

December 19, 2025

The Honorable Robert F. Kennedy, Jr.
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Dear Secretary Kennedy:

The State of Michigan hereby submits a demonstration application, pursuant to Section 1115 of the Social Security Act, to request an extension of the Flint Michigan Section 1115 Demonstration (Project Number 11-W-00302/5) for a period of five years.

This demonstration extension will uphold uninterrupted coverage and services for children up to age 21 and pregnant women affected by lead exposure from the Flint water system, ensuring that vulnerable populations continue to receive critical Medicaid benefits and targeted supports, including:

- (1) Expanded Medicaid and Children's Health Insurance Program eligibility for select individuals (i.e. children up to age 21 and pregnant women).
- (2) All state plan benefits, including Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) for children; and
- (3) Access to targeted supports such as Targeted Case Management (TCM) and home lead investigation services to address lead-related health risks.

We appreciate the assistance the Centers for Medicare & Medicaid Services have already provided and look forward to working together to achieve our mutual goal of improving the health and well-being of Michiganders.

Sincerely,

Gretchen Whitmer

Governor

c: Elizabeth Hertel, Director
 Meghan Groen, Chief Deputy Director
 Erin Emerson, Senior Deputy Director

Michigan's Application Certification Statement - Section 1115(a) Extension

This document, together with the supporting documentation outlined below, constitutes Michigan's application to the Centers for Medicare & Medicaid Services (CMS) to extend the Flint Michigan Section 1115 Demonstration (Project Number 11-W-00302/5) for a period of 5 years pursuant to section 1115(a) of the Social Security Act.

Type of Request (select one only):

Section 1115(a) extension with no program changes

This constitutes the state's application to the Centers for Medicare & Medicaid Services (CMS) to extend its demonstration without any programmatic changes. The state is requesting to extend approval of the demonstration subject to the same Special Terms and Conditions (STCs), waivers, and expenditure authorities currently in effect for the period of Demonstration Years 6-10, which is September 15, 2021–September 30, 2026.

The state is submitting the following items that are necessary to ensure that the demonstration is operating in accordance with the objectives of title XIX and/or title XXI as originally approved. The state's application will only be considered complete for purposes of initiating federal review and federal-level public notice when the state provides the information as requested in the below appendices.

- **Appendix A:** A historical narrative summary of the demonstration project, which includes the objectives set forth at the time the demonstration was approved, evidence of how these objectives have or have not been met, and the future goals of the program.
- **Appendix B:** Budget/allotment neutrality assessment, and projections for the projected extension period. The state will present an analysis of budget/allotment neutrality for the current demonstration approval period, including status of budget/allotment neutrality to date based on the most recent expenditure and member month data, and projections through the end of the current approval that incorporate the latest data. CMS will also review the state's Medicaid and State Children's Health Insurance Program Budget and Expenditure System (MBES/CBES) expenditure reports to ensure that the demonstration has not exceeded the federal expenditure limits established for the demonstration. The state's actual expenditures incurred over the period from initial approval through the current expiration date, together with the projected costs for the requested extension period, must comply with CMS budget/allotment neutrality requirements outlined in the STCs.
- **Appendix C:** Interim evaluation of the overall impact of the demonstration that includes evaluation activities and findings to date, in addition to plans for evaluation activities over the requested extension period. The interim evaluation should provide CMS with a clear analysis of the state's achievement in obtaining the outcomes expected as a direct effect of the demonstration program. The state's interim evaluation must meet all of the requirements outlined in the STCs.

- **Appendix D:** Summaries of External Quality Review Organization (EQRO) reports, managed care organization and state quality assurance monitoring, and any other documentation of the quality of and access to care provided under the demonstration.
- **Appendix E:** Documentation of the state's compliance with the public notice process set forth in 42 CFR 431.408 and 431.420.

Section 1115(a) extension with minor program changes

This constitutes the state's application to the Centers for Medicare & Medicaid Services (CMS) to extend its demonstration with minor demonstration program changes. In combination with completing the Section 1115 Extension Template, the state may also choose to submit a redline version of its approved Special Terms and Conditions (STCs) to identify how it proposes to revise its demonstration agreement with CMS.

With the exception of the proposed changes outlined in this application, the state is requesting CMS to extend approval of the demonstration subject to the same STCs, waivers, and expenditure authorities currently in effect for the period [insert current demo period].

The state's application will only be considered complete for purposes of initiating federal review and federal-level public notice when the state provides the information requested in Appendices A through E above, along with the Section 1115 Extension Template identifying the program changes being requested for the extension period. Please list all enclosures that accompany this document constituting the state's whole submission.

1. Section 1115 Extension Template
2. [List Enclosure]
3. [List Enclosure]
4. [List Enclosure]

The state attests that it has abided by all provisions of the approved STCs and will continuously operate the demonstration in accordance with the requirements outlined in the STCs.

Signature: _____

[Governor]

12/15/2025
Date: _____

CMS will notify the state no later than 15 days of submitting its application of whether we determine the state's application meets the requirements for a streamlined federal review. The state will have an opportunity to modify its application submission if CMS determines it does not meet these requirements. If CMS reviews the state's submission and determines that any proposed changes significantly alter the original objectives and goals of the existing demonstration as approved, CMS has the discretion to process this application full scope pursuant to regular statutory timeframes for an extension or as an application for a new demonstration.

FLINT MICHIGAN 1115 DEMONSTRATION: SECOND EXTENSION PERIOD REQUEST

PROJECT NUMBER 11-W-00302/5

State of Michigan
Gretchen Whitmer, Governor

Elizabeth Hertel, Director
Michigan Department of Health and Human Services
333 S. Grand Avenue
Lansing, MI 48913

12/18/2025

Executive Summary

The Michigan Department of Health and Human Services (MDHHS) requests a five-year extension of the Flint Section 1115 Demonstration (Project Number 11-W-00302/5) through September 30, 2031. This extension will maintain uninterrupted coverage and services for children up to age 21 and pregnant women affected by lead exposure from the Flint water system, ensuring that vulnerable populations continue to receive critical Medicaid benefits and targeted supports.

