

October 1, 2013

John Polanowicz
Secretary
Executive Office of Health and Human Services
One Ashburton Place
11th Floor
Boston, MA 02108

Dear Secretary Polanowicz:

This letter is to inform you that the Centers for Medicare & Medicaid Services (CMS) has approved your request to amend Massachusetts' section 1115 demonstration project, entitled MassHealth (Project Number 11-W-00030/1). The amendment is effective as of the date of the approval letter, except as otherwise noted in the attached waiver, expenditure authorities and special terms and conditions (STCs), through the end of this demonstration period, which is June 30, 2014, upon which date unless reauthorized, all waivers and authorities granted to operate this demonstration will expire.

The approval allows the Commonwealth to sustain and improve its ability to provide coverage; affordability and access to health care by making changes to the demonstration that conform to the new coverage opportunities created under the Affordable Care Act. Additionally, these changes will promote continuity of care. The amendment revises the demonstration to reflect that the state is adopting the new adult group in the state plan; accordingly, individuals with incomes at or below 133 percent of the federal poverty limit (FPL) will be in the demonstration for purposes of the delivery system and most individuals previously served in the demonstration with incomes above that amount will be served in the state's Marketplace.

In addition, pursuant to 1902(e)(14)(A) authority, Massachusetts may establish automatic MassHealth eligibility for individuals receiving Temporary Assistance for Needy Families and Emergency Aid to Elders, Disabled, and Children.

As agreed, we will continue to work with the Commonwealth on its request to implement the Primary Care Payment Reform Initiative.

Our approval of this section 1115 demonstration amendment is subject to the limitations specified in the enclosed approved expenditure and waiver authorities, not applicables, and STCs. All requirements of the Medicaid program as expressed in law, regulation, and policy statement not expressly identified as waived or as not applicable in the waiver and expenditure authorities shall apply to the MassHealth demonstration.

This award letter is also subject to our receipt of your written acceptance of the award, including the waiver and expenditures authorities and STCs, within 30 days of the date of this letter.

Your project officer is Ms. Kathleen Engle, who may be reached at (410) 786-5786 and through e-mail at kathleen.Engle@cms.hhs.gov. Communications regarding program matters and official correspondence concerning the demonstration should be submitted to Ms. Engle at the following address:

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
Mail Stop: S2-01-16
7500 Security Boulevard
Baltimore, MD 21244-1850

Official communications regarding program matters should be sent simultaneously to Ms. Engle and to Mr. Richard McGreal, Associate Regional Administrator in our Boston Regional Office. Mr. McGreal's contact information is as follows:

Centers for Medicare & Medicaid Services
JFK Federal Building
Room 2325
Boston, MA 02203
Telephone: (617) 565-1226
E-mail: Richard.McGreal@cms.hhs.gov

If you have questions regarding this approval, please contact Eliot Fishman, Director of the Children and Adults Health Programs Group in the Center for Medicaid & CHIP Services at (410) 786-5647.

CMS looks forward to continuing work with your staff on future developments within your demonstration.

Sincerely,

/s/

Marilyn Tavenner
Administrator

cc: Cindy Mann, Director, Center for Medicaid and CHIP Services,
Eliot Fishman, Director, Children and Adults Health Programs Group
Richard McGreal, Associate Regional Administrator, Region I
Kathleen Engle, Children and Adults Health Programs Group
Julie McCarthy, Region I