

**ARKANSAS SAFETY NET BENEFIT PROGRAM (HIFA)
SECTION 1115 DEMONSTRATION
FACT SHEET**

Name of Section 1115 Demonstration:	AR HIFA
Waiver Number:	21-W-00051/6 and 11-W-00214/6
Date Proposal Approved:	March 3, 2006
Date Demonstration Implemented:	October 1, 2006
Date Expires:	September 30, 2011

SUMMARY

Arkansas' HIFA initiative, the Arkansas Safety Net Benefit Program, proposes to increase health insurance coverage through a public/private partnership that will provide a "safety net" benefit package to approximately 50,000 uninsured individuals over five years. This demonstration is unique because it is designed to allow employers who have not previously provided health care coverage to their employees with this opportunity through a public/private partnership. The Arkansas Safety Net Benefit Program will provide coverage to adults who are employed by employers participating in the demonstration.

Additionally, the State will transition its ConnectCare 1915(b) waiver population of approximately 311,000 people into this new HIFA demonstration. The transition will be seamless since the benefits and service delivery will not be impacted.

The demonstration will also provide enrollees additional smoking cessation, preventive and wellness services through the Health and Wellness Benefits Program (HWBP).

ELIGIBILITY

Eligible beneficiaries are parents and spouses of Medicaid and SCHIP children (and childless adults and spouse) aged 19 – 64 with family income up to and including 200% of the Federal poverty level, who are employed by a participating employer.

Eligible beneficiaries also include all individuals previously covered under ConnectCare, the State's Medicaid Primary Care Case Management (PCCM) Program.

DELIVERY SYSTEM

Arkansas will undertake a competitive bidding process to select one or more private insurance companies to offer the Arkansas Safety Net Benefit Benefits Program to a limited number of employers who elect to participate in the program. The ConnectCare population will continue to receive services through the State's ConnectCare PCCM Program network of providers.

BENEFITS

Children

The demonstration will maintain the Medicaid State plan benefit package for beneficiaries under age 21, including EPSDT.

Adults

Adult beneficiaries (age 21 and older) receive a modified benefit package. The benefit package for both groups (Medicaid only and the chronic population with Medicare) is the same. It includes all state plan services except:

- Chiropractic
- Podiatric
- Dental
- Eyeglasses
- Therapies
- Long term care services, including nursing facility, home and community based waiver services, ICF/MR services, and hospice

(Note that Mississippi covers institutionalized eligibles up to 300% of the SSI benefit standard and has home and community based waivers with an income limit of 300% of the SSI benefit standard. Any applicant needing these services can become eligible for Medicaid through those coverage groups.)

COST SHARING

None.

STATE FUNDING SOURCE

The State of Mississippi certifies that State/local monies are used as matching funds for the demonstration and that such funds shall not be used as matching funds for any other Federal grant or contract, except as permitted by law.

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