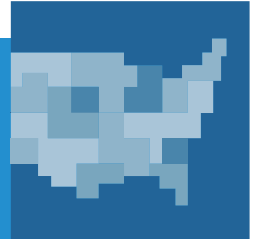


REPORT



October 2016

Medicaid Home and Community-Based Services Programs:

2013 DATA UPDATE

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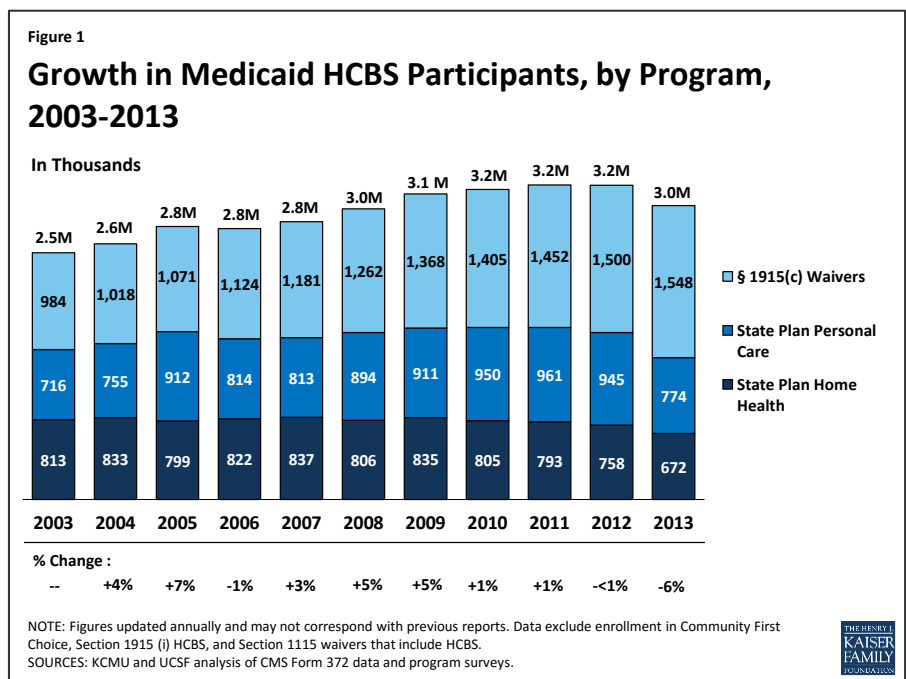
Executive Summary

As states continue to implement various aspects of the Affordable Care Act (ACA), developing and expanding home and community-based alternatives to institutional care remains a priority for many state Medicaid programs. 2013 marked the first time that home and community-based services (HCBS) accounted for a majority (51%) of national Medicaid long-term services and supports (LTSS) spending, increasing from 18 percent in 1995.¹ The share of Medicaid LTSS spending devoted to HCBS has continued to rise, reaching 53 percent in 2014.² At the same time, state Medicaid programs are operating at a time when state revenues are slowing, forcing more moderate spending growth and, as of 2016, continue to face the competing priorities of implementing the ACA’s streamlined eligibility and enrollment processes, determining whether to adopt the ACA’s Medicaid expansion, and pursuing a variety of delivery and payment system reforms.

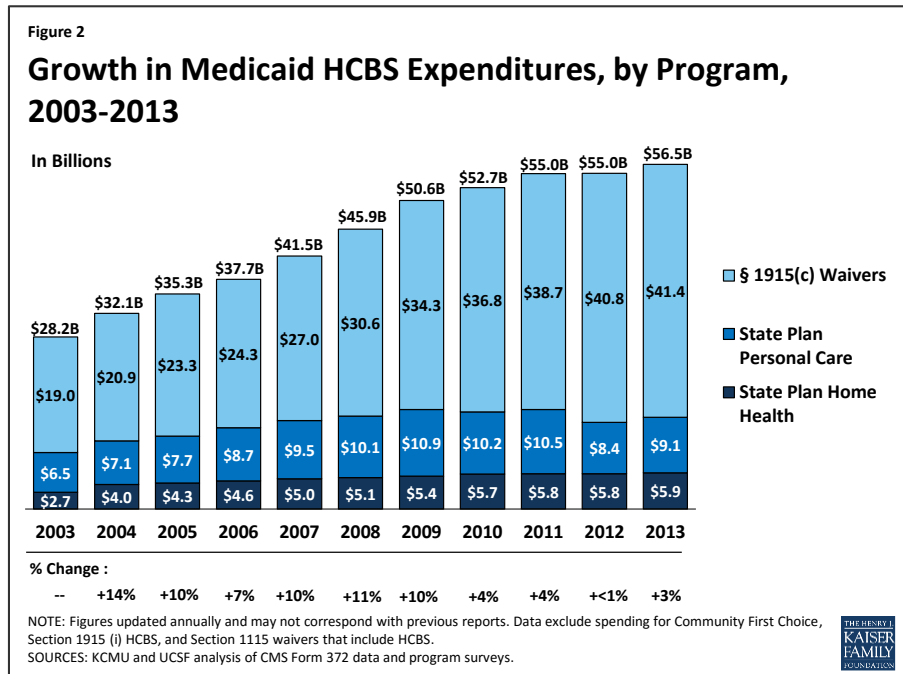
This report summarizes the key national trends to emerge from the latest (2013) participant and expenditure data for the three main Medicaid HCBS programs: (1) the mandatory home health services state plan benefit, (2) the optional personal care services state plan benefit, and (3) optional § 1915 (c) HCBS waivers. It also briefly discusses the provision of Medicaid HCBS through § 1115 demonstration waivers and highlights findings from a 2015 survey of Medicaid HCBS participant eligibility, enrollment, and provider reimbursement policies, including those related to the U.S. Department of Labor (DOL) direct care worker rules and the Centers for Medicare and Medicaid Services’ (CMS) home and community-based settings rule. States also may provide HCBS through various options offered by the ACA, which are outside the scope of this report.

KEY FINDINGS: TRENDS IN MEDICAID HCBS PARTICIPANTS AND EXPENDITURES, 2003–2013

- In 2013, almost 3 million people accessed LTSS through one of the three main Medicaid HCBS programs (Figure 1).** Within this population, the number of people receiving § 1915 (c) waiver services increased slightly from 2012 to 2013 (by 3%), while the number of people receiving personal care state plan services and home health state plan services decreased (by 18% and 11%, respectively). A total of 672,137 people received home health state plan services (in 50 states and DC), 774,243 received personal care state plan services (in 32 states), and almost 1.55 million were served through § 1915 (c) waivers (in 47 states and DC). The number of individual § 1915 (c) waivers declined slightly from 290 to 289 nationwide in 2013. States also may offer HCBS through the newer ACA options or § 1115 managed care programs instead of or in addition to these three authorities.

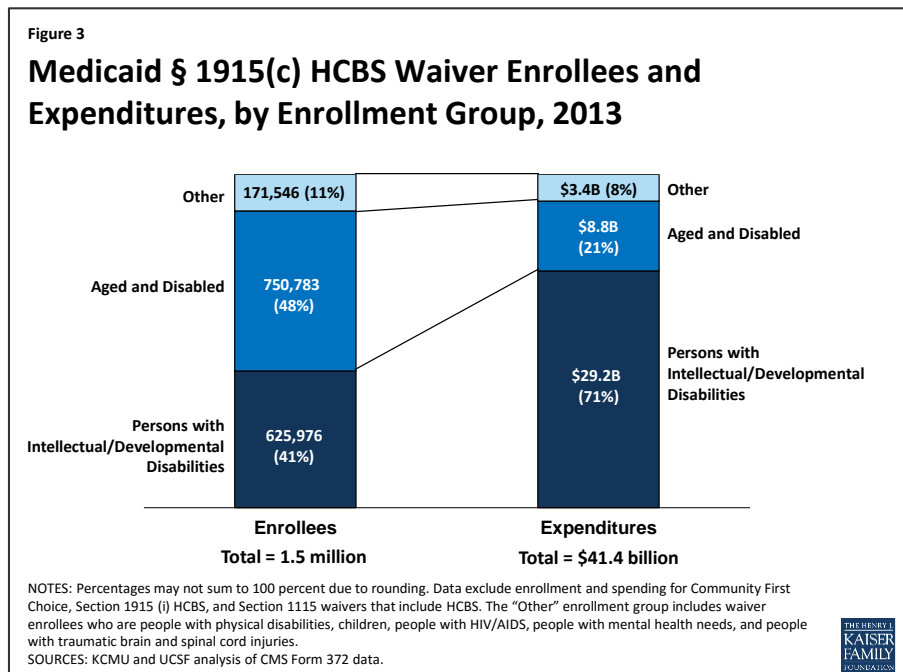


- In 2013, Medicaid HCBS expenditures for home health state plan services, personal care state plan services, and § 1915 (c) waivers totaled \$56.5 billion, increasing slightly from 2012, and lower than the 10-year average of seven percent (Figure 2). In 2013, spending growth in HCBS programs was led by personal care state plan services (9%) followed by home health state plan services (2%), while § 1915 (c) waivers increased by only one percent.



- Per participant annual spending on Medicaid HCBS averaged \$18,870 in 2013, but there was considerable variation among states and programs. Across states, Medicaid HCBS expenditures per participant served ranged from \$9,641 in Michigan to \$49,212 in Delaware. Per participant spending also varied across the three main HCBS programs, ranging from a national average of \$8,827 for home health state plan participants to \$26,768 for § 1915 (c) waiver participants. These program-to-program differences were due to the types and extent of services offered in the different home and community-based programs. Per participant spending also varied among § 1915 (c) waivers targeted to different beneficiary populations. For example, per participant spending in § 1915 (c) waivers targeted to beneficiaries with intellectual/developmental disabilities (I/DD) was considerably higher than for other beneficiary groups, reflecting the I/DD population’s relatively more intensive need for LTSS.

- The aged/disabled population made up the largest share of waiver enrollment (48%) but accounted for 21 percent of spending on waiver services in 2013 (Figure 3). People with I/DD accounted for 41 percent of HCBS waiver enrollment in 2013, but 71 percent of spending on waiver services was devoted to this population, again reflecting their more intensive need for LTSS relative to other groups.



- A minority of states use § 1115 demonstration waivers to

deliver HCBS through capitated managed care. As of 2013, three states (Arizona, Rhode Island, and Vermont) do not operate any § 1915 (c) waivers and instead use § 1115 waivers to administer statewide Medicaid managed care programs that include all covered HCBS for all populations and services. Another five states (Delaware, Hawaii, New York, Tennessee, and Texas) use § 1115 waivers for capitated Medicaid managed care programs that include HCBS for at least some geographic areas and/or populations.

2015 POLICIES IN MEDICAID HCBS PROGRAMS

- **In 2015, all states reported using cost controls in § 1915 (c) waivers, such as restrictive financial and functional eligibility standards, enrollment limits, or waiting lists.** About 25 percent of § 1915 (c) waiver programs used financial eligibility standards that were more restrictive than those used to determine eligibility for Medicaid coverage for institutional care. However, six § 1915 (c) waivers used more restrictive functional eligibility criteria than those used for institutional care. More than one half of states offering personal care state plan services (59%, or 20 states) had some form of cost controls in place, with the majority utilizing service unit limitations. Over half of states (59%, or 30 states) had some form of expenditure or service restriction in place in their home health state plan programs.
- **In 2015, more than 640,000 people were on 133 § 1915 (c) waiver waiting lists, and the average waiting time exceeded two years.** The growth in the number of people on waiting lists grew by 10 percent from 2014 to 2015, outpacing the growth rate of 8.5 percent in the previous period. The average national waiting time for § 1915 (c) waiver services was 27 months, with wide variations among waivers for different target populations and across states. The average length of time a person spent on a waiting list ranged from four months for HIV/AIDS waivers to 43 months for I/DD waivers.
- **The use of beneficiary self-direction as an alternative service delivery model was present in each of the three major Medicaid HCBS programs.** The self-direction model includes initiatives such as beneficiary choice in the allocation of Medicaid service budgets and/or the selection and dismissal of service providers. Forty-three states (or 91%) with § 1915 (c) waivers permitted or required self-direction in at least one of their waivers in 2015. Of the states offering personal care state plan services, 24 (or 71%) permitted self-direction. In contrast, seven states (or 14%) allowed self-direction of home health state plan services in 2015.
- **In 2015, seven states reported plans to restrict caregiver hours or make other policy changes in response to the DOL direct care worker minimum wage and overtime rules, and six states had cost or service caps on self-directed services in place in 2015.** Seven states indicated that state funds were budgeted for direct care worker overtime pay in FY 2016, and five states indicated state funds were budgeted for worker travel time.
- **Twenty-one states anticipated having to change state rules or policies as part of their transition to CMS's rule defining the qualities of home and community-based settings, as of 2015.** In addition, 11 states planned to submit information to CMS seeking to overcome the regulatory presumption that certain settings are institutional in nature.
- **Provider reimbursement rates increased slightly from 2014 to 2015, for both home health and personal care agencies.** The national average reimbursement rate per visit for home health agencies was \$92.69 and \$93.93 in 2014 and 2015, respectively. The hourly reimbursement rate for agencies providing personal care services increased slightly (\$18.82 in 2015 and \$18.73 in 2014).

Over the past three decades, the increase in access to community-based alternatives to institutional care has resulted in some rebalancing of national Medicaid LTSS dollars, but the size and scope of Medicaid HCBS programs vary across states. Section 1915 (c) waivers account for the majority (73%) of spending on LTSS provided in community settings. In the coming years, states will be challenged to continue to expand access to high quality, person-centered HCBS in a cost-effective manner, and it will remain important to monitor states' adoption of state plan options and other initiatives to expand Medicaid HCBS, differences in services and spending, and the impact of cost control policies on access and quality.

Introduction

Developing home and community-based alternatives to institutional care has been a priority for many state Medicaid programs over the past three decades. The national share of Medicaid long term services and supports (LTSS) spending on home and community-based services (HCBS) has nearly tripled, from 18 percent in 1995 to 53 percent in 2014.³ States' efforts to expand HCBS have been driven by beneficiary needs and preferences, the United States Supreme Court's 1999 *Olmstead* decision finding that the unjustified institutionalization of people with disabilities violates the Americans with Disabilities Act,⁴ and efforts to control growth in total LTSS expenditures. Spending on LTSS comprised 32 percent of total Medicaid spending in 2014,⁵ with HCBS typically costing less than comparable institutional care. Budgetary constraints during a time when overall state revenues are slowing, forcing more moderate spending growth across state budgets, and the administrative complexities of implementing and coordinating the various Medicaid LTSS options may pose challenges as states and the federal government continue to work to increase beneficiary access to HCBS and rebalance LTSS expenditures.

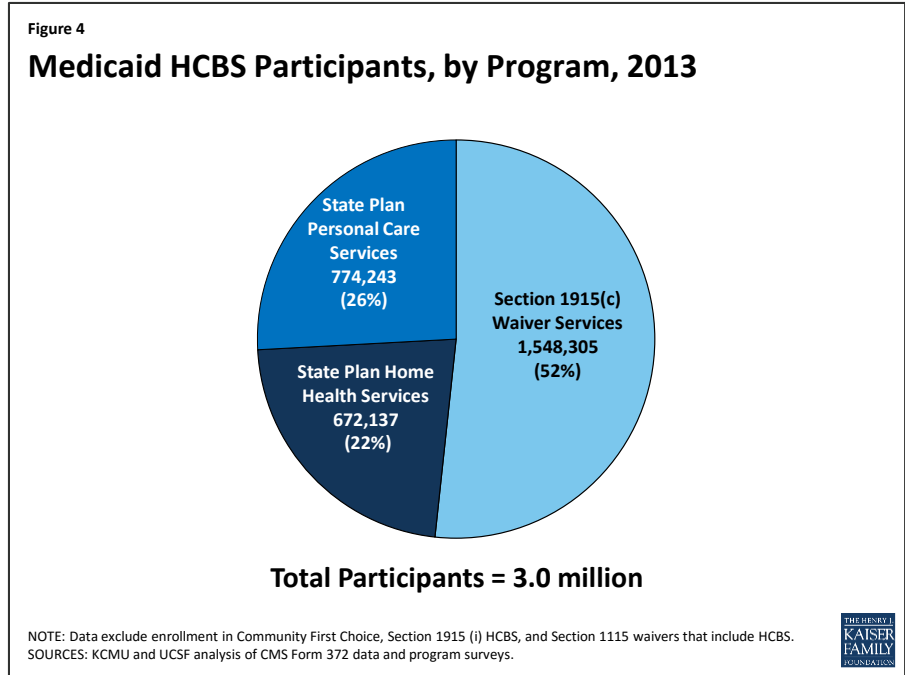
Over the last fifteen years, the Kaiser Family Foundation's Commission on Medicaid and the Uninsured (KCMU) has worked with researchers at the University of California, San Francisco (UCSF) to track the development of the three main Medicaid HCBS programs: (1) the home health services state plan benefit, (2) the personal care services state plan benefit, and (3) § 1915 (c) HCBS waivers. Medicaid HCBS also may be provided through options created and expanded by the Affordable Care Act (ACA), such as the § 1915 (i) HCBS state plan option, the Money Follows the Person demonstration,⁶ and the Community First Choice state plan option; participants and expenditures attributable to these programs are outside the scope of this report. In addition, a minority of states provide some or all of their HCBS through § 1115 demonstration waivers, which are briefly discussed in this report.

Beginning in 2002, we also surveyed the policies states use to control spending growth in § 1915 (c) waiver programs, such as eligibility criteria and waiting lists. In 2007, we expanded the policy survey to include home health and personal care services state plan benefits and, in 2015, we added questions about state policy changes in response to new U.S. Department of Labor (DOL) minimum wage and overtime rules affecting direct care workers and the Centers for Medicare and Medicaid Services' (CMS) rules defining characteristics of Medicaid home and community-based settings. In these state-level surveys, we collect data on eligibility criteria, providers, services, and reimbursement rates. This report summarizes the main trends to emerge from the latest (2013) participant and expenditure data for the three main Medicaid HCBS programs and findings from the 2015 survey of policies impacting the home health and personal care services state plan benefits and § 1915 (c) waivers.

