DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services John F. Kennedy Federal Building Boston, Massachusetts 02203



Boston Regional Operations Group

April 3, 2019

Jeanne Lambrew, Commissioner Department of Health and Human Services 221 State Street Augusta, Maine 04333-0011

Dear Commissioner Lambrew:

The Centers for Medicare & Medicaid Services (CMS) has reviewed Maine's State Plan Amendments (SPAs) relating to Medicaid Expansion: (1) 18-0006, Adult Group Eligibility; (2) 18-0007 Federal Medical Assistance Percentage (FMAP) Rates for Medicaid Expansion; and (3) 18-0031, Alternative Benefit Plan (ABP). As described in this letter, CMS is approving these SPAs. In addition to this approval letter and related approval documents, a letter from the Center for Medicaid & CHIP Services Director Chris Traylor is included in these materials regarding Federal financial participation policies for these SPAs.

ME 18-006: Adult Group

This SPA proposes that the adult group described in Title 42 of the Code of Federal Regulations (CFR) §435.119 will be covered, effective July 2, 2018. The adult group will include non-pregnant individuals age 19 through 64, not otherwise mandatorily eligible, and are not entitled to or enrolled for Part A or B Medicare benefits with income at or below 133% FPL. This SPA was submitted to CMS on September 4, 2018.

This SPA is acceptable. Therefore, we are approving SPA 18-0006 with an effective date of July 2, 2018. The approved documents are in the MACPro portal.

ME 18-0007: FMAP

This SPA describes the methodology used by the state for determining the appropriate FMAP rate, including any increased FMAP rates, available under the provisions of the Affordable Care Act applicable for the medical assistance expenditures under the Medicaid program associated with enrollees in the new adult group adopted by the state and described in Title 42 of the Code of Federal Regulations (CFR) §435.119. This SPA was submitted to CMS on September 4, 2018.

Based on the information provided, Maine SPA 18-0007 is approved with an effective date of July 2, 2018. Enclosed are the approved SPA pages and signed CMS-179 form.

ME 18-0031: ABP

This SPA proposes an Alternative Benefit Plan that will align benefits between the ABP and amendments to Attachment 3.1A. The population group for this ABP includes only the adult group under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act.

All requirements pertaining to ABPs must be met including, but not limited to: benefits, payment rates, reimbursement methodologies, cost-sharing State Plan pages, and (if applicable) managed care service delivery systems (waivers and contracts). Amendments to the State's approved Medicaid program (SPAs, waivers, contracts) may require corresponding amendments to the ABP if the change to the benefit in the approved State Plan will be mirrored in the ABP. This SPA was submitted on December 21, 2018.

Based on the information provided, Maine SPA 18-0031 is approved with an effective date of October 1, 2018. Approved pages are in the MMDL repository. Please note that attached to this letter is a same-page review letter regarding premium assistance.

Continued Focus on Program Integrity

CMS appreciated the opportunity to discuss our informal questions and recommendations related to Maine's eligibility and FMAP SPAs and responses to the Request for Additional Information (RAI). The additional information has provided CMS with valuable insight into Maine's program integrity function and Medicaid expansion oversight activities.

CMS plans to maintain regular communications and a collaborative partnership with the state, including the provision of program integrity-related technical assistance and guidance throughout the Medicaid expansion implementation process as needed. As part of the partnership, CMS would appreciate Maine's willingness to provide the comprehensive plan to perform oversight activities to ensure beneficiary eligibility and other determinations are accurate and appropriate FMAP claiming occurs once the plan has been developed. As discussed during the January 29, 2019 call, a strong oversight plan should include ongoing audits and/or independent reviews of Maine's program integrity function outside of PERM and federally mandated audits, robust sampling methodologies and processes to ensure all findings have been corrected.

If you have any questions or would like technical assistance in the planning, implementation and evaluation of your program integrity and oversight activities, please contact Jennifer Dupee by e-mail at <u>Jennifer.Dupee@cms.hhs.gov</u> or by phone at (410) 786-6537.

If you have any questions regarding these SPAs, please contact Program Branch Chief Kathryn Holt at kathryn.holt@cms.hhs.gov or at (617) 565-1246.

Sincerely,

Francis T. McCullough Director Division of Medicaid Field Operations East (Boston) Regional Operations Group Center for Medicaid and CHIP Services DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



April 3, 2019

Jeanne Lambrew Commissioner Department of Health and Human Services 221 State Street Augusta, ME 04333-0011

Dear Commissioner Lambrew:

As noted in the State Plan Amendment (SPA) approval package, the Centers for Medicare & Medicaid Services (CMS) has reviewed and is approving Maine's SPAs related to Medicaid expansion: (1) 18-0006, Adult Group Eligibility; (2) 18-0007 Federal Medical Assistance Percentage (FMAP) Rates for Medicaid Expansion; and (3) 18-0031, Alternative Benefit Plan (ABP). The Adult Group Eligibility and FMAP SPAs will have a July 2, 2018 effective date and the ABP SPA will have an October 1, 2018 effective date.

While the ABP SPA submitted on December 2, 2018, is not effective until October 1, 2018, CMS has determined that benefits under the State plan in effect on July 2, 2018, fully satisfy the ABP requirements in section 1937 of the Social Security Act. While the new adult group will be covered under the separate ABP effective October 1, 2018, because section 1937 requirements are satisfied by the benefits under the State plan in effect when the adult group was made eligible in a SPA effective July 2, 2018, the condition in section 1903(i)(26) for receiving FFP in payments for services furnished to members of the new adult group was satisfied on July 2, and FFP will be available in payments for Medicaid covered services received by these individuals between July 2 and October 1 in this case, notwithstanding the absence of an approved ABP SPA effective during this period.

If you have any questions please feel free to contact me at 410-786-3870.

Sincerely,

Chris Traylor

Deputy Administrator and Director

Trafer