



STATE OF WASHINGTON
HEALTH CARE AUTHORITY

626 8th Avenue, SE PO Box 42716 Olympia, Washington 98504-2716

September 30, 2022

TO: Interested Persons

FROM: Beth Tinker, Clinical Nurse Consultant
Clinical Quality and Care Transformation Division

SUBJECT: Summary of and Responses to Comments Received Regarding Renewal of the 1115 Family Planning Only Demonstration Waiver

The Health Care Authority (HCA) is submitting an application to renew the Section 1115 Family Planning Only (FPO) Demonstration waiver for five years, from July 1, 2023 through June 30, 2028. The waiver FPO programs cover limited family planning and family planning-related services for people who identify as women, men, and gender fluid who are in need of contraceptive care and are enrolled in the Family Planning Only programs.

The purpose, client eligibility requirements, and benefit package will remain the same. The only potential change during this next waiver cycle is the elimination of the Family Planning Pregnancy-Related program, due to the implementation of the After-Pregnancy Coverage program (i.e. 12 months of comprehensive post end of pregnancy coverage). This change is anticipated to take effect when the end of the federal Public Health Emergency (PHE) is declared. There is currently no established end date for the PHE.

HCA held public webinars on June 30, 2022, and July 29, 2022, to receive comments, questions, and feedback. There was a public comment period that followed and ended August 26, 2022. A summary of those comments, questions, and feedback is below, along with HCA's responses.

We thank our partners for their comments.

SUMMARY OF COMMENTS RECEIVED	THE AGENCY CONSIDERED ALL THE COMMENTS. THE AGENCY RESPONSE TO THE COMMENTS IS BELOW.
On August 16 th Planned Parenthood Alliance Advocates – WA submitted comments. The comments indicated overall support for the HCA submitting a FPO waiver renewal and the commitment to Washingtonians in need of	HCA thanks our partners at Planned Parenthood for their comments, support and for the critical services they provide to Washingtonians.

<p>sexual and reproductive health care. They noted in particular the importance of the waiver and the FPO programs for people seeking confidential services. They also expressed support for gender inclusive language in the waiver renewal application.</p>	
<p>On August 26th Northwest Health Law Advocates submitted comments. Those are numbered and listed separately below with the corresponding agency response.</p>	
<p>1. On pg. 6, the draft application states that “Due to complicating factors related to the PHE, some pregnancy medical clients are still transitioning to FPO-PR”. Given that coverage should be continuous after the PHE end, we request that HCA specify the “complicating factors” and identify any shared characteristics of individuals who are transitioning to FPO-PR now before the end of the PHE.</p>	<p>Our eligibility team has revised this language in the waiver renewal to provide clarity. Here is the revised language, “In June 2022, After-Pregnancy Coverage (APC) was implemented in Washington, providing 12 months of full-scope Medicaid benefit to individuals who were pregnant during the prior year. Clients who had a pregnancy less than 12 months prior were moved into APC and will continue to receive this coverage during the PHE. Clients who had a pregnancy that ended more than 12 months prior and are on FPO-PR will remain on this coverage until after the PHE ends.</p> <p>Once the PHE is declared to be over, we anticipate the FPO-PR program will become obsolete due to availability of comprehensive coverage under APC.”</p>
<p>2. On pg. 7, the draft application requests to continue waiving Medicaid’s transportation requirements, seeking a waiver from federal law “To the extent necessary to enable the State to not assure transportation to and from providers for the demonstration population”. We are wondering why HCA excludes non-emergency medical transportation for this group via the waiver. There are important reasons to provide this coverage, whether through federal or state funding. Some FPO enrollees may</p>	<p>The response from our Non-Emergency Medical Transportation (NEMT) team at the HCA, “The NEMT program is administered under 42 CFR 440.170(a)(4) to cost-effectively provide non-emergency medical transportation services to individuals eligible for medical assistance under the Medicaid State Plan. It is not included in waivers as they operate outside the state plan and may include clients that are not eligible for Medicaid.”</p>

<p>have transportation barriers that prevent them from accessing family planning care, such as youth and those who don't have access to family car or other transport, especially in rural areas. We believe these services are and should be covered regardless of any waiver limitations. We request a follow-up discussion with FPO staff to understand this limitation further.</p>	<p>We are happy to set up a meeting to discuss further, will need to include our NEMT subject matter experts at the HCA.</p>
<p>3. On pg. 8 the draft application states that "to the extent necessary to enable the State to not provide medical assistance to the demonstration population for any time prior to the first of the month in which an application for the demonstration is made". Apple Health coverage typically allows for 3 months of retroactive coverage. Due to the high cost of some FPO covered services, aligning the including of retroactive coverage with other Medicaid programs could help address a hardship for a population vulnerable to medical debt. We ask HCA to explain why retroactive coverage is excluded for FPO.</p>	<p>The response from our eligibility team is that we are happy to meet and further explore adding 3 months of retroactive coverage to the FPO waiver STCs.</p>
<p>4. The data tables on pages 12-14 of the draft are blank. We request that HCA publicly share that data prior to submission of the waiver application.</p>	<p>The data tables have been updated. Our apologies that we didn't yet have these completed for the public comment period.</p>
<p>5. On pg. 17, the draft application states that "After pregnancy coverage means that postpartum clients are no longer automatically enrolled in FPO-PR". NOHLA fully supports the expansion of PP coverage to 12 months; additionally, we also recognize that access to family planning services after the 12mo PP period remains essential to pregnancy spacing and reproductive health. However, HCA should clarify that at the end of APC</p>	<p>At the end of the certification period for all programs, HCA sends a letter 60 days prior to the end of the certification period notifying the person it is time to take action to renew their coverage (if the system cannot automatically renew it) to initiate the redetermination process to determine the suitable Medicaid program the individual is eligible for.</p>

<p>coverage, HCA will redetermine the person into any Medicaid program for which they remain eligible, including FPO as required by law.</p>	
<p>6. The data tables on pages 61-63 appear identical to the data table on pg. 60. We request that HCA publicly share that data prior to submission of the waiver application.</p>	<p>Thank you for your careful review. These data tables have been updated.</p>