

# State of Utah

## Section 1115 Demonstration Amendment

### Dental Benefits for Individuals with Blindness or Disabilities

#### Porcelain and Porcelain-to-Metal Crowns

#### Section I. Program Description and Objectives

The State is currently authorized to provide state plan dental benefits to individuals with blindness or disabilities under the State's 1915(b) Dental Choices Waiver and the 1115 Primary Care Network Demonstration Waiver. These benefits are provided through the State's dental managed care delivery system. However, due to recent legislative budget reductions due to the impact of the COVID-19 pandemic on the economy, the State no longer has funding to provide the State's share for dental benefits for individuals with blindness or disabilities. In order to continue to provide these much needed dental services to this population, the University of Utah (state teaching hospital) School of Dentistry has agreed to provide the State matching funds for these services through an Intergovernmental transfer. In addition, this will result in a change to the benefit delivery system for this population. With this waiver amendment, the State is requesting the following:

1. Authority to change the benefit delivery system for dental benefits for individuals with blindness or disabilities. Benefits will be provided through the University of Utah School of Dentistry, and its associated statewide network of dental providers, rather than the current managed care delivery system.
2. Authority to provide porcelain and porcelain-to-metal crowns for this population, as is currently authorized under the State's 1115 demonstration waiver for aged individuals, and Targeted Adult Medicaid beneficiaries who are eligible for dental benefits.

#### Goals and Objectives

Oral health is an important component of an individual's overall health. Untreated caries (cavities) and periodontal (gum) disease can exacerbate certain diseases, such as diabetes and cardiovascular disease, and lead to chronic pain, infections, and loss of teeth.<sup>1</sup> Lack of routine dental care can also delay diagnosis of conditions, which can lead to potentially preventable complications, high-cost emergency department visits, and adverse outcomes.<sup>2</sup> The State believes this demonstration furthers the objectives of Title XIX of the Social Security Act of promoting improved health outcomes by addressing the dental needs of demonstration eligible individuals. This amendment proposes to continue to provide an expanded scope of coverage and benefits for vulnerable individuals with blindness or disabilities. Without this demonstration, this population would not be able to receive much needed dental benefits.

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<sup>1</sup> U.S. Department of Health and Human Services. *Oral Health in America: A Report of the Surgeon General*.

Rockville, MD: U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health, 2000

<sup>2</sup> Freed, M, Neuman, T, Jacobson, *Drilling Down on Dental Coverage and Costs for Medicare Beneficiaries*. March 2019. <https://www.kff.org/medicare/issue-brief/drilling-down-on-dental-coverage-and-costs-for-medicare-beneficiaries/>

### Operation and Proposed Timeline

The demonstration will operate statewide. The State intends to implement the proposed changes on January 1, 2021. The State requests to operate the demonstration through the end of the current waiver approval period, which is June 30, 2022.

### Demonstration Hypotheses and Evaluation

With the help of an independent evaluator, the State will develop a plan for evaluating the hypotheses indicated below. Utah will identify validated performance measures that adequately assess the impact of the demonstration to beneficiaries. The State will submit the evaluation plan to CMS for approval.

The State will conduct ongoing monitoring of this demonstration, and will provide information regarding monitoring activities in the required quarterly and annual monitoring reports.

The following hypothesis will be tested during the approval period:

Hypothesis	Anticipated Measure(s)	Data Sources	Evaluation Approach
Individuals in the demonstration will have increased utilization of preventive dental care and decreased utilization of emergency dental services.	<ul style="list-style-type: none"><li>Utilization of preventive dental services</li><li>Utilization of emergency dental services</li></ul>	Claims data	Independent evaluator will design quantitative and qualitative measures to include experimental or quasi-experimental comparisons

Porcelain crowns are considered an added benefit to the benefit package for individuals with blindness or disabilities. As such, the impact of porcelain crowns will be evaluated with the identified hypothesis above identified.

### Section II. Demonstration Eligibility

Individuals eligible under this demonstration must be Medicaid eligible individuals age 18 and older, with blindness or disabilities.

### Projected Enrollment

The projected enrollment for the demonstration population is 32,000.

### Section III. Demonstration Benefits and Cost Sharing Requirements

There are no changes to the dental benefits provided to eligible individuals under this amendment. Individuals will continue to receive state plan dental benefits. In addition, if approved under this demonstration, this population will also be eligible to receive porcelain and porcelain-to-metal crowns.

Cost sharing requirements will not differ from those provided under the state plan.

### Section IV. Delivery System

The Department will deliver services through a fee for service payment model and by contracting with an entity that:

- Has demonstrated experience working with individuals who are being treated for both a substance use disorder and a major oral health disease;
- Operates a program, targeted at the individuals described in this amendment, that has demonstrated, through a peer-reviewed evaluation, the effectiveness of providing dental treatment to those individuals;
- Is willing to pay for an amount equal to the program's non-federal share of the cost of providing dental services to the population described;
- Can guarantee access to care statewide.

At present, the only entity that qualifies to provide services is the University of Utah School of Dentistry, and their associated statewide provider network. The University of Utah School of Dentistry currently provides dental services to Aged Medicaid and Targeted Adult Medicaid members, as authorized by the State's 1115 demonstration waiver.

