

| State | Waiver Name | Infrastructure Funding or Delivery System Changes | | | | | | Description | Expiration | Biden-era HRSN Framework? | |
|-------|---|---|--------------------|---------------------|-----------------|----------------|--|-------------|--|---------------------------|---|
| | | Housing Supports | Nutrition Supports | Employment Supports | Medical Respite | Other Supports | | | | | |
| AZ | Arizona Health Care Cost Containment System (AHCCS) | x | x | | | | | x | This waiver authorizes housing-related social needs services through the Housing and Health Opportunities (H2O) program (including up to six months of rent or temporary housing, tenancy-sustaining services, housing navigation, deposits, and medically necessary home modifications) and pre-release services for up to 90 days before release through a Reentry Demonstration Initiative. To qualify for H2O services, beneficiaries must both be experiencing or at risk of homelessness as defined by HUD AND have a documented clinical/social risk factor such as serious mental illness, a high-cost/high-needs chronic condition, or Arizona Long Term Care System (ALTCS) enrollment; reentry pre-release services are limited to individuals incarcerated in participating correctional facilities who would be Medicaid- or CHIP-eligible but for their incarceration status and have an expected release date within 90 days. | 9/30/2027 | x |
| AR | Arkansas Health and Opportunity for Me (ARHOME) | x | x | x | | | | x | This waiver uses Medicaid premium assistance to enroll the state's adult expansion population (ages 19-64) into Qualified Health Plans on the individual Marketplace in lieu of traditional Medicaid, and layers on voluntary "Life360 HOME" intensive care coordination and health-related social needs (HRSN) supports for three targeted populations: high-risk pregnant and postpartum individuals (Maternal Life360), rural beneficiaries with serious mental illness or substance use disorder (Rural Life360), and young adults at high risk of long-term poverty due to prior incarceration, foster care, or juvenile justice | 12/31/2026 | x |

Sources: Adapted from the [KFF Medicaid Waiver Tracker](#), based on [KFF analysis of state Section 1115 Medicaid waivers](#) posted to Medicaid.gov

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| | | | | | | | | involvement, plus veterans ages 19-30 at high risk of homelessness (Success Life360). | | |
| CA | BH-CONNECT | | x | | | | x | This waiver aims to transform the Medi-Cal behavioral health delivery system for members with significant behavioral health needs by expanding community-based and evidence-based services for children, youth, and adults; strengthening family-based services for children and youth (including those involved in child welfare); incentivizing behavioral health plans (BHPs) to improve access, outcomes, and delivery system reforms; and strengthening the behavioral health workforce. The demonstration also authorizes federal funding for short-term facility-based stays (for BHPs that commit to providing robust community-based services and meeting quality standards) and supports transitions out of facility-based care, community reintegration, and improved stability during vulnerable periods through transitional rent services, with focus on members who are homeless or at risk of homelessness. | 12/31/2029 | x |
| CA | CalAIM | x | x | | | x | x | This waiver provides the federal authority for a broad-based reform of Medi-Cal, shifting the program toward a statewide population health approach that integrates physical health, behavioral health, and local service providers, addresses social drivers of health, and pursues whole-person care, simplified enrollee navigation, and value-based payment reform. Subsequent CMS-approved amendments have layered on, among other things, the elimination of asset limits for certain non-MAGI low-income individuals, a 90-day pre-release Reentry | 12/31/2026 | x |

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| | | | | | | | | Demonstration Initiative for justice-involved populations, county-based Medi-Cal Managed Care model changes, coverage of traditional health care practices delivered through IHS/Tribal/urban Indian organization facilities, and Title XXI HRSN expenditure authority including transitional rent services as a Community Support. | | |
| CO | Expanding the Substance Use Disorder Continuum of Care | x | x | x | | | | This waiver allows Colorado to draw federal Medicaid funding for short-term substance use disorder (SUD) treatment in residential and inpatient settings that qualify as Institutions for Mental Disease (IMDs), with goals around treatment initiation, engagement, and retention, reduced overdose deaths, and reduced ED and inpatient utilization. Through subsequent amendments, the demonstration has expanded to cover IMD reimbursement for acute inpatient and residential stays for individuals with serious mental illness (SMI) or serious emotional disturbance (SED), pre-release services for adults and youth transitioning from correctional facilities, and HRSN supports (including pre-tenancy and tenancy-sustaining services, housing navigation, up to six months of rent or temporary housing (with utilities), one-time transition and moving costs, and nutrition supports such as medically-tailored meals, pantry stocking, and nutrition counseling/education). | 3/31/2026 | x |

