DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-25-26 Baltimore, Maryland 21244-1850



State Demonstrations Group

February 26, 2025

Cheryl J. Roberts Medicaid Director Virginia Department of Medical Assistance Services 600 E Broad St Richmond, VA 23219

Dear Director Roberts,

The Centers for Medicare & Medicaid Services (CMS) completed its review of the Former Foster Care Youth Interim Evaluation Report, which is required by the Special Terms and Conditions (STCs), specifically STC #65 "Interim Evaluation Report" of Virginia's section 1115 demonstration, "Building and Transforming Coverage, Services, and Supports for a Healthier Virginia" (Project No: 11- W-00297/3), effective through December 31, 2025. This Interim Evaluation Report covers the period from January, 2020 through March, 2024. CMS determined that the Evaluation Report, submitted on July 31, 2024 and revised on December 2, 2024 is in alignment with the CMS-approved Evaluation Design and the requirements set forth in the STCs, and therefore, approves the state's Former Foster Care Youth Interim Evaluation Report.

To assess the effectiveness of the demonstration component, the Interim Evaluation Report provides quantitative data on two measures from January 2020 to March 2024, both with an associated evaluation question and hypothesis. While the evaluation of this demonstration component is limited to process measures due to the small number of beneficiaries, the data indicates a positive trend both in the number of beneficiaries continuously enrolled and the number of beneficiaries with access to care during the evaluation period. We look forward to further analysis of the Former Foster Care Youth component of the Building and Transforming Coverage, Services, and Supports for a Healthier Virginia section 1115 demonstration.

In accordance with STC #69 "Public Access", the approved Interim Evaluation Report may now be posted to the state's Medicaid website within 30 days. CMS will also post the Interim Evaluation Report on Medicaid.gov.

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We look forward to our continued partnership on the Virginia Building and Transforming Coverage, Services, and Supports for a Healthier Virginia section 1115 demonstration. If you have any questions, please contact your CMS demonstration team.

Sincerely,

Danielle Daly Director Division of Demonstration Monitoring and Evaluation

cc: Margaret Kosherzenko, State Monitoring Lead, CMS Medicaid and CHIP Operations Group

BUILDING AND TRANSFORMING COVERAGE, SERVICES, AND SUPPORTS FOR A HEALTHIER VIRGINIA SECTION 1115 DEMONSTRATION: FORMER FOSTER CARE YOUTH MONITORING REPORT DY6Q1 – DY10Q1 AND INTERIM EVALUATION REPORT

State: Virginia

<u>Demonstration Start and End Date</u>: January 1, 2020 – December 31, 2024 <u>Monitoring and Evaluation Period in this Report</u>: DY6Q1 – DY10Q1 (January 1, 2020 – March 31, 2024)

A. Introduction

Individuals in foster care face a number of challenges upon the termination of their state custodianship, including access to health care. The "Former Foster Care Child Under Age 26 Years" Medicaid covered group provides an opportunity for this population to continue receiving Medicaid coverage until age 26, allowing these individuals time to transition into managing the responsibilities of living independently.

In 2017, DMAS submitted and received approval of an amendment to the GAP Demonstration Waiver (now named "Building and Transforming Coverage, Services, and Supports for a Healthier Virginia") to provide Medicaid coverage to former foster care youth who were enrolled in Medicaid and foster care in another state and who are now living in Virginia and are applying for Virginia Medicaid.

Most recently on December 30, 2019, the Centers for Medicare and Medicaid Services (CMS) approved a five-year extension of Virginia's Medicaid demonstration, Addiction and Recovery Treatment Services (ARTS) Delivery System Transformation (Project Number 11-W0029713). Under the approved Special Terms and Conditions (STCs) DMAS continues to provide coverage to FFCY up to age 26 who aged out of foster care in another state and now reside in Virginia.

Virginia's overall goal for the FFCY benefit is to provide former foster care youth with the access to health services they need, through the Demonstration Waiver. The objectives of the FFCY demonstration are: (1) to increase and strengthen coverage of former foster care youth who were in Medicaid and foster care in a different state and (2) to improve or maintain health outcomes for these youth.

