

Minnesota Prepaid Medical Assistance Project Plus (PMAP+)

Section 1115 Waiver No. 11-W-0039/5 Former Foster Care Youth

Amendment Request
January 24, 2024 (rev. 2/2/24)

Submitted to:

U.S. Department of Health & Human Services
Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services

Submitted by:

Minnesota Department of Human Services
540 Cedar Street
St. Paul, MN 55164-0983

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Attachment D – Letter to Tribal Governments’ Leadership

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1. Overview

A. Amendment Request

The Minnesota Department of Human Services (DHS) requests to amend the Minnesota Prepaid Medical Assistance Project Plus (PMAP+) section 1115(a) demonstration waiver (Project Number 11-W-00039/5). The amendment provides Medicaid eligibility for former foster care youth who turned 18 prior to January 1, 2023, and are under the age of 26. The Medicaid eligibility requirements mirror those provided in the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act, Pub. L. No. 115-271 for people who turned 18 on or after January 1, 2023.

B. Current Status

Effective January 1, 2023, Minnesota implemented the SUPPORT Act requirements for former foster care youth who turned 18 *on or after* January 1, 2023. Under temporary section 1902(e)14 waiver authority Minnesota applied the same eligibility requirements for former foster care youth who turned 18 *prior* to January 1, 2023. The PMAP+ amendment permits the state to continue the eligibility for this group (paralleling the SUPPORT Act eligibility requirements) through December 31, 2030, at which time all individuals in the group will have reached age 26. See [Minnesota Statutes, section 256B.055, subd. 17](#).

C. Background

The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act, Pub. L. No. 115-271, expanded Medicaid eligibility to certain people who resided in foster care. The SUPPORT Act requires states to provide Medicaid eligibility for people who were enrolled in Medicaid in another state and turn age 18 on or after January 1, 2023. These individuals are eligible for Medicaid until they reach age 26 in whatever state they reside regardless of whether they have another basis of Medicaid eligibility, but for some limited eligibility exceptions.

The January 1, 2023 birthday criteria in the SUPPORT Act created incongruent Medicaid eligibility for people under age 26 who turned 18 before January 1, 2023. Specifically, people who turned age 18 before January 1, 2023, and are under 26 years old, do not have Medicaid eligibility based on their foster care status.

The waiver amendment permits Minnesota Medicaid eligibility to be the same for both groups. Notwithstanding when they reached age 18, all people under age 26 who resided in foster care at the time they turned 18 and met the other SUPPORT Act requirements would be eligible for Minnesota Medicaid. The other SUPPORT Act requirements include that the person was on Medicaid and residing in foster care when they turned 18, regardless of which U.S. state they lived in and regardless of whether they had another basis of Medicaid eligibility.

CMS' State Health Official letter, Coverage of Youth Formerly in Foster Care in Medicaid dated December 16, 2022 (#22-003), addressed the importance of Medicaid coverage for foster care

children to the age of 26. Further, it suggested states consider section 1115 demonstration waivers as a method to provide coverage for the group of children who turned 18 prior to January 1, 2023. Given CMS' support and direction concerning coverage for this group, the state foregoes additional background information.

D. How the demonstration program furthers the objectives of Title XIX and/or Title XXI of the Social Security Act

A primary objective of Title XIX of the Social Security Act is to provide for adequate provision of Medicaid services. Congress provided Medicaid coverage for former foster care youth under the SUPPORT Act, but the law created incongruent Medicaid eligibility based on an enrollee's date of birth. The amendment furthers the objectives of Title XIX by permitting the state to apply the same eligibility requirements and processes equitably across the former foster care youth group who are in the same age range (18 to 26 years old), but who are excluded from eligibility provided in the SUPPORT Act based on their age on a specific date.

E. Description of the hypotheses

Medicaid coverage for the group of Medicaid enrollees covered under the waiver will have similar access patterns to health care services as the SUPPORT Act coverage group.

F. Regions of the state covered by the demonstration

The amendment applies statewide.

2. Impact of Amendment on Beneficiaries

People who would otherwise meet the Medicaid eligibility criteria under the SUPPORT Act due to their former foster care status will be Medicaid eligible to the age of 26, regardless of whether they reached age 18 before or after January 1, 2023.

The waiver authority is needed to provide coverage for this group through December 31, 2030. At that time, all people in the group will have reached age 26. The waiver amendment also provides coverage to the age of 26 for individuals who would be otherwise be Medicaid eligible as a pregnant person or parent.

