

AMENDMENT

OFFERED BY M____.

Add at the end the following:

1 **SEC. ____.** **MAKING CERTAIN ADJUSTMENTS TO COV-**
2 **ERAGE OF HOME OR COMMUNITY-BASED**
3 **SERVICES UNDER MEDICAID.**

4 (a) INCREASING TRANSPARENCY OF HCBS COV-
5 ERAGE UNDER MEDICAID.—

6 (1) IN GENERAL.—Section 1915(c) of the So-
7 cial Security Act (42 U.S.C. 1396n(c)) is amend-
8 ed—

9 (A) in paragraph (2)—

10 (i) in subparagraph (E)—

11 (I) by inserting “, not less fre-
12 quently than” before “annually”; and

13 (II) by inserting “(including,
14 with respect to such information pro-
15 vided on or after July 9, 2027, the in-
16 formation specified in paragraph
17 (11))” before the period at the end;
18 and

19 (ii) by adding at the end the following
20 flush sentence:

1 “The Secretary shall make all information provided
2 under subparagraph (E) on or after the date of the
3 enactment of this sentence publicly available on the
4 website of the Centers for Medicare & Medicaid
5 Services.”; and

6 (B) by adding at the end the following new
7 paragraph:

8 “(11) For purposes of paragraph (2)(E), the
9 information specified in this paragraph is the fol-
10 lowing:

11 “(A) In the case of a State that limits the
12 number of individuals who may be provided
13 home or community-based services under a
14 waiver granted under this subsection and main-
15 tains a list of individuals waiting to enroll in
16 such waiver, a description of how the State
17 maintains such list, including—

18 “(i) information on whether the State
19 screens individuals on such list to deter-
20 mine whether such individuals are eligible
21 to receive such services under such waiver;

22 “(ii) information on whether (and, if
23 applicable, how often) the State periodi-
24 cally re-screens individuals on such list for
25 eligibility;

1 “(iii) the number of people on such
2 list of individuals waiting to enroll in such
3 waiver; and

4 “(iv) the average amount of time that
5 individuals newly enrolled in such waiver
6 within the past 12 months were on such
7 list of individuals waiting to enroll in such
8 waiver.

9 “(B) With respect to homemaker services,
10 home health aide services, personal care serv-
11 ices, and habilitation services furnished under
12 waivers under this subsection, by each such
13 service type—

14 “(i) for individuals newly receiving
15 such services within the past 12 months,
16 the average amount of time (which may be
17 determined using statistically valid random
18 sampling of such individuals) from when
19 such services are initially approved for
20 such an individual to when such individual
21 begins receiving such services; and

22 “(ii) the percentage of authorized
23 hours (which may be determined using sta-
24 tistically valid random sampling of individ-
25 uals authorized to receive such services)

1 that are provided within the past 12
2 months.”.

3 (2) CONFORMING AMENDMENTS.—Section 1915
4 of the Social Security Act (42 U.S.C. 1396n) is
5 amended—

6 (A) in subsection (i) by adding at the end
7 the following new paragraph:

8 “(8) REPORTING REQUIREMENT.—With respect
9 to homemaker services, home health aide services,
10 personal care services, and habilitation services pro-
11 vided under this subsection on or after July 9, 2027,
12 the State, not less frequently than annually, shall
13 provide to the Secretary the same information re-
14 garding such services as the State is required to pro-
15 vide under subsection (c)(11)(B).”;

16 (B) in subsection (j)(2)(E), by inserting
17 after the second sentence the following: “With
18 respect to any homemaker services, home health
19 aide services, personal care services, and habili-
20 tation services provided under this subsection
21 on or after July 9, 2027, the State, not less fre-
22 quently than annually, shall provide to the Sec-
23 retary the same information regarding such
24 services as the State is required to provide
25 under subsection (c)(11)(B).”; and

1 (C) in subsection (k)(3)(E)—

2 (i) by striking “and” after “the cost
3 of such services and supports,”; and

4 (ii) by inserting before the period, the
5 following: “, and with respect to home-
6 maker services, home health aide services,
7 personal care services, and habilitation
8 services provided under this subsection on
9 or after July 9, 2027, not less frequently
10 than annually, the same information re-
11 garding such services as the State is re-
12 quired to provide under subsection
13 (c)(11)(B)”.