MEDICAID HCBS PARTICIPANTS AND EXPENDITURES IN 2013

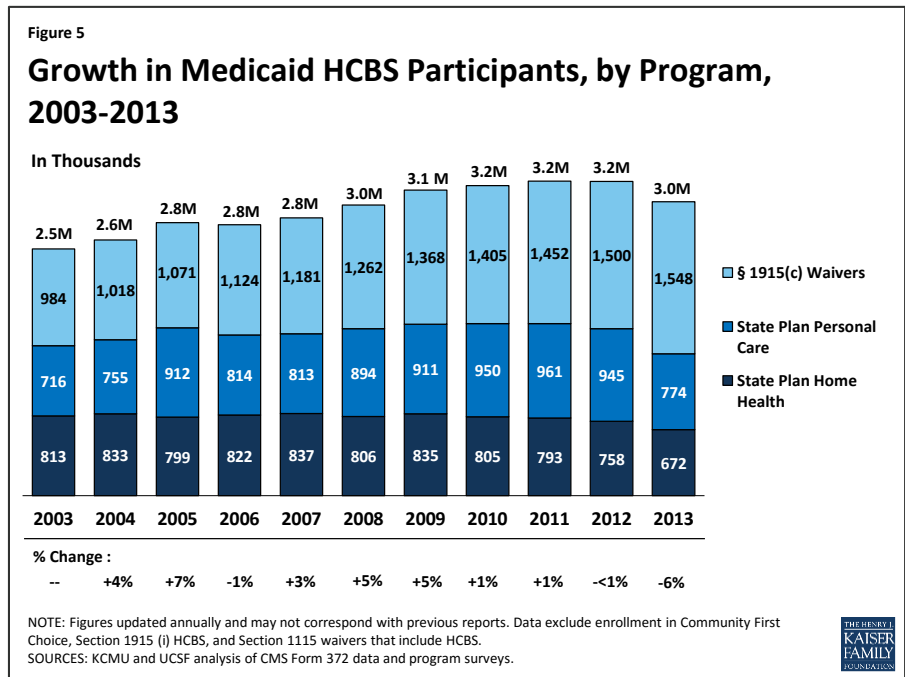
PARTICIPANTS IN MEDICAID HOME HEALTH AND PERSONAL CARE STATE PLAN SERVICES AND § 1915 (C) WAIVERS

In 2013, almost 3 million individuals received services through the three main Medicaid HCBS programs (Table 1A). Of those participants, 672,137 individuals received home health services through the mandatory state plan benefit, 774,243 individuals received personal care services through the optional state plan benefit, and 1,548,305 individuals were served through § 1915 (c) waivers (Figure 4). All states and DC offered the mandatory home health services state plan benefit in their Medicaid programs (Table 1B), while 32 states actively offered the optional personal care services state plan benefit,⁷ with Kansas as the latest state to elect this option in 2007 (Table 1C). Forty-seven states and DC operated multiple § 1915 (c) waivers in 2013 (Table 1D).



Participation in the three main HCBS programs declined by six percent between 2012 and 2013, the largest decline in the study period, and accelerating from less than a one percent decline the previous year. This was also well below the 10-year average growth rate of two percent (Table 1A and Figure 5). Some of this decline may be attributable to states offering HCBS through other authorities, such as Community First Choice, § 1915 (i), and/or § 1115 waivers.

Leading the 14 states with a decline in total HCBS enrollment between 2012 and 2013 was Delaware, with a 52 percent decline reported. Maine recorded the second largest decline

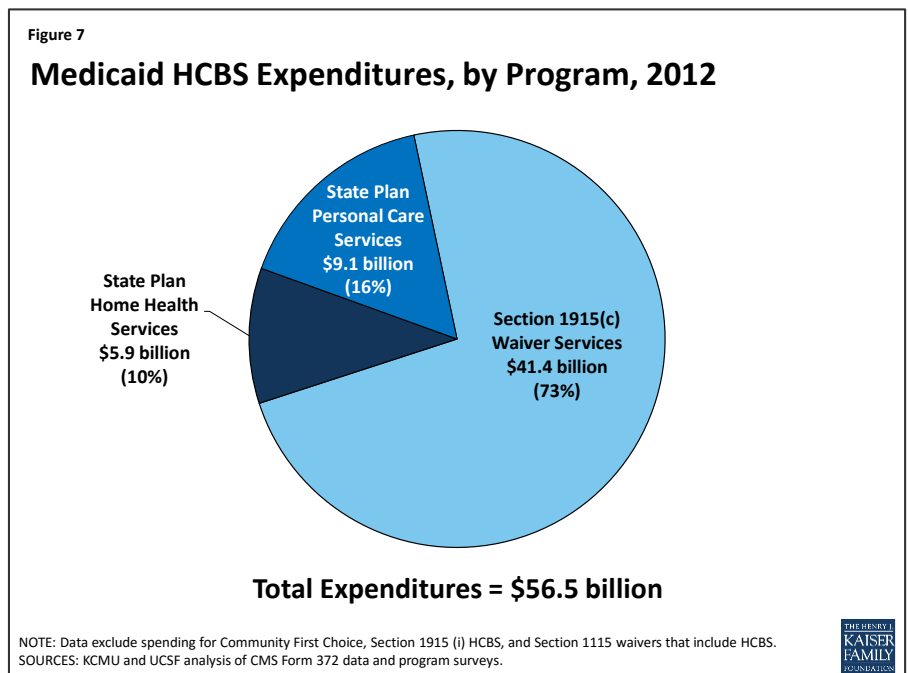
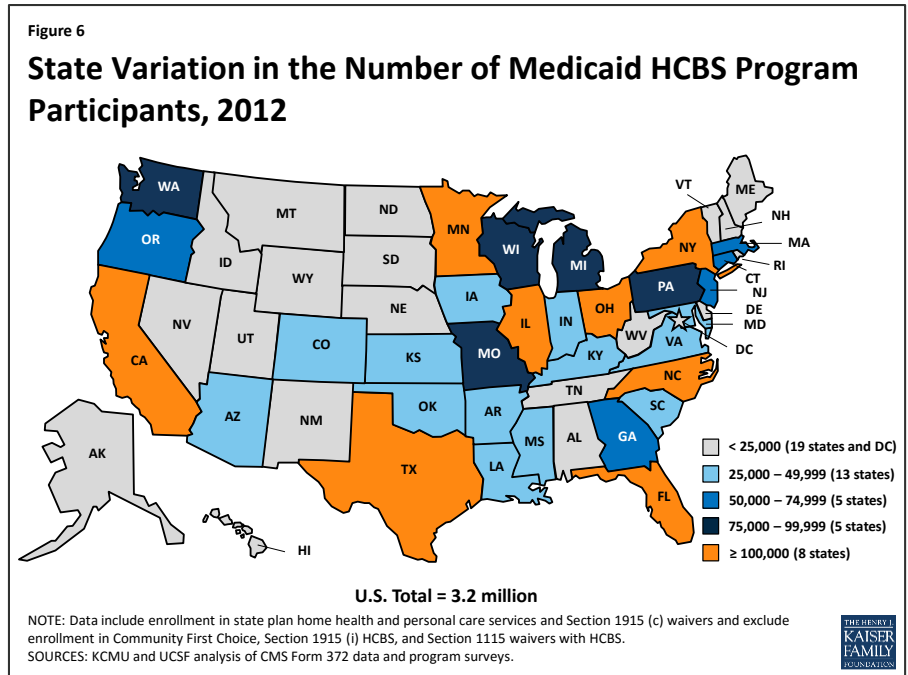


with a 44 percent drop in total HCBS enrollment between 2012 and 2013 (Table 1A). Delaware’s decline in total HCBS enrollment was due largely to a drop in its § 1915 (c) waiver enrollment as the state shifted most of these waivers to a § 1115 capitated managed care waiver. Maine’s overall decline could be due to its 78 percent drop in its home health program enrollment after two years of growth, attributed to changes in reporting. On the other hand, Indiana, Louisiana, and New Mexico saw the largest increases (16%, 14%, and 14%, respectively) in total HCBS participants in 2013. All three states’ participant growth was driven by large increases in their § 1915 (c) waiver programs.

The decline in total HCBS enrollment in 2013 was led by declines in participation in both the home health state plan program (-11%) and the personal care state plan program (-18%) (Tables 1B and 1C). Declines in participation rates in both programs accelerated from last year, some of which may be attributable to states offering services through Community First Choice, § 1915 (i), and/or § 1115 waivers. Oregon led the decline in home health program enrollment with an 87 percent drop, attributed to a change in reporting, while Texas led the decline in personal care state plan participation with an 80 percent drop in 2013, also attributed to a change in reporting. Nationally, § 1915 (c) waiver program participation increased by three percent from 2012 to 2013, the same rate of increase as the previous year, although nine states reported declines in participation led by Delaware (-71%) and Texas (-16%) (Table 1D). Delaware’s decline is attributable to the state discontinuing several § 1915 (c) waivers and instead providing services through a § 1115 waiver. Figure 6 illustrates the variation in total Medicaid HCBS program participation among the states.

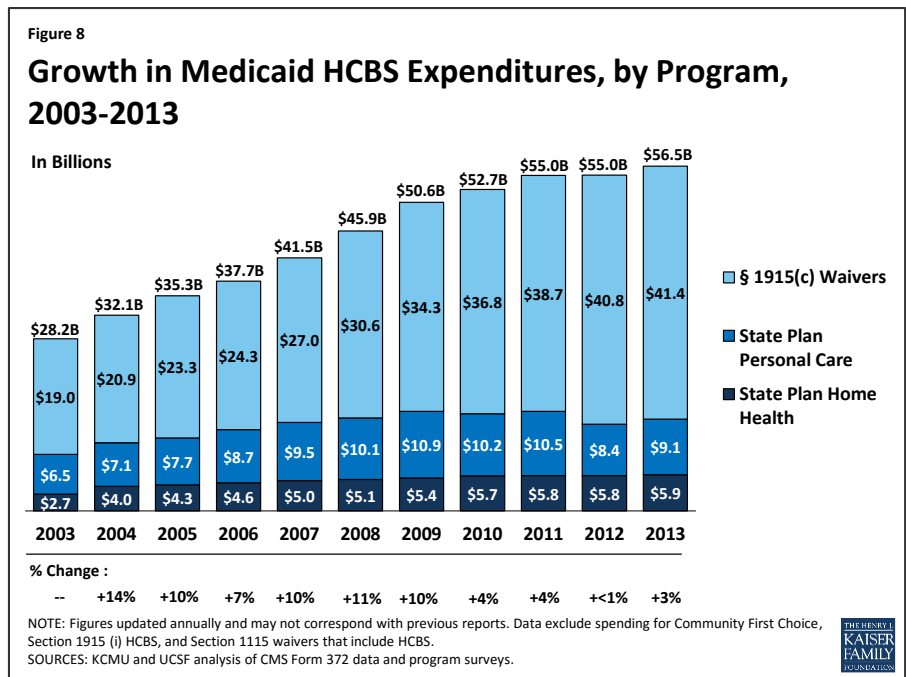
EXPENDITURES IN MEDICAID HOME HEALTH AND PERSONAL CARE STATE PLAN SERVICES AND § 1915 (C) WAIVERS

In 2013, total Medicaid spending on HCBS across the three main programs was \$56.5 billion (Table 2A). As in past years, the large majority of Medicaid



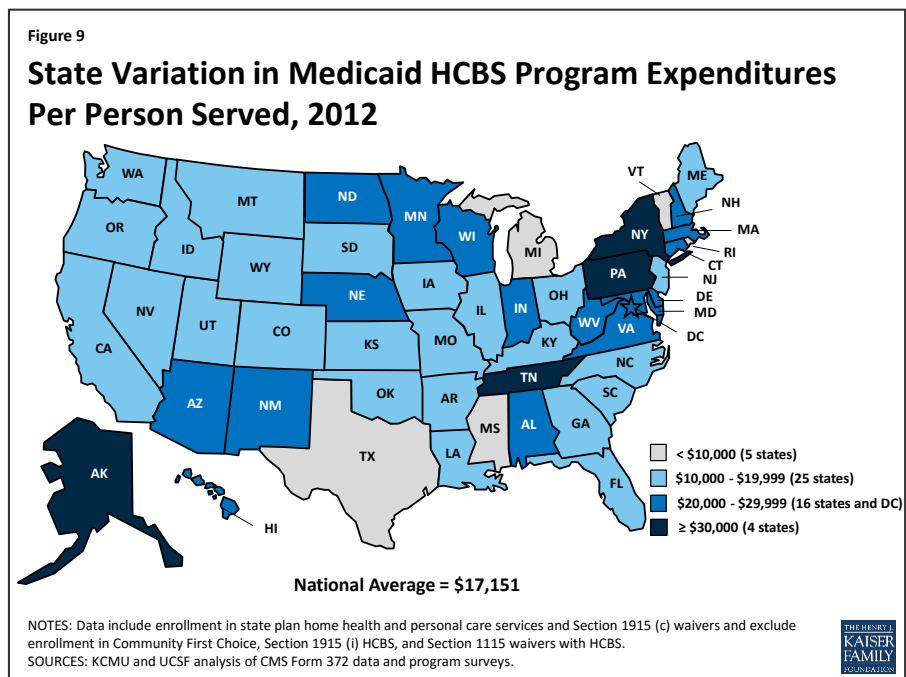
spending on HCBS was for § 1915 (c) waivers. In 2013, Medicaid spending on § 1915 (c) waivers was \$41.4 billion, compared to \$9.1 billion on personal care state plan services and \$5.9 billion on home health state plan services (Tables 2B, 2C, 2D and Figure 7).

Between 2003 and 2013, total annual Medicaid spending on HCBS in the three main programs doubled, with an average annual increase of seven percent (Figure 8). After the lowest growth in HCBS spending within the study period between 2011 and 2012, spending growth rebounded to three percent between 2012 and 2013. This was lower than the 6.9 percent growth recorded for total Medicaid spending during the same period.⁸ Amid slow growth in HCBS expenditures, nine states reported a decline in total Medicaid HCBS expenditures between 2012 and 2013. Declines were led by Oregon and Texas (-17% and -13% respectively) (Table 2A).



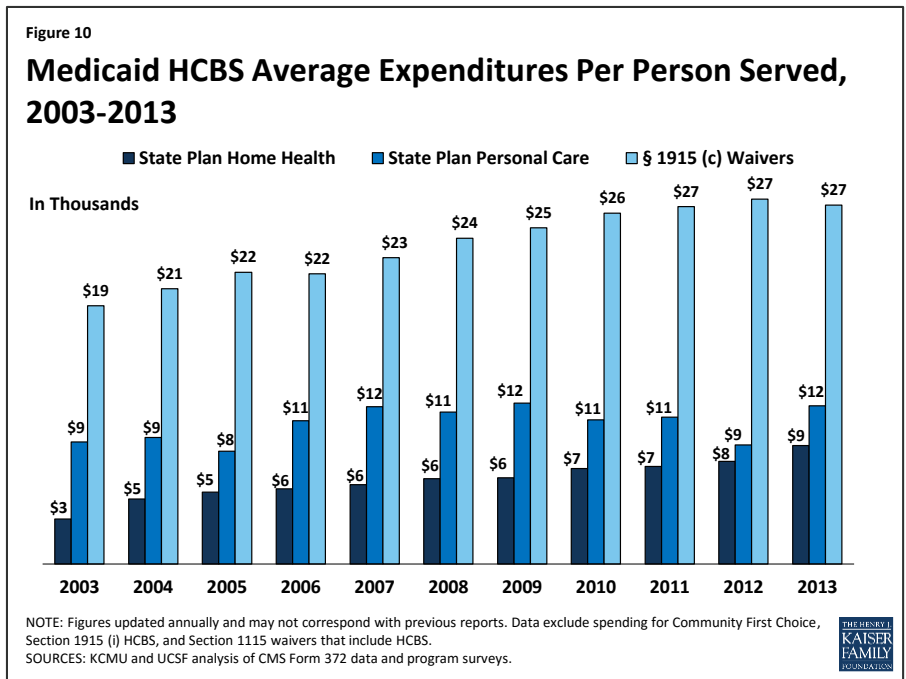
However, Medicaid HCBS expenditures as a proportion of total Medicaid LTSS expenditures continued to increase between 2012 and 2013 as they have done every year since 1995.⁹

National total Medicaid HCBS expenditure data mask state-to-state variations in spending across the three major programs. First, while national per participant spending on Medicaid HCBS averaged \$18,870 in 2013, state spending ranged from \$9,641 in Michigan to \$49,212 in Delaware (Table 3A and Figure 9). With the move of Delaware’s other HCBS waiver programs from § 1915 (c) to a § 1115 managed LTSS waiver, the only § 1915 (c) waiver remaining in Delaware is for people with intellectual or developmental disabilities (I/DD), and that population’s more intensive needs may account for the higher per participant spending.



Second, differences exist in spending across the three major Medicaid HCBS programs. National per participant expenditures ranged from \$8,827 for home health state plan services participants to \$26,768 for § 1915 (c) waiver participants in 2013 (Table 3B, 3C,

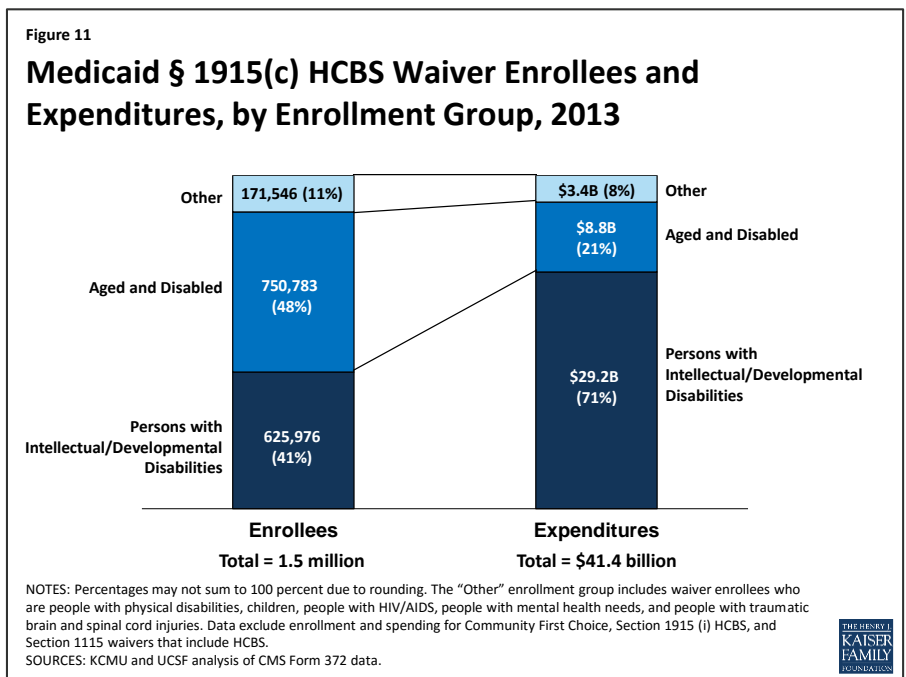
3D and Figure 10). This difference was likely due to the types and extent of services provided in each of the three main HCBS programs. The lower national per participant spending on home health state plan services likely reflects shorter periods of per participant service utilization compared to either § 1915 (c) waivers or the personal care services state plan option. Third, there was also significant per participant expenditure variation among § 1915 (c) waivers targeted to different populations (Tables 4 and 7).



MEDICAID § 1915 (C) WAIVERS

Between 2012 and 2013, the number of § 1915 (c) waivers declined slightly from 290 to 289. In 2013, with the exception of Arizona, Rhode Island, and Vermont, which operate their entire Medicaid LTSS programs through § 1115 waivers and therefore do not offer any § 1915 (c) waivers, every state and DC had at least one § 1915 (c) waiver targeted to populations that would otherwise require institutional care. These beneficiary groups include: the aged (age 65 and over), aged or disabled, individuals with physical disabilities, individuals with I/DD, children who are medically fragile or technology-dependent, individuals with HIV/AIDS, and individuals with traumatic brain and/or spinal cord injury (TBI/SCI).

Table 4 details, by waiver type, § 1915 (c) waiver enrollment, total expenditures, and per participant expenditures for the two most recent reporting years. In 2013, 1,548,305 participants were served through Medicaid § 1915 (c) waivers (Tables 4 and 5). The three percent (or 47,963 beneficiaries) increase from 2012 to 2013 is the same rate of increase as between 2011 to 2012. The largest share of § 1915 (c) waiver participants in 2013 (750,783 beneficiaries, or 48%) received services through waivers that targeted the aged and aged or disabled. The next largest group of waiver participants (625,976) was enrolled in § 1915 (c) waivers for people with I/DD, representing 41 percent of national § 1915 (c) waiver enrollment (Table 5 and Figure 11). Enrollment in waivers targeted solely to persons with



physical disabilities accounted for only six percent (88,949) of § 1915 (c) waiver participants nationwide. The § 1915 (c) waivers with the smallest enrollment were those for individuals with mental health disabilities (4,243), individuals with HIV/AIDS (12,287), individuals with TBI/SCI (17,134), and children who are medically fragile or technology-dependent (48,933) (Tables 4 and 5). The § 1915 (c) waivers with the largest annual increase in participation were those targeted to seniors (11%), followed by those serving children with disabilities (9%). There was a decline (-9%) in participants for waivers serving individuals with HIV/AIDS, the only decline recorded among all waiver groups (Table 4).

