



Minnesota Department of **Human Services**

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July 27, 2011

Ms. Cindy Mann  
Deputy Administrator and Director  
Center for Medicaid, CHIP and Survey & Certification  
7500 Security Boulevard  
Baltimore, MD

Re: Minnesota's Prepaid Medical Assistance Project Plus (PMAP+) §1115 Waiver Extension

Dear Ms. Mann:

Thank you for your letter of June 30, 2011 granting approval to extend Minnesota's Prepaid Medical Assistance Project Plus (PMAP+) §1115 waiver (No. 11-W-00039/5) through December 31, 2013 under the attached special terms and conditions, waivers, and expenditure authorities.

I accept the terms of the waiver for the extension period beginning July 1, 2011. My acceptance is made with the understanding that the following modifications to the special terms and conditions are acceptable to CMS:

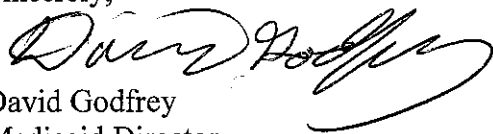
- a. Paragraph 17, item (b) (ii) should be amended as follows: American Indians, as defined in 25 U.S.C. §1603(c), who would not otherwise be mandatorily enrolled in managed care.
- b. Paragraph 35, item (a) should be amended as follows: American Indian Medicaid recipients, whether residing on or off a reservation, will have direct access to out-of-network services at IHS or 93-638 (IHS/638) facilities, or Urban Indian Organizations. DHS will purchase ~~these~~ IHS and 93-638 out-of-network services on a fee-for-service basis using payment rates negotiated between IHS and CMS, except when a 93-638 facility elects to receive the standard Medicaid rate. Physicians at IHS and 93-638 facilities will be able to refer recipients to specialists within the MCO network. Enrollees may not be required to see their MCO primary care provider prior to accessing the referral specialist.

In addition, I respectfully request that CMS consider the following changes to the special terms and conditions:

1. Amend the descriptions of populations 6 and 7 at paragraph 17, item (a) to include a cross reference to paragraph 21 for populations 6 and 7.
2. Delete paragraph 21(b), as it pertains to state law that was repealed effective July 21, 2011. Minnesota no longer needs this authority.
3. Paragraph 27, item (b) should read: The 4-month penalty under (a) above may not be applied to individuals described in paragraph ~~24~~25, items (b), (c), and (d).
4. Paragraph 29 should read: Benefits Package: MinnesotaCare Caretaker Adults. The benefit offered to MinnesotaCare Caretaker Adults (except pregnant women) is identical to the benefit offered to categorically eligible individuals under Minnesota's Medicaid State Plan, except that the services list in ~~(a)~~ (1) through ~~(h)~~ (8) are excluded, and inpatient hospital services are limited for certain participants as described in ~~(i)~~ (9) below.
5. Clarify in paragraphs 44 and 45 that expenditures and member months for populations 3, 4, 6 and 7 will be reported within the MinnesotaCare Children MEG.

Finally, Minnesota law now lifts the 6-month waiting period requirement for adults without children in the MinnesotaCare program, effective upon federal approval. Therefore, Minnesota renews its request to amend the PMAP+ waiver to include this population. We look forward to continuing to work with you and your staff on the PMAP+ demonstration project.

Sincerely,



David Godfrey  
Medicaid Director

cc: Victoria Wachino  
Keri Toback  
Jennifer Sheer  
Angela Garner