In consultation with CMS, it was decided that Virginia's FFCY reporting for DY6Q10-DY10Q1, as well as its FFCY Interim Evaluation Report, would be condensed into one report through a template developed by CMS. This report includes the Monitoring Reports and Interim Evaluation Report as required, per the demonstration's STCs, and will allow Virginia to efficiently submit monitoring data for all previous quarters for this demonstration population in addition to analyzing its process measures, per the state's approved Evaluation Design. Moving forward, DMAS will submit monitoring reports including both the FFCY and SUD reporting components of the Building and Transforming Coverage, Services, and Supports for a Healthier

Virginia 1115 Demonstration. Additionally, the summative evaluation for the demonstration will include both FFCY and SUD components. The draft Summative Evaluation Report will be due to CMS by July 1, 2026.

B. Eligibility and Enrollment Information, Including Member Month Reporting

Individuals eligible in this demonstration group are those former foster care youth who: (1) were in the custody of another state or American Indian tribe, (2) were receiving foster care and Medicaid services until discharge from foster care upon turning age 18 or older, (3) are not eligible in a mandatory Medicaid coverage group, and (4) are under the age of 26. All individuals in the Former Foster Care Child Under Age 26 covered group receive the full Medicaid benefit package, including long-term supports and services, if medically necessary.

TABLE 1: FFCY Eligibility and Enrollment Information

Month	Count	Narrative
Total Enrollmen Total number u	-	olled (as of the last day of the month)
January 2020	47	To date, Virginia's demonstration has ensured access to Medicaid
February 2020	51	services for FFCY between the ages of 18 and 26, who previously resided in another state and are now covered through Virginia
March 2020	50	Medicaid. Based on an independent evaluation conducted by the
April 2020	50	Virginia Commonwealth University (VCU), during this reporting period enrollment has steadily increased overall. Statistical testing for
May 2020	52	change between periods is provided in the table at the end of Section C.
June 2020	56	of this document.
July 2020	58	Specifically, enrollment increased by the following percentages during
August 2020	60	each demonstration quarter:
September 2020	59	DY6Q1- enrollment increased by 6% - from 47 to 50 members.
October 2020	60	DY6Q2- enrollment increased by 8% - from 50 to 56 members. DY6Q3- enrollment increased by 5% - from 56 to 59 members.
November 2020	65	DY6Q4- enrollment increased by 24% - from 59 to 73 members.
December 2020	73	Total DY6 enrollment increase: 55% Virginia believes the 24% increase in enrollment between Q3 and Q4,
January 2021	73	as well as the overall 55% increase during DY6 may be related to the
February 2021	74	COVID-19 Public Health Emergency.
March 2021	76	DY7Q1- enrollment increased by 4% - from 73 to 76 members.
April 2021	77	DY7Q2- enrollment increased by 5% - from 76 to 80 members.
May 2021	80	DY7Q3- enrollment increased by 1% - from 80 to 81 members.
June 2021	80	DY7Q4- enrollment decreased by 1% - from 81 to 80 members. Total DY7 enrollment increase: 10%
July 2021	82	217 ememment mercuser 1070
August 2021	82	DY8Q1- enrollment increased by 3% - from 80 to 82 members.
September 2021	81	DY8Q2- enrollment decreased by 3% - from 82 to 80 members. DY8Q3- enrollment increased by 4% - from 80 to 83 members.
October 2021	82	D 10Q3- emonment increased by 470 - from 60 to 63 incinocis.

November 2021	81
December 2021	80
January 2022	83
February 2022	82
March 2022	82
April 2022	81
May 2022	83
June 2022	80
July 2022	83
August 2022	83
September 2022	83
October 2022	84
November 2022	87
December 2022	89
January 2023	92

DY8Q4- enrollment increased by 7% - from 83 to 89 members. Total DY8 enrollment increase: 11%

DY9Q1- enrollment increased by 8% - from 89 to 96 members. DY9Q2- enrollment increased by 4% - from 96 to 100 members. DY9Q3- enrollment increased by 12% - from 100 to 112 members. DY9Q4- enrollment increased by 5% - from 112 to 118 members. Total DY9 enrollment increase: 33%

DY10Q1- enrollment decreased by 8% - from 118 to 109 members.