### Section V. Enrollment in Demonstration

Eligible individuals will be enrolled in the demonstration as of the implementation date of this amendment.

### Section VI. Demonstration Financing and Budget Neutrality

Refer to Budget Neutrality- Attachment 1 for the State's historical and projected expenditures for the requested period of the demonstration.

Below is the projected enrollment and expenditures for each remaining demonstration year.

<b>Individuals with Blindness or Disabilities</b>	<b>DY19 (SFY 21)*</b>	<b>DY 20 (SFY 22)</b>
Enrollment	32,000	32,800
Expenditures**	\$6,220,000	\$13,420,000

\*Represents half year estimate January 2021 - June 2021

\*\* Includes expenditures for porcelain crowns

## Section VII. Proposed Waiver and Expenditure Authority

The State requests the following proposed waivers and expenditure authority to operate the demonstration.

Waiver and Expenditure Authority	Reason and Use of Waiver
Section 1902(a)(10)(B)- Amount, Duration, and Scope of Services and Comparability	To enable the State to vary the amount, duration, and scope of services provided to individuals in the demonstration group.
Section 1902(a)(23)(A)- Freedom of Choice	To enable the State to restrict freedom of choice of providers for the population affected by this demonstration.

### Expenditure Authority

The State requests expenditure authority to provide state plan dental benefits to Medicaid eligible individuals with blindness or disabilities. The State also requests expenditure authority to provide porcelain or porcelain-to-metal crowns to this population.

## Section VIII. Compliance with Public Notice and Tribal Consultation

### Public Notice Process

Public Notice of the State’s request for this demonstration amendment, and notice of Public Hearing will be advertised in the newspapers of widest circulation, and sent to an electronic mailing list. In addition, the abbreviated public notice will be posted to the State’s Medicaid website at <https://medicaid.utah.gov/1115-waiver>.

Two public hearings to take public comment on this request will be held. The first public hearing will be held on August 18, 2020 from 4:30 p.m. to 5:30 p.m. The second public hearing will be held on August 20, 2020 from 2:00 p.m. to 4:00 p.m., during the Medical Care Advisory Committee (MCAC) meeting. Due to the COVID-19 emergency and state social distancing guidelines, both public hearings will be held via video and teleconferencing.

### Public Comment

The public comment period will be held July 31, 2020 through August 29, 2020.

### Tribal Consultation

In accordance with the Utah Medicaid State Plan, and section 1902(a)(73) of the Social Security Act, the State ensures that a meaningful consultation process occurs in a timely manner on program decisions impacting Indian Tribes in the State of Utah. DMHF notified the UDOH Indian Health Liaison of the waiver amendment. As a result of this notification, DMHF will begin the tribal consultation process by attending the Utah Indian Health Affairs Board (UIHAB) meeting on August 14, 2020 to present this demonstration amendment.

### Tribal Consultation Policy

The consultation process will include, but is not limited to:

- An initial meeting to present the intent and broad scope of the policy and waiver application to the UIHAB.
- Discussion at the UIHAB meeting to more fully understand the specifics and impact of the proposed policy initiation or change;
- Open meeting for all interested parties to receive information or provide comment;
- A presentation by tribal representatives of their concerns and the potential impact of the proposed policy;
- Continued meetings until concerns over intended policy have been fully discussed;
- A written response from the Department of Health to tribal leaders as to the action on, or outcome of tribal concerns.

Tribal consultation policy can be found at: <http://health.utah.gov/indianh/consultation.html>.

### **Section IX. Demonstration Administration**

Name and Title: Nate Checketts, Deputy Director, Utah Department of Health

Telephone Number: (801) 538-6689

Email Address: [nchecketts@utah.gov](mailto:nchecketts@utah.gov)