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| DE | Diamond State Health Plan | | | x | x | | x | This waiver, originally approved in 1995, mandatorily enrolls most Medicaid beneficiaries in managed care organizations to expand coverage and control costs in Delaware. The waiver authorizes five components: the core designated state health program (DSHP) managed care program, the DSHP Plus managed long-term services and supports (MLTSS) program for elderly, disabled, and HIV/AIDS populations, the PROMISE program providing enhanced behavioral health HCBS for beneficiaries with serious mental illness or substance use disorder, coverage for former foster care youth from other states, and SUD treatment in IMD settings. | 12/31/2028 | |
| FL | Managed Medical Assistance | | x | | | | x | Florida's Managed Medical Assistance (MMA) program is a component of the Statewide Medicaid Managed Care (SMMC) program operated under a Section 1115 Research and Demonstration Waiver (Project No. 11-W-00206/4), originally approved as a pilot in 2005, rolled out statewide in 2014, and most recently extended through June 30, 2030. The waiver mandatorily enrolls most Florida Medicaid recipients into managed care plans to improve care coordination, expand access, and enhance fiscal predictability, and authorizes several demonstration components including the Healthy Behaviors program, the Low Income Pool (LIP), the Prepaid Dental Health Program, a retroactive eligibility waiver, and the Behavioral Health and Supportive Housing Assistance Pilot. | 6/30/2030 | |

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| HI | Hawaii QUEST Integration | x | x | x | x | x | x | Hawaii's QUEST Integration is a comprehensive Section 1115(a) Medicaid demonstration administered by the Department of Human Services, Med-QUEST Division (MQD), originally implemented on August 1, 1994, that uses capitated managed care to deliver health coverage to children and adults eligible under the State Plan and additional demonstration populations. In January 2015, the state combined its original QUEST program (families and children) with QUEST Expanded Access (QExA, serving aged, blind, and disabled populations) into the unified QUEST Integration program, which provides Medicaid State Plan benefits along with primary and acute care, behavioral health services, and both institutional and home and community-based long-term services and supports (LTSS) based on medical necessity and clinical criteria. | 12/31/2029 | x |
| IL | Illinois Healthcare Transformation | x | x | x | x | x | x | This waiver is administered by the Illinois Department of Healthcare and Family Services (HFS) to address HRSNs and root causes of health disparities through the state's Medicaid managed care program. The original demonstration authorized innovative SUD treatment in Institutes for Mental Diseases, SUD-related case management, and supportive employment services; the current five-year extension expands coverage to include housing support, food and nutrition services, employment assistance, non-medical transportation, medical respite, violence prevention and intervention, services addressing adverse childhood events, and pre-release services for individuals transitioning from incarceration and institutional settings. | 6/30/2029 | x |

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| KY | TeamKY | x | x | | x | x | | The Kentucky TEAMKY (formerly KY HEALTH) Section 1115 demonstration authorizes a statewide SUD treatment program with residential and inpatient care in IMDs, short-term inpatient treatment in IMDs for adults with SMI, Recovery Residence Support Services (RRSS) for SUD beneficiaries, HRSN services and infrastructure (including a recuperative care pilot and housing interventions), a Reentry Demonstration Initiative providing pre-release services for up to 60 days prior to release from correctional facilities, and continued Medicaid coverage for out-of-state former foster care youth (FFCY) under age 26. | 12/31/2029 | x |
| MD | HealthChoice | | x | | | | x | This waiver authorizes the state's statewide mandatory Medicaid managed care program along with a range of innovative pilot programs. The demonstration provides the full ASAM continuum of SUD treatment—including residential and withdrawal management services in IMDs (levels 3.1–3.7WM and inpatient level 4.0) for Medicaid beneficiaries aged 21–64 (extended to dual eligibles in 2020), as well as IMD services for individuals with SMI and serious emotional disturbance (SED); delivered through an integrated behavioral health carve-out administered by an ASO under the Behavioral Health Administration, and also authorizes mobile crisis and crisis stabilization services for SUD beneficiaries (effective June 2024) and the Increased Community Services (ICS) program. | 12/31/2026 | |