14 (b) DEMONSTRATION PROGRAM TO EXPAND HCBS
15 COVERAGE UNDER SECTION 1915(c) WAIVERS.—Section
16 1915(c) of the Social Security Act (42 U.S.C. 1396n(c)),
17 as amended by subsection (a), is further amended—

18 (1) in paragraph (2)(E), by inserting “, and the
19 information specified in paragraph (12)(C)(v), when
20 applicable” after “paragraph (11)”; and

21 (2) by adding at the end the following new
22 paragraph:

23 “(12) DEMONSTRATION PROGRAM TO EXPAND
24 COVERAGE FOR HOME OR COMMUNITY-BASED SERV-
25 ICES.—

1 “(A) IN GENERAL.—

2 “(i) APPROVAL.—Not later than 24
3 months after the date on which the plan-
4 ning grants under subparagraph (B) are
5 awarded, notwithstanding paragraph (1),
6 the Secretary may approve a waiver that is
7 standalone from any other waiver approved
8 under this subsection for not more than 5
9 States, selected in accordance with clause
10 (ii), to include as medical assistance under
11 the State plan of such State, for the 3-year
12 period beginning on the date of such ap-
13 proval, payment for part or all of the cost
14 of home or community-based services
15 (other than room and board (as described
16 in paragraph (1))) approved by the Sec-
17 retary which are provided pursuant to a
18 written plan of care to individuals de-
19 scribed in subparagraph (C)(iii).

20 “(ii) SELECTION CRITERIA.—In se-
21 lecting States for purposes of clause (i),
22 the Secretary shall—

23 “(I) only select States that re-
24 ceived a planning grant under sub-
25 paragraph (B);

1 “(II) only select States that meet
2 the requirements specified in subpara-
3 graph (C) and such other require-
4 ments as the Secretary may determine
5 appropriate;

6 “(III) select States in a manner
7 that ensures geographic diversity;

8 “(IV) give preference to States
9 with a higher percentage (relative to
10 other States that apply to be selected
11 for purposes of clause (i)) of the total
12 State population residing in rural
13 areas (as determined by the Sec-
14 retary);

15 “(V) give preference to States
16 that have demonstrated more progress
17 in rebalancing long-term services and
18 supports systems under this title, as
19 determined based on the relative share
20 of individuals who use home or com-
21 munity-based services (as defined by
22 the Secretary) under this title as a
23 percentage of total individuals who
24 use long-term services and supports
25 (as defined by the Secretary) under

1 this title (in the most recent year for
2 which such data is available); and

3 “(VI) give preference to States
4 that pursue a waiver under this para-
5 graph that incorporates the provision
6 of mental health services for adults
7 with serious mental illness, children
8 with serious emotional disturbances,
9 or individuals with substance use dis-
10 order.

11 “(B) PLANNING GRANTS.—

12 “(i) IN GENERAL.—

13 “(I) APPROVAL.—Not later than
14 18 months after the date of the enact-
15 ment of this paragraph, the Secretary
16 shall award planning grants of not
17 more than \$5,000,000 each to not
18 more than 10 States for purposes of
19 preparing to submit a request for a
20 waiver under this subsection (includ-
21 ing for costs to implement the waiver
22 or other activities to expand the provi-
23 sion of home or community-based
24 services under this section) to provide
25 home or community-based services to

1 individuals described in subparagraph
2 (C)(iii).

3 “(II) SELECTION CRITERIA.—In
4 awarding planning grants under sub-
5 clause (I), the Secretary shall use the
6 selection criteria specified in sub-
7 clauses (III) through (VI) of subpara-
8 graph (A)(ii).