In 2013, overall expenditures for § 1915 (c) waivers increased to \$41.4 billion, a one percent increase compared to 2012, and a slowdown from the six percent rise recorded between 2011 to 2012. The vast majority of spending on § 1915 (c) waivers was for individuals with I/DD. Although individuals enrolled in I/DD waivers accounted for just 41 percent of total waiver participants, expenditures for this population accounted for 71 percent of all § 1915 (c) waiver spending (Tables 4 and 6 and Figure 10). Between 2012 and 2013, the annual rate of expenditure growth was highest for waivers serving seniors (15%) and children with disabilities (11%), primarily due to increases in participation. There was a sharp fall (-24%) in expenditures on waivers serving people with mental health disabilities (of which there are only five nationally) as well as a four percent decline recorded in waivers serving individuals with HIV/AIDS (Table 4).

Growth in § 1915 (c) waiver expenditures per participant declined by two percent from 2012 to 2013, the first decline since the study began, with a 10-year average growth of three percent (Tables 4 and 7). People with I/DD had the highest spending per participant served (\$46,644). Although this amount was more than four times higher than average waiver spending on both aged (\$11,907) and aged or disabled (\$11,689) waiver participants, average spending per I/DD participant fell by two percent from 2012. On the other hand, per participant expenditures grew by six percent from 2012 to 2013 for waivers for people with HIV/AIDS while waivers serving people with mental health disabilities and the aged and disabled fell by 28 percent and two percent respectively (Table 4).

MEDICAID § 1915 (C) WAIVER SERVICES

Our survey also collected service type data for individual § 1915 (c) waivers. States may provide many different services within these waivers, which our survey collapses into six categories: (1) case management; (2) respite/home health/personal care; (3) habilitation/day care; (4) nursing/therapy; (5) residential/foster care; and (6) other services. Participants within a waiver may use more than one service, and as such, the sum of these participants does not equal the unduplicated total waiver participants. Most participants (1,532,316) received “other” services including assistance with chores, meals, transportation, and home modifications. More than 866,000 participants received respite, home health or personal care services within these waivers in 2013, with Ohio providing these services to the most waiver enrollees (75,623) (Table 8).

Of the total \$41.4 billion spent on § 1915 (c) waivers in 2013, almost 40% (\$16.5 billion) was spent on habilitation or adult day care services, with New York spending more than \$5.1 billion and Pennsylvania spending more than \$1.7 billion. States spent more than \$12.3 billion on respite, home health or personal care services within § 1915 (c) waivers, with Ohio, Virginia and Wisconsin each spending more than \$1 billion on such services (Table 9). The most expensive waiver service on a per participant basis in 2013 was habilitation or adult day care services, with \$25,068 spent per waiver participant nationwide. There is large inter-state

variation in habilitation or adult day care services spending per participant, ranging from \$2,028 in New Jersey to \$62,304 in Massachusetts. Case management was the least expensive § 1915 (c) waiver service nationwide at \$1,786 per participant (Table 10).

HCBS AND MANAGED LTSS WITHIN § 1115 WAIVERS

In addition to the Medicaid home health and personal care services state plan benefits and § 1915 (c) waivers, states can deliver HCBS through § 1115 demonstration waivers.¹⁰ Section 1115 of the Social Security Act allows the Secretary of the Department of Health and Human Services to waive state compliance with certain federal Medicaid requirements and authorizes the use of federal Medicaid funds in ways that are not otherwise allowable. Section 1115 waivers enable “experimental, pilot or demonstration project[s] which, in the judgment of the Secretary, [are] likely to assist in promoting the objectives [of the Medicaid program].”¹¹ Section 1115 waivers have been used to implement a variety of initiatives related to HCBS, such as self-direction of personal care services,¹² payments to spouses who provide personal care services, and mandatory enrollment in capitated managed LTSS.

In 2013, three states (Arizona, Rhode Island, and Vermont¹³) used § 1115 waivers to administer statewide Medicaid capitated managed care programs¹⁴ that include all HCBS covered for all populations; these states do not offer any § 1915 (c) waivers. In 2013, Arizona spent \$1.1 billion on HCBS for 45,026 participants, Rhode Island spent \$481 million on HCBS for 4,912 participants, and Vermont spent \$254 million on HCBS for 5,212 participants.¹⁵ In addition to Arizona, Rhode Island, and Vermont’s statewide programs, another five states (Delaware, Hawaii, New York, Tennessee, and Texas)¹⁶ use § 1115 waivers for Medicaid capitated managed care programs that include HCBS for at least some populations in 2013 (not captured in this report); these states also offer § 1915 (c) waivers for other populations receiving HCBS (which are included in this report).¹⁷

ELIGIBILITY AND COST CONTAINMENT POLICIES USED IN MEDICAID HCBS PROGRAMS IN 2015

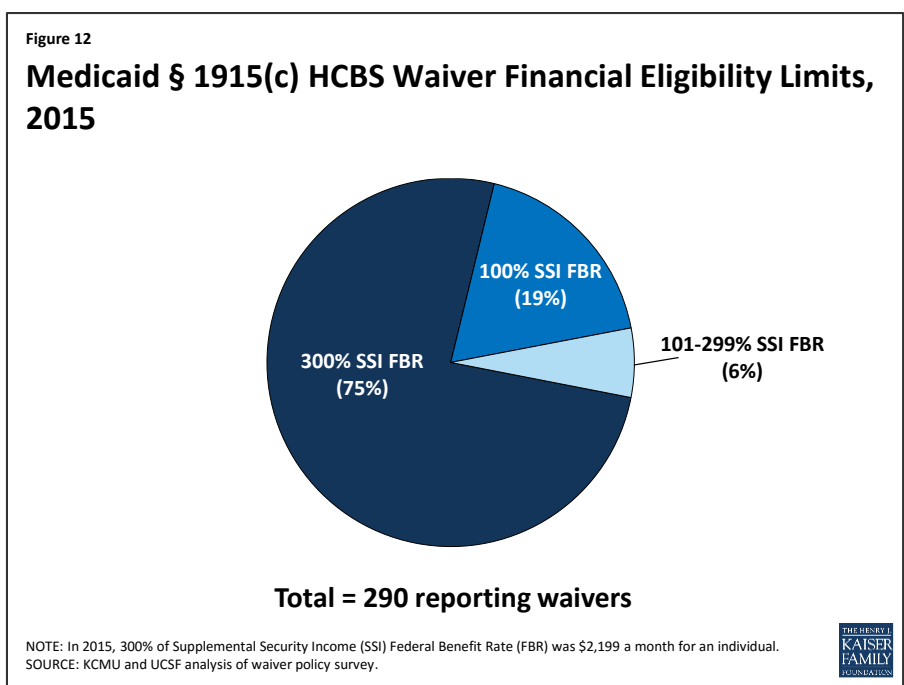
MEDICAID § 1915 (C) WAIVERS

The Medicaid § 1915 (c) waiver authority allows states to use a range of cost-containment strategies to meet federal cost neutrality requirements and limit spending so that expenditures do not exceed state budgetary restrictions. To understand how states controlled spending on HCBS waivers in 2015, we surveyed all state § 1915 (c) waiver program administrators to assess financial and functional eligibility standards, use of enrollment and/or expenditure caps, and waiting list status (i.e., number of individuals on the list(s) and average waiting time). The survey finds that every state used some type of cost-containment tool in its § 1915 (c) waivers beyond the federal cost neutrality requirement that average annual per participant waiver spending not exceed average per participant spending if services were provided in an institutional setting under the state plan absent the waiver. The following summary of the 2015 survey findings illustrates how states use cost control policies to limit access to § 1915 (c) waivers.

Financial Eligibility

Most states set their Medicaid financial eligibility standard for nursing facility services at 300 percent of the

Supplemental Security Income (SSI) federal benefit rate (\$2,199/month for an individual in 2015). States may set financial eligibility standards for Medicaid § 1915 (c) waivers at the same level as that for nursing facilities. There is, however, wide variation in financial eligibility standards across states and HCBS waiver programs as shown in Table 11. Twenty-five percent of reporting waiver programs used more restrictive financial eligibility standards (e.g., 100% of SSI) than used for nursing facilities (300% of SSI) in 2015 (Table 11 and Figure 12).



Functional Eligibility

Another way states limit eligibility for § 1915 (c) waivers is by using functional eligibility criteria that are stricter than those used to qualify for coverage of nursing facility care. For example, a state could require an individual to exhibit difficulty in performing at least three activities of daily living (ADLs, e.g., bathing, dressing, transferring, eating, toileting) for waiver eligibility but require limitations in only two ADLs for nursing facility services. The 2015 survey found that six § 1915 (c) waiver programs (2%) used functional eligibility criteria that are more restrictive than the criteria used for institutional care (no table shown); these waivers were reported in Alabama, Georgia, Idaho, Kansas, New York, and Wisconsin.

Cost Controls

Approximately 88 percent (42 states) of all states with § 1915 (c) waivers utilized some form of cost controls above and beyond the federally mandated cost neutrality formula in 2015. Many states used a mixture of fixed expenditure caps, service provision and hourly caps, and geographic limits (Table 12). Of the states with waiver cost controls in place, more than half (22 states) utilized more than one form, such as a combination of expenditure caps and service limitations (Table 12).

Self-Direction

Many states have incorporated some form of mandatory or optional self-direction within their § 1915 (c) waivers. The self-direction service delivery model can include initiatives such as beneficiary choice in the allocation of service budgets and/or the selection, training, and dismissal of service providers. In 2015, 43 states (91% of states) either allowed or required some form of self-direction (Table 12).

Policy Changes Related to U.S. Department of Labor Direct Care Worker Rules

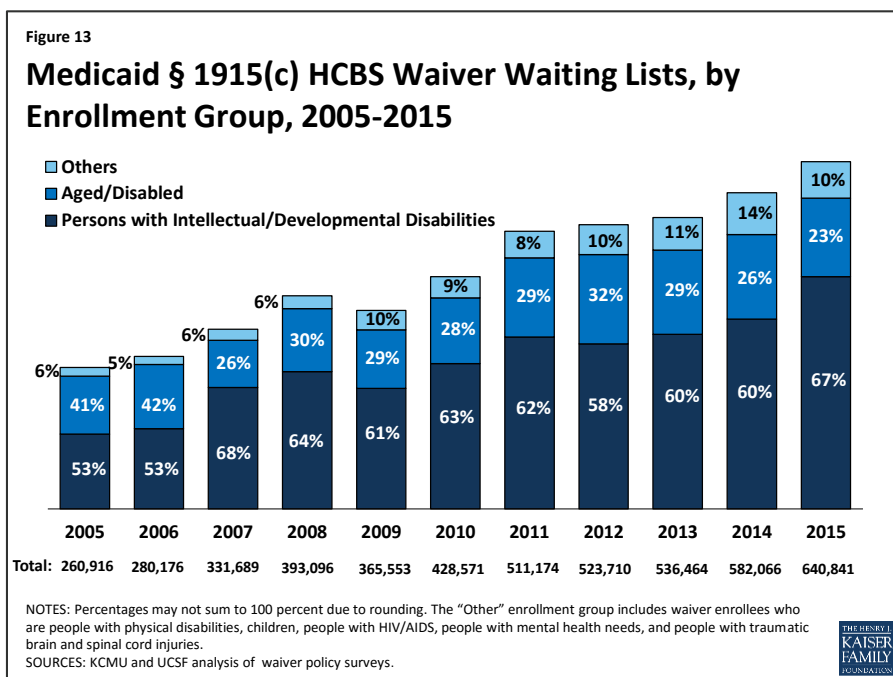
In 2015, states are working to implement the DOL rules that extend Fair Labor Standards Act (FLSA) minimum wage and overtime pay protections to direct care workers who previously were exempt from these requirements.¹⁸ Direct care workers who provide HCBS can include certified nursing assistants, home health aides, personal care aides, and other caregivers. The new DOL rules recognize the professionalization and

expansion of the direct care workforce as these workers provide increasingly skilled care and more people receive services at home instead of in institutions.¹⁹ The changes may affect Medicaid services provided through a self-directed model; CMS anticipates that “many states will determine that, for purposes of the FLSA, home care workers in self-direction programs have joint third party employer(s) [such as the state or another entity] in addition to being employed by the beneficiary”²⁰ and thus the state or other entity is subject to minimum wage and overtime requirements. Consequently, CMS observes that “many states will need to develop policies and consider programmatic changes to address the costs related to overtime and/or worker time spent traveling between worksites (i.e., individuals’ homes), to avoid or minimize negative impacts to individual [service] budgets, and to preserve the ability of individuals to self-direct services and supports effectively.”²¹ This year’s survey asked states about policy changes in response to the new DOL rules.

In 2015, 11 waivers in seven states (California, Kentucky, Maryland, Maine, New Mexico, Oregon, and Washington) planned to control caregiver hours or make other changes in response to the DOL minimum wage and overtime rules. For example, California increased provider payment rates to meet the DOL requirements, while four states were limiting caregiver hours as a result of the new rule (40 hours per week limit in Maine and New Mexico; 50 hour limit in Oregon; independent providers working over 40 hours in Washington may work overtime up to 65 hours). In addition, 12 waivers in six states (Louisiana, New Mexico, New York, Oregon, Texas, and Washington) had cost or service caps on self-directed § 1915 (c) services in place in 2015. Eighteen waivers in seven states (California, Connecticut, Kentucky, Oregon, Pennsylvania, South Carolina, and Washington) indicated that state funds were budgeted for direct care worker overtime pay in FY 2016, while eleven waivers in five states (California, Connecticut, Oregon, South Carolina, and Washington) reported that state funds were budgeted for direct care worker travel time pay in FY 2016 (no table shown). State policies may continue to evolve in this area as states gain more experience operating under the new rules.

Waiting Lists

States often have more individuals who need Medicaid home and community-based waiver services than the number of available spaces, called “slots,” in a § 1915 (c) waiver (Table 13). Many states maintain waiting lists when their program slots are filled or when state legislatures do not fully fund the maximum number of slots approved by CMS. In 2015, 35 states reported waiver waiting lists, while 12 states and DC reported no such lists (Table 14). In 2015, there were 640,841 individuals on waiver waiting lists across 133 § 1915 (c) waivers. Section 1915 (c) waivers for people with I/DD had the greatest number of individuals on waiting lists (428,151 individuals, or 67% of total waiting list enrollment) followed by waivers serving people who are aged and aged or disabled (145,424 individuals, or 23% of total waiting list enrollment) (Table 14, Figure 13). Most states reported that virtually all of the people on waiver waiting lists currently



reside in the community, although they may still be at risk of institutionalization. Due to the varying number of waiver slots available for each population, the average length of time an individual spent on a waiting list differed by population and ranged from four months for HIV/AIDS waivers to 43 months for I/DD waivers, with an average national waiting time of 27 months across all § 1915 (c) waivers with waiting lists (Table 14).

The number of individuals on § 1915 (c) waiver waiting lists grew by 10 percent from 2014 to 2015, outpacing the 8.5 percent growth rate in the 2013-2014 period. From 2005 to 2015, waiting list enrollment grew by an average of 14 percent annually. Waiting lists for some § 1915 (c) waiver target populations increased, with the exception of waivers for people who are aged and disabled, physically disabled, children who are medically frail, and those for people with TBI/SCI (Table 14). The maintenance and length of state waiver waiting lists has implications for states' compliance with the *Olmstead* decision, which requires states to provide services outside of institutions if beneficiaries are able to live in the community and do not oppose doing so.

In 2015, two-thirds (67%) of all § 1915 (c) waivers with waiting lists had a policy of screening individuals for Medicaid waiver eligibility before being placed or while on a waiting list (Table 13). In addition, more than two-thirds (70%) of all waivers with waiting lists had a policy of prioritizing certain individuals for waiver services (e.g., people transitioning to the community from an institution get priority for waiver services when slots become available). Ninety-two percent of all waivers with waiting lists provided non-waiver services (i.e., state plan services) to Medicaid eligible individuals on waiver waiting lists.

Implementation of CMS Home and Community-based Settings Rule

States also are working to come into compliance with CMS's January, 2014 rule defining the qualities of home and community-based settings in which § 1915 (c) waiver services can be provided.²² This rule seeks to ensure that beneficiaries receiving Medicaid HCBS have "full access to the benefits of community living and the opportunity to receive services in the most integrated setting."²³ To be considered community-based, the rule requires that both residential and non-residential settings support an individual's full access to the greater community; are selected by the individual from options including non-disability specific settings; ensure individual privacy, dignity, respect and freedom from coercion or restraint; optimize individual autonomy in making life choices; and facilitate individual choice regarding services and providers. There are additional criteria applied to provider-owned or -controlled residential settings to ensure individual privacy and autonomy. States had to submit transition plans, which were subject to public notice and comment, that explain how their existing § 1915 (c) waivers will come into compliance with these new standards; most of these plans currently are pending approval by CMS.²⁴

This year's survey asked states about policy changes in response to the home and community-based settings rule. Twenty-one states (California, Colorado, Connecticut, Idaho, Indiana, Kentucky, Louisiana, Maryland, Missouri, Mississippi, Montana, Nevada, New Mexico, New York, North Carolina, Ohio, Oregon, Pennsylvania, Utah, Washington, and Wyoming) anticipated having to change state rules or policies as part of their transition to the new home and community-based settings rule. Thirty waivers in 13 states (California, Colorado, Indiana, Louisiana, Maryland, Michigan, Missouri, Montana, New Mexico, New York, Oregon, Washington, and Wyoming) had identified some settings that do not meet the new rules and consequently will need to be modified so that beneficiaries can continue to receive Medicaid-funded HCBS there. Additionally, two states (Oregon and Washington) identified some non-residential settings that cannot be modified to meet the new

requirements, with the result that beneficiaries will be need to be relocated to continue receiving Medicaid-funded HCBS.

The new rule presumes that certain settings are not community-based because they have institutional qualities, such as those in a facility that provides inpatient treatment, those on the grounds of or adjacent to a public institution, and those that have the effect of isolating individuals from the broader community. However, the rule permits the Secretary to overcome this presumption by applying heightened scrutiny based on information submitted by the state. Eleven states (California, Connecticut, Indiana, Kentucky, Louisiana, Michigan, Missouri, Montana, Nevada, Oregon, and Wyoming) planned to submit information asking the Secretary to determine that such a setting does not have the qualities of an institution and is home and community-based so that the state could continue to provide Medicaid-funded HCBS in those settings. Ten states (California, Colorado, Indiana, Kentucky, Maryland, Missouri, Nevada, Oregon, Washington, and Wyoming) identified settings that effectively isolate beneficiaries from the greater community and therefore are presumed institutional under the rule. As CMS's review of the states' transition plans proceeds, additional policy changes in this area may emerge.