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| MA | MassHealth | x | x | x | | x | x | This waiver enables Massachusetts to maintain near-universal health coverage and authorizes the state's Accountable Care Organization (ACO) program and primary care sub-capitation, the Behavioral Health and Long-Term Services and Supports Community Partners (CP) program, the Safety Net Care Pool, the Hospital Quality and Equity Initiative (HQEI), the Flexible Services Program for HRSNs (housing and nutrition), the SUD and SMI/SED demonstrations (covering treatment in IMDs), the Reentry Demonstration providing services up to 90 days pre-release for justice-involved individuals, the Increased Community Services program, coverage for out-of-state former foster care youth, and other delivery-system reform initiatives that succeeded the prior DSRIP investments. | 9/30/2027 | x |
| MT | Montana Healing and Ending Addiction through Recovery and Treatment (HEART) | | x | | | | | This waiver enhances Montana's behavioral health continuum for Medicaid beneficiaries ages 18–64 with a SUD and/or SMI. The waiver authorizes Medicaid reimbursement for short-term residential treatment in IMDs for SUD and SMI, contingency management services for stimulant use disorder, pre-tenancy and tenancy support services to address housing insecurity, and a Reentry Demonstration providing targeted Medicaid services (in-reach case management, telehealth-based clinical consultation, and medication) for up to 30 days prior to release for justice-involved individuals with SUD and/or mental health diagnoses. | 6/30/2027 | |

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| NJ | New Jersey FamilyCare Comprehensive Demonstration | x | x | x | | | x | This waiver authorizes New Jersey to operate its Medicaid managed long-term services and supports (MLTSS) program, an integrated behavioral health delivery system that includes a comprehensive SUD continuum of care and the Behavioral Health Promoting Interoperability Program (BH PIP), home and community-based services for children and individuals with intellectual/developmental disabilities, the New Jersey Home Visiting pilot, adjunct services for youth with ASD up to age 21, expedited Medicaid financial eligibility for individuals placed under the Office of the Public Guardian, and 12 months of postpartum coverage. The demonstration also authorizes HRSN services, including housing supports (medically necessary home modifications/remediation, pre-tenancy and tenancy-sustaining services) and nutritional supports for pregnant individuals with pre-existing or gestational diabetes | 6/30/2028 | x |
| NM | Turquoise Care | x | x | x | | x | x | This waiver continues New Mexico's managed care, behavioral health, and HCBS authorities while adding new initiatives including a Reentry Demonstration Initiative providing up to 90 days of pre-release services (case management, MAT, diagnostic and treatment services, a 30-day prescription supply at release, CHW and peer support, Hepatitis C treatment, and family planning) for Medicaid-eligible individuals in tribal, state, or local jails, prisons, or youth correctional facilities, and a HRSN services program covering short-term post-hospitalization housing (with room and board for up to six months) and home-delivered meals for pregnant individuals with gestational diabetes, supported by up to \$99.4 million in HRSN infrastructure investment. The extension also incorporates priority items previously approved via the December 15, 2023 | 12/31/2029 | x |

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| | | | | | | | | amendment, including payment for legally responsible individuals providing personal care services under the Community Benefit and EPSDT programs, an increase in the Community Benefit enrollment cap from 6,789 to 7,789 and the supportive housing program cap (for individuals with SMI) from 180 to 450, continuous eligibility for children up to age six, and expansion of the Centennial Home Visiting Pilot to additional evidence-based models, alongside an expansion of pre-tenancy and tenancy-sustaining housing support providers beyond the Linkages Supportive Housing Program to include Local Lead Agency and Special Needs/Set Aside Housing Program providers. | | |
| NY | New York Medicaid Redesign Team | x | x | x | | x | x | This demonstration enrolls the majority of the state's Medicaid population in managed care (Mainstream MMC, Health and Recovery Plans (HARP), HIV Special Needs Plans, and the Managed Long-Term Care (MLTC) line of business comprising Partial Capitation, PACE, Medicaid Advantage Plus, and FIDA-IDD) and authorizes the Children's 1115 Waiver (managed care HCBS for medically fragile children, children with serious emotional disturbance, children with developmental disabilities, and developmentally disabled children in foster care, including Family-of-One Medicaid eligibility and Health Home care management as an HCBS), Community Oriented Recovery and Empowerment (CORE) rehabilitative services for HARP/HIV SNP/MAP enrollees, IMD transformation authority covering OASAS-Certified Title 14 NYCRR Part 820 residential SUD services (stabilization, rehabilitation, and reintegration), and a three-month nursing home benefit limit with associated lock-in policy for long-term nursing home stays in partially capitated MLTC plans. The NYHER amendment funds a Social Care Network | 3/31/2027 | x |

