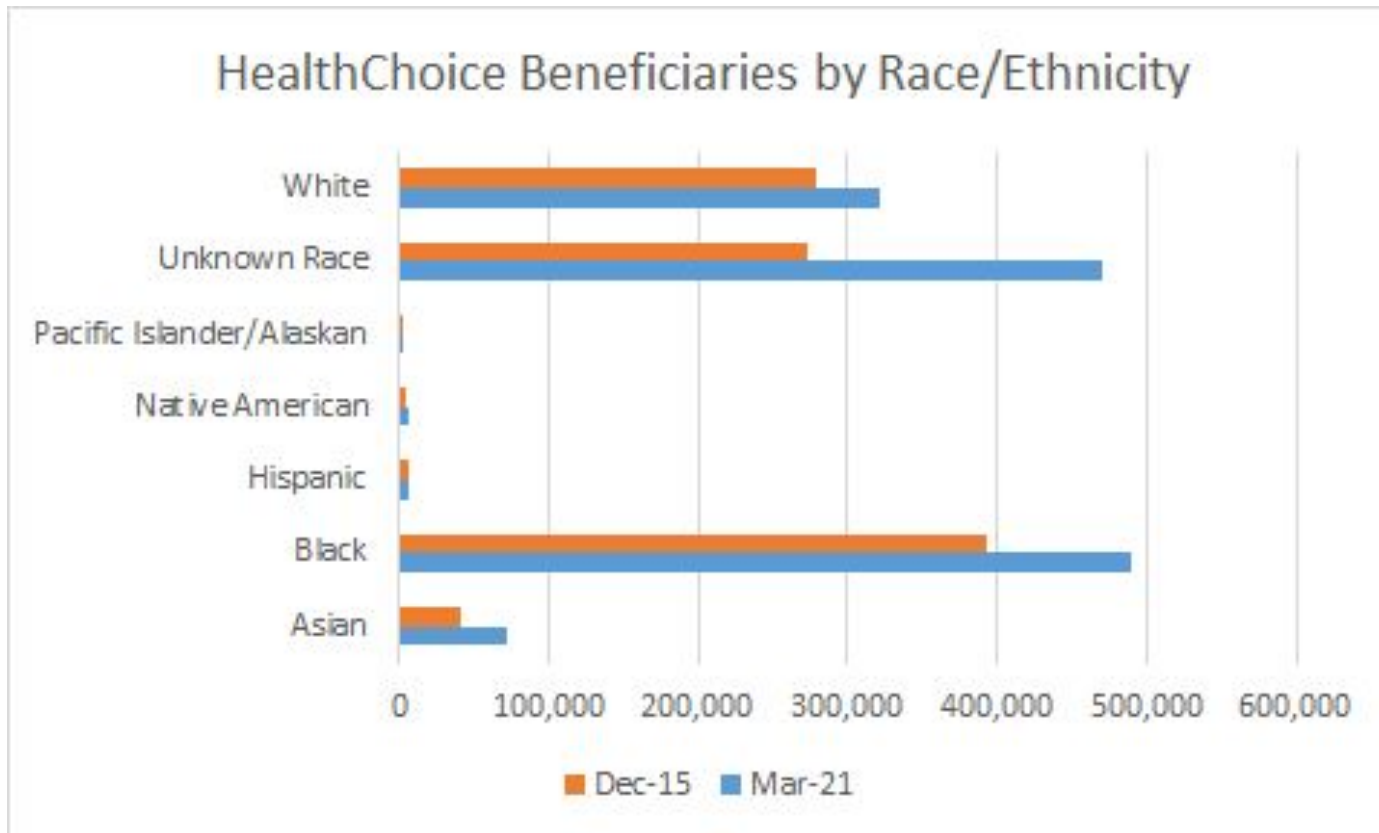
# Growth (2015-2021)