Since its initial approval in 2016, the demonstration has:

- **Expanded eligibility** to children and pregnant women up to 400% of the federal poverty level who would not otherwise qualify for Medicaid.
- **Delivered comprehensive benefits**, including the full Medicaid state plan, Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) for children, and exemption from premiums and cost-sharing.
- **Provided targeted supports**, such as Targeted Case Management (referred to as Family Supports Coordination Services in Michigan and referenced as TCM throughout this document) and home lead investigation services, addressing health risks associated with lead exposure.
- **Maintained compliance** with all Special Terms and Conditions (STCs¹), reporting requirements, and budget neutrality parameters.

As of September 2025, more than 54,000 distinct children and pregnant women have enrolled in the program. Beneficiaries have accessed over 944,000 primary care visits, and more than 1,300 enrollees are currently engaged in TCM services. Quality monitoring and external reviews show improved well-child visits, prenatal care access, and blood lead screening rates.

The interim evaluation conducted by Michigan State University confirms the demonstration's effectiveness in expanding coverage, eliminating financial barriers to care, and improving health outcomes. Community partners report satisfaction with the program while highlighting opportunities for continued improvement in service awareness and administrative processes.

For the second extension period (Demonstration Years 11–15), MDHHS requests continuation of the existing waiver and expenditure authorities with no programmatic changes. The state remains committed to:

- Preserving eligibility for the Flint demonstration population, consistent with the August 29, 2025, policy bulletin.²
- Continuing provision of TCM and home lead investigations.
- Monitoring outcomes and maintaining strong quality oversight.
- Sustaining budget neutrality and meeting all federal reporting obligations.
-

¹[Flint Waiver 1115 Demonstration Approval: Special Terms and Conditions](#)

²[MDHHS Policy Bulletin MMP 25-33](#)

The demonstration remains a critical tool in protecting the health of Flint residents impacted by the water crisis. Without this extension, thousands of children and pregnant women would lose access to essential coverage and services. Approval of this request will allow Michigan to continue its progress, safeguard long-term health outcomes, and uphold Medicaid's objectives for some of the state's most vulnerable populations.

Table of Contents

Executive Summary.....	1
History of the Demonstration.....	7
Initial Approval (2016–2021).....	7
First Extension (2021–2026).....	7
Second Extension Request (2026–2031)	8
Purpose	8
Waiver and Expenditure Authorities Requested	9
Goals and Objectives.....	10
Enrollment.....	11
Implementation/Operational Details	13
Targeted Case Management Services	13
EPSDT and Managed Care Delivery.....	14
Home Lead Investigation Services.....	14
Monitoring and Evaluation	14
STC Compliance	14
Reporting Requirements.....	14
Outcome Measures.....	15
Quality Monitoring, Quality Assessment, and EQRO Activities	15
Quality Assessment Process	15
Internal Quality Assessment.....	15
Quality Assessment Summary (2025 Data)	15
Changes to Quality Assessment	16
External Quality Review (EQRO) Summary	16
Evaluation of the Demonstration	16
Evaluation Activities and Findings to Date.....	16
Planned Evaluation Activities During Extension Period	17
Budget Neutrality and Financial Data.....	18
Historical and Projected Expenditures	18

Enrollment and Expenditure Projections	19
Funding Sources	19
Public Notice and Comment Process.....	19
Documentation of Public Notice	19
Summary of Public Comments and State Response	20
Appendices.....	20
Appendix A: Glossary of Terms	20
Appendix B: References/Supporting Documents	22
B.1 MDHHS Policy Bulletin – Flint Medicaid Demonstration Eligibility Updates.....	22
B.2 Previous Extension Application.....	22
B.3 MDHHS Policy Bulletin – Flint Medicaid Waiver Implementation	22
B.4 MDHHS Policy Bulletin – Flint Waiver Administrative Updates	23
Appendix C: EQRO Reports.....	23
C.1 2023–2024 External Quality Review Technical Report for Medicaid Health Plans.....	23
C.2 2022–2023 External Quality Review Technical Report for Medicaid Health Plans.....	23
C.3 2021–2022 External Quality Review Technical Report for Medicaid Health Plans.....	24
C.4 2020–2021 External Quality Review Technical Report for Medicaid Health Plans.....	24
C.5 2019–2020 External Quality Review Technical Report for Medicaid Health Plans.....	24
Appendix D: Evidence of Noticing	25
D.1 Full Public Notice	25
D.2 Abbreviated Public Notice.....	25
D.3 Tribal Notice.....	25
D.4 Public Comments	26
D.5 Website Notice	26
D.6 Newspaper Tearsheet	26
D.7 Presentations	26
D.8 Public Hearing Agenda.....	26
Appendix E: Flint Michigan Section 1115 Demonstration Interim Evaluation Report.....	28

History of the Demonstration

Initial Approval (2016–2021)

In 2016, the Centers for Medicare & Medicaid Services (CMS) approved Michigan's application to establish the Flint Section 1115 Demonstration (Project Number 11-W-00302/5) in response to the public health emergency of lead exposure from the Flint water system. Implementation of the waiver expanded Medicaid eligibility to low-income children up to age 21 and pregnant women served by the Flint water system during a state-specified time-period and who would otherwise not qualify for Medicaid. This population included children in households with incomes from 212 up to and including 400 percent of the federal poverty level (FPL), and pregnant women in households with incomes from 195 up to and including 400 percent of the FPL.

Under the demonstration, individuals received the full Medicaid state plan benefit package, with children also entitled to Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services. Enrollees were exempt from premiums and cost-sharing. Additional services included Targeted Case Management (TCM) and home lead investigations for eligible children and pregnant women. Coverage was primarily delivered through Medicaid managed care plans.

The initial approval period extended from March 1, 2016, through February 28, 2021. Michigan successfully implemented the demonstration, expanded coverage to the target population, and provided critical services and supports. The state complied with all Special Terms and Conditions (STCs), submitted required monitoring reports, and remained within budget neutrality limits.

First Extension (2021–2026)

In 2021, CMS approved Michigan's request for a five-year extension through September 30, 2026. During Demonstration Years 6 through 9 (September 15, 2021–September 30, 2025), Michigan continued to provide uninterrupted coverage and services to the Flint population. Enrollment remained stable, targeted case management and lead investigation services continued, and the state met all federal reporting requirements. Michigan demonstrated ongoing compliance with STCs, including STCs 17 and 17a, which require the state to determine the end date of the special eligibility period and conduct adequate noticing.