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| | | | | | | | | (SCN) program; nine regional lead entities delivering HRSN screening, navigation, and enhanced housing, nutrition, transportation, and social care management services to MMC members (launching January 1, 2025). The amendment also funds Career Pathways Training and Student Loan Repayment workforce initiatives, a statewide Health Equity Regional Organization (HERO), the Medicaid Hospital Global Budget Initiative (aligned with CMMI's AHEAD model for financially distressed safety-net hospitals), and provider payment rate floors of at least 80% of Medicare for primary, obstetric, and behavioral health care services. | | |
| NC | North Carolina's Medicaid Reform Demonstration | x | x | x | | x | x | This waiver continues North Carolina's three-track mandatory managed care design (Standard Plan, Behavioral Health/Intellectual and Developmental Disability Tailored Plans, and the Children and Families Specialty Plan), SUD treatment authority for beneficiaries in institutions for mental diseases, and the Healthy Opportunities Pilot (HOP) covering HRSN services including housing supports (pre-tenancy/tenancy-sustaining services, utility assistance, home remediation, accessibility modifications, plus newly authorized short-term rental assistance and short-term recuperative care/post-transition housing subject to CMS housing duration caps), nutrition supports (case management for food access, nutrition counseling, home-delivered and medically tailored meals, pantry stocking, nutrition prescriptions), and additional non-HRSN HOP services (interpersonal violence and toxic stress interventions, the CDC Diabetes Prevention Program, enhanced case management, linkages to health-related legal supports, and NMT/NEMT). The extension also adds seven new initiatives: (1) coverage for out-of-state Former Foster Care Youth until age | 12/9/2029 | x |

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| | | | | | | | | 26; (2) continuous eligibility for Medicaid children up to age 6 and 24-month continuous eligibility for children ages 6 through 18; (3) a Section 1915(i) Community Transition Benefit for individuals transitioning out of IMDs; (4) up to 90 days of reentry pre-release services for Medicaid-eligible incarcerated individuals in state/local jails, state prisons, youth correctional facilities, and tribal jails (aligned with SMDL #23-003); (5) up to \$100 million in workforce initiatives (Student Loan Repayment for Qualified Providers and a Behavioral Health and Long-Term Services and Supports Workforce program); (6) up to \$45 million in health IT investments (the BH and I/DD HIT Program for EHR adoption/upgrades and HIE/crisis-system connectivity, and the School Health Technology Program for Title I, tribal, and BH/I/DD specialty schools); and (7) up to \$381.9 million in time-limited Designated State Health Programs expenditure authority, with freed-up state funds dedicated to the reentry initiative, HOP geographic expansion, and new HOP services, and conditioned on the state's compliance with mental health parity requirements. | | |
| OR | Oregon Health Plan | x | x | x | | | x | The Oregon Health Plan (OHP) Section 1115 Demonstration covers roughly 1.48 million low-income Oregonians. The demonstration continues service delivery through Coordinated Care Organizations (CCOs) that provide integrated physical, behavioral, and oral health care under global budgets and the state's prioritized list of services, and advances the Oregon Health Authority's goal of eliminating health inequities by 2030. | 9/30/2027 | x |
| PA | Keystones for Health | x | x | | | | x | This waiver authorizes pre-release services up to 90 days prior to release under a Reentry Demonstration Initiative and HRSN services covering housing supports and | 12/31/2029 | x |

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| | | | | | | | | Food is Medicine/nutrition supports for qualifying Medicaid beneficiaries with specified clinical and social risk criteria. Separate continuous-eligibility authorities approved November 14, 2024 (multi-year for children through age six; 12 months post-release for individuals leaving state correctional facilities) face uncertain implementation following 2025 federal guidance shifts, and CMS approved an HRSN Provider Payment Rate Increase Attestation Table (Attachment J) on April 7, 2026 requiring behavioral health fee-for-service rate increases effective January 1, 2027 (DY3). | | |
| RI | Rhode Island Comprehensive Demonstration | x | x | | | | | This demonstration continues mandatory managed care for most Medicaid beneficiaries and authorizing HCBS for populations at risk of long-term care (elders 65+, adults with disabilities, Alzheimer's adults, 1915(c)-like groups), SUD treatment in IMDs, 1915(i)-like Home Stabilization Services, Rite Share premium assistance, a Marketplace Subsidy Program, and behavioral health, peer recovery, and family/youth support services. Key extension updates expand the Rite Smiles managed care dental program to all adult Medicaid beneficiaries, separate the Peer Recovery Specialist Program from the Family/Youth Support Partner Program, and remove inactive authorities; Rhode Island withdrew earlier requests for reentry/pre-release coverage, HRSN services, a contingency management pilot, and expanded complementary alternative medicine. | 12/31/2030 | |

