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Medicaid Peer-to-Peer Learning Network

Update on CMS' Policies on SPAs and Family Planning Waivers

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Agenda

- Landscape
- SPAs 101
- To SPA or Not to SPA?
- Waiver Policies
- Questions and Discussion

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Where Are We Now?

- March 23: Family planning SPAs authorized in Affordable Care Act (ACA)
- July 2: CMS releases guidance on SPAs
- August 27: CMS issues draft preprint
- August 31: CMS holds clarifying call on SPAs
- October 1: CMS issues letter on streamlining SPA approvals
- October 25: Joint memo released summarizing CMS' guidance to date on SPAs

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Where Are We Now?

- States known to have applied for a SPA:
  - Wisconsin
  - South Carolina
  - California

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SPAs 101: Eligibility

- Eligibility is based only on pregnancy status and income
- Teens and men must be included
- “Grandfather” clause for waivers (on or before 1/1/07)
- Presumptive eligibility is allowed
- State can choose to determine income eligibility using the same methodology it uses for pregnant women

SPAs 101: Enrollment

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- Individuals who apply for full-benefit Medicaid but only qualify for a SPA must be offered enrollment in the SPA
  - State could comply by adding question to application as to whether individual wants to be considered for SPA
  - Informed choice is paramount, but…
- Individuals who apply to SPA but who qualify for full-benefit Medicaid must be enrolled in broader coverage
  - Questions remain about confidentiality, point of service enrollment and shortened enrollment forms

SPAs 101: Enrollment

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- All eligible individuals must have option to enroll:
  - Post-menopausal women: States can set "reasonable" parameters for automatic eligibility determinations. Informed choice is paramount
  - Sterilized women: States may not explicitly exclude, as a group, individuals who have already been sterilized. However, once the package of covered services is explained to potential enrollees, CMS anticipates that few, if any, individuals who have already been sterilized will choose to enroll.

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SPAs 101: Services

- Family planning services and supplies (90% match)
- Family planning-related services (regular FMAP)
  - Provided pursuant to a family planning service in a family planning setting
  - Generally provided as part of or as follow-up to a family planning visit
  - **Causal link:** services were provided because they were identified, or diagnosed, during a family planning visit

SPAs 101: Services

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- Must provide some (but not all) of the following:
  - STI treatment drugs
  - Follow-up visit/encounter for the STI treatment/drugs
  - Subsequent follow-up visits to rescreen based on CDC guidelines
  - Annual family planning visit for men
  - Drugs for treatment of lower genital tract and genital skin infections/disorders and urinary tract infections

SPAs 101: Services

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- Must provide some (but not all) of the following:
  - Other medical diagnosis, treatment and preventive services (such as HPV vaccines)
  - Treatment of major complications
  - For persons who have had a sterilization, states must cover family planning-related services provided as part of or as follow-up to the family planning visit in which the sterilization took place

SPAs 101: General Rules

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- Transportation **must** be covered (regular FMAP)
- Must provide same provider reimbursement rates as full-benefit Medicaid
- All general Medicaid rules apply, including cost-sharing, citizenship, immigration, 3rd party liability
  - Premiums cannot be charged for family planning, but unclear for family planning-related services.
- No creditable coverage prohibition
  - "Good cause" exception: not addressed by guidance, but exception allowed under federal statutes and regulations

To SPA or Not to SPA?

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- States may keep waivers instead of converting to SPAs, but:
  - Date to keep in mind: December 31, 2013
- Waiver budget neutrality will be applied through effective SPA date
  - Waivers in states seeking conversion must have been in effect long enough to achieve budget neutrality
- Maintenance of effort requirements

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To SPA or Not to SPA?

Issue	Waivers	State Plan Amendments (SPAs)
Budget Neutrality	Required	Not Required
Research and Evaluation	Required	Not Required
Timeline for Approval	No (average 15+ months)	Yes (federally mandated)
Approval Period	~~5 years~~ December 31, 2013	Permanent
Renewal	~~Every 3~~ 2 years	None
Creditable Coverage	No (recent policy change)	No
Presumptive Eligibility	Allowed (recent policy change)	Allowed

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To SPA or Not to SPA?

Issue	Waivers	State Plan Amendments (SPAs)
Eligibility – Age	At state's discretion	Must include teens
Eligibility – Gender	At state's discretion	Must include men
Eligibility – Income	Calculated as family of 1	Can be family of 2
Sterilized Individuals	Not eligible	State may not explicitly exclude
Family Planning-Related Services	Can be covered	Some must be covered, state's choice as to which
Transportation	Can be covered at state's regular FMAP	Must be covered at state's regular FMAP

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Waiver Policies

- CMS' new waiver process/application:
  - Presumptive eligibility is allowed
  - No creditable coverage prohibition
- New waiver timeframes
- January 1, 2011: **28** states will have waivers
- State updates

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Questions and Discussion