

# Collaborative Stakeholder Meeting

Monday, September 10, 2018



IDAHO DEPARTMENT OF  
HEALTH & WELFARE

DIVISION OF MEDICAID

# Agenda – Discussion Topics

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- Welcome
- General Discussion
  - Changes to Medicaid Programs – Rulemaking Requirements
  - Scope of Collaborative Stakeholder Meetings
  - Structure and Schedule for Collaborative Stakeholder Meetings
- Rate Review Discussion
  - Review Summary of Stakeholder Comments and Department Responses/Requests for Additional Information Related to Cost Survey Triggers
- Conclusion – Next Steps
  - Written Comment Period (if agreed upon in general discussion above)
  - Department Response / Draft Rule Revisions
  - Next Collaborative Stakeholder Meeting

# Medicaid Program Laws

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Medicaid is a health care program that is jointly financed by the federal government and the state of Idaho.

The federal government sets broad national guidelines and minimum requirements for eligibility, services and methods of payment, but individual states have considerable leeway in developing custom offerings.

Because Medicaid is a joint state/federal program, we must have BOTH state and federal authorization to operate the various Medicaid programs and those programs must comply with BOTH state and federal laws.

# Medicaid Program Laws

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## *Federal Laws*

- Laws made by the U.S. Congress (House and Senate), which are called “Statutes.”
  - Statutes are typically passed as “Acts” on a particular topic (for example the “Social Security Act” and the “Patient Protection and Affordable Care Act”).
  - “Acts” are then organized into the United States Code (USC).
- Laws made by federal agencies (e.g. CMS\*), which are called “Regulations.”
  - Regulations are organized into the Code of Federal Regulations (CFR).

\*Centers for Medicare & Medicaid Services

# Medicaid Program Laws

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## *State Laws*

- Laws made by the Idaho Legislature (House and Senate), which are called “Statutes.”
  - These laws are typically passed as “Acts” on a particular topic (for example the “Idaho Medicaid Simplification Act”).
  - “Acts” are then organized into the Idaho Code.
- Laws proposed by state agencies (e.g. IDHW\*) and then approved by the Idaho Legislature, which are called “Rules.”
  - Idaho’s Rules are organized into the Idaho Administrative Code (IDAPA).

\*Idaho Department of Health and Welfare

# Medicaid Programs

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## *State Plan for Medical Assistance (“State Plan”)*

The approved “State Plan” is Idaho’s agreement with the federal government about eligibility, services, and methods of payment for medical assistance in Idaho.

- Federal Statutes - Title XIX of the Social Security Act (SSA)
- Federal Regulations - Title 42 “Public Health” of the Code of Federal Regulations (CFR)
- State Statutes - Title 56 “Public Assistance and Welfare” of the Idaho Code
- State Rules - IDAPA 16 “Department of Health and Welfare”

# Medicaid Programs

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## *Waiver for Home and Community-Based Services*

The approved “Application for a §1915(c) Home and Community Based Services Waiver” is Idaho’s agreement with the federal government about select services made available to a targeted group of individuals.

- Federal Statutes - Title XIX of the Social Security Act (SSA)
  - §1915(c) of the SSA allows the state to request a waiver of certain requirements, so that the state can provide services that are not otherwise available under the approved “State Plan” to individuals who: (a) require a specified level of care and (b) meet target group criteria.
- Federal Regulations - Title 42 “Public Health” of the Code of Federal Regulations (CFR)
- State Statutes - Title 56 “Public Assistance and Welfare” of the Idaho Code
- State Rules - IDAPA 16 “Department of Health and Welfare”

# Medicaid Program Changes

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## *How Do We Make Changes to Idaho's Medicaid Programs?*

- Identify changes;
- Review federal statutes and regulations;
- Review state statutes and rules and revise if necessary; and
- Review State Plan or Waiver and revise if necessary.

# Medicaid Program Changes

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## *Changes to the Idaho Administrative Code (IDAPA)*

- Collaborative Stakeholder Meetings
- Negotiated Rulemaking
  - Agencies shall proceed through informal rulemaking whenever it is feasible to do so in order to improve the substance of proposed rules by drawing upon shared information, knowledge, expertise and technical abilities possessed by interested persons and to expedite formal rulemaking.
  - Consider the recommendations of interested persons concerning the subject of the proposed rule;
- Proposed Rulemaking
- Pending Rule
- Final Rule

# Medicaid Program Changes

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## *Changes to the State Plan and Waivers*

### Medicaid State Plan for Medical Assistance (the “State Plan”)

- State submits a “State Plan Amendment” to CMS for approval.
- Public notice and input requirements for making State Plan Amendments are set in federal regulations (CFR).

### Medicaid Waiver for Home and Community-Based Services

- State submits a “Waiver Amendment” to CMS for approval.
- Public notice and input requirements for making Waiver Amendments are set in federal regulations (CFR).

# Collaborative Stakeholder Meeting

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*Scope*

# Collaborative Stakeholder Meeting

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## *Structure and Schedule*

# Collaborative Stakeholder Meeting

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*Rate Survey Trigger Discussion (Part 1)*

# Conclusion

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## *Next Steps*

- Written Comment Period (if agreed upon in general discussion above)
- Department Response / Draft Rule Revisions
- Next Collaborative Stakeholder Meeting