



Medicaid and CHIP Operations Group

March 26, 2026

Lee Grossman, Medicaid Agent
Wyoming Division of Health Care Financing
61010 Yellowstone Road, Suite 210
Cheyenne, WY 82002

RE: WY.0236.R07.00 1915(c) waiver renewal

Dear Lee Grossman:

The Centers for Medicare & Medicaid Services (CMS) is approving the state's request to renew 1915(c) Community Choices Waiver (CCW) for adults with physical disabilities 19 years and over and individuals over the age of 65. The CMS Control Number for the amendment is WY.0236.R07.00 and should be referenced on all future correspondence relating to this waiver renewal.

For this HCBS waiver, the state is a renewing this waiver. The effective date of the renewal is July 1, 2026.

This waiver will offer the following supports for waiver participants: Adult Day Services, Case Management, Homemaker, Personal Support Services, respite, Home Health Aide, Skilled Nursing, Assisted Living Facility, Assistive Technology, Companion, Environmental Modification, Home-Delivered Meals, Non-Medical Transportation, Personal Emergency Response System, Transition Intensive Case Management, and Transition Setup Expenses.

The state is making the following major changes: (1) Decreasing the total unduplicated number of participants to align with actual utilization levels, (2) Added Companion Services and Assistive Technology as new services to the waiver, (3) Updated service definitions for Adult Day, Homemaker, Home Health Aide, Respite, Case Management, Personal Support Services, Home Health Aide, Non-medical transportation, Assisted Living Facility Services, Home Delivered Meals and Personal Emergency Response Services, (4) Updated Rate methodology to include Companion Services, and updated cost estimates. No participants will lose access to services or waiver eligibility as a result of these changes.

The following number of unduplicated recipients and estimates of average per capita cost of waiver services have been approved:

Waiver Year	C Factor Estimates	D Factor Estimates	D' Factor Estimates	G Factor Estimates	G' Factor Estimates
Year 1	2,891	\$14,158	\$6,142	\$57,595	\$2,929
Year 2	2894	\$14,158	\$6,217	\$62,958	\$3,281
Year 3	2897	\$14,158	\$6,292	\$68,819	\$3,675
Year 4	2900	\$14,158	\$6,370	\$75,226	\$4,117
Year 5	2903	\$14,158	\$6,447	\$82,230	\$4,611

This approval is subject to your agreement to serve no more individuals than those indicated in “C Factor Estimates” shown in the table above. If the state wishes to serve more individuals or make any other alterations to this waiver, an amendment must be submitted for approval. The state may renew the waiver at the end of the five-year period by providing evidence and documentation of satisfactory performance and oversight.

It is important to note that CMS’ approval of this waiver solely addresses the state’s compliance with the applicable Medicaid authorities. CMS’ approval does not address the state’s independent and separate obligations under federal laws including, but not limited to, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, or the Supreme Court’s Olmstead decision. Guidance from the Department of Justice concerning compliance with the Americans with Disabilities Act and the Olmstead decision is available at http://www.ada.gov/olmstead/q&a_olmstead.htm.

Approval of this waiver action does not constitute confirmation by CMS that the state has fully expended federal funds attributable to the increased FMAP available under section 9817 of the American Rescue Plan Act of 2021.

If you have any questions concerning this information, please contact me at (410) 786-7561. You may also contact Elizabeth Heintzman at elizabeth.heintzman@cms.hhs.gov or (206) 615-2596.

Sincerely,

George P. Failla, Jr., Director
Division of HCBS Operations and Oversight

cc: Curtis Cunningham, CMS
Dominique Mathurin, CMS