

**ARKANSAS HEALTH CARE INDEPENDENCE PROGRAM  
(PRIVATE OPTION) SECTION 1115 DEMONSTRATION  
FACT SHEET**

<b>Name of Section 1115 Demonstration:</b>	Arkansas Health Care Independence Program (Private Option)
<b>Waiver Number:</b>	11-W-00287/6
<b>Date Proposal Submitted:</b>	August 6, 2013
<b>Date Proposal Approved:</b>	September 27, 2013
<b>Date Implemented:</b>	October 1, 2013
<b>Date Renewed:</b>	n/a
<b>Date Expires:</b>	December 31, 2016

**SUMMARY**

The Private Option demonstration will be authorized under section 1115(a) of the Social Security Act (the Act) through December 31, 2016. The Private Option demonstration represents the first federal-state partnership for a premium assistance demonstration to enroll individuals in the new adult group into the Marketplace.

Under the Private Option demonstration, the state will provide premium assistance for beneficiaries eligible under the new adult group under the state plan, to support the purchase of coverage from QHPs offered in the individual market through the Marketplace.

**ELIGIBILITY**

In Arkansas, individuals eligible for coverage under the new adult group are either (1) childless adults ages 19 through 64 with incomes at or below 133 percent of the FPL or (2) parents and other caretaker relatives between the ages of 19 through 64 with incomes between approximately 17 and 133 percent of the FPL (collectively Private Option beneficiaries).

**ENROLLMENT**

Through this demonstration, Arkansas predicts an enrollment of approximately 200,000 in the first year of the demonstration. Enrollment activities for the new adult population will begin on October 1, 2013 for the Private Option QHPs with eligibility effective January 1, 2014.

**DELIVERY SYSTEM**

Arkansas currently delivers Medicaid largely through fee-for-service with some primary care case management. Arkansas will provide coverage for the new adult group through a different delivery system. The state will use this demonstration to provide coverage for Private Option eligible Medicaid beneficiaries through QHPs offered in the individual market instead of the fee-for-service delivery system that serves the traditional Medicaid population. The state will pay premiums for QHPs in the Marketplace for Private Option beneficiaries. Beneficiaries enrolled in the QHP will be offered benefits through the QHP with wrap around provisions by the state Medicaid agency including non-emergency medical transportation (NEMT), family planning at non-network providers,

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and for individuals aged 19 and 20, early and periodic screening and diagnostic treatment (EPSDT).

**COST SHARING**

Within the demonstration, cost sharing obligations will be consistent with both the State Plan and with the cost-sharing rules applicable to individuals with comparable incomes in the Marketplace. All individuals who are statutorily required to be exempt from cost sharing will be exempt from cost sharing under the Demonstration, including pregnant women and American Indians/Alaskan Natives.

CMS Contact:

Vanessa Sammy, 410-786-2613

Email: [Vanessa.Sammy@cms.hhs.gov](mailto:Vanessa.Sammy@cms.hhs.gov)