MEDICAID HOME HEALTH AND PERSONAL CARE SERVICES STATE PLAN BENEFITS

Unlike waivers, states are not permitted to maintain waiting lists or geographically limit the services provided through Medicaid home health and personal care state plan benefits. State plan services must be available to all beneficiaries as medically necessary. However, federal Medicaid rules allow states to use certain cost-containment strategies for state plan benefits. To understand how states controlled spending for home health and personal care services state plan benefits in 2015, all state Medicaid programs were asked about approved provider types, services provided within the scope of each benefit, the use of any expenditure or service caps, and the availability of self-direction within the programs. The following summary of the 2015 survey findings shows how states use cost control policies to limit access to Medicaid home health and personal care state plan services.²⁵

Providers and Services

To obtain a more comprehensive picture of the three main Medicaid HCBS programs, states were asked about the types of approved providers for state plan HCBS and the scope of benefits provided (no Tables shown). In addition to licensed home health agencies, 17 states (33%) allowed hospice agencies to provide home health state plan services, while Centers for Independent Living and independent providers were allowed to provide personal care state plan services in 14 states (41%) and 19 states (56%), respectively.

In addition to skilled nursing services, therapy services, and home health aide services for assistance with ADLs, 14 states (27%) provided assistance with instrumental ADLs (e.g., medication management, meal preparation) as part of their home health state plan benefit. In addition, although therapy services are optional within the home health services state plan benefit, almost all states provide some form of therapy, such as physical, occupational, or speech. Even though case management is not required under the home health state plan benefit, four states (8%) provided this service.

Among states with personal care state plan services, 30 states (88%) provided assistance with instrumental ADLs, while 14 states (41%) provided some sort of transportation services. Case management was offered in eight states (24%) within the personal care services state plan option.

Cost Controls

More than half of all states (59%, or 30 states) utilized either expenditure or service limits or both in their home health services state plan programs in 2015, while 59 percent of states with the optional personal care services state plan benefit used cost control limits. Among states offering the optional personal care services state plan benefit, 19 states used service limits while only one state used expenditure limits. Among the 30 states with cost controls in their home health services state plan benefit, Connecticut, Michigan and Oregon had a combination of expenditure and service limits while the rest had only one of these limits in place. Service limitations were the most popular form of cost control for home health state plan services, with 26 states (87% of cost control states) using such limits (Table 12).

Self-Direction

In 2015, only seven states allowed self-direction within their home health services state plan programs. In contrast, 71 percent of states (24 states) with the personal care services state plan option allowed self-direction (Table 12).

Provider Reimbursement

The average reimbursement rate that states provided to home health agencies was \$93.93 per home health visit in 2015, slightly higher than \$92.69 in 2014. In states that paid registered nurses or home health aides directly or mandated their reimbursement rates, the average rate per visit was \$87.26 and \$52.19, respectively (Table 15). For the personal care services state plan option, the average rate paid to provider agencies was \$18.82 per hour in 2015, a slight increase from \$18.73 per hour in 2014. In states where personal care services providers were paid directly by the state or where reimbursement rates were determined by the state, the average reimbursement rate was \$13.43 per hour in 2015 (Table 15²⁶). Medicaid provider reimbursement rates are often set by state legislatures as part of the budget process.

Conclusion

Over the past three decades, the increase in access to community-based alternatives to institutional care has resulted in rebalancing of national Medicaid LTSS dollars, while the size and scope of Medicaid HCBS programs continues to vary across states. Section 1915 (c) waivers still account for the majority (73%) of spending on LTSS provided in the community, and continued growth in waiver waiting list enrollment, to more than 640,000 persons nationally with waiting times of almost two and a half years, highlights the need for HCBS, especially for individuals with I/DD, seniors, and non-elderly people with physical disabilities. States continue to review and change policies in response to new regulatory requirements, including the DOL home care worker rules and CMS's rule defining the qualities of home and community-based settings.

At the same time, competing pressures in state budgets may mean that states may face uncertainties about funding for Medicaid HCBS in the coming years, and states are continuing to utilize cost control measures within their Medicaid HCBS programs. In response to fiscal pressures and a desire to better coordinate beneficiaries' LTSS, states continue to incorporate HCBS into Medicaid managed care arrangements. In the coming years, states will be challenged to continue to expand access to high quality, person-centered HCBS in a cost-effective manner, and it will remain important to monitor the adoption of state plan options and other initiatives to expand Medicaid HCBS, differences in services and spending, and the impact of cost control policies on access and quality.

Table 1A: Total Medicaid HCBS Participants, by State, 2003–2013

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	2,512,560	2,605,870	2,782,984	2,760,641	2,831,517	2,961,608	3,114,796	3,159,688	3,204,638	3,202,732	2,994,685	-6%
AK	6,365	8,243	8,915	8,032	7,912	7,859	8,136	8,437	8,862	8,983	9,291	3%
AL	19,766	19,723	20,330	20,823	21,327	21,888	24,552	22,078	21,320	20,305	20,019	-1%
AR	33,506	33,970	34,174	34,559	33,174	33,145	34,891	34,726	35,763	36,519	36,564	0%
AZ	27,545	29,934	31,197	32,358	33,891	34,968	36,045	37,122	38,199	39,275	40,364	3%
CA	446,510	454,476	482,776	493,315	516,338	599,526	605,489	586,696	594,425	554,567	440,841	-21%
CO	33,615	34,270	31,264	36,721	38,637	40,455	42,927	44,185	46,078	47,763	49,755	4%
CT	38,053	39,467	40,027	38,242	29,917	31,145	47,566	49,311	52,879	55,061	55,932	2%
DC	5,081	5,574	6,818	7,579	9,027	9,541	9,952	10,678	11,404	12,268	12,432	1%
DE	3,794	4,162	4,070	4,224	4,171	4,078	4,123	4,104	4,262	4,327	2,077	-52%
FL	85,604	87,836	94,323	99,857	89,176	82,578	104,833	93,073	96,126	107,410	105,041	-2%
GA	36,999	40,871	43,425	41,585	41,812	46,614	50,538	52,443	51,890	55,419	56,694	2%
HI	6,277	4,643	5,663	6,060	6,502	7,088	4,197	4,305	4,454	4,583	4,691	2%
IA	37,087	42,110	42,618	36,259	38,517	40,185	40,670	42,010	42,564	42,046	42,089	0%
ID	13,021	15,827	16,552	17,004	17,976	18,784	17,528	17,244	16,828	21,364	18,435	-14%
IL	73,070	77,419	81,714	85,935	85,354	93,287	100,021	104,701	111,852	117,982	125,386	6%
IN	19,601	22,413	21,318	22,271	24,476	26,323	29,952	33,504	35,265	38,144	44,313	16%
KS	25,338	27,767	29,213	30,211	30,752	33,423	33,916	33,631	33,591	32,251	32,349	0%
KY	42,514	39,063	37,337	34,100	33,266	33,228	32,806	34,384	35,832	36,686	39,289	7%
LA	18,258	24,126	26,001	27,758	30,970	36,172	40,520	44,231	46,015	41,877	47,772	14%
MA	48,196	46,212	50,668	52,093	52,639	55,075	59,487	63,733	65,991	70,891	76,751	8%
MD	20,215	19,478	23,662	23,705	23,360	24,505	29,434	30,346	31,156	32,332	33,554	4%
ME	9,235	9,009	8,948	9,361	8,971	9,914	10,548	10,559	18,010	20,458	11,547	-44%
MI	78,884	79,901	79,275	80,200	81,426	83,051	86,146	90,738	92,456	94,086	102,810	9%
MN	51,577	56,005	59,325	78,449	84,517	90,225	94,841	99,009	89,920	103,125	103,268	0%
MO	83,771	88,565	89,271	84,810	83,068	84,091	87,404	86,304	91,254	91,646	96,714	6%
MS	23,613	23,885	23,584	22,166	22,524	22,924	24,482	25,714	27,045	30,553	25,240	-17%
MT	6,525	7,303	7,566	7,650	7,890	8,105	8,327	8,616	8,820	9,505	9,285	-2%
NC	84,254	95,880	110,891	117,467	115,123	115,793	120,312	116,892	104,570	116,075	107,911	-7%
ND	4,126	5,159	5,511	6,401	6,487	6,515	6,473	5,824	6,087	6,286	6,925	10%
NE	14,547	15,065	17,271	17,942	19,031	19,081	18,186	18,828	17,196	15,807	15,702	-1%
NH	8,048	8,152	7,769	8,378	9,298	9,740	10,449	10,965	11,236	11,638	11,692	0%
NJ	48,120	48,140	52,699	55,690	57,279	57,894	66,236	61,154	61,997	63,995	65,022	2%
NM	15,121	15,934	16,274	17,508	19,812	21,083	21,304	22,011	23,246	23,388	26,642	14%
NV	6,642	8,993	9,741	10,344	10,679	11,250	11,327	10,091	10,575	11,758	11,792	0%
NY	250,697	271,682	271,886	281,821	277,626	277,555	280,552	281,990	280,418	281,006	281,283	0%
OH	133,828	143,989	83,281	88,866	103,114	96,932	105,654	110,506	123,348	132,770	139,520	5%
OK	28,685	27,556	31,255	33,538	36,434	39,720	39,047	37,891	36,957	36,960	35,306	-4%
OR	43,361	42,487	43,196	43,607	44,437	44,688	47,284	49,270	51,109	52,071	46,196	-11%
PA	48,173	53,897	59,938	76,891	78,202	84,782	90,912	98,588	86,152	91,778	92,225	0%
RI	6,436	6,919	7,226	7,697	8,516	9,119	7,697	1,376	1,413	1,310	1,350	3%
SC	27,766	24,793	24,249	22,638	24,492	25,173	25,141	23,876	23,345	23,718	25,360	7%
SD	9,255	9,769	9,646	9,862	9,986	10,013	9,218	7,880	7,362	7,265	7,394	2%
TN	12,573	17,735	19,317	19,871	20,292	23,519	25,089	25,255	20,034	18,879	19,009	1%
TX	309,191	291,625	427,907	319,786	335,174	320,722	339,215	367,106	381,135	317,662	196,974	-38%
UT	6,896	8,942	8,903	8,790	15,510	13,043	16,144	13,555	12,295	11,418	11,947	5%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
VA	20,428	20,536	22,735	24,337	25,416	28,493	31,706	36,522	39,232	42,416	44,557	5%
VT	8,373	9,070	9,559	5,958	5,705	6,224	6,224	6,247	5,943	5,555	5,564	0%
WA	63,689	64,336	67,668	69,022	69,810	71,808	73,066	77,431	80,125	88,528	82,712	-7%
WI	49,148	53,940	57,055	58,048	60,578	67,941	70,285	80,133	83,652	88,219	91,054	3%
WV	15,664	15,388	14,916	16,524	16,335	17,659	19,180	19,365	19,755	19,992	21,195	6%
WY	3,519	3,631	4,058	4,328	4,591	4,684	4,765	5,050	5,196	4,813	4,850	1%

NOTES: Data may not sum to total due to rounding. Total Medicaid HCBS comprises Medicaid home health state plan services, Medicaid personal care state plan services, and Medicaid § 1915(c) HCBS waivers. Arizona did not operate any § 1915(c) waivers over the study period because all HCBS were provided through a § 1115 managed care waiver. Hawaii transitioned all non-Intellectual/Developmental Disabilities (I/DD) § 1915(c) waiver participants to a § 1115 waiver in 2009. Rhode Island terminated its § 1915(c) waivers in mid-2009 and provided services under a § 1115 waiver. Vermont terminated its § 1915(c) waivers in 2006 and provided services under a § 1115 waiver.

SOURCES: Kaiser Commission on Medicaid and the Uninsured (KCMU) and compilation of University of California, San Francisco (UCSF) analyses of Medicaid Home Health and Personal Care Services Policy Surveys and Centers for Medicare and Medicaid Services (CMS) Form 372.

Table 1B: Medicaid Home Health State Plan Services Participants, by State, 2003–2013

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	812,831	832,910	799,406	822,296	837,278	805,843	835,395	804,504	792,506	757,884	672,137	-11%
AK	286	273	390	373	348	294	312	298	302	281	307	9%
AL	6,576	6,345	6,757	6,389	6,513	6,743	9,635	7,013	6,622	5,527	5,231	-5%
AR	6,772	6,642	6,788	6,505	6,065	5,763	6,251	6,167	6,363	6,352	6,387	1%
AZ	27,545	29,934	31,197	32,358	33,891	34,968	36,045	37,122	38,199	39,275	40,364	3%
CA	89,436	87,027	88,659	87,656	86,543	85,697	84,851	30,626	29,669	23,832	21,035	-12%
CO	7,326	8,275	8,687	9,430	10,412	10,964	11,037	11,134	11,998	12,201	12,603	3%
CT	20,933	21,446	21,753	22,217	14,394	15,157	26,519	27,474	30,070	31,484	31,676	1%
DC	2,124	2,360	2,855	3,406	4,090	4,236	4,382	4,528	5,178	5,549	5,403	-3%
DE	1,324	1,601	1,428	1,467	1,324	1,269	1,214	1,159	1,150	1,105	1,130	2%
FL	17,476	19,962	21,192	21,149	19,092	17,023	15,819	14,671	12,226	11,042	10,562	-4%
GA	10,913	13,102	14,014	8,731	6,411	6,033	5,655	5,277	4,899	4,521	4,631	2%
HI	2,726	585	1,300	1,469	1,532	1,628	1,724	1,820	1,903	1,992	2,032	2%
IA	20,548	23,346	24,558	12,835	13,039	13,230	12,699	13,922	13,766	13,016	13,189	1%
ID	1,794	3,295	3,326	3,321	3,936	4,475	1,882	1,790	1,871	2,111	1,811	-14%
IL	12,903	12,391	13,063	14,913	14,080	13,085	14,107	14,162	13,795	12,667	11,655	-8%
IN	8,235	8,939	7,834	8,307	8,353	8,291	9,250	10,663	13,134	14,237	13,051	-8%
KS	6,688	7,152	5,865	5,364	4,888	4,145	4,106	3,965	3,730	3,736	3,803	2%
KY	24,636	23,702	22,415	19,261	18,528	18,146	16,572	15,976	15,864	14,986	15,036	0%
LA	11,051	11,662	12,187	11,986	11,704	11,691	11,830	11,222	11,042	10,978	10,813	-2%
MA	19,521	16,498	17,875	17,591	17,214	17,653	18,231	19,977	20,899	23,001	24,895	8%
MD	3,598	1,245	4,393	4,176	3,312	3,709	3,977	4,067	4,244	4,233	4,108	-3%
ME	3,140	2,875	2,986	3,695	3,091	2,866	2,634	2,611	7,831	11,606	2,537	-78%
MI	8,301	7,080	6,573	6,551	5,996	5,896	5,796	6,395	6,044	5,253	13,764	162%
MN	5,174	5,349	5,229	13,078	12,682	12,624	12,293	12,053	2,317	12,822	10,056	-22%
MO	7,237	7,246	7,739	6,960	6,964	6,143	6,513	6,544	6,938	6,880	6,543	-5%
MS	10,351	9,472	9,044	8,223	7,949	7,888	7,889	8,749	9,257	7,923	1,104	-86%
MT	456	473	442	414	442	392	412	428	367	387	378	-2%
NC	33,206	35,871	38,670	40,313	40,517	40,387	41,094	38,871	39,970	33,507	32,767	-2%
ND	803	899	521	813	769	865	884	758	749	954	1,120	17%
NE	5,602	5,532	7,539	7,700	8,184	7,678	5,808	6,305	4,307	3,123	2,671	-14%
NH	2,300	2,389	2,841	2,694	2,698	2,540	2,798	3,056	3,314	3,572	3,546	-1%
NJ	10,896	11,322	11,136	12,653	13,564	14,695	15,826	16,957	17,481	18,392	19,032	3%
NM	609	391	431	447	429	396	326	273	249	523	581	11%
NV	1,279	980	870	798	751	705	608	658	659	698	691	-1%
NY	89,844	110,910	109,244	117,401	113,603	109,386	108,365	107,344	106,323	105,302	104,325	-1%
OH	89,857	96,408	31,171	32,215	39,846	31,308	34,586	36,676	39,138	44,576	47,937	8%
OK	3,006	3,841	5,129	5,233	5,918	5,001	5,147	5,750	5,298	5,528	5,058	-9%
OR	1,165	1,010	819	3,341	4,609	3,012	3,341	2,970	3,062	3,191	414	-87%
PA	8,071	9,171	9,359	23,716	24,521	25,775	27,461	28,705	14,656	13,777	7,692	-44%
RI	1,365	1,588	1,658	1,546	1,566	1,436	1,406	1,376	1,413	1,310	1,350	3%
SC	7,849	4,680	3,908	3,041	2,654	2,037	1,687	1,257	1,056	954	893	-6%
SD	5,013	5,236	5,103	5,036	4,963	4,865	3,767	2,561	1,812	1,841	1,706	-7%
TN	7,648	12,655	12,539	11,875	10,912	10,727	10,850	11,829	12,130	10,934	11,165	2%
TX	186,870	170,881	187,099	192,421	209,679	198,832	210,046	230,619	235,475	199,567	133,544	-33%
UT	1,488	2,214	2,121	1,976	10,013	6,866	9,842	7,236	5,649	4,392	4,479	2%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
VA	3,831	2,890	3,299	4,055	3,432	3,733	3,958	5,530	4,772	4,510	3,738	-17%
VT	3,501	3,611	3,854	3,842	3,737	3,571	3,810	3,625	3,440	3,145	3,210	2%
WA	3,231	2,858	3,597	3,703	3,317	3,282	3,239	3,356	3,129	2,750	3,668	33%
WI	5,903	7,006	7,430	6,742	6,204	6,035	5,866	5,697	5,317	5,040	4,803	-5%
WV	1,865	1,754	1,954	2,343	1,989	2,147	2,476	2,699	2,833	2,689	3,041	13%
WY	559	536	565	567	610	555	569	583	597	611	602	-1%

NOTES: Data may not sum to total due to rounding.

SOURCE: KCMU and UCSF analysis of Medicaid Home Health Policy Survey.