3. Beneficiaries Affected by the Demonstration

Eligibility

Eligibility for the amended waiver coverage is for two Medicaid Expenditure Groups (MEGs). Individuals must meet all other Minnesota Medicaid eligibility requirements.

The first MEG includes people who meet all of the following criteria:

- who resided in foster care when they turned age 18;
- who were enrolled in Medicaid in any U.S. state;

- who are not yet age 26; and
- who may have another basis of Medicaid eligibility (see second MEG).

Because Minnesota has not covered this group related solely to former foster care status, it is an expansion group under the waiver.

The second MEG includes people who meet all of the following criteria:

- who resided in foster care when they turned age 18;
- who were enrolled in Medicaid in Minnesota;
- who are not yet age 26; and
- who would be otherwise Medicaid eligible as a pregnant person or parent.

Because Minnesota has covered this group under other Medicaid eligibility groups, it is not an expansion group under the waiver.

A. Eligibility determinations, if different from state plan

Eligibility determination processes are not changed and will follow the approved state plan.

Eligibility Chart

1115 Waiver Groups	Conditions
Former foster care youth who turned 18 before January 1, 2023, and are applying for Minnesota Medicaid on or after January 1, 2023, and are under age 26.	The individuals were enrolled in both foster care and Medicaid in another U.S. state when they turned age 18.
Former foster care youth who turned 18 before January 1, 2023, and who are applying for Minnesota Medicaid on or after January 1, 2023, and are under age 26.	The individuals could qualify under one of these mandatory bases: <ul style="list-style-type: none"> • Pregnant person, or • Parent.¹

B. Enrollment limits

No enrollment limits apply.

C. Projected number of individuals

DHS anticipates less than 20 enrollees which will decline as the individuals reach age 26.

D. Post eligibility of income for long term care services and supports

Post-eligibility is not changed for the MEG groups covered by this amendment. Minnesota applies a household size of one for children under age 21 who meet the eligibility requirements

¹ This includes a child who is a parent with income up to 133% FPL, 42 CFR 435.110; and, a pregnant person with income up to 283% FPL, 1902(a)(10)(A)(III) and (IV) 42 CFR 435.116 and 435.170.

for section 1915(c) home and community-based services, nursing facility care, or Intermediate Care Facility for people with Developmental Disabilities services.

4. Impact of Amendment on Demonstration Reporting, Quality and Evaluation Plans

Given the low number of individuals who are likely to be in the demonstration through this amendment and the expected gradual decline in that number through 2030, it is unlikely that the state will be able to conduct a meaningful evaluation for this amendment. In consultation with CMS, we will keep CMS posted on the number of individuals covered through the amendment and their high-level utilization patterns (as feasible) through monitoring and evaluation reports, as applicable.

5. Impact of Amendment on Budget Neutrality Agreement

Because enrollment is anticipated to be under 20 people, DHS does not anticipate an impact on waiver budget cost neutrality. Additionally, no systems or process changes are being implemented to specifically identify and track the enrollees in each MEGs.

6. Public Notice & Process for Comment

A. Start and end dates of the state's public comment period

The 30-day comment period was from December 18, 2023 to January 18, 2024. Additionally, public hearings on continuous eligibility were held during the state's 2022-2023 legislative session.

B. Certification that the state provided required public notice of the application

The change to Medicaid eligibility described in the amendment was authorized by the 2023 Minnesota legislature. As part of the legislative process there were several public hearings. The authorizing law was enacted in Minnesota Session Law 2023, Chapter 70, Art. 1, sec. 9. Information about the waiver amendment was also shared at the Medicaid Services Advisory Committee on November 14, 2023, with discussion and feedback welcomed. The agenda for the meeting is attached. See Attachment A.

A notice requesting public comment on the waiver amendment was published in the Minnesota State Register on December 18, 2023. The notice provided information about the 30-day comment period from December 18, 2023 to January 18, 2024, and a link to the DHS website with more information. A copy of the Minnesota State Register Notice is provided as Attachment B.

An electronic copy of the waiver request was posted on the DHS' website on December 18, 2023. The webpage is updated on a regular basis and includes information about the public

notice process, opportunities for public input, and provides a link to the waiver amendment. The main page of the DHS public website supports a search function to help people quickly move to the federal waiver page that identifies open comment periods.

C. Public hearings

The public hearing requirement was met through the legislative hearing process that required DHS to request this amendment.

D. Electronic mailing list

A GovDelivery² email list was used to notify subscribers and applicable state legislative committee chairs and county agencies of the former foster care youth amendment. The GovDelivery email with links to the DHS web page with waiver comment period information was sent on December 18, 2023. See Attachment C.