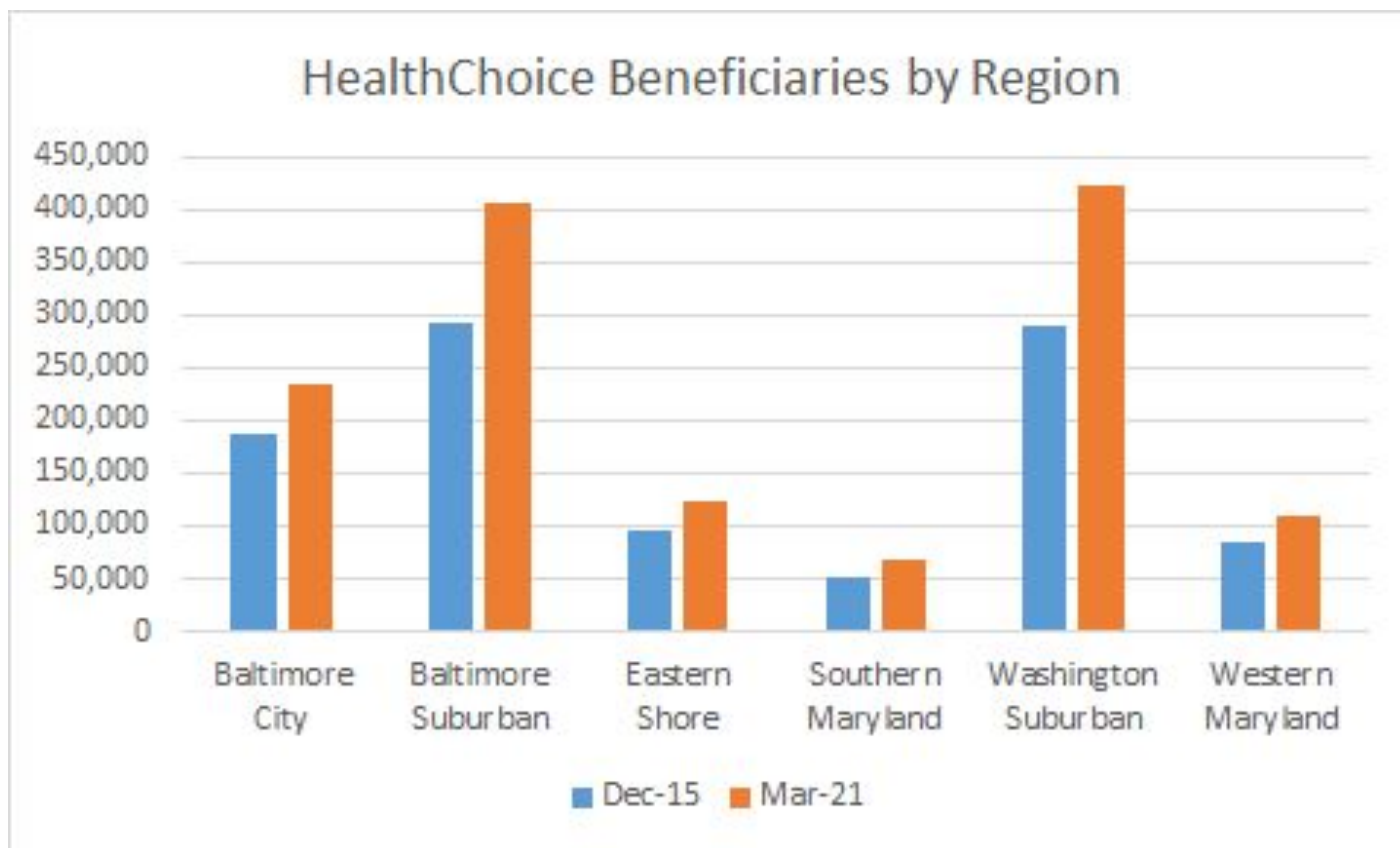
# Age



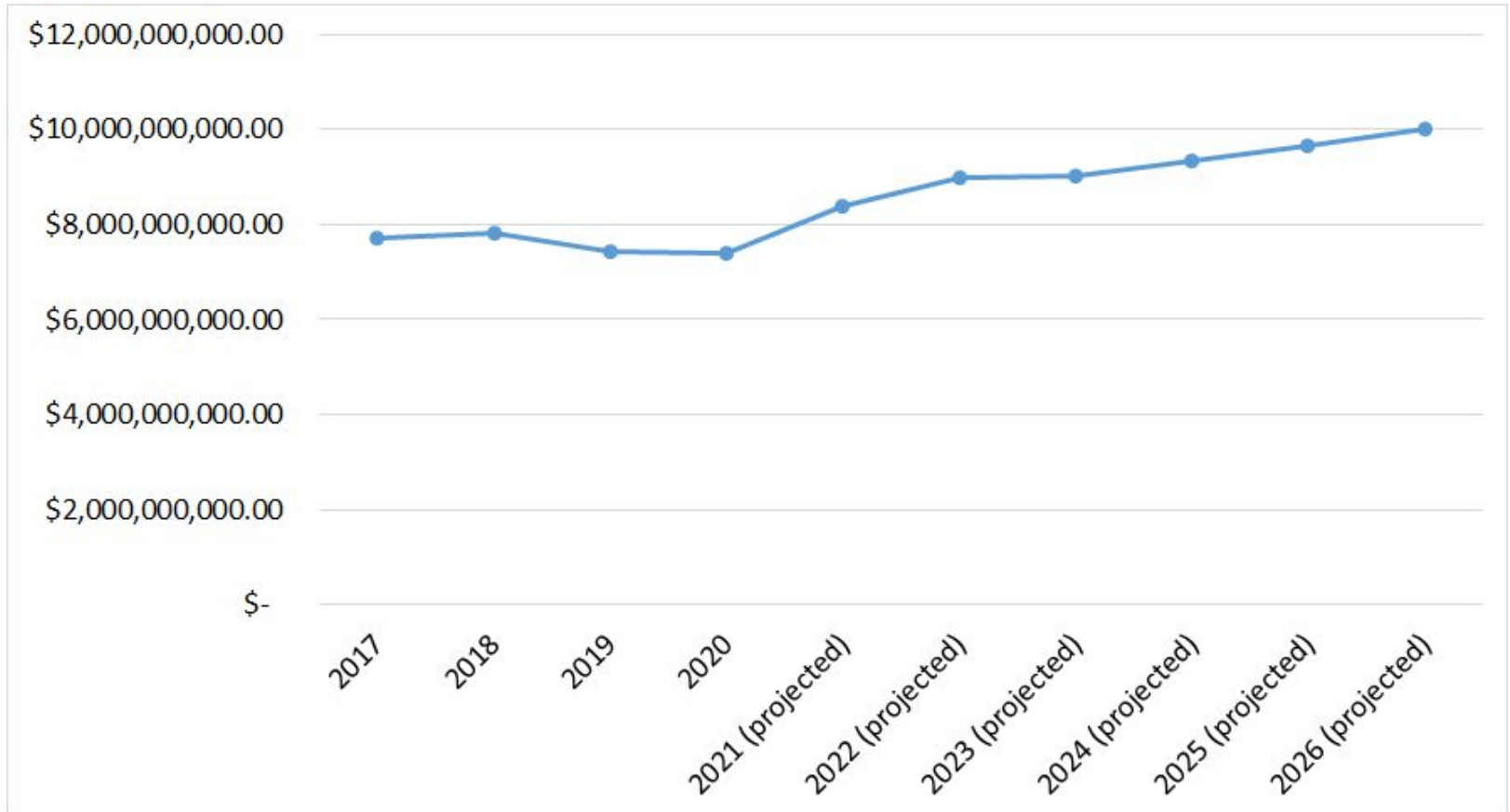
# Race/Ethnicity



# Geographic Region



# HealthChoice Expenditures



# MCO Market Share

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Nine managed care organizations (MCOs) participate in the HealthChoice program.

## MCO market share as of March 2021:

- Aetna Better Health (2.9 percent)
- Amerigroup (19.5 percent)
- CareFirst Community Health Plan Maryland (3.5 percent)
- Jai Medical Systems (1.9 percent)
- Kaiser Permanente (6.3 percent)
- Maryland Physicians Care (14.9 percent)
- MedStar Family Choice (6.5 percent)
- Priority Partners (21.0 percent)
- United Healthcare (10.2 percent)

# Performance Highlights

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## Between CY 2015 and CY 2019...