9 “(ii) CONSULTATION.—A State that is
10 awarded a planning grant under clause (i)
11 shall, in preparing to submit a request for
12 a waiver described in such clause, consult
13 with—

14 “(I) individuals in need of (and
15 not receiving) home or community-
16 based services, individuals receiving
17 home or community-based services,
18 and the caregivers of such individuals;

19 “(II) providers furnishing home
20 or community-based services; and

21 “(III) such other stakeholders, as
22 the Secretary may specify.

23 “(C) STATE REQUIREMENTS.—In addition
24 to the requirements specified under this sub-
25 section (except for the requirements described

1 in subparagraphs (C) and (D) of paragraph (2)
2 and any other requirement the Secretary deter-
3 mines to be inapplicable in the context of a
4 waiver relation to individuals who do not re-
5 quire the level of care described in paragraph
6 (1)), the requirements specified in this para-
7 graph are, with respect to a State, the fol-
8 lowing:

9 “(i) As of the date that such State re-
10 quests a waiver under this subsection to
11 provide home or community-based services
12 to individuals described in clause (iii), all
13 other waivers (if any) granted under this
14 subsection to such State meet the require-
15 ments of this subsection.

16 “(ii) The State demonstrates to the
17 Secretary that approval of a waiver under
18 this subsection with respect to individuals
19 described in clause (iii) will not result in a
20 material increase of the average amount of
21 time that individuals with respect to whom
22 a determination described in paragraph (1)
23 has been made will need to wait to receive
24 home or community-based services under

1 any waiver granted under this subsection,
2 as determined by the Secretary.

3 “(iii) The State establishes needs-
4 based criteria, subject to the approval of
5 the Secretary, to identify individuals for
6 whom a determination described in para-
7 graph (1) is not applicable, who will be eli-
8 gible for home or community-based serv-
9 ices under a waiver approved under this
10 paragraph, and specifies the home or com-
11 munity-based services such individuals so
12 eligible will receive.

13 “(iv) The State established needs-
14 based criteria for determining whether an
15 individual described in clause (iii) requires
16 the level of care provided in a hospital,
17 nursing facility, or an intermediate care fa-
18 cility for individuals with developmental
19 disabilities under the State plan or under
20 any waiver of such plan that are more
21 stringent than the needs-based criteria es-
22 tablished under clause (iii) for determining
23 eligibility for home or community-based
24 services.

1 “(v) The State attests that the State’s
2 average per capita expenditure for medical
3 assistance under the State plan (or waiver
4 of such plan) provided with respect to such
5 individuals enrolled in a waiver under this
6 paragraph will not exceed the State’s aver-
7 age per capita expenditures for medical as-
8 sistance for individuals receiving institu-
9 tional care under the State plan (or waiver
10 of such plan) for the duration that the
11 waiver under this paragraph is in effect.

12 “(vi) The State provides to the Sec-
13 retary data (in such form and manner as
14 the Secretary may specify) regarding the
15 number of individuals described in clause
16 (i) with respect to a State seeking approval
17 of a waiver under this subsection, to whom
18 the State will make such services available
19 under such waiver.

20 “(vii) The State agrees to provide to
21 the Secretary, not less frequently than an-
22 nually, data for purposes of paragraph
23 (2)(E) (in such form and manner as the
24 Secretary may specify) regarding, with re-
25 spect to each preceding year in which a

1 waiver under this subsection to provide
2 home and community-based services to in-
3 dividuals described in clause (iii) was in ef-
4 fect—

5 “(I) the cost (as such term is de-
6 fined by the Secretary) of such serv-
7 ices furnished to individuals described
8 in clause (iii), broken down by type of
9 service;

10 “(II) with respect to each type of
11 home and community-based service
12 provided under the waiver, the length
13 of time that such individuals have re-
14 ceived such service;

15 “(III) a comparison between the
16 data described in subclause (I) and
17 any comparable data available with
18 respect to individuals with respect to
19 whom a determination described in
20 paragraph (1) has been made and
21 with respect to individuals receiving
22 institutional care under this title; and

23 “(IV) the number of individuals
24 who have received home and commu-

1 nity-based services under the waiver
2 during the preceding year.”.