DEMONSTRATION WITHOUT WAIVER (WOW) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	TREND RATE 1	MONTHS OF AGING	BASE YEAR DY 15 (SFY 17)	TREND RATE 2	DEMONSTRATION YEARS (DY)					TOTAL WOW
					DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>Current Eligibles</b>										
<i>Parent Caretaker Relative (PCR) population 45-60% FPL: transferred to Expansion Parents effective 4/1/19</i>										
<b>Pop Type:</b>	<b>Medicaid</b>									
Eligible Member Months	0.0%	0	377,866	0.0%	377,866	364,366	320,957	319,534	318,076	
PMPM Cost	5.3%	0	\$ 949.03	5.3%	\$ 999.33	\$ 1,052.29	\$ 1,108.07	\$ 1,166.79	\$ 1,228.63	
Total Expenditure					\$ 377,612,830	\$ 383,420,334	\$ 355,641,571	\$ 372,830,227	\$ 390,798,881	\$ 1,880,303,842
<b>Demo Pop I - PCN Adults with Children</b>										
<i>PCN ends 3/31/19</i>										
<b>Pop Type:</b>	<b>Hypothetical</b>									
Eligible Member Months	5.9%	0	104,836	5.9%	111,042	88,212	-	-	-	
PMPM Cost	5.3%	0	\$ 46.18	5.3%	\$ 48.63	\$ 51.21	\$ 53.92	\$ 56.78	\$ 59.79	
Total Expenditure					\$ 5,399,987	\$ 4,517,106	\$ -	\$ -	\$ -	\$ 9,917,093
<b>Demo Pop III/V - UPP Adults with Children</b>										
<b>Pop Type:</b>	<b>Hypothetical</b>									
Eligible Member Months	34.9%	0	6,067	34.9%	8,182	11,034	14,881	20,068	27,064	
PMPM Cost	5.3%	0	\$ 150.08	5.3%	\$ 158.03	\$ 166.41	\$ 175.23	\$ 184.52	\$ 194.30	
Total Expenditure					\$ 1,293,029	\$ 1,836,200	\$ 2,607,542	\$ 3,702,908	\$ 5,258,410	\$ 14,698,089
<b>Demo Pop I - PCN Childless Adults</b>										
<i>PCN ends 3/31/19</i>										
<b>Pop Type:</b>	<b>Medicaid</b>									
Eligible Member Months		0		2.5%	73,812	58,293	-	-	-	
PMPM Cost		0		5.3%	\$ 51.57	\$ 54.30	\$ 57.18	\$ 60.21	\$ 63.40	
Total Expenditure					\$ 3,806,153	\$ 3,165,223	\$ -	\$ -	\$ -	\$ 6,971,376
<b>Demo Pop III/V - UPP Childless Adults</b>										
<b>Pop Type:</b>	<b>Medicaid</b>									
Eligible Member Months	159	0		2.5%	163	167	171	176	180	
PMPM Cost	68.45	0		5.3%	\$ 72.08	\$ 75.90	\$ 79.92	\$ 84.16	\$ 88.62	
Total Expenditure					\$ 10,702	\$ 11,237	\$ 11,799	\$ 12,388	\$ 13,008	\$ 59,133
<b>Targeted Adults</b>										
<i>Member months will increase when the criteria is expanded to include victims of domestic violence and individuals with court ordered treatment. PMPM will increase due to adding the housing support benefit and new managed care directed payments</i>										
<b>Pop Type:</b>	<b>Expansion</b>				<i>Started 11/1/17</i>					
Eligible Member Months		0	0	2.5%	78,000	78,000	126,000	172,200	176,505	
PMPM Cost		0	\$ -	5.3%	\$ 979.53	\$ 1,031.45	\$ 1,522.79	\$ 1,603.50	\$ 1,688.48	
Total Expenditure					\$ 76,403,340	\$ 80,452,717	\$ 191,871,540	\$ 276,122,333	\$ 298,025,737	\$ 922,875,668
<b>Dental - Targeted Adults</b>										
<i>Started 3/1/19 Porcelain crowns anticipated start date of 1/1/20 increases PMPM</i>										
<b>Pop Type:</b>	<b>Expansion</b>									
Eligible Member Months		0		2.5%	-	12,000	36,900	37,823	38,768	
PMPM Cost	5.3%	0		5.3%	\$ -	\$ 33.33	\$ 37.27	\$ 39.24	\$ 41.32	
Total Expenditure					\$ -	\$ 400,000	\$ 1,375,111	\$ 1,484,192	\$ 1,601,925	\$ 4,861,228

DEMONSTRATION WITHOUT WAIVER (WOW) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	TREND RATE 1	MONTHS OF AGING	BASE YEAR DY 15 (SFY 17)	TREND RATE 2	DEMONSTRATION YEARS (DY)					TOTAL WOW
					DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>System of Care</b>										
<b>Pop Type: Hypothetical</b>										
<i>Anticipated start date of 1/1/20</i>										
Eligible Member Months		0			-		720	1,440	1,440	
PMPM Cost	5.3%	0		5.3%	\$ -		\$ 2,100.00	\$ 2,211.30	\$ 2,328.50	
Total Expenditure					\$ -		\$ 1,512,000	\$ 3,184,272	\$ 3,353,038	\$ 8,049,310
<b>Dental - Blind/Disabled</b>										
<b>Pop Type: Hypothetical</b>										
<i>Anticipated start date of 1/1/21</i>										
Eligible Member Months	2.5%	0			412,361	412,361	412,361	398,181	393,600	
PMPM Cost	5.3%	0			\$ 18.42	\$ 19.40	\$ 20.42	\$ 25.49	\$ 34.10	
Total Expenditure					\$ 7,595,690	\$ 7,998,261	\$ 8,422,169	\$ 10,149,621	\$ 13,420,241	\$ 47,585,981
21.50674765										
<b>Dental - Aged</b>										
<b>Pop Type: Hypothetical</b>										
<i>Anticipated start date of 1/1/20    Anticipated start date of 1/1/21</i>										
Eligible Member Months	2.5%	0	108,000				54,000	156,300	160,208	
PMPM Cost	5.3%	0					\$ 30.75	\$ 32.38	\$ 34.10	
Total Expenditure					\$ -	\$ -	\$ 1,660,500	\$ 5,060,955	\$ 5,462,415	\$ 12,183,870
<b>Former Foster</b>										
<b>Pop Type: Hypothetical</b>										
Eligible Member Months	0.0%	24			10	10	10	10	10	
PMPM Cost	4.8%	24			\$ 990.87	\$ 1,038.43	\$ 1,088.28	\$ 1,140.51	\$ 1,195.26	
Total Expenditure					\$ 9,909	\$ 10,384	\$ 10,883	\$ 11,405	\$ 11,953	\$ 54,534
<b>Substance Use Disorder (SUD)</b>										
<b>Pop Type: Hypothetical</b>										
Eligible Member Months	6.9%	18	36,913	6.9%	39,456.31	42,175	40,554	43,348	46,335	
PMPM Cost	5.0%	18		5.0%	\$ 3,321.96	\$ 3,488.06	\$ 3,662.46	\$ 3,845.58	\$ 4,037.86	
Total Expenditure					\$ 131,072,269	\$ 147,108,390	\$ 148,527,403	\$ 166,698,858	\$ 187,093,676	\$ 780,500,596
<b>Withdrawal Management</b>										
<b>Pop Type: Hypothetical</b>										
<i>Started 5/1/19</i>										
Eligible Member Months	0.0%	0	4,018	0.0%		670	4,018	4,018	4,018	
PMPM Cost	5.0%	0		5.0%	\$ -	\$ 700.00	\$ 735.00	\$ 771.75	\$ 810.34	
Total Expenditure					\$ -	\$ 468,738	\$ 2,953,046	\$ 3,100,699	\$ 3,255,733	\$ 9,778,216
<b>Medicaid for Justice-Involved Populations</b>										
<b>Pop Type: Hypothetical</b>										
<i>Assumes start date of 7/1/20</i>										
Eligible Member Months	1.75%		3,200	1.75%	-			38,400	39,072	
PMPM Cost	3.0%			3.0%	-		\$ -	\$ 520.00	\$ 535.60	
Total Expenditure					-		\$ -	\$ 19,968,000	\$ 20,926,963	\$ 40,894,963
<b>Expansion Parents &lt;=100% FPL</b>										
<b>Pop Type: Expansion</b>										
<i>Assumes start date of 1/1/20</i>										
Eligible Member Months	2.5%		339,828	2.5%	-		169,914	348,324	357,032	
PMPM Cost	5.3%			5.3%	\$ -		\$ 671.61	\$ 707.21	\$ 744.69	
Total Expenditure					\$ -		\$ 114,115,918	\$ 246,336,326	\$ 265,876,956	\$ 626,329,200