Overall, enrollment of FFCY from out-of-state has increased 132%--

February 2023	93
March 2023	96
April 2023	97
May 2023	101
June 2023	100
July 2023	102
August 2023	108
September 2023	112
October 2023	115
November 2023	117
December 2023	118
January 2024	117
February 2024	114
March 2024	109

from 47 members in January 2020 to 109 members in March 2024. The increase in enrollment aligns with Virginia's efforts and expectations. Statistical testing for change between periods is provided in the table at the end of Section C.

New Enrollment

Total number of new enrollees (as of the last day of the month)

January 2020	2
February 2020	5
March 2020	1
April 2020	3

In DY6Q1 there were 8 new members, in DY6Q2 there were 10 new members, in DY6Q3 there were 4 new members, and in DY6Q4 there were 15 new members. The amount of new enrollees fluctuated month to month, with the largest numbers (38% of the total for the

		•
May 2020	3	demons
June 2020	4	Decemble between
July 2020	2	Emerge
August 2020	2	In DY7
September 2020	0	member
October 2020	1	were 3
November 2020	6	average the dem
December 2020	8	
January 2021	2	In DY8
February 2021	1	were 5
March 2021	3	DY6 an
April 2021	4	In DY9
May 2021	3	member
June 2021	2	were 10 DY8.
July 2021	4	D16.
August 2021	3	In DY1
September 2021	0	TT1
October 2021	1	The nui
November 2021	1	the end
December 2021	1	During
January 2022	3	During
February 2022	0	
March 2022	2	
April 2022	1	
May 2022	2	

demonstration year, or 15 out of 37 new members) in November and December. Virginia believes this 73% increase in new enrollees between Q3 and Q4 may be related to the COVID-19 Public Health Emergency.

In DY7Q1 there were 6 new members, in DY7Q2 there were 9 new members, in DY7Q3 there were 7 new members, and in DY7Q4 there were 3 new members. New enrollees remained relatively steady at an average of 2.1 new members per month, with 25 total new members for the demonstration year.

In DY8Q1 there were 5 new members, in DY8Q2 there were 3 new members, in DY8Q3 there were 5 new members, and in DY8Q4 there were 5 new members. DY8 new enrollments decreased by 51% from DY6 and by 28% from DY7.

In DY9Q1 there were 11 new members, in DY9Q2 there were 8 new members, in DY9Q3 there were 18 new members, and in DY9Q4 there were 10 new members. DY9 new enrollments increased by 62% from DY8.

In DY10Q1 there were 8 new members.

The number of new enrollments aligns with Virginia's expectations. Statistical testing for change between periods is provided in the table at the end of Section C. of this document.

During 2022 and 2023 Virginia Medicaid updated the website and

June 2022	0
July 2022	3
August 2022	1
September 2022	1
October 2022	0
November 2022	3
December 2022	2
January 2023	4
February 2023	2

resource material to highlight health care information for former foster care youth. Virginia includes questions about foster care in its Medicaid Application to identify potentially eligible recipients. Virginia also continues to share information about eligibility for FFCY from out of state through existing stakeholder meetings and statewide trainings. These stakeholder meetings and trainings involve local DSS staff who conduct Medicaid eligibility and enrollment for Virginia Medicaid, and continue to occur on at least a bi-monthly basis.

March 2023	5
April 2023	2
May 2023	5
June 2023	1
July 2023	5
August 2023	6
September 2023	7
October 2023	3
November 2023	4
December 2023	3
January 2024	1
February 2024	4
March 2024	3

Re-Enrollment

Total number of beneficiaries who disenrolled and later reenrolled within 3 months (as of the last day of the month)

0
0
0
0
0
0
0
0
0
0
0
0
0
0
0
0
0
0
0
0

There was one (1) re-enrollment during DYs 7, 8, and 10, for a total of three (3) re-enrollments during the reporting period. This indicates no significant findings, trends, or changes between periods. The number of re-enrollments were within Virginia's expected number of reenrollments during the demonstration period.

