



CENTER FOR MEDICAID & CHIP SERVICES (CMCS) SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE

This document serves as a template for Monitoring Leads to summarize and capture key content of section 1115 Demonstration Monitoring Reports (MRs) submitted by states for approved section 1115 Demonstrations on quarterly and annual basis. For additional guidance, please refer to [Section 1115 Monitoring Report Review Guide.pdf](#).

Instructions: During your review of an 1115 quarterly/annual monitoring report, consider the following:

- (1) Engage the internal demonstration team in reviewing monitoring reports (especially for the first one or two reports submitted).
- (2) Discuss with the PO and others (where applicable) any issues or “high risk” areas identified during the initial review and approval of the 1115 demonstration or through previous monitoring reports (e.g. potential beneficiary access to care issues, financing arrangements, “grandfathered” IMD authority). This information will assist in identifying any issues that need to be monitored closely; documented in summary report; and/or entered into the Issue Register.
- (3) If the data provided in the report is unstructured, please work with your internal demonstration team to assess and ensure that any significant changes to enrollment, eligibility, grievances, appeals, and denial of services are identified and captured in the summary template.
- (4) If a Demonstration has different policy areas, clarify applicability of reported information (i.e. if information is applicable to the entire Demonstration or only a portion of the Demonstration, such as SUD, managed care, etc.).
- (5) If the MR does not include information for any of the elements below, state “Not included in MR” under the “Summary of Information” column below. Identify whether that particular element was a required MR element in the Demonstration Special Terms and Conditions (STCs) and include that information in the summary column.
- (6) For demonstration deliverables that include home and community-based (HCBS) and/or managed care authority, ensure that the DHCBSO and/or DCMO SME enters feedback in the sections at the end of the template.

Complete the following fields:

Monitoring Report Information	Summary of Information
State and Demonstration Name	<i>Alabama Medicaid Agency – Community Waiver Program</i>
Monitoring Lead reviewing MR	Rita E. Nimmons



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<p>MR Time Period (please specify quarterly vs. annual report and time period covered by MR)</p>	<p>Annual Report – 10/01/2021 – 09/30/2022</p>
<p>Did the State submit the MR timely? If not, please note length of delay and reasons for delay (if known)</p>	<p>Yes, State submitted Annual Report on 12/22/2022; due date was 12/29/2022</p>
<p>Please specify if there are any required elements missing in the MR per STCs</p> <p>If this is an annual report, please review the list of required content in footnote 1 of the <u>Monitoring Report Review Guide</u>. Determine if any required content is missing, including the summary of the annual forum.</p>	<p>None missing</p>
<p>Summary of key accomplishments and activities during reporting period</p>	<p>State reported the following accomplishments:</p> <ul style="list-style-type: none"> • Outreach - The Alabama Department of Mental Health - Division of Developmental Disabilities (ADMH/DD) launched the CWP with newly appropriated funding from the Alabama legislature, allowing for the initial creation of 500 enrollment slots and providing for the elimination of 25% of the statewide waiting list; • There was an increase in requests for emergency residential placements; • The expansion of employment opportunities and the competitive integrated employment participation rate for individuals receiving waiver supports; • Collaboration between ADMH/DD and Alabama Department of Rehabilitation Services (ADRS)/



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	<p>Alabama Vocational Rehabilitation (VR) is working with no significant complaints or concerns.</p> <ul style="list-style-type: none"> • Enrollee Success Stories – the report cited 6 success stories; • Online training for Direct Support Professionals (DSPs) Workforce; • Establishment of Annual CWP All-Staff In-Person Meeting to discuss the first year challenges and successes.
<p>Enrollment numbers for MR period</p>	<p>The state reported one hundred seventy-three (173) new enrollments during year one of the demonstration year. Actual enrollments into the CWP did not meet the anticipated pace for targeted number of enrollments of 500 during this demonstration year. The State achieved 39% of the targeted number of enrollments.</p>
<p>Enrollment numbers for past MR period (for quarterly MR please refer to previous quarter; for annual MR please refer to previous year)</p>	<p>This is the first year of the demonstration. The report stated that enrollments into the CWP under STC 41, Operational Accomplishments and Conclusion sections enrollment achieved for the demonstration year was one hundred and seventy-three (173); however, under the state’s Year One Evaluation section, the report stated that the enrollment total was one-hundred and eighty (180) enrollees.</p>
<p>Did the state provide context/explanation for enrollment increases or decreases? If yes, please provide detail here. If no, please consider whether to include as a discussion item in an upcoming monitoring call.</p>	<p>Yes, the primary explanations for the low enrollments in year one was:</p> <ul style="list-style-type: none"> • Ongoing issues with gathering and updating eligibility documentation necessary to facilitate enrollment; • Lack of an effective outreach strategy for Group 5 and overly narrow eligibility criteria for Group 5. CWP enrollments continue to lag behind set targets.
<p>For eligibility and coverage demonstrations, please enter disenrollment numbers for report period.</p>	<p>N/A</p>



