

### Section 1115 Context & Statute

Leonardo Cuello October 27, 2017

# About NHeLP

- National non-profit committed to improving health care access and quality for low income and underserved individuals and families
- State & local partners:
  - Disability rights advocates 50 states + DC
  - Poverty & legal aid advocates 50 states + DC
- Join our mailing list at <u>www.healthlaw.org</u>
- Follow us on Social Media
  @nhelp\_org on Twitter &
  @NHeLProgram on Facebook



### **Overview**

- What is § 1115?
- What states are using § 1115?
- What does the statute say?



## What Is Section 1115?

- Under Medicaid, states receive federal funding to provide health care to enrollees, but the states must comply with the federal requirements
- Section 1115 (Social Security Act) allows the Secretary to waive some of these requirements for states conducting a demonstration program
- Historically, this authority has been used to do things like managed care, coverage expansions, family planning expansions, etc.



### **New Wave of 1115 Demonstrations**

- Starting in 2014, when the ACA's Medicaid expansion went into effect, a new wave of quid pro quo § 1115 approvals appeared: waivers granted in exchange for Medicaid expansion
- Now, the Trump administration is considering how this power might be used

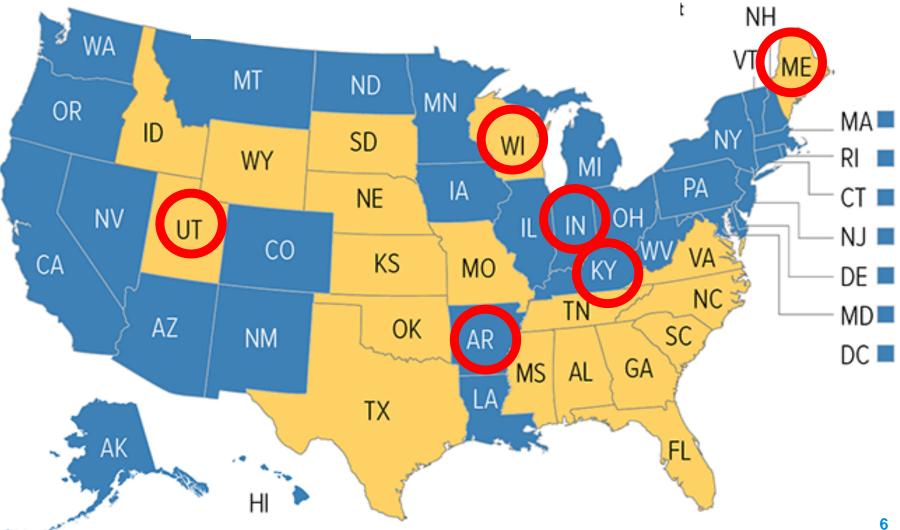




# **Pending § 1115 Demonstrations**

Expanded (32)

Not expanded (19) 



# Pending § 1115s: Two Key Points

- The first round of Medicaid expansion waivers was to get new states to expand – the current pending states have mostly expanded already
- The first round of Medicaid expansion waivers targeted the Medicaid expansion population – the current pending states are also targeting traditional Medicaid populations

Table 2: Populations Who Would Be Subject to Work Requirements in Pending Waivers						
	AR	IN	КҮ	ME	UT	WI
Expansion Adults	х	X	х			
Traditional Adults Source: Kaiser Family Found	dation	X (low income parents, Transitional Medical Assistance)	X (low income parents)	X (parents up to 105% FPL, former foster care youth, Transitional Medical Assistance, medically needy, family planning)	X (parents from 60-100% FPL and childless adults 0-100% FPL)	X (adults without dependent children from 0-100% FPL)

# § 1115 Law

- There <u>are</u> legal standards that govern the use of § 1115 authority
- The statute sets out numerous limits constraining the use of the authority
- There are long-standing battles on how those § 1115 standards are *applied*



# § 1115 Statutory Language Excerpt

### Sec. 1115. [42 U.S.C. 1315]

In the case of any experimental, pilot, or <u>demonstration</u> project which, in the judgment of the Secretary, is likely to assist in promoting the <u>objectives</u> of title ... XIX [Medicaid] ... in a State ... the Secretary may waive compliance with any of the requirements of section ... <u>1902</u> ... to the <u>extent</u> and for the period he finds necessary to enable such State ... to carry out such project...



# Key Legal Limits of § 1115 Statute

- 1. § 1115 project must be a "demonstration"
- 2. Must promote the "objectives of" Medicaid



### The "Objectives" of Medicaid

### Sec. 1901. [42 U.S.C. 1396-1] APPROPRIATION

For the purpose of enabling each State ... to furnish (1) **medical assistance** on behalf of families with dependent children and of aged, blind, or disabled individuals, whose income and resources are insufficient to meet the costs of necessary medical services, and (2) **rehabilitation** and other services to help such families and individuals attain or retain capability for independence or self-care...



# **TANF: Helpful Comparison?**

### 42 U.S. Code § 601

### Purpose

(a) IN GENERAL The purpose of this part is to <u>increase the</u> <u>flexibility</u> of States in operating a program designed to—

(1) provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives;

(2) <u>end the dependence of needy parents on government benefits</u> by promoting job preparation, work, and marriage;

(3) prevent and reduce the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies; and

(4) encourage the formation and maintenance of two-parent families.



# Key Legal Limits of § 1115 Statute

- 1. § 1115 project must be a "demonstration"
- 2. Must promote the "objectives of" Medicaid
- 3. Only items in one section (§ 1902) can be waived
- 4. Can only waive to "extent and for the period" necessary to carry out demonstration
- 5. Must comply with transparency requirements



### § 1115 Application & Review Process -Comments & Hearings (42 CFR 431.420)

### State Level

- Notice & "comprehensive description" of demonstration
- Min. 30 day comment period
- At least 2 public hearings
- Summary & response to public comments, including any changes made

### **Federal Level**

- 15 days to determine completeness
- Min. 30 day comment period
- CMS approval/denial no sooner than 15 days after comments close
- Usually negotiations last longer



Visit healthlaw.org to access publications related to this topic



**NHeLP** 

# Key Legal Limits of § 1115 Statute

- 1. § 1115 project must be a "demonstration"
- 2. Must promote the "objectives of" Medicaid
- 3. Only items in one section (§ 1902) can be waived
- 4. Can only waive to "extent and for the period" necessary to carry out demonstration
- 5. Must comply with transparency requirements
- § 1916(f): Any cost-sharing waiver must comply with additional stringent requirements



# **Final Thoughts**

- When does an exceptional administrative power usurp the power to legislate?
- How do we construe Medicaid's statutory intent after the narrow vision in the NFIB case?
- How do we distinguish a legitimate innovation from a health care cut masquerading as innovation?





### **Thank You**

#### Washington DC Office

1444 I Street NW, Suite 1105 Washington, DC 20005 ph: (202) 289-7661 fx: (202) 289-7724 nhelpdc@healthlaw.org

#### Los Angeles Office

3701 Wilshire Blvd, Suite #750 Los Angeles, CA 90010 ph: (310) 204-6010 fx: (213) 368-0774 nhelp@healthlaw.org

#### North Carolina Office

101 East Weaver Street, Suite G-7 Carrboro, NC 27510 ph: (919) 968-6308 fx: (919) 968-8855 nhelpnc@healthlaw.org

#### www.healthlaw.org