Table 1C: Medicaid Personal Care State Plan Services Participants, by State, 2003–2013

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	715,657	755,397	912,229	814,192	813,481	894,154	911,239	949,822	960,601	944,507	774,243	-18%
AK	2,742	4,679	4,960	3,904	3,705	3,520	3,538	3,556	3,574	3,598	3,657	2%
AL	-	-	-	-	-	-	-	-	-	-	-	-
AR	15,499	15,503	15,452	15,160	14,223	13,923	14,377	13,904	14,559	15,206	15,356	1%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	288,000	295,049	313,893	329,893	345,507	422,823	425,321	455,243	456,512	419,385	305,132	-27%
CO	-	-	-	-	-	-	-	-	-	-	-	-
CT	-	-	-	-	-	-	-	-	-	-	-	-
DC	2,352	2,432	2,522	2,498	2,365	2,298	2,231	2,164	2,097	2,112	2,098	-1%
DE	0	0	0	0	0	0	0	0	0	0	0	0%
FL	14,659	14,718	13,980	12,253	357	403	944	1,235	1,744	11,115	12,364	11%
GA	-	-	-	-	-	-	-	-	-	-	-	-
HI	-	-	-	-	-	-	-	-	-	-	-	-
IA	-	-	-	-	-	-	-	-	-	-	-	-
ID	3,377	3,614	3,601	3,777	3,773	3,799	4,266	3,331	2,163	5,918	2,070	-65%
IL	-	-	-	-	-	-	-	-	-	-	-	-
IN	-	-	-	-	-	-	-	-	-	-	-	-
KS	-	-	-	-	18	89	147	210	273	336	365	9%
KY	-	-	-	-	-	-	-	-	-	-	-	-
LA	-	2	4,400	6,568	8,625	11,532	14,166	17,533	18,535	18,393	19,431	6%
MA	10,570	11,716	13,767	14,200	15,109	16,900	18,200	19,828	21,566	22,853	24,292	6%
MD	4,743	4,603	4,643	4,474	4,385	4,416	4,608	4,894	5,221	5,323	5,593	5%
ME	1,899	1,950	1,901	1,632	1,716	1,704	2,128	2,245	4,474	3,016	3,088	2%
MI	53,351	54,986	55,158	56,210	57,980	59,124	61,324	64,956	66,930	69,090	68,133	-1%
MN	6,302	8,329	9,940	16,569	18,862	20,759	22,750	24,352	22,664	23,589	24,297	3%
MO	44,835	49,295	49,481	47,435	46,969	49,333	52,732	51,115	55,473	55,665	58,960	6%
MS	-	-	-	-	-	-	-	-	-	-	-	-
MT	2,864	2,990	3,127	3,117	3,095	3,093	3,144	3,323	3,323	3,592	3,558	-1%
NC	34,058	41,911	50,818	53,141	49,877	50,017	53,162	50,830	38,713	57,098	47,905	-16%
ND	450	777	1,362	1,896	1,872	1,754	1,509	1,089	1,145	1,165	1,200	3%
NE	1,301	1,356	1,549	1,680	1,723	1,832	2,412	2,349	2,266	1,991	2,325	17%
NH	26	25	25	21	16	21	25	29	28	28	32	14%
NJ	17,707	18,987	20,884	21,198	21,582	20,623	20,553	20,483	20,413	20,543	20,748	1%
NM	8,960	9,525	9,614	10,477	11,769	12,365	13,443	14,520	15,598	15,872	16,013	1%
NV	2,038	4,408	4,991	5,383	5,663	6,205	6,507	5,133	5,377	6,470	6,494	0%
NY	83,846	85,613	84,270	82,801	80,099	78,494	75,158	71,693	68,228	66,198	64,032	-3%
OH	-	-	-	-	-	-	-	-	-	-	-	-
OK	7,000	4,342	5,505	4,077	3,700	3,327	3,475	3,885	3,836	3,998	3,858	-4%
OR	2,376	4,495	5,086	3,746	3,609	3,389	3,077	3,228	3,130	3,226	700	-78%
PA	-	-	-	-	-	-	-	-	-	-	-	-
RI	0	0	0	0	0	0	0	0	0	0	0	0%
SC	-	-	-	-	-	-	-	-	-	-	-	-
SD	948	923	901	936	986	996	861	791	763	572	427	-25%
TN	-	-	-	-	-	-	-	-	-	-	-	-
TX	66,967	71,381	187,099	64,425	59,025	51,567	52,628	56,510	69,409	56,161	11,125	-80%
UT	450	1,787	1,755	1,674	72	62	131	168	241	393	400	2%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
VA	-	-	-	-	-	-	-	-	-	-	-	-
VT	1,222	1,543	1,896	2,116	1,968	2,653	2,414	2,622	2,503	2,410	2,354	-2%
WA	21,436	22,390	22,738	23,988	25,152	27,075	25,689	27,303	27,989	26,979	25,684	-5%
WI	10,474	11,123	12,540	13,255	13,653	14,032	14,411	14,790	15,169	15,548	15,654	1%
WV	5,205	4,945	4,371	5,688	6,026	6,026	5,908	6,510	6,685	6,664	6,898	4%
WY	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Data may not sum to total due to rounding. Personal care services are an optional benefit. In 2013, 32 states reported personal care services participants. Delaware and Rhode Island were approved by CMS to offer personal care services but did not report participants during the period. A dash indicates that there was no operational personal care services program that year.

SOURCE: KCMU and UCSF analysis of Medicaid Personal Care Services Policy Survey.

Table 1D: Medicaid § 1915(c) HCBS Waivers Participants, by State, 2003–2013

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	984,072	1,017,563	1,071,349	1,124,153	1,180,758	1,261,611	1,368,163	1,405,362	1,451,531	1,500,342	1,548,305	3%
AK	3,337	3,291	3,565	3,755	3,859	4,045	4,286	4,583	4,986	5,104	5,327	4%
AL	13,190	13,378	13,573	14,434	14,814	15,145	14,917	15,065	14,698	14,778	14,788	0%
AR	11,235	11,825	11,934	12,894	12,886	13,459	14,263	14,655	14,841	14,961	14,821	-1%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	69,074	72,400	80,224	75,766	84,288	91,006	95,317	100,827	108,244	111,350	114,674	3%
CO	26,289	25,995	22,577	27,291	28,225	29,491	31,890	33,051	34,080	35,562	37,152	4%
CT	17,120	18,021	18,274	16,025	15,523	15,988	21,047	21,837	22,809	23,577	24,256	3%
DC	605	782	1,441	1,675	2,572	3,007	3,339	3,986	4,129	4,607	4,931	7%
DE	2,470	2,561	2,642	2,757	2,847	2,809	2,909	2,945	3,112	3,222	947	-71%
FL	53,469	53,156	59,151	66,455	69,727	65,152	88,070	77,167	82,156	85,253	82,115	-4%
GA	26,086	27,769	29,411	32,854	35,401	40,581	44,883	47,166	46,991	50,898	52,063	2%
HI	3,551	4,058	4,363	4,591	4,970	5,460	2,473	2,485	2,551	2,591	2,659	3%
IA	16,539	18,764	18,060	23,424	25,478	26,955	27,971	28,088	28,798	29,030	28,900	0%
ID	7,850	8,918	9,625	9,906	10,267	10,510	11,380	12,123	12,794	13,335	14,554	9%
IL	60,167	65,028	68,651	71,022	71,274	80,202	85,914	90,539	98,057	105,315	113,731	8%
IN	11,366	13,474	13,484	13,964	16,123	18,032	20,702	22,841	22,131	23,907	31,262	31%
KS	18,650	20,615	23,348	24,847	25,846	29,189	29,663	29,456	29,588	28,179	28,181	0%
KY	17,878	15,361	14,922	14,839	14,738	15,082	16,234	18,408	19,968	21,700	24,253	12%
LA	7,207	12,462	9,414	9,204	10,641	12,949	14,524	15,476	16,438	12,506	17,528	40%
MA	18,105	17,998	19,026	20,302	20,316	20,522	23,056	23,928	23,526	25,037	27,564	10%
MD	11,874	13,630	14,626	15,055	15,663	16,380	20,849	21,385	21,691	22,776	23,853	5%
ME	4,196	4,184	4,061	4,034	4,164	5,344	5,786	5,703	5,705	5,836	5,922	1%
MI	17,232	17,835	17,544	17,439	17,450	18,031	19,026	19,387	19,482	19,743	20,913	6%
MN	40,101	42,327	44,156	48,802	52,973	56,842	59,798	62,604	64,939	66,714	68,915	3%
MO	31,699	32,024	32,051	30,415	29,135	28,615	28,159	28,645	28,843	29,101	31,211	7%
MS	13,262	14,413	14,540	13,943	14,575	15,036	16,593	16,965	17,788	22,630	24,136	7%
MT	3,205	3,840	3,997	4,119	4,353	4,620	4,771	4,865	5,130	5,526	5,349	-3%
NC	16,990	18,098	21,403	24,013	24,729	25,389	26,056	27,191	25,887	25,470	27,239	7%
ND	2,873	3,483	3,628	3,692	3,846	3,896	4,080	3,977	4,193	4,167	4,605	11%
NE	7,644	8,177	8,183	8,562	9,124	9,571	9,966	10,174	10,623	10,693	10,706	0%
NH	5,722	5,738	4,903	5,663	6,584	7,179	7,626	7,880	7,894	8,038	8,114	1%
NJ	19,517	17,831	20,679	21,839	22,133	22,576	29,857	23,714	24,103	25,060	25,242	1%
NM	5,552	6,018	6,229	6,584	7,614	8,322	7,535	7,218	7,399	6,993	10,048	44%
NV	3,325	3,605	3,880	4,163	4,265	4,340	4,212	4,300	4,539	4,590	4,607	0%
NY	77,007	75,159	78,372	81,619	83,924	89,675	97,029	102,953	105,867	109,506	112,926	3%
OH	43,971	47,581	52,110	56,651	63,268	65,624	71,068	73,830	84,210	88,194	91,583	4%
OK	18,679	19,373	20,621	24,228	26,816	31,392	30,425	28,256	27,823	27,434	26,390	-4%
OR	39,820	36,982	37,291	36,520	36,219	38,287	40,866	43,072	44,917	45,654	45,082	-1%
PA	40,102	44,726	50,579	53,175	53,681	59,007	63,451	69,883	71,496	78,001	84,533	8%
RI	5,071	5,331	5,568	6,151	6,950	7,683	6,291	-	-	-	-	-
SC	19,917	20,113	20,341	19,597	21,838	23,136	23,454	22,619	22,289	22,764	24,467	7%
SD	3,294	3,610	3,642	3,890	4,037	4,152	4,590	4,528	4,787	4,852	5,261	8%
TN	4,925	5,080	6,778	7,996	9,380	12,792	14,239	13,426	7,904	7,945	7,844	-1%
TX	55,354	49,363	53,709	62,940	66,470	70,323	76,541	79,977	76,251	61,934	52,305	-16%
UT	4,958	4,941	5,027	5,140	5,425	6,115	6,171	6,151	6,405	6,633	7,068	7%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
VA	16,597	17,646	19,436	20,282	21,984	24,760	27,748	30,992	34,460	37,906	40,819	8%
VT	3,650	3,916	3,809	-	-	-	-	-	-	-	-	-
WA	39,022	39,088	41,333	41,331	41,341	41,451	44,138	46,772	49,007	58,799	53,360	-9%
WI	32,771	35,811	37,085	38,051	40,721	47,874	50,008	59,646	63,166	67,631	70,597	4%
WV	8,594	8,689	8,591	8,493	8,320	9,486	10,796	10,156	10,237	10,639	11,256	6%
WY	2,960	3,095	3,493	3,761	3,981	4,129	4,196	4,467	4,599	4,202	4,248	1%

NOTES: Data may not sum to total due to rounding. Arizona did not operate a § 1915(c) waiver over the study period because all HCBS were provided through a § 1115 managed care waiver. Hawaii transitioned all non-I/DD § 1915(c) waiver participants to a § 1115 waiver in 2009. Rhode Island terminated its § 1915(c) waivers in mid-2009 and provided services under a § 1115 waiver. Vermont terminated its § 1915(c) waivers in 2006 and provided services under a § 1115 waiver. A dash indicates that there was no operational § 1915(c) waiver that year.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 2A: Total Medicaid HCBS Expenditures, by State, 2003–2013 (\$, in thousands)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	28,216,947	32,069,976	35,265,334	37,663,246	41,481,325	45,910,301	50,609,471	52,720,253	54,994,764	55,035,077	56,510,691	3%
AK	145,679	154,532	156,572	204,456	207,051	216,777	240,683	264,154	288,418	304,935	331,312	9%
AL	212,282	237,214	273,707	297,316	333,373	360,800	401,074	404,282	413,801	421,686	452,002	7%
AR	163,560	177,834	203,467	236,124	242,661	262,769	313,836	344,180	369,189	397,407	405,225	2%
AZ	502,730	571,603	642,134	694,692	783,660	793,647	803,633	813,619	823,606	833,592	849,478	2%
CA	3,598,498	4,024,636	4,415,656	4,994,201	5,865,291	6,347,460	7,006,430	6,537,005	6,998,970	5,593,850	5,681,174	2%
CO	459,337	464,008	433,878	477,107	512,932	557,264	678,293	720,817	738,093	827,162	881,789	7%
CT	669,221	677,714	701,999	341,269	340,732	376,033	1,019,813	1,045,839	1,121,845	1,199,212	1,229,427	3%
DC	26,775	31,255	38,496	50,041	81,335	95,204	184,499	227,023	255,654	275,561	294,863	7%
DE	63,121	67,341	74,056	86,786	99,991	108,474	115,687	114,767	114,267	116,651	102,213	-12%
FL	813,749	919,013	1,001,617	1,111,757	1,220,846	1,301,098	1,008,925	1,390,426	1,552,103	1,736,585	1,712,743	-1%
GA	339,544	377,603	397,916	449,990	427,570	517,181	655,220	819,154	800,488	914,391	978,729	7%
HI	78,699	108,280	120,842	128,630	133,649	138,909	110,894	104,185	105,620	107,473	119,901	12%
IA	251,675	285,540	352,321	410,094	453,768	495,130	533,901	565,564	577,916	616,267	671,830	9%
ID	112,677	134,245	146,763	156,768	169,315	182,154	196,241	218,602	221,980	236,861	223,851	-5%
IL	628,828	708,678	802,485	874,787	903,932	1,070,985	1,221,466	1,325,518	1,479,595	1,588,015	1,629,712	3%
IN	372,148	471,504	488,513	496,083	556,511	641,574	729,215	784,163	793,087	845,048	998,531	18%
KS	346,807	364,019	368,829	401,008	443,773	506,743	575,054	574,161	680,691	569,325	714,323	25%
KY	249,306	245,138	277,332	263,695	334,418	347,118	370,523	417,182	482,639	552,634	636,841	15%
LA	201,612	481,613	605,240	383,204	473,487	632,067	748,929	742,020	762,665	674,064	831,311	23%
MA	816,117	884,525	951,013	1,034,885	1,024,243	1,130,156	1,284,262	1,339,689	1,401,148	1,634,704	1,793,693	10%
MD	375,900	460,526	521,542	572,551	683,372	680,193	800,918	834,349	850,436	965,510	1,050,474	9%
ME	217,868	240,961	242,990	265,977	283,299	342,198	354,103	359,843	381,136	378,806	373,225	-1%
MI	583,489	656,393	663,682	667,403	713,414	749,468	786,316	820,079	853,013	899,103	991,141	10%
MN	1,145,026	1,222,684	1,374,386	1,623,184	1,795,676	2,002,357	2,208,230	2,296,604	2,389,306	2,455,891	2,517,987	3%
MO	570,761	580,071	616,843	653,403	729,314	806,630	895,232	844,619	1,000,729	1,080,007	1,192,728	10%
MS	95,938	132,325	141,184	124,416	142,763	156,100	179,224	207,517	208,309	270,288	273,255	1%
MT	88,122	97,642	105,414	112,248	117,504	137,808	151,663	165,514	168,920	174,068	176,851	2%
NC	738,981	803,021	943,140	991,647	1,092,502	1,176,824	1,185,789	1,256,967	1,199,884	1,157,769	1,199,775	4%
ND	60,711	71,566	75,531	82,644	88,506	98,072	109,865	126,233	147,512	165,652	179,640	8%
NE	181,540	195,653	215,597	226,642	248,177	268,384	273,811	294,545	312,040	325,113	335,409	3%
NH	153,386	157,916	163,275	171,188	185,352	202,118	236,010	251,221	251,077	259,119	273,132	5%
NJ	741,790	743,903	804,134	809,575	840,544	866,594	1,012,815	1,082,551	1,132,610	1,256,614	1,324,450	5%
NM	386,869	443,841	424,686	463,942	504,150	557,314	546,763	568,229	581,356	584,713	614,608	5%
NV	61,186	87,594	95,280	126,347	142,596	152,703	155,126	158,699	164,673	168,259	166,613	-1%
NY	5,221,679	6,383,266	7,008,325	7,761,946	8,454,236	9,041,475	9,441,876	9,713,233	9,684,139	9,712,552	9,451,904	-3%
OH	890,302	979,106	1,026,817	1,245,787	1,546,853	1,569,361	1,752,152	1,907,247	2,180,451	2,255,206	2,348,916	4%
OK	336,358	298,367	337,313	390,549	438,951	486,746	508,450	505,779	497,495	495,812	483,842	-2%
OR	570,406	561,006	586,983	600,838	640,195	726,316	869,422	926,182	1,059,030	968,092	807,320	-17%
PA	1,184,355	1,313,386	1,479,377	1,294,903	1,375,754	2,116,073	2,395,308	2,632,203	2,532,129	2,784,016	3,054,059	10%
RI	234,785	242,921	243,359	260,635	293,257	304,493	144,212	2,579	2,461	2,544	2,694	6%
SC	266,240	276,384	289,974	281,348	335,875	392,982	486,588	446,291	457,403	442,920	472,501	7%
SD	72,998	85,156	79,489	89,901	97,242	104,222	109,714	115,070	119,357	120,566	126,374	5%
TN	244,002	344,406	520,247	634,819	782,847	926,555	909,931	839,807	802,345	803,423	808,145	1%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
TX	1,286,404	1,725,338	1,957,450	2,066,581	2,036,889	2,278,729	2,638,822	2,879,440	3,074,590	2,426,576	2,099,185	-13%
UT	114,232	125,793	130,506	134,753	147,776	190,113	214,327	214,589	217,419	220,326	238,949	8%
VA	363,474	361,373	431,049	529,166	620,997	710,241	838,222	950,681	1,042,903	1,124,032	1,220,259	9%
VT	125,870	142,778	141,610	24,210	22,501	23,152	25,853	27,838	29,063	35,070	35,006	0%
WA	754,189	725,307	851,519	929,438	994,350	1,116,182	1,283,178	1,377,645	1,424,414	1,638,838	1,484,147	-9%
WI	805,316	902,982	986,359	1,069,318	1,116,212	1,212,537	1,422,037	1,665,416	1,738,918	1,842,459	1,945,764	6%
WV	215,466	239,217	264,715	269,684	302,372	332,385	356,346	381,931	392,163	483,087	598,123	24%
WY	76,936	82,799	89,724	95,313	99,314	100,436	118,588	115,003	117,709	93,227	125,268	34%

NOTES: Data may not sum to total due to rounding. Total Medicaid HCBS comprises Medicaid home health state plan services, Medicaid personal care state plan services and Medicaid § 1915(c) HCBS waivers. Arizona did not operate any § 1915(c) waivers over the study period because all HCBS were provided through a § 1115 managed care waiver. Hawaii transitioned all non-Intellectual/Developmental Disabilities (I/DD) § 1915(c) waiver participants to a § 1115 waiver in 2009. Rhode Island terminated its § 1915(c) waivers in mid-2009 and provided services under a § 1115 waiver. Vermont terminated its § 1915(c) waivers in 2006 and provided services under a § 1115 waiver.

SOURCES: KCMU and compilation of UCSF analyses of Medicaid Home Health and Personal Care Services Policy Surveys and CMS Form 372.