7. Tribal Consultation

There are eleven Tribal Nations in Minnesota, seven Ojibwe reservations and four Dakota (Sioux) communities. The seven Ojibwe reservations are: Grand Portage located in the northeast corner of the state; Bois Forte located in far northern Minnesota; Red Lake located in northern Minnesota west of Bois Forte; White Earth located in northwestern Minnesota; Leech Lake located in the north central portion of the state; Fond du Lac located in northeastern Minnesota west of Duluth; and Mille Lacs Band of Ojibwe located south of Brainerd in the central part of the state. The four Dakota communities are: Shakopee Mdewakanton Sioux located south of the Twin Cities near Prior Lake; Prairie Island Indian Community located near Red Wing; Lower Sioux Community located near Redwood Falls; and Upper Sioux Community whose lands are near the city of Granite Falls.

While these eleven Tribal Nations frequently collaborate on issues of mutual benefit, each operates independently as a separate and sovereign entity government – a state within a state or nation within a nation. Recognizing American Indian tribes as sovereign nations, each with distinct and independent governing structures, is critical to the work of DHS. DHS recognizes each American Indian tribe as a sovereign nation with distinct and independent governing structures. It is vital for the state to have strong collaborative relationships with tribal governments. To support this for health and human services programs, DHS has a designated staff liaison in the Medicaid Director's office who is responsible to inform and, as applicable, coordinate Medicaid issues with the eleven Tribal Nations. Furthermore, Minnesota Executive Order 19-24 affirms the Government-to-Government Relationship between the State of Minnesota and Minnesota Tribal Nations.

The Tribal and Urban Health Directors Work Group was formed to address the need for a regular forum for formal consultation between tribes and state staff. Work group attendees include Tribal

² GovDelivery is a subscription-based email system used by Minnesota state government to share information with the public. It is also sent to specific provider and stakeholder groups as applicable.

Chairs, Tribal Health Directors, Tribal Social Services Directors, and the DHS liaison. Other DHS leaders often participate in the meetings. The Native American Consultant from CMS and state agency staff attend as necessary depending on the topics covered. The DHS liaison attends all Tribal and Urban Health Directors Work Group meetings and provides updates on state and federal activities. The liaison arranges for appropriate DHS policy staff to attend the meetings to receive input from Tribal representatives and to answer questions.

Notice of the former foster care youth amendment was provided during the Tribal and Urban Indian Health Director's meeting on November 16, 2023.

On December 18, 2023, a letter was sent to all Tribal Chairs, Tribal Health Directors, Tribal Social Services Directors, the Indian Health Service Area Office Director, and the Director of the Minneapolis Indian Health Board clinic informing each of the state's intent to submit the former foster care youth amendment and inviting feedback and comment. The letter also informed Tribes of the public input process and provided a link to the former foster care youth amendment. Please refer to Attachment D for a copy of the letter.

The Department did not receive any feedback.

8. Public Comment

During the public comment period from December 18, 2023 to January 18, 2024, the Department received 2 letters of support. See attachment E. The Department did not receive any suggested changes or questions.

9. State Contact

Christina Samion
Federal Relations
Minnesota Department of Human Services
P.O. Box 64983
St. Paul, MN 55164-0983

(651) 431-5885
christina.samion@state.mn.us

Agenda: Medicaid Services Advisory Committee

Date: Tuesday, November 14, 2023

Committee Membership

Medicaid beneficiaries or caregivers of beneficiaries	Consumer, non-profit, or human services organizations	Physicians or provider organizations
1. Kathryn Barton 2. George Klauser* 3. Saudade Samuelson* 4. Kate Quale* 5. Aaron Wittnebel*	1. Christine Reiten 2. Ashley Anderson 3. Chelsea Georgesen 4. Abdullahi Abdullahi* 5. Samuel Moose*	1. Elizabeth Duffy 2. Katie Peck 3. Micah Niermann* 4. Nneka Sederstrom* 5. Lynette Tahtinen*

Public Welfare or Health Director: Jovon Perry, Director of Economic Assistance, Department of Human Services

Welcome and Overview

Melorine Mokri, Deputy Federal Relations Director, Health Care Administration

Medicaid Program Update

Julie Marquardt, State Medicaid Director

Committee Feedback on Medicaid Renewal Communications

David Kennedy-Logan, Content Integrity and Communications Supervisor, Medicaid Payment and Provider Services

MMIS Modernization: Redesign for an Agile Medicaid Program

Matthew Woods, Director Medicaid Payments and Provider Services, Health Care Administration

Lauren Siegel, Medicaid Systems Transformation Coordinator, Health Care Administration

Public Comment

Next Meeting and Adjourn

February 13, 2024 – From 12:30 – 2:30 p.m.