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<p>Did the state provide context/explanation for increases or decreases in grievances? If yes, please provide detail here. If no, please consider whether to include as a discussion item in an upcoming monitoring call agenda.</p>	<p>There was a total of one (1) complaint/grievance during the demonstration year. According to the state, the complaint resulted from a misunderstanding of options available under self-directed services. The complaint was quickly resolved, once correct information on self-direction options were shared with the CWP participant.</p>
<p>Did the state provide context/explanation for increases or decreases in appeals? If yes, please provide detail here. If no, please consider whether to include as a discussion item in an upcoming monitoring call agenda.</p>	<p>There were no lawsuits or legal actions related to the CWP for the first demonstration year.</p>
<p>Did the state provide context/explanation regarding increases or decreases in denial of services? If yes, please provide detail here. If no, please consider whether to include as a discussion item in an upcoming monitoring call agenda.</p>	<p>The report noted that in demonstration year one, challenges persisted throughout the year related to denials of claims from CWP provider agencies due to third party liability (TPL) edits in Medicaid’s claims billing system, but no mention of denial of services.</p>
<p>Did number of providers for MR period increase or decrease significantly from the previous MR period? If yes, please enter reason if identified in report. If no reason provided, please review with state in an upcoming Monitoring Call.</p>	<p>The Provider Network has grown from an initial 13 providers to 33 as of the end of demonstration year one.</p>
<p>Operational, implementation and beneficiary Issues identified in MR (Note: Discuss with team and</p>	<p>The report noted the following challenges:</p> <ul style="list-style-type: none"> • Administrative Staffing challenges, • Enrollment documentation challenges,



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<p>determine whether these should be entered in Monitoring Issue Register)</p>	<ul style="list-style-type: none"> • Enrollment challenges regarding 1115 demonstration Group 5, • Provider claims approvals and timely Provider payments for Services rendered, • Lack of appropriate capacity and expertise to respond timely and effectively, • Ongoing workforce issues with both internal and external staff, • Providers reported ongoing challenges with providing CWP services due to the COVID-19 pandemic’s impact on recruitment and retention of direct support professionals (DSPs). <p>There was a total of one (1) complaint/grievance during the demonstration year. But there were no patterns or trends that could be analyzed. There were no unusual or unanticipated trends during the first demonstration year.</p>
<p>Any notable policy, operational and implementation updates or changes included in MR</p>	<p>House Bill (HB) 105, sponsored by Representative Gaston – DHR Elder Abuse Registry (Act 2022-161), received final passage in this year’s legislative session. ADMH/DD is actively coordinating with DHR for the rollout and implementation of the statewide Elder Abuse Registry by the end of 2022, of which ADMH/DD Waiver Services programs and their staff, including those in the CWP, will be participating in beginning in 2023.</p>
<p>Were there any evaluation updates included in MR? If yes, please summarize here.</p>	<p>Yes, Appendix B of the report noted that the CWP waiver was rolled out gradually in its first year, at a pace that would allow for necessary infrastructure development, capacity building, and effective implementation at the provider and service delivery level. This affected enrollment numbers and some data systems and processes needed for the evaluation that are in the early stages of development.</p> <p>The evaluation design for the state submission to CMS was submitted on August 22, 2022.</p>



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The following sections are only completed for demonstrations that include HCBS and/or managed care authority:

For 1115 Demonstrations authorizing managed care, the DMCO SME will complete the following fields (add as many rows as needed):

Monitoring Report/Issue/Requirement Information	Summary of Information

For 1115 Demonstrations authorizing HCBS services, the DHCBSO SME will complete the following fields (add as many rows as needed):

Monitoring Report/Issue/Requirement Information	Summary of Information
NA	No new comments or questions for this reporting period.