3 (c) NON-APPLICATION OF THE PAPERWORK REDUC-
4 TION ACT.—Chapter 35 of title 44, United States Code
5 (commonly referred to as the “Paperwork Reduction Act
6 of 1995”), shall not apply to the implementation of the
7 amendments made by subsections (a) and (b).

8 (d) CMS GUIDANCE TO STATES ON INTERIM COV-
9 ERAGE UNDER SECTION 1915 HOME AND COMMUNITY-
10 BASED SERVICES AUTHORITIES.—Not later than January
11 1, 2027, the Secretary of Health and Human Services
12 shall issue guidance to the States to clarify how a State
13 may provide, with respect to an individual who is eligible
14 for home and community-based services under section
15 1915 of the Social Security Act (42 U.S.C. 1396n), cov-
16 erage of such services pursuant to a provisional written
17 plan of care, pending finalization, with respect to such in-
18 dividual.

19 (e) FUNDING.—

20 (1) IN GENERAL.—There are appropriated, out
21 of any funds in the Treasury not otherwise obli-
22 gated, \$71,000,000 for fiscal year 2025, to remain
23 available until expended, to the Secretary of Health
24 and Human Services for purposes of carrying out

1 subsection (d) and the amendments made by sub-
2 section (b).

3 (2) RESERVATION FOR PLANNING GRANTS.—Of
4 the amount appropriated under paragraph (1), the
5 Secretary of Health and Human Services shall re-
6 serve \$50,000,000 of such amount to award plan-
7 ning grants under the demonstration program estab-
8 lished by the amendments made by subsection (b).

9 **SEC. _____. REMOVING CERTAIN AGE RESTRICTIONS ON**
10 **MEDICAID ELIGIBILITY FOR WORKING**
11 **ADULTS WITH DISABILITIES.**

12 (a) MODIFICATION OF OPTIONAL BUY-IN GROUPS.—

13 (1) IN GENERAL.—Section
14 1902(a)(10)(A)(ii)(XV) of the Social Security Act
15 (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)) is amended by
16 striking “but less than 65,”.

17 (2) DEFINITION MODIFICATION.—Section
18 1905(v)(1)(A) of the Social Security Act (42 U.S.C.
19 1396d(v)(1)(A)) is amended by striking “, but less
20 than 65,”.

21 (b) APPLICATION TO CERTAIN STATES.—A State
22 that, as of the date of enactment of this subtitle, provides
23 for making medical assistance available to individuals de-
24 scribed in subclause (XV) or (XVI) of section
25 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C.

1 1396a(a)(10)(A)(ii)) shall not be regarded as failing to
2 comply with the requirements of either such subclause (as
3 amended by subsection (a)(1)) or with section
4 1905(v)(1)(A) of the Social Security Act (42 U.S.C.
5 1396d(v)(1)(A)) (as amended by subsection (a)(2)) before
6 January 1, 2027.

7 **SEC. _____. MEDICAID STATE PLAN REQUIREMENT FOR DE-**
8 **TERMINING RESIDENCY AND COVERAGE FOR**
9 **MILITARY FAMILIES.**

10 (a) IN GENERAL.—Section 1902 of the Social Secu-
11 rity Act (42 U.S.C. 1396a), as previously amended by this
12 subtitle, is further amended—

13 (1) in subsection (a)—

14 (A) in paragraph (86), by striking “and”
15 at the end;

16 (B) in paragraph (87), by striking the pe-
17 riod at the end and inserting “; and”; and

18 (C) by inserting after paragraph (87), the
19 following new paragraph:

20 “(88) beginning January 1, 2028, provide, with
21 respect to an active duty relocated individual (as de-
22 fined in subsection (uu)(1))—

23 “(A) that, for purposes of determining eli-
24 gibility for medical assistance under the State
25 plan (or waiver of such plan), such active duty