Official Notices

Department of Human Services

Health Care Administration

Request for Comments on the Minnesota Prepaid Medical Assistance Project Plus Section 1115 Medicaid Demonstration Waiver Amendments

DHS is announcing a 30-day comment period on two proposed amendments to the Prepaid Medical Assistance Project Plus (PMAP+) Section 1115 Medicaid demonstration waiver.

The PMAP+ waiver was first approved by the Centers for Medicare & Medicaid Services in July 1995. The PMAP+ waiver currently provides federal authority to:

- Cover children under Medical Assistance who are 12 to 23 months old with income eligibility above 275% and at or below 283% of the federal poverty level (FPL).
- Waive the federal requirement to redetermine the basis of Medical Assistance eligibility for caretaker adults with incomes at or below 133% of the FPL who assume responsibility and live with children age 18 who are not full-time secondary school students.
- Provide Medical Assistance benefits to pregnant people during the period of presumptive eligibility.

Effective January 2024, the federal SUPPORT for Patients and Communities Act requires states to provide 12-months of continuous Medicaid coverage for children from birth to age 18, with some limited exceptions. The first PMAP+ amendment extends the number of months of continuous Minnesota Medicaid eligibility from 12- to 72-months for children up to age six and extends the 12-months of continuous Minnesota Medicaid eligibility to people age 19 and 20.

Effective January 2023, the federal SUPPORT for Patients and Communities Act requires states to provide Medicaid coverage for people up to age 26, with some limited exceptions, if they were enrolled in Medicaid and receiving foster care services in another state when they turned age 18 and their birth date was on or after January 1, 2023. The second PMAP+ amendment provides the same Minnesota Medicaid coverage for people who turned age 18 before January 1, 2023. Minnesota has time-limited authority to cover this group related to the public health emergency. The PMAP+ authority would permit Medicaid coverage for this group through December 31, 2030, at which time all individuals in the group will have reached age 26. See Minnesota Statutes, section 256B.055, subd. 17.

DHS invites public comment on both PMAP+ amendments. Comments received will be posted on the DHS website. A copy of each amendment can be found at <https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/minnesota-health-care-programs/federal-waivers.jsp>. If you are unable to access the amendments electronically, you may request a printed copy by emailing Section1115WaiverComments@state.mn.us or by sending a written request to the address below.

Written comments may be submitted by email to Section1115WaiverComments@state.mn.us. To support making comments available to people who use screen readers, DHS requests comments be submitted in Microsoft Word format or incorporated within the email text. If you would also like to provide a signed copy of a comment letter, you may submit a second copy in Adobe PDF format. Comments must be received or postmarked by January 18, 2024. Comments mailed by USPS must be sent to:

Minnesota Department of Human Services
Federal Relations – Medicaid Waivers
P.O. Box 64967
St. Paul, MN 55164-0967

Subject: FW: Minnesota Prepaid Medical Assistance Program Plus (PMAP+)
Amendments – Comment Period

From: Minnesota Department of Human Services <Minnesota_DHS@public.govdelivery.com>

Sent: Monday, December 18, 2023 9:07 AM

To: Samion, Christina M (DHS) <christina.samion@state.mn.us>

Subject: Minnesota Prepaid Medical Assistance Program Plus (PMAP+) Amendments – Comment Period



The Minnesota Department of Human Services (DHS) is announcing a 30-day comment period for two amendments to the Prepaid Medical Assistance Program Plus (PMAP+) section 1115 waiver. The amendments expand and extend continuous eligibility for children and adopt consistent eligibility policy for a small group of former foster care youth.

The continuous eligibility amendment expands the number of months of continuous eligibility for children under age six from 12- to 72-months and extends the 12-months of continuous eligibility for young adults ages 19 and 20. The amendment for former foster care youth impacts a small number of people who were excluded from federal law change because of the date they reached age 18; before January 1, 2023. The amendment provides coverage for this group until they reach age 26 and parallels the eligibility provided in federal law for people who turned 18 on or after January 1, 2023.

Both amendments add eligibility coverage, streamline eligibility processes, and reduce churn off and back on the respective Medicaid program when temporary changes, such as fluctuations in family size or household income occur. Churn is used to describe the temporary loss and return to health care coverage primarily due to paperwork or eligibility process and policy issues.

Drafts of both amendments are available for review on the [DHS website](#). The website also includes information about how to submit comments. Written comments must be received by January 18, 2024.