Table 2B: Medicaid Home Health State Plan Services Expenditures, by State, 2003–2013 (\$, in thousands)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	2,737,352	4,043,432	4,285,354	4,607,332	4,953,786	5,132,589	5,374,357	5,725,628	5,771,653	5,800,108	5,933,047	2%
AK	848	745	1,221	1,165	1,155	957	302	335	375	319	1,041	226%
AL	9,200	11,500	16,000	16,500	20,800	25,000	32,320	29,248	28,884	23,404	21,069	-10%
AR	9,850	12,640	13,140	13,199	11,702	10,370	14,160	15,958	16,609	16,771	17,237	3%
AZ	502,730	571,603	642,134	694,692	783,660	793,647	803,633	813,619	823,606	833,592	849,478	2%
CA	157,959	162,471	161,558	161,459	159,631	156,214	152,797	150,174	146,757	137,979	129,547	-6%
CO	96,765	99,364	75,370	90,877	88,367	88,651	126,358	148,124	160,692	211,764	265,486	25%
CT	179,555	173,256	178,419	194,780	144,862	148,520	231,265	223,456	250,615	251,585	255,585	2%
DC	12,151	12,478	12,900	13,316	15,321	17,632	19,944	22,255	22,852	23,466	24,301	4%
DE	3,485	3,578	3,699	4,270	5,085	5,070	5,055	5,040	5,154	5,270	5,364	2%
FL	44,680	53,741	67,041	73,248	74,528	71,306	65,878	221,586	201,905	179,752	165,236	-8%
GA	13,535	7,417	6,663	6,861	5,698	5,037	4,376	3,715	3,054	2,892	2,962	2%
HI	2,706	822	2,052	2,660	2,963	3,169	3,374	3,580	3,824	4,050	4,135	2%
IA	70,559	67,449	76,136	91,684	100,158	106,830	113,447	122,715	125,935	133,533	134,037	0%
ID	3,447	6,362	6,773	7,504	7,248	7,487	4,048	3,943	4,479	4,844	3,844	-21%
IL	39,242	36,424	35,983	33,744	35,358	32,318	42,320	48,491	53,345	51,604	52,198	1%
IN	52,176	66,990	76,746	84,227	94,117	105,813	138,778	158,242	184,603	218,663	243,681	11%
KS	40,788	40,333	16,570	16,360	14,790	12,085	12,854	10,882	9,620	9,830	9,451	-4%
KY	58,124	54,134	52,479	56,169	63,172	49,893	41,885	40,880	38,652	35,099	36,084	3%
LA	26,816	293,605	292,748	27,154	28,688	36,526	38,670	42,891	44,699	44,803	43,946	-2%
MA	66,544	64,057	62,886	64,745	71,321	85,672	100,134	120,992	150,099	194,634	240,228	23%
MD	2,633	2,523	2,691	2,591	2,044	2,327	2,361	2,798	3,061	2,943	2,986	1%
ME	5,567	5,894	6,094	6,932	7,861	7,703	4,097	3,921	3,379	3,719	4,477	20%
MI	4,776	4,825	4,515	4,738	4,163	4,037	3,911	5,081	4,977	4,342	13,340	207%
MN	8,225	7,594	7,419	28,587	26,329	25,160	24,020	22,364	23,347	22,456	17,083	-24%
MO	6,134	5,339	7,113	6,388	6,746	5,955	6,493	6,923	7,263	6,887	6,607	-4%
MS	14,698	28,883	19,289	12,393	11,661	7,284	4,048	8,677	7,918	6,193	2,344	-62%
MT	539	494	488	447	485	431	455	531	445	448	572	28%
NC	94,913	97,659	111,310	116,214	119,785	131,309	144,747	149,348	141,831	55,269	56,355	2%
ND	3,026	4,944	4,925	5,256	5,018	5,750	6,267	7,652	6,682	8,670	10,651	23%
NE	20,658	19,721	32,005	32,985	34,753	38,132	24,832	25,838	19,199	17,425	12,100	-31%
NH	3,028	3,205	3,884	3,205	3,884	2,980	3,490	4,001	4,511	5,022	5,133	2%
NJ	36,608	37,591	38,865	42,634	45,367	49,037	52,707	56,376	57,649	58,950	60,452	3%
NM	538	315	386	451	441	426	327	289	254	1,740	2,188	26%
NV	6,136	2,218	4,325	2,180	3,394	3,347	3,155	5,113	7,513	11,034	13,015	18%
NY	704,235	1,342,916	1,424,463	1,682,697	1,836,285	1,842,757	1,849,228	1,855,700	1,862,171	1,868,643	1,889,655	1%
OH	114,663	132,313	83,193	98,579	151,244	149,864	182,308	214,740	250,636	294,259	365,252	24%
OK	4,158	5,411	7,742	8,994	12,001	10,739	11,490	13,396	14,209	14,770	15,266	3%
OR	1,006	1,033	1,068	544	475	1,055	544	663	490	607	552	-9%
PA	37,159	45,277	52,370	139,112	159,887	187,338	216,248	224,029	88,310	90,462	39,894	-56%
RI	3,114	3,632	3,755	3,427	3,266	3,037	2,808	2,579	2,461	2,544	2,694	6%
SC	18,406	18,901	19,541	22,660	26,357	29,632	25,588	19,577	15,068	10,687	7,418	-31%
SD	4,044	4,153	4,293	3,957	4,700	4,763	4,827	4,891	5,098	5,771	7,014	22%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
TN	33,818	69,346	136,076	195,439	278,452	318,237	244,845	207,652	211,821	202,985	204,496	1%
TX	176,894	414,933	459,642	481,609	429,354	467,050	528,469	622,167	679,625	643,671	609,817	-5%
UT	2,908	8,801	9,217	9,557	13,284	32,895	35,518	34,183	34,903	27,503	28,860	5%
VA	4,434	3,053	4,556	5,019	4,787	5,842	6,228	7,166	7,935	7,920	6,533	-18%
VT	7,972	7,652	7,633	7,798	5,668	6,313	6,576	6,302	6,877	13,295	15,971	20%
WA	3,843	3,236	4,489	4,615	4,337	4,282	4,201	4,365	3,980	3,021	3,570	18%
WI	18,232	18,722	19,356	18,653	18,133	17,633	17,134	16,635	17,082	17,541	16,450	-6%
WV	2,594	2,663	2,754	3,513	3,066	3,372	3,886	4,348	4,752	4,784	5,258	10%
WY	1,231	1,217	1,378	1,545	1,936	1,705	1,953	2,201	2,449	2,697	2,137	-21%

NOTES: Data may not sum to total due to rounding.

SOURCE: KCMU and UCSF analysis of Medicaid Home Health Policy Survey.

Table 2C: Medicaid Personal Care State Plan Services Expenditures, by State, 2003–2013 (\$, in thousands)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	6,516,807	7,124,121	7,672,918	8,708,956	9,546,110	10,130,555	10,935,233	10,219,773	10,523,897	8,390,654	9,133,062	9%
AK	39,328	40,384	41,752	78,154	73,174	72,474	77,336	82,197	87,059	91,921	93,145	1%
AL	-	-	-	-	-	-	-	-	-	-	-	-
AR	52,311	53,920	61,134	59,892	57,422	55,633	70,117	71,263	78,580	84,946	90,143	6%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	2,300,000	2,605,215	2,857,270	3,403,108	4,013,108	4,326,503	4,865,302	4,325,761	4,349,211	2,270,395	2,960,322	30%
CO	-	-	-	-	-	-	-	-	-	-	-	-
CT	-	-	-	-	-	-	-	-	-	-	-	-
DC	10,283	10,559	10,917	10,124	9,653	8,963	8,273	7,583	6,893	7,588	7,961	5%
DE	0	0	0	0	0	0	0	0	0	0	0	0%
FL	35,127	35,264	33,411	29,286	5,204	6,380	18,047	31,098	38,200	180,550	190,325	5%
GA	-	-	-	-	-	-	-	-	-	-	-	-
HI	-	-	-	-	-	-	-	-	-	-	-	-
IA	-	-	-	-	-	-	-	-	-	-	-	-
ID	26,886	24,453	27,298	28,549	30,161	30,732	24,765	15,906	15,999	20,778	6,949	-67%
IL	-	-	-	-	-	-	-	-	-	-	-	-
IN	-	-	-	-	-	-	-	-	-	-	-	-
KS	-	-	-	-	56	1,247	2,375	3,398	4,421	5,444	5,903	8%
KY	-	-	-	-	-	-	-	-	-	-	-	-
LA	-	1	33,519	72,267	121,164	194,116	242,683	237,587	190,140	185,443	227,137	22%
MA	193,168	221,845	243,905	268,960	283,566	314,501	355,674	394,358	436,194	465,197	504,651	8%
MD	20,739	20,490	20,595	21,475	22,904	23,899	25,201	26,535	29,990	31,062	40,474	30%
ME	10,358	11,640	10,935	10,774	9,234	6,566	14,798	16,247	45,829	27,135	26,055	-4%
MI	249,445	254,155	237,292	218,775	253,962	254,320	256,432	259,320	281,640	289,709	290,638	0%
MN	116,529	121,767	180,596	281,732	304,956	346,854	396,486	400,763	422,260	438,478	444,657	1%
MO	209,162	211,889	239,481	242,195	265,736	303,599	351,852	234,779	398,945	420,764	466,007	11%
MS	-	-	-	-	-	-	-	-	-	-	-	-
MT	21,300	21,900	24,958	25,306	26,037	28,778	36,937	45,316	43,305	43,177	42,698	-1%
NC	190,808	221,039	286,653	311,069	301,391	316,782	346,151	320,902	249,918	229,763	330,717	44%
ND	2,004	4,556	5,314	10,949	11,367	12,369	15,964	17,433	19,041	19,830	20,989	6%
NE	8,116	8,463	9,784	10,539	11,269	13,653	13,359	13,401	12,474	12,351	14,233	15%
NH	654	499	511	472	495	430	557	684	811	798	804	1%
NJ	280,035	263,184	269,283	254,337	253,790	250,363	250,369	250,375	250,381	251,387	256,840	2%
NM	159,392	180,888	150,526	167,269	190,766	203,666	223,786	243,906	264,026	267,982	276,023	3%
NV	19,809	43,134	35,568	54,273	65,004	71,775	69,844	68,222	70,110	66,672	67,383	1%
NY	1,796,653	1,930,721	2,045,068	2,244,915	2,324,483	2,342,911	2,220,834	2,140,557	2,060,281	2,051,086	2,068,407	1%
OH	-	-	-	-	-	-	-	-	-	-	-	-
OK	31,000	12,375	14,340	11,847	10,824	10,237	10,763	12,187	12,281	11,930	11,420	-4%
OR	3,100	4,497	5,645	5,323	5,178	4,960	4,426	3,995	3,754	3,866	1,700	-56%
PA	-	-	-	-	-	-	-	-	-	-	-	-
RI	0	0	0	0	0	0	0	0	0	0	0	0%
SC	-	-	-	-	-	-	-	-	-	-	-	-
SD	1,321	1,337	1,337	1,570	1,694	1,763	1,501	1,201	1,173	822	619	-25%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
TN	-	-	-	-	-	-	-	-	-	-	-	-
TX	374,444	417,973	459,642	481,520	449,989	422,475	479,569	414,168	551,443	304,501	91,104	-70%
UT	847	1,272	1,082	1,204	319	356	363	675	796	1,352	1,784	32%
VA	-	-	-	-	-	-	-	-	-	-	-	-
VT	8,165	10,616	13,131	16,411	16,832	16,839	19,277	21,536	22,186	21,775	19,035	-13%
WA	215,675	238,677	195,430	222,686	249,212	304,218	344,090	361,707	372,795	368,742	349,207	-5%
WI	113,296	123,839	128,035	136,936	140,365	145,396	150,426	155,457	160,487	163,517	164,032	0%
WV	26,850	27,571	28,505	27,037	36,793	37,800	37,676	41,253	43,273	51,696	61,700	19%
WY	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Data may not sum to total due to rounding. Personal care services are an optional benefit. In 2013, 32 states reported personal care services expenditures. Delaware and Rhode Island were approved by CMS to offer personal care services but did not report expenditures during the period. A dash indicates that there was no operational personal care services program that year.

SOURCE: KCMU and UCSF analysis of Medicaid Personal Care Services Policy Survey.

Table 2D: Medicaid § 1915(c) HCBS Waivers Expenditures, by State, 2003–2013 (\$, in thousands)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Total	18,962,787	20,902,423	23,307,062	24,346,957	26,981,429	30,647,156	34,299,881	36,774,853	38,699,215	40,844,314	41,444,582	1%
AK	105,503	113,402	113,599	125,137	132,721	143,346	163,045	181,622	200,984	212,695	237,126	11%
AL	203,082	225,714	257,707	280,816	312,573	335,800	368,754	375,034	384,918	398,281	430,933	8%
AR	101,399	111,273	129,193	163,033	173,537	196,766	229,559	256,959	274,000	295,690	297,845	1%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	1,140,539	1,256,950	1,396,828	1,429,634	1,692,552	1,864,743	1,988,332	2,061,069	2,503,002	3,185,476	2,591,306	-19%
CO	362,572	364,644	358,508	386,230	424,565	468,613	551,935	572,693	577,400	615,398	616,303	0%
CT	489,666	504,458	523,580	146,489	195,870	227,512	788,548	822,383	871,230	947,627	973,843	3%
DC	4,340	8,218	14,678	26,601	56,360	68,608	156,282	197,185	225,909	244,508	262,601	7%
DE	59,637	63,763	70,357	82,517	94,906	103,405	110,632	109,727	109,113	111,381	96,849	-13%
FL	733,941	830,009	901,164	1,009,222	1,141,114	1,223,412	924,999	1,137,742	1,311,999	1,376,283	1,357,182	-1%
GA	326,008	370,186	391,253	443,129	421,872	512,144	650,844	815,439	797,435	911,498	975,767	7%
HI	75,994	107,459	118,789	125,971	130,686	135,740	107,520	100,605	101,796	103,423	115,766	12%
IA	181,116	218,091	276,185	318,410	353,610	388,300	420,454	442,849	451,981	482,734	537,794	11%
ID	82,344	103,431	112,692	120,714	131,905	143,935	167,428	198,753	201,503	211,240	213,057	1%
IL	589,587	672,254	766,502	841,044	868,574	1,038,667	1,179,146	1,277,027	1,426,249	1,536,410	1,577,515	3%
IN	319,972	404,514	411,766	411,856	462,394	535,762	590,437	625,921	608,485	626,384	754,849	21%
KS	306,019	323,687	352,258	384,648	428,926	493,410	559,825	559,881	666,650	554,051	698,969	26%
KY	191,182	191,004	224,853	207,525	271,246	297,226	328,638	376,303	443,987	517,535	600,757	16%
LA	174,795	188,007	278,972	283,784	323,635	401,425	467,575	461,542	527,827	443,818	560,228	26%
MA	556,405	598,623	644,222	701,180	669,355	729,983	828,454	824,339	814,855	974,873	1,048,814	8%
MD	352,527	437,514	498,257	548,485	658,424	653,967	773,357	805,016	817,385	931,505	1,007,014	8%
ME	201,944	223,427	225,961	248,270	266,204	327,929	335,208	339,675	331,928	347,952	342,693	-2%
MI	329,268	397,413	421,876	443,889	455,289	491,111	525,973	555,677	566,396	605,052	687,163	14%
MN	1,020,272	1,093,323	1,186,371	1,312,866	1,464,391	1,630,342	1,787,725	1,873,476	1,943,699	1,994,956	2,056,247	3%
MO	355,464	362,843	370,250	404,820	456,831	497,076	536,887	602,917	594,521	652,357	720,114	10%
MS	81,240	103,442	121,895	112,023	131,102	148,815	175,176	198,840	200,391	264,095	270,911	3%
MT	66,284	75,248	79,969	86,495	90,983	108,599	114,271	119,668	125,171	130,443	133,580	2%
NC	453,260	484,323	545,177	564,364	671,325	728,732	694,891	786,717	808,134	872,737	812,703	-7%
ND	55,680	62,066	65,292	66,439	72,121	79,953	87,634	101,147	121,788	137,152	148,000	8%
NE	152,766	167,469	173,808	183,117	202,155	216,599	235,620	255,306	280,367	295,337	309,075	5%
NH	149,705	154,211	158,880	167,511	180,973	198,708	231,962	246,536	245,754	253,299	267,196	5%
NJ	425,146	443,129	495,986	512,603	541,388	567,194	709,740	775,799	824,580	946,277	1,007,157	6%
NM	226,940	262,637	273,775	296,222	312,943	353,222	322,651	324,034	317,075	314,992	336,397	7%
NV	35,241	42,243	55,387	69,893	74,198	77,581	82,127	85,363	87,050	90,553	86,215	-5%
NY	2,720,790	3,109,629	3,538,794	3,834,334	4,293,467	4,855,807	5,371,814	5,716,976	5,761,687	5,792,823	5,493,843	-5%
OH	775,640	846,793	943,624	1,147,208	1,395,609	1,419,497	1,569,844	1,692,507	1,929,815	1,960,947	1,983,664	1%
OK	301,201	280,582	315,231	369,707	416,125	465,770	486,196	480,197	471,006	469,112	457,156	-3%
OR	566,300	555,476	580,270	594,972	634,543	720,301	864,453	921,524	1,054,787	963,620	805,068	-16%
PA	1,147,196	1,268,109	1,427,006	1,155,791	1,215,867	1,928,735	2,179,060	2,408,175	2,443,818	2,693,554	3,014,165	12%
RI	231,671	239,289	239,604	257,209	289,991	301,456	141,405	-	-	-	-	-
SC	247,834	257,484	270,433	258,689	309,519	363,350	461,000	426,715	442,335	432,233	465,083	8%
SD	67,633	79,667	73,859	84,374	90,849	97,696	103,386	108,979	113,085	113,974	118,741	4%

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
TN	210,184	275,060	384,171	439,380	504,395	608,317	665,087	632,155	590,524	600,438	603,649	1%
TX	735,065	892,433	1,038,166	1,103,452	1,157,546	1,389,204	1,630,785	1,843,104	1,843,521	1,478,404	1,398,264	-5%
UT	110,477	115,720	120,207	123,992	134,173	156,863	178,446	179,731	181,720	191,471	208,305	9%
VA	359,040	358,320	426,493	524,147	616,209	704,399	831,993	943,515	1,034,968	1,116,112	1,213,726	9%
VT	109,732	124,510	120,845	-	-	-	-	-	-	-	-	-
WA	534,670	483,394	651,600	702,137	740,802	807,682	934,887	1,011,573	1,047,640	1,267,075	1,131,370	-11%
WI	673,788	760,421	838,968	913,729	957,714	1,049,507	1,254,477	1,493,325	1,561,349	1,661,401	1,765,281	6%
WV	186,022	208,982	233,456	239,133	262,513	291,214	314,784	336,330	344,138	426,607	531,165	25%
WY	75,705	81,582	88,346	93,768	97,378	98,731	116,635	112,802	115,260	90,530	123,132	36%