DEMONSTRATION WITHOUT WAIVER (WOW) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	TREND RATE 1	MONTHS OF AGING	BASE YEAR DY 15 (SFY 17)	TREND RATE 2	DEMONSTRATION YEARS (DY)			DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	TOTAL WOW
<b>Expansion Adults w/out Dependent Children &lt;=100% FPL</b>											
<b>Pop Type: Expansion</b>											
<i>Assumes start date of 1/1/20</i>											
Eligible Member Months	2.5%		400,973	2.5%	-		200,487	410,997	421,272		
PMPM Cost	5.3%			5.3%	-		\$ 937.16	\$ 986.83	\$ 1,039.13		
Total Expenditure					-		\$ 187,887,968	\$ 405,584,361	\$ 437,757,341		\$ 1,031,229,669
<b>Expansion Parents 101-133% FPL</b>											
<b>Pop Type: Expansion</b>											
<i>Assumes start date of 1/1/20 and a 3.4% reduction in member months as an estimate for nonpayment of premiums</i>											
Eligible Member Months	5.25%		121,473	5.25%	-		58,671	123,503	129,987	10,292	10,832
PMPM Cost	5.3%			5.3%	-		\$ 656.90	\$ 691.72	\$ 728.38		
Total Expenditure					-		\$ 38,541,205	\$ 85,429,087	\$ 94,679,562		\$ 218,649,854
<b>Expansion Adults w/out Dependent Children 101-133% FPL</b>											
<b>Pop Type: Expansion</b>											
<i>Assumes start date of 1/1/20 and a 3.4% reduction in member months as an estimate for nonpayment of premiums</i>											
Eligible Member Months	5.25%		384,418	5.25%	-		185,674	390,844	411,363	32,570	34,280
PMPM Cost	5.3%			5.3%	-		\$ 920.73	\$ 969.53	\$ 1,020.91		
Total Expenditure					-		\$ 170,955,560	\$ 378,934,111	\$ 419,966,044		\$ 969,855,715

- Start date of 5/1/19 (2 months of SFY19) \$ 6,584,798,337
- Assumes start date of 1/1/2020 (SFY20)
- Assumes start date of 7/1/20 (SFY21)
- Anticipated start date of 1/1/21 (SFY21); increase in member months due to approx 7,600 clients moving over from Dental - Blind/Disabled; PMPM increase due to coverage of porcelains and crowns
- Anticipated start date of 1/1/21 (SFY21); decrease in member months as 7,600 clients move out of Dental - Aged