Following the U.S. Environmental Protection Agency's May 2025 announcement lifting the emergency order on Flint's drinking water, declaring the city in compliance with Safe Drinking Water Act standards, the Michigan Department of Health and Human Services (MDHHS) issued Medicaid Policy Bulletin MMP 25-33. This policy formally codified eligibility criteria and service delivery expectations for the Flint Waiver population, in alignment with STC 17 and 17a. The promulgation of MMP 25-33 marked a critical milestone in the state's transition immediate crisis management to a responsive, policy-based framework aligned with ongoing community need, ensuring continued access to care for populations still at risk of the long-term impacts of lead exposure. The policy was developed through MDHHS's formal policy promulgation process, including public comment and tribal consultation, reinforcing transparency and stakeholder

engagement. Michigan also maintained budget neutrality, further reinforcing the waiver's value.

Second Extension Request (2026–2031)

As the state concludes Demonstration Year 9 (October 1, 2024 – September 30, 2025), Michigan is seeking a second five-year extension, from October 1, 2026, through September 30, 2031. The request is for continuation of the same program design and authorities previously approved under the initial demonstration and first extension.

In July 2025, MDHHS issued public notice and engaged in tribal consultation related to the proposed conclusion of the Special Eligibility Period (SEP). Within these forums, MDHHS also signaled its intent to pursue a second extension. While not serving as the formal vehicle for the demonstration extension notice, the alignment of this communication was intentional. The inclusion of the intent to pursue a second extension served to reinforcing the state's commitment to continued coverage and pre-emptively address potential concerns that the end of the SEP might be misinterpreted as the end of the demonstration itself.

Subsequent tribal and public notices, including announcements of public hearing opportunities and additional tribal consultation, have been established to support formal engagement with the public and interested stakeholders specific to the demonstration extension request. Maintaining Michigan's commitment to ensuring access to comprehensive Medicaid coverage and lead-related supports for affected children and pregnant women in Flint, while upholding all federal STC, monitoring, and budget neutrality requirements.

Purpose

The Flint Michigan Section 1115 Demonstration exists to ensure that children and pregnant women affected by lead exposure from the Flint water system have access to comprehensive Medicaid coverage and related services, regardless of standard Medicaid eligibility.

The demonstration achieves this by:

- Expanding Medicaid eligibility to the affected population within specified income ranges.
- Providing all state plan benefits, including Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) for children.
- Offering targeted supports such as Targeted Case Management (TCM) and home lead investigation services to address lead-related health risks.

The requested second five-year extension (Demonstration Years 11–15; October 1, 2026 – September 30, 2031) will maintain uninterrupted access to these benefits and services. While the initial public health emergency has concluded, ongoing monitoring, case management, and

health services remain critical to addressing the long-term impacts of lead exposure from the Flint water system. This extension will allow Michigan to continue serving the Flint population effectively by maintaining access to critical services, support ongoing case management, and monitor long-term health outcomes.

Waiver and Expenditure Authorities Requested

Michigan is requesting continuation of the same authorities approved under the current Flint Michigan Section 1115 Demonstration for the second five-year extension period (Demonstration Years 11–15; October 1, 2026 – September 30, 2031). No changes to waivers or expenditure authorities are requested. All authorities will continue to be subject to the Special Terms and Conditions (STCs) established for the demonstration.

Specifically, MDHHS seeks continuation of the following waivers of state plan requirements under §1902 of the Social Security Act:

³ [MDHHS Policy Bulletin MMP 25-33](#)

- **Provision of Medical Assistance (§1902(a)(8); §1902(a)(10))** – To permit the state to limit medical assistance (and treatment as eligible) to children up to age 21 and pregnant women who were served by the Flint water system from April 1, 2014, through September 30, 2025. This includes any child born to a pregnant woman served by the Flint water system during that time. An individual is considered served by the Flint water system if, for more than one day, they:
 1. Resided in a dwelling connected to the system;
 2. Were employed at a location served by the system; or
 3. Received childcare or education at a location connected to the system.
- **Comparability (§1902(a)(17) or §1902(a)(10)(B))** – To enable the state to waive premiums for individuals who resided in the Flint water system area from April 1, 2014, through September 30, 2025 and to provide home lead exposure evaluations only for individuals meeting these non-financial criteria.
- **Freedom of Choice (§1902(a)(23))** – To allow the state to restrict provider choice for children and pregnant women with respect to targeted case management and home lead exposure evaluation. This includes limiting choice to providers within Managed Care Entity (MCE) and Prepaid Inpatient Health Plan (PIHP) networks. No waiver of freedom of choice is authorized for family planning providers.

Additionally, MDHHS seeks continuation of the CMS-approved expenditure authority that enables:

- Expenditures for evaluation of potential lead exposure in the homes of eligible children under 21 and eligible pregnant women residing in the Flint water system area from April 1, 2014 through September 30, 2025, regardless of whether an elevated blood lead level has been documented.

Goals and Objectives

Since the demonstration's initial approval in 2016, the Flint Michigan Section 1115 Demonstration has successfully promoted the objectives of Medicaid and achieved the state's goals by expanding access to services, improving health outcomes, and providing critical supports for children and pregnant women affected by lead exposure.

Key accomplishments include:

- **Expanded Medicaid Eligibility:**
 - MDHHS has maintained eligibility for children up to age 21 and pregnant women in households up to 400 percent of the Federal Poverty Level (FPL) served by the Flint water system during the state-specified period.
 - As of September 2025, a total of 54,553 pregnant women and children have been enrolled in the demonstration.