NOTES: Data may not sum to total due to rounding. Arizona did not operate a § 1915(c) waiver over the study period because all HCBS were provided through a § 1115 managed care waiver. Hawaii transitioned all non-I/DD § 1915(c) waiver participants to a § 1115 waiver in 2009. Rhode Island terminated its § 1915(c) waivers in mid-2009 and provided services under a § 1115 waiver. Vermont terminated its § 1915(c) waivers in 2006 and provided services under a § 1115 waiver. A dash indicates that there was no operational § 1915(c) program that year.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 3A: Total Medicaid HCBS Expenditures Per Participant Served, By State, 2003–2013 (\$)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Avg.	11,230	12,307	12,672	13,643	14,650	15,502	16,248	16,685	17,161	17,184	18,870	10%
AK	22,888	18,747	17,563	25,455	26,169	27,583	29,582	31,309	32,545	33,947	35,659	5%
AL	10,740	12,027	13,463	14,278	15,632	16,484	16,336	18,312	19,409	20,767	22,579	9%
AR	4,882	5,235	5,954	6,832	7,315	7,928	8,995	9,911	10,323	10,882	11,083	2%
AZ	18,251	19,096	20,583	21,469	23,123	22,696	22,295	21,918	21,561	21,224	21,045	-1%
CA	8,059	8,856	9,146	10,124	11,359	10,587	11,572	11,142	11,774	10,087	12,887	28%
CO	13,665	13,540	13,878	12,993	13,276	13,775	15,801	16,314	16,018	17,318	17,723	2%
CT	17,587	17,172	17,538	8,924	11,389	12,074	21,440	21,209	21,215	21,780	21,981	1%
DC	5,270	5,607	5,646	6,603	9,010	9,978	18,539	21,261	22,418	22,463	23,718	6%
DE	16,637	16,180	18,196	20,546	23,973	26,600	28,059	27,965	26,814	26,957	49,212	83%
FL	9,506	10,463	10,619	11,133	13,690	15,756	9,624	14,939	16,147	16,168	16,305	1%
GA	9,177	9,239	9,163	10,821	10,226	11,095	12,965	15,620	15,427	16,500	17,263	5%
HI	12,538	23,321	21,339	21,226	20,555	19,599	26,422	24,201	23,715	23,449	25,560	9%
IA	6,786	6,781	8,267	11,310	11,781	12,321	13,128	13,463	13,578	14,657	15,962	9%
ID	8,653	8,482	8,867	9,219	9,419	9,697	11,196	12,677	13,191	11,087	12,143	10%
IL	8,606	9,154	9,821	10,180	10,590	11,481	12,212	12,660	13,228	13,460	12,998	-3%
IN	18,986	21,037	22,916	22,275	22,737	24,373	24,346	23,405	22,489	22,154	22,534	2%
KS	13,687	13,110	12,625	13,274	14,431	15,161	16,955	17,072	20,264	17,653	22,082	25%
KY	5,864	6,275	7,428	7,733	10,053	10,447	11,294	12,133	13,469	15,064	16,209	8%
LA	11,042	19,962	23,278	13,805	15,289	17,474	18,483	16,776	16,574	16,096	17,402	8%
MA	16,933	19,141	18,769	19,866	19,458	20,520	21,589	21,020	21,232	23,059	23,370	1%
MD	18,595	23,643	22,041	24,153	29,254	27,757	27,211	27,495	27,296	29,862	31,307	5%
ME	23,592	26,747	27,156	28,413	31,579	34,517	33,571	34,079	21,162	18,516	32,322	75%
MI	7,397	8,215	8,372	8,322	8,761	9,024	9,128	9,038	9,226	9,556	9,641	1%
MN	22,200	21,832	23,167	20,691	21,246	22,193	23,283	23,196	26,571	23,815	24,383	2%
MO	6,813	6,550	6,910	7,704	8,780	9,592	10,242	9,787	10,966	11,785	12,333	5%
MS	4,063	5,540	5,986	5,613	6,338	6,809	7,321	8,070	7,702	8,847	10,826	22%
MT	13,505	13,370	13,933	14,673	14,893	17,003	18,213	19,210	19,152	18,313	19,047	4%
NC	8,771	8,375	8,505	8,442	9,490	10,163	9,856	10,753	11,474	9,974	11,118	11%
ND	14,714	13,872	13,705	12,911	13,644	15,053	16,973	21,675	24,234	26,351	25,941	-2%
NE	12,480	12,987	12,483	12,632	13,041	14,066	15,056	15,644	18,146	20,568	21,361	4%
NH	19,059	19,371	21,016	20,433	19,934	20,751	22,587	22,911	22,346	22,264	23,361	5%
NJ	15,415	15,453	15,259	14,537	14,675	14,969	15,291	17,702	18,269	19,636	20,369	4%
NM	25,585	27,855	26,096	26,499	25,447	26,434	25,665	25,816	25,009	25,001	23,069	-8%
NV	9,212	9,740	9,781	12,214	13,353	13,574	13,695	15,727	15,572	14,310	14,129	-1%
NY	20,829	23,495	25,777	27,542	30,452	32,575	33,655	34,445	34,535	34,564	33,603	-3%
OH	6,653	6,800	12,330	14,019	15,001	16,190	16,584	17,259	17,677	16,986	16,836	-1%
OK	11,726	10,828	10,792	11,645	12,048	12,254	13,021	13,348	13,461	13,415	13,704	2%
OR	13,155	13,204	13,589	13,778	14,407	16,253	18,387	18,798	20,721	18,592	17,476	-6%
PA	24,585	24,368	24,682	16,841	17,592	24,959	26,348	26,699	29,391	30,334	33,115	9%
RI	36,480	35,109	33,678	33,862	34,436	33,392	18,736	1,874	1,741	1,943	1,996	3%
SC	9,589	11,148	11,958	12,428	13,714	15,611	19,354	18,692	19,593	18,675	18,632	0%
SD	7,887	8,717	8,241	9,116	9,738	10,409	11,902	14,603	16,213	16,596	17,091	3%
TN	19,407	19,420	26,932	31,947	38,580	39,396	36,268	33,253	40,049	42,556	42,514	0%
TX	4,161	5,916	4,574	6,462	6,077	7,105	7,779	7,844	8,067	7,639	10,657	40%
UT	16,565	14,068	14,659	15,330	9,528	14,576	13,276	15,831	17,684	19,296	20,001	4%
VA	17,793	17,597	18,960	21,743	24,433	24,927	26,437	26,030	26,583	26,500	27,386	3%
VT	15,033	15,742	14,814	4,063	3,944	3,720	4,154	4,456	4,890	6,313	6,292	0%
WA	11,842	11,274	12,584	13,466	14,244	15,544	17,562	17,792	17,777	18,512	17,944	-3%
WI	16,386	16,740	17,288	18,421	18,426	17,847	20,232	20,783	20,788	20,885	21,369	2%
WV	13,755	15,546	17,747	16,321	18,511	18,822	18,579	19,723	19,851	24,164	28,220	17%
WY	21,863	22,803	22,110	22,022	21,632	21,445	24,887	22,773	22,654	19,370	25,828	33%

NOTES: Total Medicaid HCBS comprises Medicaid home health state plan services, Medicaid personal care state plan services, and Medicaid § 1915(c) waivers. Arizona did not operate a § 1915(c) waiver over the study period because all HCBS were provided through a § 1115 managed care waiver. Hawaii transitioned all non-I/DD § 1915(c) waiver participants to a § 1115 waiver in 2009. Rhode Island terminated its § 1915(c) waivers in mid-2009 and provided services under a § 1115 waiver. Vermont terminated its § 1915(c) waivers in 2006 and provided services under a § 1115 waiver.

SOURCES: KCMU and compilation of UCSF analyses of Medicaid Home Health and Personal Care Services Policy Surveys and CMS Form 372.

Table 3B: Medicaid Home Health State Plan Services Expenditures Per Participant Served, by State, 2003–2013 (\$)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Avg.	3,368	4,855	5,361	5,603	5,917	6,369	6,433	7,117	7,283	7,653	8,827	15%
AK	2,965	2,730	3,131	3,124	3,319	3,256	967	1,124	1,242	1,137	3,389	198%
AL	1,399	1,812	2,368	2,583	3,194	3,708	3,354	4,171	4,362	4,235	4,028	-5%
AR	1,455	1,903	1,936	2,029	1,929	1,799	2,265	2,588	2,610	2,640	2,699	2%
AZ	18,251	19,096	20,583	21,469	23,123	22,696	22,295	21,918	21,561	21,224	21,045	-1%
CA	1,766	1,867	1,822	1,842	1,845	1,823	1,801	4,903	4,946	5,790	6,159	6%
CO	13,208	12,008	8,676	9,637	8,487	8,086	11,449	13,304	13,393	17,356	21,065	21%
CT	8,578	8,079	8,202	8,767	10,064	9,799	8,721	8,133	8,334	7,991	8,069	1%
DC	5,721	5,287	4,518	3,910	3,746	4,163	4,551	4,915	4,413	4,229	4,498	6%
DE	2,632	2,235	2,591	2,910	3,840	3,995	4,164	4,348	4,483	4,768	4,747	0%
FL	2,557	2,692	3,163	3,463	3,904	4,189	4,165	15,104	16,514	16,279	15,644	-4%
GA	1,240	566	475	786	889	835	774	704	623	640	640	0%
HI	993	1,404	1,579	1,811	1,934	1,946	1,957	1,967	2,010	2,033	2,035	0%
IA	3,434	2,889	3,100	7,143	7,681	8,075	8,934	8,814	9,148	10,259	10,163	-1%
ID	1,921	1,931	2,036	2,260	1,842	1,673	2,151	2,203	2,394	2,295	2,123	-7%
IL	3,041	2,940	2,755	2,263	2,511	2,470	3,000	3,424	3,867	4,074	4,479	10%
IN	6,336	7,494	9,797	10,139	11,267	12,762	15,003	14,840	14,055	15,359	18,671	22%
KS	6,099	5,639	2,825	3,050	3,026	2,916	3,131	2,745	2,579	2,631	2,485	-6%
KY	2,359	2,284	2,341	2,916	3,410	2,750	2,527	2,559	2,436	2,342	2,400	2%
LA	2,427	25,176	24,021	2,265	2,451	3,124	3,269	3,822	4,048	4,081	4,064	0%
MA	3,409	3,883	3,518	3,681	4,143	4,853	5,493	6,057	7,182	8,462	9,650	14%
MD	732	2,026	613	620	617	627	594	688	721	695	727	5%
ME	1,773	2,050	2,041	1,876	2,543	2,688	1,555	1,502	432	320	1,765	451%
MI	575	681	687	723	694	685	675	795	823	827	969	17%
MN	1,590	1,420	1,419	2,186	2,076	1,993	1,954	1,855	10,076	1,751	1,699	-3%
MO	848	737	919	918	969	969	997	1,058	1,047	1,001	1,010	1%
MS	1,420	3,049	2,133	1,507	1,467	923	513	992	855	782	2,124	172%
MT	1,181	1,044	1,103	1,079	1,096	1,101	1,105	1,240	1,211	1,158	1,512	31%
NC	2,858	2,723	2,878	2,883	2,956	3,251	3,522	3,842	3,548	1,649	1,720	4%
ND	3,769	5,500	9,453	6,464	6,526	6,648	7,089	10,095	8,922	9,088	9,510	5%
NE	3,688	3,565	4,245	4,284	4,246	4,966	4,275	4,098	4,458	5,579	4,530	-19%
NH	1,316	1,342	1,367	1,190	1,440	1,173	1,247	1,309	1,361	1,406	1,447	3%
NJ	3,360	3,320	3,490	3,369	3,345	3,337	3,330	3,325	3,298	3,205	3,176	-1%
NM	883	805	895	1,009	1,028	1,077	1,003	1,058	1,022	3,326	3,765	13%
NV	4,797	2,263	4,971	2,732	4,519	4,748	5,189	7,771	11,400	15,808	18,835	19%
NY	7,838	12,108	13,039	14,333	16,164	16,846	17,065	17,287	17,514	17,746	18,113	2%
OH	1,276	1,372	2,669	3,060	3,796	4,787	5,271	5,855	6,404	6,601	7,619	15%
OK	1,383	1,409	1,509	1,719	2,028	2,147	2,232	2,330	2,682	2,672	3,018	13%
OR	864	1,023	1,304	163	103	350	163	223	160	190	1,332	601%
PA	4,604	4,937	5,596	5,866	6,520	7,268	7,875	7,805	6,026	6,566	5,186	-21%
RI	2,281	2,287	2,265	2,216	2,085	2,115	1,997	1,874	1,741	1,943	1,996	3%
SC	2,345	4,039	5,000	7,451	9,931	14,547	15,168	15,574	14,269	11,202	8,307	-26%
SD	807	793	841	786	947	979	1,281	1,910	2,814	3,135	4,111	31%
TN	4,422	5,480	10,852	16,458	25,518	29,667	22,566	17,554	17,463	18,565	18,316	-1%
TX	947	2,428	2,457	2,503	2,048	2,349	2,516	2,698	2,886	3,225	4,566	42%
UT	1,955	3,975	4,345	4,836	1,327	4,791	3,609	4,724	6,179	6,262	6,443	3%
VA	1,157	1,056	1,381	1,238	1,395	1,565	1,574	1,296	1,663	1,756	1,748	0%
VT	2,277	2,119	1,981	2,030	1,517	1,768	1,726	1,738	1,999	4,227	4,975	18%
WA	1,190	1,132	1,248	1,246	1,307	1,305	1,297	1,301	1,272	1,099	973	-11%
WI	3,089	2,672	2,605	2,767	2,923	2,922	2,921	2,920	3,213	3,481	3,425	-2%
WV	1,391	1,518	1,409	1,500	1,542	1,570	1,570	1,611	1,677	1,779	1,729	-3%
WY	2,203	2,270	2,438	2,725	3,173	3,072	3,432	3,775	4,102	4,414	3,549	-20%

SOURCE: KCMU and UCSF analysis of Medicaid Home Health Policy Survey.

Table 3C: Medicaid Personal Care State Plan Services Expenditures Per Participant Served, by State, 2003–2013 (\$)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Avg.	9,106	9,431	8,411	10,696	11,735	11,330	12,000	10,760	10,956	8,884	11,796	33%
AK	14,343	8,631	8,418	20,019	19,750	20,589	21,859	23,115	24,359	25,548	25,470	0%
AL	-	-	-	-	-	-	-	-	-	-	-	-
AR	3,375	3,478	3,956	3,951	4,037	3,996	4,877	5,125	5,397	5,586	5,870	5%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	7,986	8,830	9,103	10,316	11,615	10,232	11,439	9,502	9,527	5,414	9,702	79%
CO	-	-	-	-	-	-	-	-	-	-	-	-
CT	-	-	-	-	-	-	-	-	-	-	-	-
DC	4,372	4,342	4,329	4,053	4,082	3,900	3,708	3,504	3,287	3,593	3,794	6%
DE	0	0	0	0	0	0	0	0	0	0	0	0%
FL	2,396	2,396	2,390	2,390	14,578	15,830	19,118	25,180	21,904	16,244	15,393	-5%
GA	-	-	-	-	-	-	-	-	-	-	-	-
HI	-	-	-	-	-	-	-	-	-	-	-	-
IA	-	-	-	-	-	-	-	-	-	-	-	-
ID	7,962	6,766	7,581	7,559	7,994	8,089	5,805	4,775	7,396	3,511	3,357	-4%
IL	-	-	-	-	-	-	-	-	-	-	-	-
IN	-	-	-	-	-	-	-	-	-	-	-	-
KS	-	-	-	-	3,118	14,011	16,156	16,180	16,193	16,201	16,174	0%
KY	-	-	-	-	-	-	-	-	-	-	-	-
LA	-	666	7,618	11,003	14,048	16,833	17,131	13,551	10,258	10,082	11,689	16%
MA	18,275	18,935	17,717	18,941	18,768	18,610	19,543	19,889	20,226	20,356	20,774	2%
MD	4,373	4,451	4,436	4,800	5,223	5,412	5,469	5,422	5,744	5,835	7,236	24%
ME	5,454	5,969	5,752	6,602	5,381	3,853	6,954	7,237	10,243	8,997	8,437	-6%
MI	4,676	4,622	4,302	3,892	4,380	4,301	4,182	3,992	4,208	4,193	4,266	2%
MN	18,491	14,620	18,169	17,004	16,168	16,709	17,428	16,457	18,631	18,588	18,301	-2%
MO	4,665	4,298	4,840	5,106	5,658	6,154	6,672	4,593	7,192	7,559	7,904	5%
MS	-	-	-	-	-	-	-	-	-	-	-	-
MT	7,437	7,324	7,981	8,119	8,413	9,304	11,748	13,637	13,032	12,020	12,001	0%
NC	5,602	5,274	5,641	5,854	6,043	6,333	6,511	6,313	6,456	4,024	6,904	72%
ND	4,454	5,863	3,902	5,775	6,072	7,052	10,579	16,009	16,630	17,022	17,491	3%
NE	6,238	6,241	6,317	6,273	6,541	7,453	5,539	5,705	5,505	6,204	6,122	-1%
NH	25,137	19,956	20,438	22,486	30,934	20,496	22,293	23,594	28,969	28,509	25,114	-12%
NJ	15,815	13,861	12,894	11,998	11,759	12,140	12,182	12,224	12,266	12,237	12,379	1%
NM	17,789	18,991	15,657	15,965	16,209	16,471	16,648	16,798	16,927	16,884	17,237	2%
NV	9,720	9,785	7,126	10,082	11,479	11,567	10,734	13,291	13,039	10,305	10,376	1%
NY	21,428	22,552	24,268	27,112	29,020	29,848	29,549	29,857	30,197	30,984	32,303	4%
OH	-	-	-	-	-	-	-	-	-	-	-	-
OK	4,429	2,850	2,605	2,906	2,925	3,077	3,097	3,137	3,201	2,984	2,960	-1%
OR	1,305	1,000	1,110	1,421	1,435	1,463	1,438	1,237	1,199	1,198	2,429	103%
PA	-	-	-	-	-	-	-	-	-	-	-	-
RI	0	0	0	0	0	0	0	0	0	0	0	0%
SC	-	-	-	-	-	-	-	-	-	-	-	-
SD	1,393	1,448	1,484	1,677	1,718	1,770	1,744	1,518	1,538	1,436	1,450	1%
TN	-	-	-	-	-	-	-	-	-	-	-	-
TX	5,591	5,856	2,457	7,474	7,624	8,193	9,112	7,329	7,945	5,422	8,189	51%
UT	1,881	712	617	719	4,428	5,735	2,772	4,020	3,304	3,439	4,460	30%
VA	-	-	-	-	-	-	-	-	-	-	-	-
VT	6,682	6,880	6,926	7,756	8,553	6,347	7,985	8,214	8,864	9,035	8,086	-11%
WA	10,061	10,660	8,595	9,283	9,908	11,236	13,394	13,248	13,319	13,668	13,596	-1%
WI	10,817	11,134	10,210	10,331	10,281	10,362	10,438	10,511	10,580	10,517	10,479	0%
WV	5,159	5,576	6,521	4,753	6,106	6,273	6,377	6,337	6,473	7,758	8,945	15%
WY	-	-	-	-	-	-	-	-	-	-	-	-

NOTES: Personal care state plan services are an optional benefit. In 2013, 32 states reported personal care services expenditures. Delaware and Rhode Island were approved by CMS to offer personal care services but did not report expenditures during the period. A dash indicates that there was no operational personal care services program that year.

SOURCE: KCMU and UCSF analysis of Medicaid Personal Care Services Policy Survey.