- The rate of potentially-avoidable emergency department (ED) visits decreased by 4.3 percentage points.
- Rates for well-child visits—as well as immunization—were consistently higher than the national Medicaid average.
- The percentage of pregnant individuals with a timely prenatal care appointment increased from 84.4 percent to 88.2 percent.
- The percentage of adults aged 50-64 who received a colorectal cancer screening increased by 6.5 percentage points.
- Individuals with substance use disorders who received medication-assisted therapy increased by 6.2 percentage points.

# §1115 Waiver Renewal



# §1115 Waiver Renewal Initiatives

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Continuation of Existing Programs without changes:

- Adult Dental Pilot Program
- Breast and Cervical Cancer Program
- Collaborative Care Pilot Program
- HealthChoice Diabetes Prevention Program
- Hospital Presumptive Eligibility Process
- Increased Community Services

# §1115 Waiver Renewal Initiatives

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## Modifications to Existing Programs:

- Assistance in Community Integration Services (ACIS) pilot - expanding from 600 to 900 spaces
- Home Visiting Services for High Risk Pregnant Women and Children (HVS) pilot - expanding the allowable service time frame of eligibility from age two to age three in the HFA model (this aligns now with that model)
- Residential Treatment for Adults with Substance Use Disorder - expanding coverage of ASAM Level 4.0 to include providers based in contiguous states
  - More than 12,000 participants expected to receive services annually
  - Coverage for up to two non-consecutive 30-day stays (no more than 60 days) annually; state-only dollars used for additional days.

# §1115 Waiver Renewal Initiatives

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## New Programs:

- The proposed changes for the renewal period 1/2022 – 12/2027 include expanding services under the following programs:
  - Expansion of Institution of Mental Diseases Services for Adults with Serious Mental Illness (SMI IMD)
  - Maternal Opioid Misuse model (MOM)
  - Emergency Triage, Treat, and Transport model (ET3)

# §1115 Waiver New Initiatives

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## Serious Mental Illness Institutions of Mental Disease (SMI IMD)

- Requesting expenditure authority to cover Medicaid adults aged 21 to 64 that have a diagnosis of SMI who are residing in a private IMD
- Estimated 3,960 participants served annually
- Up to two non-consecutive 30-day stays (no more than 60 days) annually; state-only dollars used for additional days
- Coverage available when delivered by facilities located in Maryland or a contiguous state

# §1115 Waiver New Initiatives

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## Maternal Opioid Misuse (MOM) model

- An initiative designed to link pregnant and postpartum Medicaid participants with opioid use disorder with needed health care and health-related social needs
- Seeking funding for PMPM payments for MCOs to cover enhanced case management services
- Will be piloted initially in St. Mary's County, with the aim of scaling to statewide

# §1115 Waiver New Initiatives

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## Emergency Triage, Transport, and Treat (ET3) Model

- A voluntary, five-year payment model 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

# Public Notice

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- The following online public hearings will discuss the content of the waiver renewal and solicit feedback and input from stakeholders:
  - First Public Hearing: 5/11/21, 10:00-12:00 pm
  - Second Public Hearing: 5/27/21, 3:00-5:00 pm
    - Combined with HealthChoice Post Award Forum Hearing
  - Full draft of the application was available for public comment on 5/4/21

# General Information

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- The 1115 Waiver Renewal draft is available here:
  - On the [main HealthChoice page](#)
  - Directly in [pdf form](#)
  - And with [a summary document](#)
- Hard copies may be obtained by calling:  
(410) 767-5208.
- Interested parties may send written comments concerning the waiver renewal to [mdh.healthchoicerenewal@maryland.gov](mailto:mdh.healthchoicerenewal@maryland.gov).
- The Department will accept comments from Tuesday, May 4th to Friday, June 4th.



# Questions and Public Comments

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