- In support of the second extension period, MDHHS issued a policy bulletin⁴ on August 29, 2025 (effective October 1, 2025) clarifying eligibility rules, ensuring uninterrupted access for the target population.
- **Comprehensive Services:**
 - Beneficiaries receive the full Medicaid state plan benefit package, including EPSDT for children.
 - Individuals are exempt from premiums and cost-sharing.
 - Targeted Case Management (TCM) services continue for all eligible children and pregnant women up to 12 months post-delivery, including:
 - Face-to-face comprehensive assessment and individualized care planning
 - Coordination with primary care providers, other providers, and Medicaid Health Plans as appropriate
 - Planning, linking, follow-up, and ongoing monitoring
- **Utilization of Services:**
 - As of September 2025:
 - 944,404 cumulative primary care provider visits among enrolled beneficiaries
 - 1,319 beneficiaries actively receiving ongoing TCM services
- **Improved Access and Health Outcomes:**
 - Increased screening and blood lead testing for children
 - Increased prenatal care access for pregnant women
 - Beneficiaries report easier access to care and services needed for themselves or their children

Objectives for the Second Extension Period (Demonstration Years 11–15):

1. Maintain access to comprehensive Medicaid coverage for eligible children and pregnant women affected by the Flint water system.
2. Ensure continuity of eligibility in accordance with the August 2025 policy bulletin⁴, effective October 1, 2025.
3. Continue provision of lead-related supports, including TCM and home lead investigation services.
4. Monitor and evaluate health outcomes to ensure continued improvement in care access and quality.
5. Ensure program compliance with STCs, monitoring, and budget neutrality requirements throughout the extension period.

Enrollment

Enrollment into the Flint Medicaid waiver program began on May 9, 2016. The Michigan Department of Health and Human Services (MDHHS) uses an electronic administrative renewal

⁴ [MDHHS Policy Bulletin MMP 25-33](#)

process to redetermine eligibility based on verification of income and residency, facilitating enrollment and retention annually.

Demonstration enrollment activity is detailed in this section. Enrollment data were derived from the MDHHS Data Warehouse.

- For reporting purposes, the Children enrollment group includes demonstration enrollees under the age of 21.
- Pregnant women are identified using pregnancy indicators in the MDHHS Data Warehouse. To avoid duplication, pregnant women are excluded from the Children enrollment group.
- Demonstration years in the following tables align with the definitions in the Special Terms and Conditions.

The following tables present unduplicated counts of beneficiaries affected by the demonstration for each year of the current approval period:

1. Medicaid / CHIP Enrollment by Demonstration Year

Medicaid/CHIP Enrollment by Demonstration Year			
Demonstration Year	Enrollment Group		Total Medicaid/CHIP Enrollment
	Children	Pregnant Women	
1	1,265,574	117,935	2,898,870
2	1,255,784	113,813	2,912,025
3	1,246,670	108,516	2,893,218
4	1,267,781	110,625	2,993,234
5	1,244,158	102,831	2,976,832
6	1,277,606	114,269	3,232,759
7	1,311,969	111,312	3,414,390
8	1,300,644	113,727	3,462,575
9*	1,140,904	109,014	3,016,321
Cumulative Enrollment*	2,166,374	356,330	5,066,186

*Year to date

2. Flint Demonstration Enrollment by Demonstration Year

- The Cumulative Enrollment row shows the total distinct number of Flint waiver enrollees over the demonstration period.

Flint Demonstration Enrollment by Demonstration Year			
Demonstration Year	Enrollment Group		Total Flint Demonstration Enrollment
	Children	Pregnant Women	
1	29,985	1,813	31,798
2	32,990	1,735	34,725

3	31,047	1,254	32,301
4	30,075	1,318	31,393
5	28,019	1,120	29,139
6	28,233	988	29,221
7	28,283	888	29,171
8	28,611	1,094	29,705
9*	26,004	1,074	27,078
Cumulative Enrollment*	48,296	6,257	54,553

*Year to date

3. Flint Demonstration Disenrollment by Demonstration Year

- The Cumulative Disenrollment row shows the distinct number of individuals who disenrolled from the Flint waiver over the course of the demonstration period.

Demonstration Year	Enrollment Group		Total Flint Demonstration Disenrollment
	Children	Pregnant Women	
1	6,223	1,103	7,326
2	8,310	3,629	11,939
3	7,168	927	8,095
4	8,678	981	9,659
5	3,655	815	4,470
6	3,181	685	3,866
7	3,759	567	4,326
8	8,723	732	9,455
9*	5,946	803	6,749
Cumulative Disenrollment*	43,402	6,145	49,547

*Year to date

Note: Data were retrieved in September 2025, reflecting cumulative enrollment and disenrollment through current Demonstration Year 9.

The Children and Pregnant Women enrollment groups are subsets of the total Medicaid/CHIP population; therefore, adding these two groups together will not equal the total Medicaid/CHIP population.

Implementation/Operational Details

Targeted Case Management Services

TCM is provided to all eligible children and pregnant women to support navigation of medical, developmental, and behavioral health services. Services include comprehensive assessments,

individualized care planning, linkage to providers and community resources, and coordination with primary care and specialty providers. MDHHS ensures ongoing monitoring of TCM service delivery and utilization to maintain continuity of care. TCM services are available to eligible beneficiaries up to age 21 and pregnant women up to 12 months post-delivery.

EPSDT and Managed Care Delivery

Children receive full EPSDT services as part of the Medicaid state plan benefit package. Medicaid services are primarily delivered through the state's contracted Medicaid Health Plans (MHPs) which provide coordinated access to primary and specialty care. MHPs work closely with MDHHS to ensure provider network adequacy, timely access, and adherence to program requirements.

Home Lead Investigation Services

Eligible households receive home lead investigations to assess potential exposure and mitigate risk. MDHHS coordinates with local public health departments to schedule and perform investigations, ensuring alignment with broader public health efforts in Flint.

Monitoring and Evaluation

MDHHS conducts internal program monitoring, reviewing enrollment, service utilization, and outcomes. Annual monitoring reports are submitted to CMS using the updated structured template and cadence effective June 25, 2025.⁵ Operational data are used to identify risks, inform course corrections, and evaluate the effectiveness of service delivery.

STC Compliance

The program maintains full compliance with the demonstration Special Terms and Conditions (STCs).⁶ All eligibility, enrollment, service delivery, and reporting processes are consistent with the approved terms and conditions.

Reporting Requirements

MDHHS submits required reporting to CMS, including annual monitoring reports, quarterly monitoring calls, and ad hoc reports as needed. Reporting includes program activity, enrollment data, TCM and EPSDT utilization, and home lead investigation outcomes.