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| TN | TennCareIII | | | | x | | x | This waiver operates statewide mandatory managed care through TennCare MCOs and TennCare Select with major authorities for TennCare CHOICES HCBS (adults 65+ and adults with physical disabilities), Employment and Community First (ECF) CHOICES HCBS for individuals with intellectual or developmental disabilities, the Katie Beckett (Part A) and Medicaid Diversion (Part B) groups for medically complex children, the Standard Spend Down population, a Designated State Investment Program, and uncompensated care payments. CMS most recently acknowledged Tennessee's addition of Supportive Home Care and Respite benefits to ECF CHOICES Group 7. | 12/31/2030 | |
| UT | Utah Medicaid Reform Demonstration | x | x | | | x | x | This waiver authorizes Utah's Adult Expansion (with mandatory employer-sponsored insurance enrollment), Targeted Adult Medicaid program, ESI and COBRA premium subsidies, SUD and SMI treatment in IMDs, comprehensive dental coverage for adults and pregnant/postpartum women, fertility preservation and IVF/genetic testing for qualifying conditions, a Reentry Demonstration Initiative providing pre-release services up to 90 days, and HRSN housing supports and infrastructure. CMS approved an amended Evaluation Design (Attachment M) on January 16, 2026 incorporating prior amendments from July 2, 2024 and January 8, 2025, and Utah is currently soliciting public comment on a 2027-2032 renewal. | 6/30/2027 | x |

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| VT | Global Commitment to Health | x | x | | | x | | This waiver operates statewide Medicaid through the Department of Vermont Health Access as a non-risk Prepaid Inpatient Health Plan, with major authorities for the Choices for Care HCBS program (highest, high, and moderate needs groups), VPharm and VPharm Expansion premium/copay assistance for Medicare beneficiaries, SUD and SMI treatment in IMDs (including the Lund Home for pregnant/postpartum and maternal populations), a Marketplace Subsidy Program, Community Rehabilitation and Treatment services for severe and persistent mental illness, a Supportive Housing Assistance Pilot, a Reentry Demonstration Initiative providing pre-release services up to 90 days, and HRSN housing supports and infrastructure. The demonstration also includes Vermont's distinctive Public Health, Health Care, and Health-Related Investments authority, permitting the state to direct demonstration funds toward state-funded health programs benefiting Medicaid, uninsured, and underinsured populations. | 12/31/2027 | x |
| WA | Washington Medicaid Transformation Project 2.0 | x | x | x | x | x | x | This waiver authorizes Medicaid Alternative Care (MAC) and Tailored Support for Older Adults (TSOA) services for adults 55+, Foundational Community Supports (supportive housing and employment), SUD and SMI treatment in IMDs, a Contingency Management pilot for SUD treatment, continuous eligibility for children and 12-month postpartum coverage, a Reentry Demonstration Initiative providing pre-release services up to 90 days from state prisons, county/city jails, youth correctional facilities, and tribal jails, HRSN services and infrastructure, and DSHP. On November 3, 2025, CMS approved an HRSN/DSHP-related Provider Payment Rate Increase Attestation Table (added to Attachment V) requiring behavioral health managed care rate increases effective July 1, 2025 (DY10); CMS | 6/30/2028 | x |

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| | | | | | | | | noted in that letter that it does not anticipate approving, renewing, or extending certain DSHP demonstration proposals going forward and has rescinded the November 2023 and December 2024 HRSN-related CMCS Center Informational Bulletins while reevaluating policy. | | |
| WV | West Virginia Creating a Continuum of Care for Medicaid Enrollees with Substance Use Disorders | | x | | x | | x | West Virginia's "Evolving West Virginia Medicaid's Behavioral Health Continuum of Care" Section 1115 Demonstration (formerly titled "Creating a Continuum of Care for Medicaid Enrollees with Substance Use Disorders") continues authorities for SUD treatment in IMDs, Peer Recovery Support Specialist services, and a managed care lock-in for beneficiaries enrolled in the Children with Serious Emotional Disorder 1915(c) Waiver (CSEDW). New extension authorities include a Reentry Demonstration Initiative providing pre-release services up to 90 days (case management, MAT, and a 30-day prescription supply upon release) for adults leaving state/local jails, state prisons, and youth correctional facilities; HRSN housing supports without room and board (including case management for access to housing and pre-tenancy navigation); post-overdose Quick Response Teams; and recovery-related support services to help SUD-affected individuals manage symptoms interfering with employment. | 12/31/2029 | x |