DEMONSTRATION WITH WAIVER (WW ALL) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	DY 15	DEMO TREND RATE	DEMONSTRATION YEARS (DY)					TOTAL WW
			DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>Current Eligibles</b>								
<b>Pop Type: Medicaid</b>		<i>Parent Caretaker Relative (PCR) population 45-60% FPL: transferred to Expansion Parents effective 4/1/19</i>						
Eligible Member Months	377,866	0%	377,866	364,366	320,957	319,534	318,076	
PMPM Cost	\$ 949.03	5.3%	\$ 999.33	\$ 1,052.29	\$ 1,108.07	\$ 1,166.79	\$ 1,228.63	
Total Expenditure			\$ 377,612,830	\$ 383,420,334	\$ 355,641,571	\$ 372,830,227	\$ 390,798,881	
<b>Demo Pop I - PCN Adults w/Children</b>								
<b>Pop Type: Hypothetical</b>		<i>PCN ends 3/31/19</i>						
Eligible Member Months	104,836	5.9%	111,042	88,212	-	-	-	
PMPM Cost	\$ 46.18	5.3%	\$ 48.63	\$ 51.21	\$ 53.92	\$ 56.78	\$ 59.79	
Total Expenditure			\$ 5,399,987	\$ 4,517,106	\$ -	\$ -	\$ -	
<b>Demo Pop III/V - UPP Adults with Children</b>								
<b>Pop Type: Hypothetical</b>								
Eligible Member Months	6,067	34.9%	8,182	11,034	14,881	20,068	27,064	
PMPM Cost	\$ 150.08	5.3%	\$ 158.03	\$ 166.41	\$ 175.23	\$ 184.52	\$ 194.30	
Total Expenditure			\$ 1,293,029	\$ 1,836,200	\$ 2,607,542	\$ 3,702,908	\$ 5,258,410	
<b>Demo Pop I - PCN Childless Adults</b>								
<b>Pop Type: Medicaid</b>		<i>PCN ends 3/31/19</i>						
Eligible Member Months	70,097	4.9%	73,812	58,293	-	-	-	
PMPM Cost	\$ 48.97	5.3%	\$ 51.57	\$ 54.30	\$ 57.18	\$ 60.21	\$ 63.40	
Total Expenditure			\$ 3,806,153	\$ 3,165,223	\$ -	\$ -	\$ -	
<b>Demo Pop III/V - UPP Childless Adults</b>								
<b>Pop Type: Medicaid</b>								
Eligible Member Months	159	4.9%	167	175	184	193	202	
PMPM Cost	\$ 68.45	5.3%	\$ 72.08	\$ 75.90	\$ 79.92	\$ 84.16	\$ 88.62	
Total Expenditure			\$ 10,702	\$ 11,237	\$ 11,799	\$ 12,388	\$ 13,008	
<b>Targeted Adults</b>								
<b>Pop Type: Expansion</b>		<i>Member months will increase when the criteria is expanded to include victims of domestic violence and individuals with court ordered treatment. PMPM will increase due to adding the housing support benefit and new managed care directed payments</i>						
		<i>Started 11/1/17</i>						
Eligible Member Months		2.5%	78,000	78,000	126,000	172,200	176,505	
PMPM Cost		5.3%	\$ 979.53	\$ 1,031.45	\$ 1,522.79	\$ 1,603.50	\$ 1,688.48	
Total Expenditure			\$ 76,403,340	\$ 80,452,717	\$ 191,871,540	\$ 276,122,333	\$ 298,025,737	
<b>Dental - Targeted Adults</b>								
<b>Pop Type: Expansion</b>		<i>Started 3/1/19 Porcelain crowns anticipated start date of 1/1/20 increases PMPM</i>						
Eligible Member Months		2.5%	-	12,000	36,900	37,823	38,768	
PMPM Cost		5.3%	\$ -	\$ 33.33	\$ 37.27	\$ 39.24	\$ 41.32	
Total Expenditure			\$ -	\$ 400,000	\$ 1,375,111	\$ 1,484,192	\$ 1,601,925	
<b>System of Care</b>								
<b>Pop Type: Hypothetical</b>		<i>Anticipated start date of 1/1/20</i>						
Eligible Member Months			-	720	1,440	1,440		
PMPM Cost		5.3%	\$ -	\$ 2,100	\$ 2,211	\$ 2,328		
Total Expenditure			\$ -	\$ 1,512,000	\$ 3,184,272	\$ 3,353,038	\$ 8,049,310	