⁵ [CMS Monitoring Redesign Overlay Letter](#)

⁶ [Flint Waiver 1115 Demonstration Approval: Special Terms and Conditions](#)

Outcome Measures

MDHHS tracks key outcome metrics, such as utilization of primary care services, developmental and behavioral screenings, and enrollment retention. Outcomes inform program management, quality improvement initiatives, and support the demonstration's ongoing evaluation activities.

Quality Monitoring, Quality Assessment, and EQRO Activities

Quality Assessment Process

Michigan evaluates the quality, accessibility, and efficiency of services provided under the Flint Waiver from both a broad and targeted perspective. MDHHS conducts an annual statewide assessment of its managed care delivery systems in collaboration with the state's nine contracted MHPs. This process includes reporting on Healthcare Effectiveness Data and Information Set (HEDIS) measures, including:

- Child and adolescent care, aligning with the waiver's pediatric eligibility group
- Pregnancy care, aligning with the waiver's pregnant women eligibility group

Additional measures of access and utilization support evaluation of overall Medicaid service delivery in Michigan.

Internal Quality Assessment

MDHHS performs monthly evaluations, quarterly reports, and annual reviews covering:

- Enrollment and changes in enrollment status
- Service utilization
- Access to care

These internal quality assessments complement the formal EQRO reviews and help ensure continuous oversight of service delivery and beneficiary outcomes.

Quality Assessment Summary (2025 Data)

Internal reviews and interim assessments conducted in collaboration with Michigan State University indicate continued success in program reach and service delivery:

- As of September 2025, 54,553 cumulative pregnant women and children have been enrolled in the program.⁷
- TCM services continue as part of the comprehensive benefits, including:

⁷ For reporting purposes, children are defined as individuals under the age of 21, and pregnant women are identified using indicators in the Michigan Department of Health and Human Services' Data Warehouse. To avoid duplication, pregnant women are excluded from the children enrollment group.

- Face-to-face assessments, history-taking, reassessment, and individualized care planning
- Planning, linking, coordination, follow-up, and monitoring to assist beneficiaries in accessing needed services
- Coordination with primary care providers, other providers, and MHPs as applicable
- Service utilization outcomes: 90 percent of cumulative enrollees had used a primary care provider, totaling 944,404 primary care visits, and 1,319 enrollees were actively receiving ongoing TCM services since program inception.

Changes to Quality Assessment

The state intends to maintain its current quality assurance monitoring program for the Flint Waiver. No significant modifications to internal QA processes, TCM monitoring, or service delivery oversight are planned during the requested extension period.

External Quality Review (EQRO) Summary

External quality reviews of the state's Medicaid Health Plans (MHPs) show improvements to quality of and access to care. In 2023, MHP performance levels on well-visits for children within the first 15 months of life and 18 to 21-year-old adolescents ranked above national averages, with steady improvements year over year for all other age groups. The rate of children who had at least one lead screening by age 2 continues to improve after a decrease during the COVID-19 pandemic. To support continuous improvement in lead screenings and allow more timely identification of elevated blood lead levels, all MHPs initiated formal Performance Improvement Projects aimed at improving screening rates at age 1 and at age 2. Similarly, the percentage of pregnant persons who received a prenatal care visit during the first trimester showed a 5.36-point increase in 2023 compared to the prior year.

Full EQRO reports for the Flint Waiver population are included in the Appendices.

Evaluation of the Demonstration

Evaluation Activities and Findings to Date

The Flint Medicaid Expansion (FME) waiver evaluation assesses the program's effectiveness in increasing access to healthcare services, expanding Medicaid eligibility, and improving health outcomes for children and pregnant women exposed to lead. The interim evaluation report, submitted by Michigan State University (MSU) on July 31, 2025, covers the period from September 15, 2021, through December 31, 2024, and is included in [Appendix E](#). The Interim Evaluation Report was submitted to CMS on November 20, 2025. Additional evaluation reports, including the Summative Evaluation Report, will continue through September 2026.

Key findings from the interim evaluation include:

- Waiver enrollment remained steady, with 48,016 unique beneficiaries enrolled from May 2016 through September 2023, and 15,533 (32 percent) enrolled for the entire period. Children enrollment stabilized at approximately 25,000 per month, while pregnant women enrollment peaked in October 2016 and decreased over time.
- The waiver successfully eliminated financial barriers to care by expanding Medicaid eligibility above 212 percent of the federal poverty level (FPL), with the high-income group (above 212 percent FPL) increasing to a peak of 6 percent in 2022 before slightly decreasing to 5 percent in 2023.
- Enrollees reported increased access to services, including well-child visits, age-appropriate developmental screenings, and prenatal lead testing, compared to non-enrollees with similar characteristics.
- Low utilization of targeted case management (TCM) services limited the ability to statistically evaluate the impact of TCM; however, survey data indicate that those who used TCM reported satisfaction with services and improved access to resources.
- Improved health outcomes were observed in age-appropriate childhood immunization rates, confidence in managing chronic conditions, and access to referral services to mitigate educational or behavioral challenges.
- Community partner feedback indicated general awareness of the waiver and satisfaction with enrollment processes, with opportunities noted for enhanced administrative processes and community education.
- Preliminary interpretations suggest the waiver achieved moderate success in meeting its overarching goals while highlighting areas for continued improvement, particularly in lead testing awareness and TCM service utilization.

Planned Evaluation Activities During Extension Period

A copy of the interim evaluation report and plans for evaluating the waiver extension are included in Appendix E. MDHHS will continue partnering with Michigan State University to extend the evaluation through September 2026, using the research questions and hypotheses previously outlined in the interim report. Tracking longer-term trends and previously identified targets remains important, and additional data sources and methodologies may be developed through data use agreements with other agencies or departments. Challenges from earlier evaluation periods—such as compiling data sources and conducting community outreach—have largely been addressed, allowing evaluation to continue without major impediments. The interim evaluation also highlighted actionable areas for improvement, including increasing awareness and use of Targeted Case Management services, supporting ongoing lead screening for children and pregnant enrollees, and enhancing community education and administrative processes. These findings underscore the continued need for the waiver to improve access, service utilization, and health outcomes.

During the extension period, planned evaluation activities include:

- Ongoing administrative and survey data collection to assess access to services, health outcomes, and TCM utilization.