September 2021	0
October 2021	1
November 2021	0
December 2021	0
January 2022	0
February 2022	0
March 2022	0
April 2022	0
May 2022	0
June 2022	0
July 2022	0
August 2022	0
September 2022	0
October 2022	1
November 2022	0
December 2022	0
January 2023	0
February 2023	0
March 2023	0
April 2023	0
May 2023	0
June 2023	0
July 2023	0
August 2023	0
September 2023	0
October 2023	0
November 2023	0
December 2023	0
January 2024	1
February 2024	0
March 2024	0
Disenrollment	
1	

Total number of beneficiaries who disenrolled (as of the last day of the month)

January 2020	0	During DY6 there were 5 total disenrollments. During DY7 there were
February 2020	2	

March 2020 1 April 2020 0 May 2020 0 June 2020 0 July 2020 0 August 2020 1 September 2020 0 October 2020 0 November 2020 1 December 2020 0
May 2020 0 June 2020 0 July 2020 0 August 2020 1 September 2020 0 October 2020 0 November 2020 1
June 2020 0 July 2020 0 August 2020 1 September 2020 0 October 2020 0 November 2020 1
July 2020 0 August 2020 1 September 2020 0 October 2020 0 November 2020 1
August 2020 1 September 2020 0 October 2020 0 November 2020 1
September 2020 0 October 2020 0 November 2020 1
October 2020 0 November 2020 1
November 2020 1
110 vember 2020
December 2020 0
January 2021 0
February 2021 0
March 2021 1
April 2021 1
May 2021 1
June 2021 1
July 2021 0
August 2021 0
September 2021 0
October 2021 0
November 2021 0
December 2021 1
January 2022 1
February 2022 1
March 2022 1
April 2022 0
May 2022 0
June 2022 0
July 2022 2
August 2022 1
September 2022 1
October 2022 1
November 2022 0
December 2022 0
December 2022 0

5 disenrollments. During DY8 there were 8 disenrollments. During DY9 there were 11 disenrollments. Disenrollments increased to 17 members in Q1 of DY10, with 12 of those disenrollments in March 2024.

The disenrollment number is aligned with Virginia's expectations in relation to total disenrollments for DY6-DY9. In February of 2024, Virginia initiated its last group of redeterminations out of the unwinding cohort, which may have impacted the sharp increase in disenrollments DY10Q1.

The historical primary reason for disenrollment among Virginia's

former foster care program are "aging out" of the program. Recipients are frequently reminded to report address changes. DMAS will continue to monitor future months and quarters to determine whether any trends or findings need to be addressed.

February 2023	0
March 2023	1
April 2023	1
May 2023	2
June 2023	0
July 2023	0
August 2023	1
September 2023	0
October 2023	1
November 2023	2
December 2023	2
January 2024	2
February 2024	3
March 2024	12

C. Utilization Monitoring

The state will summarize utilization through a review of claims/encounter data for the demonstration population.

Virginia examined service usage of 4 (four) types of services to assess utilization and health outcomes for the demonstration population. Additionally, the count of beneficiaries with any claims includes services that were not chosen for monitoring but indicate that the beneficiary had access to care. Statistical testing for change between periods is provided in the table at the end of Section C. The total count of beneficiaries with any claim, with an ambulatory care visit, and with an emergency department visit have increased with statistical significance throughout this demonstration period. However, with the increase in beneficiaries enrolled in the FFCY population, the percent of users of each of the types of services assessed has not necessarily increased.

The encounter claims indicate that 90% of FFCY beneficiaries utilized any service in 2019, 70% in 2020, 75% in 2021, 69% in 2022, and 58% in 2023. In terms of ambulatory care visits, 76% of FFCY beneficiaries utilized these services in 2019, 54% in 2020, 59% in 2021, 53% in 2022, and 45% in 2023. Encounter claims indicate that 46% of FFCY beneficiaries utilized emergency department services in 2019, 40% in 2020, 31% in 2021, 37% in 2022, and 31% in 2023. Utilization of behavioral health appointments remained between 10% and 13% of FFCY beneficiaries during 2019 to 2022. However, in 2023 (DY9), this percentage of utilization decreased to 3% of FFCY beneficiaries. Finally, 2% of FFCY beneficiaries accessed inpatient behavioral health services in years 2019, 2020, and 2020. This utilization increased to 6% of beneficiaries in 2022, and then 4% in 2023.