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**Minnesota Department of Human Services
Health Care Administration
540 Cedar Street
PO Box 64983
St Paul, MN 55164-0983**

December 18, 2023

Re: Prepaid Medical Assistance Program Plus (PMAP+) Eligibility Amendments

Dear Tribal Leader,

The Department of Human Services (DHS) is announcing a 30-day comment period for two amendments to the Prepaid Medical Assistance Program Plus section 1115 waiver. The amendments expand and extend continuous eligibility for children and adopts consistent eligibility policy for a small group of former foster care youth.

The continuous eligibility amendment expands the number of months of continuous eligibility for children under age six from 12- to 72-months and extends the 12-months of continuous eligibility for young adults ages 19 and 20. The amendment for former foster care youth impacts a small number of people who were excluded from federal law change because of the date they reached age 18; before January 1, 2023. The amendment provides coverage for this group until they reach age 26 and parallels the eligibility provided in federal law for people who turned 18 on or after January 1, 2023.

Both amendments add eligibility coverage, streamline eligibility processes, and reduce churn off and back on the respective Medicaid program when temporary changes, such as fluctuations in family size or household income occur. Churn is used to describe the temporary loss and return to health care coverage primarily due to paperwork or eligibility process and policy issues.

Both amendments are available for review on the [DHS website](#). The website includes information about how to submit comments. We request that feedback be provided by January 18, 2024. Should you have questions about the PMAP+ amendment, please contact Michelle Long of my staff directly at michelle.long@state.mn.us. Thank you.

Sincerely,



Patrick Hultman
Deputy State Medicaid Director



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December 21, 2023

Jodi Harpstead, Commissioner
Minnesota Department of Human Services
444 Lafayette Rd.
St. Paul, MN 55155

RE: Comment on amendments to Prepaid Medical Assistance Project Plus Waiver

Dear Commissioner Harpstead,

The Minnesota Medical Association (MMA) appreciates the opportunity to comment on [proposed amendments](#) to the Prepaid Medical Assistance Project Plus (PMAP+) waiver that extend and expand Medicaid eligibility for children and young adults in Minnesota, including older young adults who have previously received foster care services. We support these amendments and the role they will play in improving access to affordable, uninterrupted healthcare for young Minnesotans who are still developing and/or face unique coverage challenges.

The MMA looks forward to working with the Minnesota Department of Human Services on future efforts to ensure healthcare coverage for all Minnesotans.

Laurel Ries, MD
President, Minnesota Medical Association



1753 Cottonwood Circle • Saint Cloud, MN 56303 • www.machp.org

Support for MN DHS 1115 PMAP+ Waiver Amendments

January 10, 2024

Minnesota's three County-Based Purchasing (CBP) plans (Itasca Medical Care, South Country Health Alliance, and PrimeWest Health) support the Minnesota Department of Human Services' (DHS's) two proposed amendments to the Prepaid Medical Assistance Project Plus (PMAP+) waiver:

SUPPORT: Amendment for extended and expanded continuous Medicaid eligibility

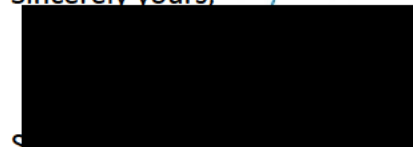
MACHP and its member CBP plans strongly support DHS's waiver amendment request to expand the number of months of continuous Medicaid eligibility from 12 months to 72 months for children up to age six, and extend the 12 months of continuous Minnesota Medicaid eligibility to people ages 19 and 20. This amendment is authorized in [Minnesota Statutes, 256B.056, subdivision 7](#). Particularly for Medicaid eligible children and young adults, this improved stability and continuity in coverage and care will strengthening health outcomes by eliminating enrollment churn and coverage gaps.

SUPPORT: Amendment to provide Medicaid coverage for former foster care youth

MACHP and its member CBP plans strongly support DHS's waiver amendment request to extend through Dec. 31, 2030 the SUPPORT for Patients and Communities Act Medicaid coverage for people up to age 26 (with some limited exceptions) if they were enrolled in Medicaid and receiving foster care services when they turned age 18 and their birthdate was on or after Jan. 1, 2023. Refer to [Minnesota Statutes, 256B.055, subdivision 17](#). This extended continuity of coverage and care will strengthen the health and well being of young people who are Medicaid eligible and receiving foster care services.

We appreciate these waiver amendment requests aimed at helping close gaps in continuity of coverage and care for young people in need. Thank you.

Sincerely yours, /



Executive Director

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www.machp.org

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