- Continued engagement with community partners to identify barriers, opportunities, and best practices for outreach and enrollment.
- Regular interim reporting to CMS, aligned with updated demonstration monitoring guidance.
- Summative evaluation culminating in a final report expected by March 31, 2027, assessing the demonstration's cumulative impact and informing future program improvements.
- Integration of additional data sources, as available, to refine utilization estimates and participant-reported outcomes.

Available data to date indicate the waiver has been successful in meeting selected goals, with opportunities for enhanced performance remaining. The interim and future summative evaluations provide a foundation for continuous quality improvement and evidence-based program refinement.

Budget Neutrality and Financial Data

To report on past enrollment and expenditures and to make projections, the population is separated into two groups: “Full Coverage” beneficiaries and “TCM-Only” beneficiaries. “Full Coverage” beneficiaries include all individuals under 21 years of age and pregnant women (of any age) under 400 percent of the federal poverty level (FPL) but higher than the FPL for their enrollment category (between 212 and 400 percent FPL for children under 20, between 133 and 400 percent FPL for age 20, and between 195 and 400 percent FPL for pregnant women). “TCM-Only” beneficiaries are individuals who were Medicaid-eligible prior to the waiver but receive additional targeted case management (TCM) services as a result of the demonstration.

Historical and Projected Expenditures

The Demonstration years in the following tables are aligned with the definitions in the special terms and conditions. Since the data were retrieved in September 2025, enrollment for demonstration year 9 is not complete.

	Total Member Months		Total Utilization	
DY 2016*	220,723	TCM-Only Benes	215,606	\$832,457
		Full Coverage Benes	5,117	\$597,133
DY 2017	341,155	TCM-Only Benes	331,770	\$2,033,836
		Full Coverage Benes	9,385	\$1,002,035
DY 2018	325,791	TCM-Only Benes	315,091	\$2,283,043
		Full Coverage Benes	10,700	\$1,301,721
DY 2019	312,299	TCM-Only Benes	301,224	\$2,388,925
		Full Coverage Benes	11,075	\$1,276,012
DY 2020	310,786	TCM-Only Benes	298,284	\$3,712,154
		Full Coverage Benes	12,502	\$1,093,663
DY 2021	312,066	TCM-Only Benes	299,304	\$2,304,079
		Full Coverage Benes	12,762	\$1,771,891
DY 2022	298,361	TCM-Only Benes	291,918	\$3,007,260

		Full Coverage Benes	6,443		Full Coverage Benes	\$2,180,776
DY 2023	283,635	TCM-Only Benes	276,234	\$5,479,096	TCM-Only Benes	\$3,207,786
		Full Coverage Benes	7,401		Full Coverage Benes	\$2,271,310
DY 2024	281,634	TCM-Only Benes	273,255	\$5,963,530	TCM-Only Benes	\$3,257,382
		Full Coverage Benes	8,379		Full Coverage Benes	\$2,706,148
DY 2025 (Projected)	281,935	TCM-Only Benes	257,938	\$6,914,678	TCM-Only Benes	\$3,939,279
		Full Coverage Benes	8,825		Full Coverage Benes	\$2,975,399

*Program enrollment began in May 2016, this row reflects on 9 months of data

Enrollment and Expenditure Projections

Projecting the next five years of costs associated with the waiver involves population projection followed by utilization. Historic enrollment and costs were analyzed for the two enrollment groups. A “per member per month” (PMPM) cost was calculated for each group, with trends applied to estimate future costs. The PMPM was multiplied by the member months expected each year for both groups to project total waiver utilization.

	Total Member Months			Total Utilization		
DY 2026 (Projected)	268,685	TCM-Only Benes	259,425	\$7,055,742	TCM-Only Benes	\$3,921,682
		Full Coverage Benes	9,260		Full Coverage Benes	\$3,134,060
DY 2027 (Projected)	262,644	TCM-Only Benes	252,773	\$7,507,012	TCM-Only Benes	\$4,122,500.48
		Full Coverage Benes	9,871		Full Coverage Benes	\$3,384,511.86
DY 2028 (Projected)	256,603	TCM-Only Benes	246,121	\$7,958,283	TCM-Only Benes	\$4,323,319.05
		Full Coverage Benes	10,482		Full Coverage Benes	\$3,634,963.53
DY 2029 (Projected)	250,561	TCM-Only Benes	239,469	\$8,409,553	TCM-Only Benes	\$4,524,137.62
		Full Coverage Benes	11,903		Full Coverage Benes	\$3,885,415.20
DY 2030 (Projected)	244,520	TCM-Only Benes	232,816	\$8,860,823	TCM-Only Benes	\$4,724,956.19
		Full Coverage Benes	11,704		Full Coverage Benes	\$4,135,866.87

These projections reflect an average number of distinct beneficiaries per year based on the overall member months. The state is not requesting any changes to the program. Based on current projections, a large number of individuals in both categories would lose coverage if the waiver were discontinued.

Funding Sources

The state’s intended source for financing the non-federal share of expenditures under the demonstration is the state general fund.

Public Notice and Comment Process

Documentation of Public Notice

The following methods were used by the state to provide notice to the public and solicit input from interested parties:

- Notice (L 25-56) sent to Tribal Chairs and Health Directors on (9/19/25)
- Full public notice posted on department website (9/19/25)

- Abbreviated public notice sent to state newspapers (9/19/25)
- Public meeting & open comment held by Medicaid Advisory Council (9/23/25)
- Public meeting & open comment held in Flint, MI (10/20/25)
- Formal public comment period (ended 11/17/25)

Summary of Public Comments and State Response

The consultation summary (a full summary of written, oral, and electronic comments, along with responses from MDHHS) is located in the Appendices ([Appendix D.4](#)).