DEMONSTRATION WITH WAIVER (WW ALL) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	DY 15	DEMO TREND RATE	DEMONSTRATION YEARS (DY)					TOTAL WW
			DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>Dental - Blind/Disabled</b>								
<b>Pop Type:</b>	Hypothetical		Anticipated start date of 1/1/21					
Eligible Member Months		0%	412,361	412,361	412,361	398,181	393,600	
PMPM Cost		3.0%	\$ 18.42	\$ 19.40	\$ 20.42	\$ 25.49	\$ 34.10	
Total Expenditure			\$ 7,595,690	\$ 7,998,261	\$ 8,422,169	\$ 10,149,621	\$ 13,420,241	\$ 47,585,981
<b>Dental - Aged</b>								
<b>Pop Type:</b>	Hypothetical		Anticipated start date of 1/1/20		Anticipated start date of 1/1/21			
Eligible Member Months		2.5%	-	-	54,000	156,300	160,208	
PMPM Cost		3.0%	\$ -	\$ -	\$ 30.75	\$ 32.38	\$ 34.10	
Total Expenditure			\$ -	\$ -	\$ 1,660,500	\$ 5,060,955	\$ 5,462,415	\$ 12,183,870
<b>Former Foster Care</b>								
<b>Pop Type:</b>	Hypothetical							
Eligible Member Months		0%	10	10	10	10	10	
PMPM Cost		4.8%	\$ 990.87	\$ 1,038.43	\$ 1,088.28	\$ 1,140.51	\$ 1,195.26	
Total Expenditure			\$ 9,909	\$ 10,384	\$ 10,883	\$ 11,405	\$ 11,953	\$ 54,534
<b>Substance Use Disorder (SUD)</b>								
<b>Pop Type:</b>	Hypothetical							
Eligible Member Months		6.9%	39,456	42,175	40,554	43,348	46,335	
PMPM Cost		5.0%	\$ 3,321.96	\$ 3,488.06	\$ 3,662.46	\$ 3,845.58	\$ 4,037.86	
Total Expenditure			\$ 131,072,269	\$ 147,108,390	\$ 148,527,403	\$ 166,698,858	\$ 187,093,676	\$ 780,500,596
<b>Withdrawal Management</b>								
<b>Pop Type:</b>	Hypothetical		Started 5/1/19					
Eligible Member Months		0.0%	-	670	4,018	4,018	4,018	
PMPM Cost		5.0%	\$ -	\$ 700.00	\$ 735.00	\$ 771.75	\$ 810.34	
Total Expenditure			\$ -	\$ 468,738	\$ 2,953,046	\$ 3,100,699	\$ 3,255,733	\$ 9,778,216
<b>Medicaid for Justice-Involved Populations</b>								
<b>Pop Type:</b>	Hypothetical		Assumes start date of 7/1/2021					
Eligible Member Months		1.75%	-	-	-	38,400	39,072	
PMPM Cost		3.0%	\$ -	\$ -	\$ -	\$ 520.00	\$ 535.60	
Total Expenditure			\$ -	\$ -	\$ -	\$ 19,968,000	\$ 20,926,963	\$ 40,894,963
<b>Expansion Parents &lt;=100% FPL</b>								
<b>Pop Type:</b>	Expansion		Assumes start date of 1/1/20					
Eligible Member Months		2.5%	-	-	169,914	348,324	357,032	
PMPM Cost		5.3%	\$ -	\$ -	\$ 671.61	\$ 707.21	\$ 744.69	
Total Expenditure			\$ -	\$ -	\$ 114,115,918	\$ 246,336,326	\$ 265,876,956	\$ 626,329,200

DEMONSTRATION WITH WAIVER (WW ALL) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	DY 15	DEMO TREND RATE	DEMONSTRATION YEARS (DY)					TOTAL WW
			DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>Expansion Adults w/out Dependent Children &lt;=100% FPL</b>								
<b>Pop Type:</b> Expansion		<i>Assumes start date of 1/1/20</i>						
Eligible Member Months		2.5%	-	-	200,487	410,997	421,272	
PMPM Cost		5.3%	-	\$ -	\$ 937.16	\$ 986.83	\$ 1,039.13	
Total Expenditure			-	\$ -	\$ 187,887,968	\$ 405,584,361	\$ 437,757,341	\$ 1,031,229,669
<b>Expansion Parents 101-133% FPL</b>								
<b>Pop Type:</b> Expansion		<i>Assumes start date of 1/1/20 and a 3.4% reduction in member months as an estimate for nonpayment of premiums</i>						
Eligible Member Months		5.25%	-	-	58,671	123,503	129,987	
PMPM Cost		5.3%	\$ -	\$ -	\$ 656.90	\$ 691.72	\$ 728.38	
Total Expenditure			\$ -	\$ -	\$ 38,541,205	\$ 85,429,087	\$ 94,679,562	\$ 218,649,854
<b>Expansion Adults w/out Dependent Children 101-133% FPL</b>								
<b>Pop Type:</b> Expansion		<i>Assumes start date of 1/1/20 and a 3.4% reduction in member months as an estimate for nonpayment of premiums</i>						
Eligible Member Months		5.25%	-	-	185,674	390,844	411,363	
PMPM Cost		5.3%	-	\$ -	\$ 920.73	\$ 969.53	\$ 1,020.91	
Total Expenditure			-	\$ -	\$ 170,955,560	\$ 378,934,111	\$ 419,966,044	\$ 969,855,715

- Start date of 5/1/19 (2 months of SFY19) \$ 6,584,798,337
- Assumes start date of 1/1/2020 (SFY20)
- Assumes start date of 7/1/20 (SFY21)
- Anticipated start date of 1/1/21 (SFY21); increase in member months due to approx 7,600 clients moving over from Dental - Blind/Disabled; PMPM increase due to coverage of porcelains and crowns
- Anticipated start date of 1/1/21 (SFY21); decrease in member months as 7,600 clients move out of Dental - Aged

