

# Minnesota Prepaid Medical Assistance Project Plus (PMAP+)

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

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**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:**

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## **Attachments**

Attachment A – State Medicaid Services Advisory Committee, Nov. 2023 Agenda

Attachment B – Minnesota State Register Notice

Attachment C – Public GovDelivery Notice

Attachment D – Letter to Tribal Governments’ Leadership

Attachment E – Letters of Support

## 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**

<b>1115 Waiver Groups</b>	<b>Conditions</b>
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"> <li>• Pregnant person, or</li> <li>• Parent.<sup>1</sup></li> </ul>

**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

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<sup>1</sup> 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 GovDelivery<sup>2</sup> 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

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<sup>2</sup> 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**

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