Appendices

Appendix A: Glossary of Terms

Term / Acronym	Definition / Explanation
DY	Demonstration Year – the year associated with the Medicaid demonstration period.
EQRO	External Quality Review Organization – independent entity contracted to review Medicaid managed care performance.
TCM	Targeted Case Management – Medicaid service providing care coordination for eligible individuals.
TCM-Only Beneficiaries	Members receiving only TCM services, not full Medicaid coverage.
Full Coverage Beneficiaries	Medicaid members receiving the full range of covered services.
Total Member Months	Sum of all months of enrollment for all members during a given year.
Total Utilization	Total expenditures for services provided to members during a given year.
PMPM	Per-Member-Per-Month – average monthly cost per enrolled member, calculated as Total Utilization ÷ Total Member Months.
MDHHS	Michigan Department of Health and Human Services – state agency administering Medicaid in Michigan.
MHP	Medicaid Health Plans
CMS	Centers for Medicare & Medicaid Services – federal agency overseeing Medicaid and Medicare programs.
Public Notice	Official announcement informing the public about program changes, eligibility, or opportunities to comment.
Abbreviated Public Notice	Shortened version of the public notice for broader distribution.
Tribal Notice	Notification specifically for federally recognized tribes regarding program updates or consultation opportunities.
Press Release	Public-facing announcement issued to media outlets.

Erratum Notice	Correction or clarification issued after the original publication of a report or document.
SPA	State Plan Amendment – formal change to a state’s Medicaid plan requiring CMS approval.
VPP	Voluntary Provider Program – optional program or benefit available under a demonstration (if applicable).
Projected Values	Estimates of member counts, utilization, and costs for future demonstration years, used for planning and budgeting.
Actual Values	Observed data for member counts, utilization, and costs during completed demonstration years.

Appendix B: References/Supporting Documents

B.1 MDHHS Policy Bulletin – Flint Medicaid Demonstration Eligibility Updates

- **Title:** *Eligibility for Flint Medicaid Demonstration Population*
- **Bulletin Number:** MMP 25-33
- **Date Issued:** August 29, 2025
- **Effective Date:** October 1, 2025
- **Description:** Clarifies eligibility parameters for children and pregnant women served by the Flint water system, ensuring continued access to Medicaid coverage and lead-related supports for the second extension period (Demonstration Years 11–15).
- **Link / Attachment:** <Final-Bulletin-MMP-25-33-Eligibility.pdf>

B.2 Previous Extension Application

- **Title:** *Flint Medicaid Expansion Waiver Extension Application*
- **Date Submitted:** 2020
- **Description:** Prior extension application approved by CMS for Demonstration Years 6–9 (March 2020 – September 2025). Serves as a reference for historical program design, budget neutrality methodology, and evaluation framework.
- **Link / Attachment:** <https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/mi-health-impacts-potential-lead-exposure-pa.pdf>

B.3 MDHHS Policy Bulletin – Flint Medicaid Waiver Implementation

- **Title:** *Implementation of Flint Medicaid Waiver*
- **Bulletin Number:** MSA 16-10
- **Date Issued:** March 3, 2016
- **Effective Date:** March 1, 2016
- **Description:** Announces implementation of the Flint Waiver, outlining eligibility groups, benefits, and covered services available to children and pregnant women impacted by the Flint water crisis.
- **Link / Attachment:** https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Folder1/Folder98/MSA_16-10.pdf?rev=022b1af6bf834cbc89756d6704c1d6f2&hash=E7096EA82CEF9EB47FADCA7E8993B0F4B.5 MDHHS Policy Bulletin – Flint Waiver Service Guidance
- **Title:** *Flint Waiver Coverage and Services*
- **Bulletin Number:** MSA 16-11
- **Date Issued:** March 3, 2016
- **Effective Date:** March 1, 2016
- **Description:** Provides detailed operational guidance on enrollment processes, service delivery, and provider responsibilities under the Flint Waiver.

- **Link / Attachment:** https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Folder1/Folder46/MSA_16-11.pdf?rev=32646acf48c243179a709e3c390a2ba6&hash=C2FA7321D3C569A46C486BB794B1EEBF

B.4 MDHHS Policy Bulletin – Flint Waiver Administrative Updates

- **Title:** *Administrative Updates for Flint Medicaid Waiver*
- **Bulletin Number:** HASA 22-08
- **Date Issued:** September 9, 2022
- **Effective Date:** October 1, 2022
- **Description:** Updates program administration processes, reporting requirements, and coordination across state systems to support waiver operations.
- **Link / Attachment:** https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder1/Folder2/Folder1/HASA_22-08.pdf?rev=347bf717e2b04ae7aaf6ae3178c36e6f

Appendix C: EQRO Reports

C.1 2023–2024 External Quality Review Technical Report for Medicaid Health Plans

- **Title:** *2023–2024 External Quality Review Technical Report for Medicaid Health Plans*
- **Link to Report:** https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/MI2024_MHP_EQR-TR_Report_F1_071825.pdf?rev=74abc45790234c3abe9f8d60c92c8a7b&hash=860A91D9E74F87AB76245EF1A0F86306
- **Description:** Technical review of Medicaid Health Plans covering DY2023–2024, including performance measures, compliance evaluation, and quality improvement recommendations. The erratum corrects minor errors identified after initial publication.

C.2 2022–2023 External Quality Review Technical Report for Medicaid Health Plans

- **Title:** *2022–2023 External Quality Review Technical Report for Medicaid Health Plans*
- **Link to Report:** https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/MI2023_MHP_EQR-TR_Report_F1.pdf?rev=db214fc4e2224df29343a81cc9b08bd2&hash=798B30EB1D1E1AB597AD62AAE5C83396

- **Description:** Evaluation of Medicaid Health Plan performance and quality metrics for DY2022–2023, providing key findings and recommendations for improvement.

C.3 2021–2022 External Quality Review Technical Report for Medicaid Health Plans

- **Title:** *2021–2022 External Quality Review Technical Report for Medicaid Health Plans*
- **Link to Report:** https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/MI2022_MHP_EQR-TR_Report_F1.pdf?rev=1e1861a955b244cea0f28a852733264e&hash=892B992E34BDC980CA3C11F49F542AB1
- **Description:** Technical review and analysis of Medicaid Health Plan performance, including compliance, service delivery, and quality improvement opportunities for DY2021–2022.

C.4 2020–2021 External Quality Review Technical Report for Medicaid Health Plans

- **Title:** *2020–2021 External Quality Review Technical Report for Medicaid Health Plans*
- **Link to Report:** https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/MI2021_MHP_EQR-TR_Report_F1.pdf?rev=677c4dfa7a314ba59347688ae62c9557&hash=BC3F9E7A0B0E9919507EE2422C15495B
- **Description:** Comprehensive assessment of Medicaid Health Plan performance for DY2020–2021, identifying strengths, gaps, and recommendations for quality improvement.