**DEMONSTRATION WITH WAIVER (WW NONE) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS**

ELIGIBILITY GROUP	DY 15	DEMO TREND RATE	DEMONSTRATION YEARS (DY)					TOTAL WW
			DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>Current Eligibles</b>			<i>Parent Caretaker Relative (PCR) population 45-60% FPL: transferred to Expansion Parents effective 4/1/19</i>					
<b>Pop Type:</b>	<b>Medicaid</b>							
Eligible Member Months	377,866	0%	377,866	364,366	320,957	319,534	318,076	
PMPM Cost	\$ 949.03	5.3%	\$ 999.33	\$ 1,052.29	\$ 1,108.07	\$ 1,166.79	\$ 1,228.63	
Total Expenditure			\$ 377,612,830	\$ 383,420,334	\$ 355,641,571	\$ 372,830,227	\$ 390,798,881	\$ 1,880,303,842
<b>Demo Pop I - PCN Adults w/Children</b>			<i>PCN ends 3/31/19</i>					
<b>Pop Type:</b>	<b>Hypothetical</b>							
Eligible Member Months	104,836	5.9%	111,042	88,212	-	-	-	
PMPM Cost	\$ 46.18	5.3%	\$ 48.63	\$ 51.21	\$ 53.92	\$ 56.78	\$ 59.79	
Total Expenditure			\$ 5,399,987	\$ 4,517,106	\$ -	\$ -	\$ -	\$ 9,917,093
<b>Demo Pop III/V - UPP Adults with Children</b>								
<b>Pop Type:</b>	<b>Hypothetical</b>							
Eligible Member Months	6,067	34.9%	8,182	11,034	14,881	20,068	27,064	
PMPM Cost	\$ 150.08	5.3%	\$ 158.03	\$ 166.41	\$ 175.23	\$ 184.52	\$ 194.30	
Total Expenditure			\$ 1,293,029	\$ 1,836,200	\$ 2,607,542	\$ 3,702,908	\$ 5,258,410	\$ 14,698,089
<b>Demo Pop I - PCN Childless Adults</b>			<i>PCN ends 3/31/19</i>					
<b>Pop Type:</b>	<b>Medicaid</b>							
Eligible Member Months	70,097	4.9%	73,812	58,293	-	-	-	
PMPM Cost	\$ 48.97	5.3%	\$ 51.57	\$ 54.30	\$ 57.18	\$ 60.21	\$ 63.40	
Total Expenditure			\$ 3,806,153	\$ 3,165,223	\$ -	\$ -	\$ -	\$ 6,971,376
<b>Demo Pop III/V - UPP Childless Adults</b>								
<b>Pop Type:</b>	<b>Medicaid</b>							
Eligible Member Months	159	4.9%	167	175	184	193	202	
PMPM Cost	\$ 68.45	5.3%	\$ 72.08	\$ 75.90	\$ 79.92	\$ 84.16	\$ 88.62	
Total Expenditure			\$ 10,702	\$ 11,237	\$ 11,799	\$ 12,388	\$ 13,008	\$ 59,133
<b>Former Targeted Adults</b>			<i>Member months will increase when the criteria is expanded to include victims of domestic violence, individuals with court ordered treatment and certain individuals on probation or parole. Also, member months will decrease due to the removal of continuous eligibility.</i>					
			<i>PMPM will increase due to adding new managed care directed payments.</i>					
			<i>PMPM will decrease due to removing the housing support benefit, and for non-medically frail individuals removing certain benefits from the traditional package.</i>					
<b>Pop Type:</b>	<b>Expansion</b>		<i>Started 11/1/17</i>					
Eligible Member Months		2.5%	78,000	78,000	121,696	163,378	167,462	
PMPM Cost		5.3%	\$ 979.53	\$ 1,031.45	\$ 1,281.14	\$ 1,349.04	\$ 1,420.54	
Total Expenditure			\$ 76,403,340	\$ 80,452,717	\$ 155,909,778	\$ 220,402,517	\$ 237,885,946	\$ 771,054,298
<b>Dental - Targeted Adults</b>			<i>Started 3/1/19</i>					
<b>Pop Type:</b>	<b>Expansion</b>							
Eligible Member Months		2.5%	-	12,000	18,450			
PMPM Cost		5.3%	\$ -	\$ 33.33	\$ 37.27	\$ 39.24	\$ 41.32	
Total Expenditure			\$ -	\$ 400,000	\$ 687,556	\$ -	\$ -	\$ 1,087,556