Virginia believes that the COVID-19 Public Health Emergency had an impact on the percent of FFCY beneficiaries utilizing services during 2020. All types of services assessed aside from behavioral health appointments, decreased in percentage of users from 2019 to 2020. Between 2020 and 2021, percentage of beneficiaries with all claims, beneficiaries with ambulatory visits trended upward again.

TABLE 2: FFCY Utilization Monitoring

TABLE 2: FFCY	l Cunzation M	lomtoring			
Month	Benes with Any Claim	Benes with Primary Care Appointments	Benes with Behavioral Health Appointments	Benes with Emergency Dept. Visits	Benes with Inpatient Visits
January 2020	23	6	3	5	1
February 2020	24	7	2	6	1
March 2020	22	6	2	5	1
April 2020	20	3	1	6	3
May 2020	21	6	2	3	2
June 2020	27	7	2	10	2
July 2020	27	9	4	9	3
August 2020	27	6	4	6	2
September 2020	28	5	2	9	3
October 2020	25	7	3	6	2
November 2020	30	5	2	12	4
December 2020	32	6	1	9	1
January 2021	29	7	5	6	3
February 2021	30	7	2	10	1
March 2021	41	9	1	12	1
April 2021	39	8	3	8	2
May 2021	41	11	2	7	0
June 2021	41	12	3	7	2
July 2021	35	4	2	8	4
August 2021	37	5	3	6	3
September 2021	36	7	3	8	4
October 2021	37	5	4	8	2
November 2021	36	3	3	6	1
December 2021	32	1	2	5	1
January 2022	37	8	3	9	3

34	2	2	7	4
35	5	4	13	6
34	5	2	8	4
37	4	2	8	3
31	5	3	6	3
37	9	5	16	5
34	10	4	7	3
29	3	4	8	1
35	5	4	5	1
36	7	4	7	2
37	9	3	10	0
28	3	3	5	3
36	5	2	8	0
36	5	2	6	0
32	6	1	6	0
43	8	2	7	0
35	6	2	10	4
39	7	3	12	2
42	3	2	12	2
29	5	3	11	1
41	6	2	8	0
35	5	2	6	0
36	8	1	8	0
31	9	1	3	1
36	11	3	7	2
34	6	1	13	3
	35 34 37 31 37 34 29 35 36 37 28 36 36 32 43 35 39 42 29 41 35 36 31 36	35 5 34 5 37 4 31 5 37 9 34 10 29 3 35 5 36 7 37 9 28 3 36 5 36 5 32 6 43 8 35 6 39 7 42 3 29 5 41 6 35 5 36 8 31 9 36 11	35 5 4 34 5 2 37 4 2 31 5 3 37 9 5 34 10 4 29 3 4 35 5 4 36 7 4 37 9 3 28 3 3 36 5 2 36 5 2 32 6 1 43 8 2 35 6 2 39 7 3 42 3 2 29 5 3 41 6 2 35 5 2 36 8 1 31 9 1 36 11 3	35 5 4 13 34 5 2 8 37 4 2 8 31 5 3 6 37 9 5 16 34 10 4 7 29 3 4 8 35 5 4 5 36 7 4 7 37 9 3 10 28 3 3 5 36 5 2 8 36 5 2 8 36 5 2 6 43 8 2 7 35 6 2 10 39 7 3 12 42 3 2 12 29 5 3 11 41 6 2 8 35 5 2 6 36 8 1 8 31 9 1 3 36 11 3 7

^{*}Significant at 5% level

D. Grievances and Appeals

One (1) grievance was identified during this reporting period (January 1, 2020 through March 31, 2024). The grievance was related to reimbursement, was determined partially substantiated, and was resolved by the assigned MCO.