C.5 2019–2020 External Quality Review Technical Report for Medicaid Health Plans

- **Title:** *2019–2020 External Quality Review Technical Report for Medicaid Health Plans*
- **Link to Report:** https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Folder2/Folder49/Folder149/MI2019-20_MHP_EQR-TR_Report_F1.pdf?rev=6e970bd145cd49b4a1c88504d37b527a&hash=E7CF79232EAA3DE08CA90965F0BED29B
- **Description:** Review and evaluation of Medicaid Health Plan operations and quality measures for DY2019–2020, with detailed findings and recommendations.

Appendix D: Evidence of Noticing

D.1 Full Public Notice

- **Title:** *Flint, Michigan Section 1115 Demonstration Waiver Extension Application*
- **Link:** [https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/Revised-Flint-Waiver-Renewal---Short-and-Long-Public-Notice_091725-\(2\).pdf?rev=a3d85fba752a4ad7847838fba40282f7&hash=97CBE40C4C59F4DB4926E2D1736FBFAE](https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/Revised-Flint-Waiver-Renewal---Short-and-Long-Public-Notice_091725-(2).pdf?rev=a3d85fba752a4ad7847838fba40282f7&hash=97CBE40C4C59F4DB4926E2D1736FBFAE)
- **Date Issued:** 9/19/2025
- **Description:** In compliance with federal and state notice requirements, it provides: a comprehensive description of the demonstration extension; locations and internet addresses where copies of the application are available for public review; timeframe and postal and email addresses for public comments; and the location, date, and time of two public hearings.

D.2 Abbreviated Public Notice

- **Title:** *Flint, Michigan Section 1115 Demonstration Waiver Extension Application*
- **Link:** [https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/Revised-Flint-Waiver-Renewal---Short-and-Long-Public-Notice_091725-\(2\).pdf?rev=a3d85fba752a4ad7847838fba40282f7&hash=97CBE40C4C59F4DB4926E2D1736FBFAE](https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/Other-Prov-Specific-Page-Docs/Revised-Flint-Waiver-Renewal---Short-and-Long-Public-Notice_091725-(2).pdf?rev=a3d85fba752a4ad7847838fba40282f7&hash=97CBE40C4C59F4DB4926E2D1736FBFAE)
- **Date Issued:** 9/19/2025
- **Description:** An abbreviated version of the Public Notice, it provides: a description of the demonstration extension; locations and internet addresses where copies of the application are available for public review; timeframe and postal and email addresses for public comments; and the location, date, and time of two public hearings.

D.3 Tribal Notice

- **Title:** *Section 1115 Waiver Extension Request to Assist in Addressing Health Impacts from Potential Lead Exposure in Flint, Michigan*
- **Link:** <https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Assistance-Programs/Medicaid-BPHASA/2025-L-Letters/Numbered-Letter-L-25-56.pdf?rev=0ff163b86daa45e9a5bd7285e5b7f0ea&hash=24869038E7BAC5C3CC6A94F385E9BFE4>
- **Document Number / Identifier:** Provider Letter Number L 25-56
- **Date Issued:** 9/19/2025
- **Description:** Provides notification and consultation materials specifically for federally recognized tribes. Ensures that tribal governments are informed of the demonstration

extension and invited to submit feedback or request meetings.

D.4 Public Comments

- **Title:** *Consultation Summary – Flint Michigan 1115 Demonstration: Second Extension Period Request*
- **Date Issued / Compiled:** 11/17/2025
- **Description:** Consolidated summary of all public comments received in response to the public notice. Includes comments from individuals, advocacy groups, and other stakeholders, along with MDHHS responses where applicable.
- **Link / Attachment:** [Summary of Public Comments](#)

D.5 Website Notice

- **Title:** *Section 1115 Waiver - Medicaid Eligibility for Flint Residents*
- **URL:** <https://www.michigan.gov/mdhhs/assistance-programs/section-1115-waiver-medicaid-eligibility-for-flint-residents>
- **Description:** Central online location where the full public notice, abbreviated notice, Tribal notice, and related materials are posted for public access.

D.6 Newspaper Tearsheet

- **Title:** *Flint Journal Public Notice Publication*
- **Date Issued / Compiled:** 9/21/2025
- **Description:** An example of a newspaper tearsheet documenting the public notice as published in the Flint Journal. This includes the full printed advertisement exactly as it appeared to readers, with the publication date and original formatting preserved to verify proper public notice requirements were met.
- **Link / Attachment:** [Flint Journal Public Notice Publication](#)

D.7 Presentations

- **Title:** *Community and Stakeholder Presentations on Flint Medicaid Waiver*
- **Date Range:** 10/20/2025-10/21/2025
- **Description:** Includes MDHHS-led presentations to community stakeholders that summarize program design, implementation, evaluation progress, and intent to extend.
- **Link / Attachment:** [Flint Michigan Section 1115 Demonstration Extension 10.20.25](#)

D.8 Public Hearing Agenda

- **Title:** *Public Hearing Agenda on Flint Medicaid Waiver*
- **Date Range:** 10/20/2025-10/21/2025
- **Description:** The public hearing agenda detailing the order of proceedings, including introductions, an overview of the waiver demonstration, presentations on proposed

changes, discussion periods, and structured opportunities for public comment, ensuring transparency and compliance with federal public notice requirements.

- **Link / Attachment:** [Public Hearing Agenda on Flint Medicaid Waiver](#)

Appendix E: Flint Michigan Section 1115 Demonstration Interim Evaluation Report

- **Title:** Flint Michigan Section 1115 Demonstration Interim Evaluation Report
- **Author:** Michigan State University Institute for Health Policy
- **Date Submitted to MDHHS:** July 31, 2025
- **Date Submitted to CMS:** November 20, 2025
- **Coverage Period:** September 15, 2021 – December 31, 2024
- **Description:** Provides an interim evaluation (pre-CMS review) of waiver operations, enrollment, service utilization, and outcomes, including preliminary findings and recommendations to inform the waiver extension.
- **Link / Attachment:** [Interim Evaluation Report](#)