

Amendment to Minnesota’s Elderly Waiver Plan

New eligibility group served by Elderly Waiver (EW)

This amendment:

- Adds two waiver target subgroups of individuals who are age 65 and older
 - Disabled (Physical) age 65 and older
 - Disabled (other) age 65 and older
- Adds to EW, the MA eligibility group of working individuals with disabilities -Medical Assistance for Employed Persons with Disabilities (MA-EPD) who are age 65 and older

Elderly Waiver

Appendix B-1: Specification of the Waiver Target Group(s)

a. Target Group (s)

SELECT ONE WAIVER TARGET GROUP	TARGET GROUP/SUBGROUP	MINIMUM AGE	MAXIMUM AGE	
			MAXIMUM AGE LIMIT: THROUGH AGE –	NO MAXIMUM AGE LIMIT
<input checked="" type="checkbox"/>	Aged or Disabled, or Both - General			
<input checked="" type="checkbox"/>	Aged (age 65 and older)	65		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<u>Disabled (Physical)</u>	<u>65</u>		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<u>Disabled (Other)</u>	<u>65</u>		<input checked="" type="checkbox"/>
<input type="checkbox"/>	Aged or Disabled, or Both - Specific Recognized Subgroups			
<input type="checkbox"/>	Brain Injury			<input type="checkbox"/>
<input type="checkbox"/>	HIV/AIDS			<input type="checkbox"/>
<input type="checkbox"/>	Medically Fragile			<input type="checkbox"/>
<input type="checkbox"/>	Technology Dependent			<input type="checkbox"/>
<input type="checkbox"/>	Intellectual Disability or Developmental Disability, or Both			
<input type="checkbox"/>	Autism			<input type="checkbox"/>
<input type="checkbox"/>	Developmental Disability			<input type="checkbox"/>
<input type="checkbox"/>	Mental Retardation			<input type="checkbox"/>

Appendix B-4: Eligibility Groups Served in the Waiver

b. Medicaid Eligibility Groups Served in the Waiver

<i>Eligibility Groups Served in the Waiver (excluding the special home and community-based waiver group under 42 CFR §435.217)</i>	
<input type="checkbox"/>	Low income families with children as provided in §1931 of the Act
<input type="checkbox"/>	SSI recipients
√	Aged, blind or disabled in 209(b) states who are eligible under 42 CFR §435.121
<input type="checkbox"/>	Optional State supplement recipients
√	Optional categorically needy aged and/or disabled individuals who have income at: <i>(select one)</i>
<input type="radio"/>	100% of the Federal poverty level (FPL)
√	95% of FPL, which is lower than 100% of FPL Specify percentage:
√	<u>Working individuals with disabilities who buy into Medicaid (BBA working disabled group as provided in §1902(a)(10)(A)(ii)(XIII) of the Act)</u>
<input type="checkbox"/>	Working individuals with disabilities who buy into Medicaid (TWWIA Basic Coverage Group as provided in §1902(a)(10)(A)(ii)(XV) of the Act)
<input type="checkbox"/>	Working individuals with disabilities who buy into Medicaid (TWWIA Medical Improvement Coverage Group as provided in §1902(a)(10)(A)(ii)(XVI) of the Act)
<input type="checkbox"/>	Disabled individuals age 18 or younger who would require an institutional level of care (TEFRA 134 eligibility group as provided in §1902(e)(3) of the Act)
√	Medically needy in 209(b) States (42 CFR §435.330)
<input type="checkbox"/>	Medically needy in 1634 States and SSI Criteria States (42 CFR §435.320, §435.322 and §435.324)
<input type="checkbox"/>	Other specified groups (include only the statutory/regulatory reference to reflect the additional groups in the State plan that may receive services under this waiver) <i>specify:</i>