1 relocated individual is treated as a resident of
2 the State unless such individual voluntarily
3 elects not to be so treated for such purposes;

4 “(B) that if, at the time of relocation (as
5 described in subsection (uu)(1)), such active
6 duty relocated individual is on a home and com-
7 munity-based services waiting list (as defined in
8 subsection (uu)(2)), such individual remains on
9 such list until—

10 “(i) the State completes an assess-
11 ment and renders a decision with respect
12 to the eligibility of such individual to re-
13 ceive the relevant home and community-
14 based services at the time a slot for such
15 services becomes available and, in the case
16 such decision is a denial of such eligibility,
17 such individual has exhausted the individ-
18 ual’s opportunity for a fair hearing; or

19 “(ii) such individual elects to be re-
20 moved from such list; and

21 “(C) payment for medical assistance fur-
22 nished under the State plan (or a waiver of the
23 plan) on behalf of such active duty relocated in-
24 dividual in the military service relocation State
25 (as referred to in subsection (uu)(1)(B)(i)), to

1 the extent that such assistance is available in
2 such military service relocation State in accord-
3 ance with such guidance as the Secretary may
4 issue to ensure access to such assistance.”; and
5 (2) by adding at the end the following new sub-
6 section:

7 “(uu) ACTIVE DUTY RELOCATED INDIVIDUAL; HOME
8 AND COMMUNITY-BASED SERVICES WAITING LIST.—For
9 purposes of subsection (a)(88) and this subsection:

10 “(1) ACTIVE DUTY RELOCATED INDIVIDUAL.—

11 The term ‘active duty relocated individual’ means an
12 individual—

13 “(A) who—

14 “(i) is enrolled under the State plan
15 (or waiver of such plan); or

16 “(ii) with respect to an individual de-
17 scribed in subparagraph (C)(ii), would be
18 so enrolled pursuant to subsection
19 (a)(10)(A)(ii)(VI) if such individual began
20 receiving home and community-based serv-
21 ices;

22 “(B) who—

23 “(i) is a member of the Armed Forces
24 engaged in active duty service and is relo-
25 cated to another State (in this subsection

1 referred to as the ‘military service reloca-
2 tion State’) by reason of such service;

3 “(ii) would be described in clause (i)
4 except that the individual stopped being
5 engaged in active duty service (including
6 by reason of retirement from such service)
7 and the last day on which the individual
8 was engaged in active duty service oc-
9 curred not more than 12 months ago; or

10 “(iii) is a dependent (as defined by
11 the Secretary) of a member described in
12 clause (i) or (ii) who relocates to the mili-
13 tary service relocation State with such
14 member; and

15 “(C) who—

16 “(i) was receiving home and commu-
17 nity-based services (as defined in section
18 9817(a)(2)(B) of the American Rescue
19 Plan Act of 2021) at the time of such relo-
20 cation; or

21 “(ii) if the State maintains a home
22 and community-based services waiting list,
23 was on such home and community-based
24 services waiting list at the time of such re-
25 location.

1 “(2) HOME AND COMMUNITY-BASED SERVICES
2 WAITING LIST.—The term ‘home and community-
3 based services waiting list’ means, in the case of a
4 State that has a limit on the number of individuals
5 who may receive home and community-based services
6 under section 1115(a), section 1915(c), or section
7 1915(j), a list maintained by such State of individ-
8 uals who are requesting to receive such services
9 under 1 or more such sections but for whom the
10 State has not yet completed an assessment and ren-
11 dered a decision with respect to the eligibility of
12 such individuals to receive the relevant home and
13 community-based services at the time a slot for such
14 services becomes available due to such limit.”.

15 (b) IMPLEMENTATION FUNDING.—There are appro-
16 priated, out of any funds in the Treasury not otherwise
17 obligated, \$1,000,000 for each of fiscal years 2025
18 through 2029, to remain available until expended, to the
19 Secretary of Health and Human Services for purposes of
20 implementing the amendments made by subsection (a).