Year	Total Num of Benes	Num of Benes continuously enrolled	Benes with Any Claim	Benes with Ambulatory Care Visit	Benes with Emergency Dept. Visits	Benes with Inpatient Visit	Benes with Behavioral Health Encounter
2019	67	32	60	51	31	8	7
2020	102	59	71	55	41	13	13
2021	118	94	88	70	37	13	14
2022	131	108	90	70	48	15	13
2023	163	118	95	74	51	11	4
P-value	0.002*	0.005*	0.011*	0.02*	0.03*	0.42	0.73
Trend over time	significant	significant	significant	significant	significant	insignificant	insignificant

Two (2) appeals were filed during this reporting period by the demonstration population. Both were related to pharmacy services (benefit denial or limitation). The result was that the decision was overturned in both cases.

Due to the limited number (3) throughout the demonstration period, there are no patterns for grievances or appeals and therefore no specific actions being taken to address any significant issues.

E. Operational/Policy/Systems/Fiscal Developments/Issues and Action Plans

This demonstration continues Medicaid coverage for an eligibility group that was previously covered under Virginia's State Plan. Virginia has not encountered any significant program developments, issues, or problems, and does not anticipate any in the near future. Current enrollees in this 1115 waiver will continue to be covered under this waiver. Any new enrollees from other states who turned 18 prior to January 1, 2023 will also be enrolled under this 1115 waiver.

F. Demonstration Evaluation Activities and Interim Findings

A summary of the demonstration's core evaluation questions and hypotheses are provided below. Process measures include enrollment and basic measures of utilization that allow us to track and monitor the number of members who are benefitting from the demonstration. Outcome measures would allow for a more comprehensive assessment of the impact of the demonstration. However, because the number of members included in the demonstration is small, the <u>evaluation design</u> is limited to an assessment of process measures.

Demonstration Goal	Expand access to Medicaid for former foster care youth who were in foster care and Medicaid in another state and are now applying for Medicaid in the state in which they live.
Evaluation Question 1 Hypothesis 1 Measure 1	Does the demonstration provide continuous health insurance coverage? Beneficiaries will be continuously enrolled for 12 months. Number of beneficiaries continuously enrolled / total number enrollees.
Hypothesis 2	How did beneficiaries utilize health services? Beneficiaries will access health services. Number of beneficiaries with ambulatory care, emergency department, inpatient, and behavioral health visits / total number of beneficiaries, respectively

This evaluation covered the January 2020 to March 2024 time period. The design for evaluating the demonstration was approved by CMS. No changes to the evaluation design are planned. No challenges have been encountered, and Virginia Commonwealth University continues to evaluate the data on a contract basis for this demonstration.

The demonstration has been successful in maintaining access to Medicaid for the former foster care youth who were in foster care and receiving Medicaid in another state and are now Virginia residents. The data indicates that the number of beneficiaries with continuous health coverage increased in each demonstration year with statistical significance. While 59 out of 102 FFCY beneficiaries (58%) were continuously enrolled in 2020, 94 out of 118 (80%) were continuously enrolled in 2021, 108 out of 131 (82%) were continuously enrolled in 2022, and 118 out of 163 (72%) were continuously enrolled in 2023.

Utilization data discussed in Section C indicates the FFCY beneficiaries covered in this demonstration have access to ambulatory care, emergency department, inpatient, and behavioral health visits. They also utilized services not chosen for monitoring, which indicates they have access to multiple type of services. The encounter claims indicate that 70% of FFCY beneficiaries utilized a service in 2020, 75% in 2021, 69% in 2022, and 58% in 2023. Additional analysis can be found in Section C.

Due to Section 1002(a) of the SUPPORT Act providing state plan coverage to individuals who turn 18 on or after January 1, 2023 Virginia anticipates fewer individuals qualifying for coverage under the demonstration, and thus fewer new enrollees.

G. Budget Neutrality

Out-of-State FFCY Data Without Waiver

DY 6	DY 7	DY 8	DY 9

Member Months	1,212	1,332	1,437	1,255
Per Member Per Month (PMPM)	\$586.96	\$549.83	\$647.45	\$960.75
Total Expenditures	\$711,400	\$732,378	\$930,391	\$1,205,737

Out-of-State FFCY Data With Waiver

	DY 6	DY 7	DY 8	DY 9
Member Months	1,212	1,332	1,437	1,255
Per Member Per Month (PMPM)	\$586.96	\$549.83	\$647.45	\$960.75
Total Expenditures	\$711,400	\$732,378	\$930,391	\$1,205,737