DEMONSTRATION WITH WAIVER (WW NONE) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	DY 15	DEMO TREND RATE	DEMONSTRATION YEARS (DY)					TOTAL WW
			DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>System of Care</b>								
Pop Type:	Hypothetical		Anticipated start date of 1/1/20					
Eligible Member Months			-		720	1,440	1,440	
PMPM Cost		5.3%	\$ -		2,100	2,211	2,328	
Total Expenditure			\$ -		1,512,000	3,184,272	3,353,038	\$ 8,049,310
<b>Dental - Blind/Disabled</b>								
Pop Type:	Hypothetical		Anticipated start date of 1/1/21					
Eligible Member Months		0%	412,361	412,361	412,361	398,181	393,600	
PMPM Cost		3.0%	\$ 18.42	\$ 19.40	\$ 20.42	\$ 25.49	\$ 34.10	
Total Expenditure			\$ 7,595,690	\$ 7,998,261	\$ 8,422,169	\$ 10,149,621	\$ 13,420,241	\$ 47,585,981
<b>Dental - Aged</b>								
Pop Type:	Hypothetical		Anticipated start date of 1/1/20		Anticipated start date of 1/1/21			
Eligible Member Months		0%	-	-	54,000	156,300	160,208	
PMPM Cost		3.0%	\$ -	\$ -	\$ 30.75	\$ 32.38	\$ 34.10	
Total Expenditure			\$ -	\$ -	\$ 1,660,500	\$ 5,060,955	\$ 5,462,415	\$ 12,183,870
<b>Former Foster Care</b>								
Pop Type:	Hypothetical							
Eligible Member Months		0%	10	10	10	10	10	
PMPM Cost		4.8%	\$ 990.87	\$ 1,038.43	\$ 1,088.28	\$ 1,140.51	\$ 1,195.26	
Total Expenditure			\$ 9,909	\$ 10,384	\$ 10,883	\$ 11,405	\$ 11,953	\$ 54,534
<b>Substance Use Disorder (SUD)</b>								
Pop Type:	Hypothetical							
Eligible Member Months		6.9%	39,456	42,175	40,554	43,348	46,335	
PMPM Cost		5.0%	\$ 3,321.96	\$ 3,488.06	\$ 3,662.46	\$ 3,845.58	\$ 4,037.86	
Total Expenditure			\$ 131,072,269	\$ 147,108,390	\$ 148,527,403	\$ 166,698,858	\$ 187,093,676	\$ 780,500,596
<b>Withdrawal Management</b>								
Pop Type:	Hypothetical		Started 5/1/19					
Eligible Member Months		0.0%	-	670	4,018	4,018	4,018	
PMPM Cost		5.0%	\$ -	\$ 700.00	\$ 735.00	\$ 771.75	\$ 810.34	
Total Expenditure			\$ -	\$ 468,738	\$ 2,953,046	\$ 3,100,699	\$ 3,255,733	\$ 9,778,216
<b>Medicaid for Justice-Involved Populations</b>								
Pop Type:	Hypothetical		Assumes start date of 7/1/2020					
Eligible Member Months		1.75%	-	-	-	38,400	39,072	
PMPM Cost		3.0%	\$ -	\$ -	\$ -	\$ 520.00	\$ 535.60	
Total Expenditure			\$ -	\$ -	\$ -	\$ 19,968,000	\$ 20,926,963	\$ 40,894,963
<b>Expansion Parents &lt;=100% FPL</b>								
Pop Type:	Expansion		Assumes start date of 1/1/20					
Eligible Member Months		2.5%	-	-	169,914	348,324	357,032	
PMPM Cost		5.3%	\$ -	\$ -	\$ 640.57	\$ 674.52	\$ 710.27	
Total Expenditure			\$ -	\$ -	\$ 108,841,789	\$ 234,951,327	\$ 253,588,841	\$ 597,381,956

**DEMONSTRATION WITH WAIVER (WW NONE) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS**

ELIGIBILITY GROUP	DY 15	DEMO TREND RATE	DEMONSTRATION YEARS (DY)					TOTAL WW
			DY 16 (SFY 18)	DY 17 (SFY 19)	DY 18 (SFY 20)	DY 19 (SFY 21)	DY 20 (SFY 22)	
<b>Expansion Adults w/out Dependent Children &lt;=100% FPL</b>			<i>Assumes start date of 1/1/20</i>					
<b>Pop Type: Expansion</b>			<i>PMPM will decrease for non-medically frail individuals removing certain benefits from the traditional package.</i>					
Eligible Member Months		2.5%	-	-	200,487	410,997	421,272	
PMPM Cost		5.3%	-	\$ -	\$ 899.03	\$ 946.68	\$ 996.85	
Total Expenditure			\$ -	\$ -	\$ 180,242,854	\$ 389,081,237	\$ 419,945,107	\$ 989,269,198
<b>Expansion Parents 101-133% FPL</b>			<i>Assumes start date of 1/1/20 and a 3.4% reduction in member months as an estimate for nonpayment of premiums. Further reduction of 8.3% to account for premium payment required prior to enrollment. Further reduction of 1.4% to account for removal of retroactive enrollment.</i>					
<b>Pop Type: Expansion</b>								
Eligible Member Months		5.25%	-	-	53,048	111,667	117,529	
PMPM Cost		5.3%	\$ -	\$ -	\$ 625.86	\$ 659.03	\$ 693.96	
Total Expenditure			\$ -	\$ -	\$ 33,200,871	\$ 73,591,888	\$ 81,560,602	\$ 188,353,362
<b>Expansion Adults w/out Dependent Children 101-133% FPL</b>			<i>Assumes start date of 1/1/20 and a 3.4% reduction in member months as an estimate for nonpayment of premiums. Further reduction of 8.3% to account for premium payment required prior to enrollment. Further reduction of 1.4% to account for removal of retroactive enrollment.</i>					
<b>Pop Type: Expansion</b>			<i>PMPM will decrease for non-medically frail individuals removing certain benefits from the traditional package.</i>					
Eligible Member Months		5.25%	-	-	167,879	353,386	371,939	
PMPM Cost		5.3%	\$ -	\$ -	\$ 882.60	\$ 929.37	\$ 978.63	
Total Expenditure			\$ -	\$ -	\$ 148,169,813	\$ 328,428,021	\$ 363,991,028	\$ 840,588,862

- Start date of 5/1/19 (2 months of SFY19)
- Assumes start date of 1/1/2020 (SFY20)
- Assumes start date of 7/1/20 (SFY21)
- Anticipated start date of 1/1/21 (SFY21); increase in member months due to approx 7,600 clients moving over from Dental - Blind/Disabled; PMPM increase due to coverage of porcelains and crowns
- Anticipated start date of 1/1/21 (SFY21); decrease in member months as 7,600 clients move out of Dental - Aged