Table 3D: Medicaid § 1915(c) HCBS Waivers Expenditures Per Participant Served, by State, 2003–2013 (\$)

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	12-13 % change
Avg.	19,270	20,542	21,755	21,658	22,851	24,292	25,070	26,168	26,661	27,223	26,768	-2%
AK	31,616	34,458	31,865	33,325	34,393	35,438	38,041	39,629	40,310	41,674	44,514	7%
AL	15,397	16,872	18,987	19,455	21,100	22,172	24,720	24,894	26,188	26,950	29,141	8%
AR	9,025	9,410	10,826	12,644	13,467	14,620	16,095	17,534	18,462	19,764	20,096	2%
AZ	-	-	-	-	-	-	-	-	-	-	-	-
CA	16,512	17,361	17,412	18,869	20,081	20,490	20,860	20,442	23,124	28,608	22,597	-21%
CO	13,792	14,027	15,879	14,152	15,042	15,890	17,307	17,328	16,943	17,305	16,589	-4%
CT	28,602	27,993	28,652	9,141	12,618	14,230	37,466	37,660	38,197	40,193	40,149	0%
DC	7,174	10,509	10,186	15,881	21,913	22,813	46,805	49,469	54,713	53,072	53,255	0%
DE	24,144	24,898	26,630	29,930	33,335	36,812	38,031	37,259	35,062	34,569	102,270	196%
FL	13,726	15,615	15,235	15,187	16,365	18,778	10,503	14,744	15,970	16,144	16,528	2%
GA	12,498	13,331	13,303	13,488	11,917	12,620	14,501	17,289	16,970	17,908	18,742	5%
HI	21,401	26,481	27,226	27,439	26,295	24,862	43,477	40,485	39,904	39,916	43,537	9%
IA	10,951	11,623	15,293	13,593	13,879	14,405	15,032	15,766	15,695	16,629	18,609	12%
ID	10,490	11,598	11,708	12,186	12,848	13,695	14,712	16,395	15,750	15,841	14,639	-8%
IL	9,799	10,338	11,165	11,842	12,186	12,951	13,725	14,105	14,545	14,589	13,871	-5%
IN	28,152	30,022	30,537	29,494	28,679	29,712	28,521	27,403	27,495	26,201	24,146	-8%
KS	16,409	15,702	15,087	15,481	16,595	16,904	18,873	19,007	22,531	19,662	24,803	26%
KY	10,694	12,434	15,069	13,985	18,405	19,707	20,244	20,442	22,235	23,850	24,770	4%
LA	24,254	15,086	29,634	30,833	30,414	31,000	32,193	29,823	32,110	35,488	31,962	-10%
MA	30,732	33,261	33,860	34,537	32,947	35,571	35,932	34,451	34,636	38,937	38,050	-2%
MD	29,689	32,099	34,067	36,432	42,036	39,925	37,093	37,644	37,683	40,899	42,218	3%
ME	48,128	53,400	55,642	61,544	63,930	61,364	57,934	59,561	58,182	59,622	57,868	-3%
MI	19,108	22,283	24,047	25,454	26,091	27,237	27,645	28,662	29,073	30,646	32,858	7%
MN	25,443	25,830	26,868	26,902	27,644	28,682	29,896	29,926	29,931	29,903	29,837	0%
MO	11,214	11,330	11,552	13,310	15,680	17,371	19,066	21,048	20,612	22,417	23,072	3%
MS	6,126	7,177	8,383	8,034	8,995	9,897	10,557	11,721	11,266	11,670	11,224	-4%
MT	20,681	19,596	20,007	20,999	20,901	23,506	23,951	24,598	24,400	23,605	24,973	6%
NC	26,678	26,761	25,472	23,502	27,147	28,703	26,669	28,933	31,218	34,266	29,836	-13%
ND	19,380	17,820	17,997	17,995	18,752	20,522	21,479	25,433	29,046	32,911	32,139	-2%
NE	19,985	20,480	21,240	21,387	22,156	22,631	23,642	25,094	26,392	27,620	28,869	5%
NH	26,162	26,874	32,405	29,579	27,485	27,678	30,417	31,286	31,132	31,511	32,930	5%
NJ	21,783	24,852	23,985	23,472	24,461	25,124	23,771	32,715	34,211	37,761	39,900	6%
NM	40,875	43,642	43,952	44,991	41,101	42,444	42,820	44,893	42,854	45,044	33,479	-26%
NV	10,599	11,718	14,275	16,789	17,397	17,876	19,498	19,852	19,178	19,728	18,714	-5%
NY	35,332	41,374	45,154	46,978	51,159	54,149	55,363	55,530	54,424	52,900	48,650	-8%
OH	17,640	17,797	18,108	20,250	22,059	21,631	22,089	22,924	22,917	22,234	21,660	-3%
OK	16,125	14,483	15,287	15,259	15,518	14,837	15,980	16,994	16,929	17,100	17,323	1%
OR	14,221	15,020	15,561	16,292	17,520	18,813	21,153	21,395	23,483	21,107	17,858	-15%
PA	28,607	28,353	28,213	21,736	22,650	32,687	34,342	34,460	34,181	34,532	35,657	3%
RI	45,686	44,886	43,032	41,816	41,726	39,238	22,477	-	-	-	-	-
SC	12,443	12,802	13,295	13,200	14,173	15,705	19,656	18,865	19,845	18,988	19,009	0%
SD	20,532	22,069	20,283	21,689	22,504	23,530	22,524	24,068	23,623	23,492	22,570	-4%
TN	42,677	54,146	56,679	54,951	53,775	47,554	46,709	47,084	74,712	75,574	76,957	2%
TX	13,279	18,079	19,329	17,532	17,415	19,755	21,306	23,045	24,177	23,871	26,733	12%
UT	22,283	23,420	23,912	24,123	24,732	25,652	28,917	29,220	28,372	28,866	29,472	2%
VA	21,633	20,306	21,943	25,843	28,030	28,449	29,984	30,444	30,034	29,444	29,734	1%
VT	30,064	31,795	31,726	-	-	-	-	-	-	-	-	-
WA	13,702	12,367	15,765	16,988	17,919	19,485	21,181	21,628	21,377	21,549	21,203	-2%
WI	20,560	21,234	22,623	24,013	23,519	21,922	25,086	25,036	24,718	24,566	25,005	2%
WV	21,646	24,051	27,175	28,157	31,552	30,699	29,157	33,116	33,617	40,100	47,190	18%
WY	25,576	26,359	25,292	24,932	24,461	23,914	27,797	25,252	25,062	21,545	28,986	35%

NOTES: Arizona did not operate a § 1915(c) waiver over the study period because all HCBS were provided through a § 1115 managed care waiver. Hawaii transitioned all non-I/DD § 1915(c) waiver participants to a § 1115 waiver in 2009. Rhode Island terminated its § 1915(c) waivers in mid-2009 and provided services under a § 1115 waiver. Vermont terminated its § 1915(c) waivers in 2006 and provided services under a § 1115 waiver. A dash indicates that there was no operational § 1915(c) waiver program that year.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 4: National § 1915(c) HCBS Waivers Participants, Expenditures, and Expenditures Per Participant, by Waiver Type, 2012 and 2013

Waiver Type	Participants			Expenditures (\$, in thousands)			Expenditures Per Participant (\$)		
	2012	2013	% Change	2012	2013	% Change	2012	2013	% Change
Total	1,500,342	1,548,305	3%	\$40,844,314	\$41,444,582	1%	\$27,223	\$26,768	-2%
I/DD	614,360	625,976	2%	\$29,106,060	\$29,198,146	0%	\$47,376	\$46,644	-2%
Aged (≥ 65)	189,894	210,421	11%	\$2,181,026	\$2,505,382	15%	\$11,485	\$11,907	4%
Aged/Disabled	528,132	540,362	2%	\$6,301,799	\$6,316,263	0%	\$11,932	\$11,689	-2%
Physically Disabled	87,017	88,949	2%	\$1,818,976	\$1,897,906	4%	\$20,904	\$21,337	2%
Children	46,274	48,933	6%	\$681,245	\$753,277	11%	\$14,722	\$15,394	5%
HIV/AIDS	13,538	12,287	-9%	\$52,226	\$50,029	-4%	\$3,858	\$4,072	6%
Mental Health	4,061	4,243	4%	\$50,502	\$38,230	-24%	\$12,436	\$9,010	-28%
TBI/SCI	17,066	17,134	0%	\$652,482	\$685,349	5%	\$38,233	\$39,999	5%

NOTES: Data may not sum to total due to rounding. I/DD – Intellectual/Developmental Disability; TBI/SCI – Traumatic Brain Injury/Spinal Cord Injury.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 5: Medicaid § 1915(c) HCBS Waiver Participants, by Type of Waiver and State, 2013

	No. of Waivers	I/DD	Aged (≥ 65)	Aged/Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total Participants
Total	289	625,976	210,421	540,362	88,949	48,933	12,287	4,243	17,134	1,548,305
AK	4	1,701	1,832	-	1,501	293	-	-	-	5,327
AL	6	5,538	-	8,535	530	-	185	-	-	14,788
AR	4	4,151	6,805	988	2,810	67	-	-	-	14,821
CA	8	96,369	-	13,361	2,882	112	1,950	-	-	114,674
CO	11	7,849	-	23,706	-	1,986	-	3,286	325	37,152
CT	8	9,334	-	13,284	996	48	-	166	428	24,256
DC	2	1,806	-	3,125	-	-	-	-	-	4,931
DE	1	947	-	-	-	-	-	-	-	947
FL	13	24,826	32,008	17,767	122	5	7,012	-	375	82,115
GA	5	12,425	-	38,013	-	489	-	-	1,136	52,063
HI	1	2,659	-	-	-	-	-	-	-	2,659
IA	7	12,263	10,521	-	3,621	1,107	36	-	1,352	28,900
ID	4	3,373	-	9,926	-	1,255	-	-	-	14,554
IL	9	18,537	56,643	9,281	21,081	2,333	1,495	-	4,361	113,731
IN	4	15,797	-	15,265	-	-	-	-	200	31,262
KS	7	8,872	6,801	-	6,215	5,613	-	-	680	28,181
KY	6	12,867	-	10,906	62	-	-	-	418	24,253
LA	6	10,372	-	5,837	-	1,319	-	-	-	17,528
MA	8	11,873	15,321	-	-	172	-	-	198	27,564
MD	9	13,503	3,684	4,695	732	1,111	-	69	59	23,853
ME	4	4,244	-	1,519	159	-	-	-	-	5,922
MI	4	8,321	-	11,846	-	746	-	-	-	20,913
MN	5	16,285	31,278	-	19,872	-	-	-	1,480	68,915
MO	10	12,265	-	17,067	1,653	153	73	-	-	31,211
MS	6	2,009	-	18,267	2,522	-	-	505	833	24,136
MT	6	2,639	-	2,384	-	116	-	210	-	5,349
NC	4	13,014	-	12,542	-	1,683	-	-	-	27,239
ND	6	4,170	-	396	-	39	-	-	-	4,605
NE	5	4,475	-	5,883	-	327	-	-	21	10,706
NH	4	4,488	3,425	-	-	-	-	-	201	8,114
NJ	5	10,912	-	13,456	292	-	240	-	342	25,242
NM	6	4,259	-	5,634	-	148	7	-	-	10,048
NV	4	1,751	2,236	37	583	-	-	-	-	4,607
NY	9	71,738	-	29,890	-	8,388	-	-	2,910	112,926
OH	9	32,706	-	46,248	12,629	-	-	-	-	91,583
OK	5	4,965	41	20,970	127	287	-	-	-	26,390
OR	6	15,135	-	29,659	-	288	-	-	-	45,082
PA	9	29,845	37,706	-	9,848	6,231	297	-	606	84,533
SC	6	6,803	-	15,464	52	426	986	-	736	24,467
SD	4	3,519	1,607	-	135	-	-	-	-	5,261
TN	3	7,844	-	-	-	-	-	-	-	7,844
TX	7	31,376	-	14,480	-	6,449	-	-	-	52,305
UT	7	4,486	513	1,436	128	399	-	-	106	7,068
VA	7	10,282	-	30,134	397	-	6	-	-	40,819
WA	6	12,347	-	40,930	-	83	-	-	-	53,360
WI	11	25,152	-	38,827	-	6,435	-	7	176	70,597
WV	2	4,492	-	6,757	-	-	-	-	7	11,256
WY	6	1,392	-	1,847	-	825	-	-	184	4,248

NOTES: Data may not sum to total due to rounding. I/DD – Intellectual/Developmental Disability; TBI/SCI – Traumatic Brain Injury/Spinal Cord Injury. A dash indicates no § 1915(c) waiver was offered for that target enrollment group. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

**Table 6: Medicaid § 1915(c) HCBS Waiver Expenditures, by Type of Waiver and State, 2013
(\$, in thousands)**

	No. of Waivers	I/DD	Aged (≥ 65)	Aged/ Disabled	Physically Disabled	Children	HIV/ AIDS	Mental Health	TBI/SCI	Total Expenditures
Total	289	29,198,146	2,505,382	6,316,263	1,897,906	753,277	50,029	38,230	685,349	41,444,582
AK	4	126,580	49,035	-	48,462	13,049	-	-	-	237,126
AL	6	306,192	-	116,898	6,408	-	1,435	-	-	430,933
AR	4	181,882	59,314	14,772	41,788	89	-	-	-	297,845
CA	7	2,378,950	-	83,334	119,665	386	8,971	-	-	2,591,306
CO	11	321,817	-	236,713	-	16,235	-	28,256	13,282	616,303
CT	8	722,261	-	182,220	26,364	-	-	2,845	40,154	973,843
DC	2	180,135	-	82,466	-	-	-	-	-	262,601
DE	3	96,849	-	-	-	-	-	-	-	96,849
FL	15	901,603	320,587	112,697	633	24	10,569	-	11,069	1,357,182
GA	5	503,574	-	413,246	-	16,579	-	-	42,369	975,767
HI	1	115,766	-	-	-	-	-	-	-	115,766
IA	7	394,937	76,980	-	25,497	9,366	335	-	30,679	537,794
ID	4	130,241	-	75,416	-	7,400	-	-	-	213,057
IL	9	589,123	427,421	138,463	287,940	43,254	18,602	-	72,711	1,577,515
IN	5	584,462	-	164,383	-	-	-	-	6,004	754,849
KS	7	358,300	71,326	-	156,975	89,657	-	-	22,710	698,969
KY	6	474,626	-	84,403	5,139	-	-	-	36,589	600,757
LA	5	427,384	-	118,968	-	13,875	-	-	-	560,228
MA	8	909,040	123,547	-	-	2,655	-	-	13,572	1,048,814
MD	8	729,869	123,770	80,159	35,698	31,689	-	90	5,741	1,007,014
ME	4	309,604	-	27,926	5,163	-	-	-	-	342,693
MI	4	501,688	-	168,762	-	16,713	-	-	-	687,163
MN	5	1,032,258	380,135	-	546,686	-	-	-	97,167	2,056,247
MO	9	599,575	-	94,179	22,921	1,513	1,926	-	-	720,114
MS	6	49,592	-	152,074	47,096	-	-	3,365	18,785	270,911
MT	6	90,653	-	37,453	-	1,857	-	3,617	-	133,580
NC	4	563,856	-	186,394	-	62,453	-	-	-	812,703
ND	5	142,543	-	5,107	-	349	-	-	-	148,000
NE	5	217,784	-	70,770	-	19,825	-	-	696	309,075
NH	4	206,924	41,237	-	-	-	-	-	19,035	267,196
NJ	5	723,646	-	232,490	21,371	-	568	-	29,083	1,007,157
NM	6	286,334	-	48,096	-	1,675	293	-	-	336,397
NV	4	73,246	9,340	275	3,354	-	-	-	-	86,215
NY	9	5,146,108	-	64,025	-	153,594	-	-	130,116	5,493,843
OH	8	1,301,277	-	435,133	247,254	-	-	-	-	1,983,664
OK	5	273,025	312	179,222	2,239	2,358	-	-	-	457,156
OR	6	610,949	-	192,906	-	1,213	-	-	-	805,068
PA	9	1,921,815	807,315	-	206,636	29,230	2,919	-	46,250	3,014,165
SC	6	286,502	-	137,554	1,757	5,903	4,402	-	28,965	465,083
SD	4	103,195	10,856	-	4,689	-	-	-	-	118,741
TN	3	603,649	-	-	-	-	-	-	-	603,649
TX	7	1,126,706	-	174,047	-	97,512	-	-	-	1,398,264
UT	6	164,892	4,206	28,824	2,135	4,918	-	-	3,329	208,305
VA	7	639,956	-	541,726	32,035	-	9	-	-	1,213,726
WA	9	549,379	-	579,669	-	2,322	-	-	-	1,131,370
WI	11	789,161	-	874,035	-	93,663	-	57	8,365	1,765,281
WV	2	365,285	-	165,784	-	-	-	-	96	531,165
WY	6	84,953	-	15,677	-	13,921	-	-	8,581	123,132

NOTES: Data may not sum to total due to rounding. I/DD – Intellectual/Developmental Disability; TBI/SCI – Traumatic Brain Injury/Spinal Cord Injury. A dash indicates no § 1915(c) waiver was offered for that target enrollment group. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 7: Medicaid § 1915(c) HCBS Waiver Expenditures Per Participant Served, by Type of Waiver and State, 2013 (\$)

	Total No. of Waivers	I/DD	Aged (≥ 65)	Aged/ Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total Expenditures Per Person
Avg.	289	46,644	11,907	11,689	21,337	15,394	4,072	9,010	39,999	26,768
AK	4	74,415	26,766	-	32,286	44,535	-	-	-	44,514
AL	6	55,289	-	13,696	12,091	-	7,759	-	-	29,141
AR	4	43,816	8,716	14,951	14,871	1,326	-	-	-	20,096
CA	7	24,686	-	6,237	41,522	3,445	4,601	-	-	22,597
CO	11	41,001	-	9,985	-	8,175	-	8,599	40,868	16,589
CT	8	77,380	-	13,717	26,470	-	-	17,137	93,817	40,149
DC	2	99,743	-	26,389	-	-	-	-	-	53,255
DE	3	102,270	-	-	-	-	-	-	-	102,270
FL	15	36,317	10,016	6,343	5,191	4,709	1,507	-	29,517	16,528
GA	5	40,529	-	10,871	-	33,903	-	-	37,296	18,742
HI	1	43,537	-	-	-	-	-	-	-	43,537
IA	7	32,206	7,317	-	7,041	8,461	9,303	-	22,692	18,609
ID	4	38,613	-	7,598	-	5,896	-	-	-	14,639
IL	9	31,781	7,546	14,919	13,659	18,540	12,443	-	16,673	13,871
IN	5	36,998	-	10,769	-	-	-	-	30,021	24,146
KS	7	40,385	10,488	-	25,258	15,973	-	-	33,397	24,803
KY	6	36,887	-	7,739	82,883	-	-	-	87,535	24,770
LA	5	41,206	-	20,382	-	10,519	-	-	-	31,962
MA	8	76,564	8,064	-	-	15,434	-	-	68,546	38,050
MD	8	54,052	33,597	17,073	48,767	28,523	-	1,302	97,302	42,218
ME	4	72,951	-	18,384	32,471	-	-	-	-	57,868
MI	4	60,292	-	14,246	-	22,404	-	-	-	32,858
MN	5	63,387	12,153	-	27,510	-	-	-	65,654	29,837
MO	9	48,885	-	5,518	13,866	9,890	26,389	-	-	23,072
MS	6	24,685	-	8,325	18,674	-	-	6,663	22,551	11,224
MT	6	34,351	-	15,710	-	16,013	-	17,224	-	24,973
NC	4	43,327	-	14,862	-	37,108	-	-	-	29,836
ND	5	34,183	-	12,897	-	8,956	-	-	-	32,139
NE	5	48,667	-	12,030	-	60,626	-	-	33,143	28,869
NH	4	46,106	12,040	-	-	-	-	-	94,700	32,930
NJ	5	66,317	-	17,278	73,189	-	2,365	-	85,038	39,900
NM	6	67,230	-	8,537	-	11,317	41,802	-	-	33,479
NV	4	41,831	4,177	7,428	5,753	-	-	-	-	18,714
NY	9	71,735	-	2,142	-	18,311	-	-	44,714	48,650
OH	8	39,787	-	9,409	19,578	-	-	-	-	21,660
OK	5	54,990	7,616	8,547	17,627	8,217	-	-	-	17,323
OR	6	40,367	-	6,504	-	4,211	-	-	-	17,858
PA	9	64,393	21,411	-	20,982	4,691	9,829	-	76,320	35,657
SC	6	42,114	-	8,895	33,797	13,857	4,464	-	39,355	19,009
SD	4	29,325	6,756	-	34,736	-	-	-	-	22,570
TN	3	76,957	-	-	-	-	-	-	-	76,957
TX	7	35,910	-	12,020	-	15,120	-	-	-	26,733
UT	6	36,757	8,199	20,072	16,681	12,326	-	-	31,409	29,472
VA	7	62,240	-	17,977	80,692	-	1,451	-	-	29,734
WA	9	44,495	-	14,162	-	27,972	-	-	-	21,203
WI	11	31,376	-	22,511	-	14,555	-	8,147	47,531	25,005
WV	2	81,319	-	24,535	-	-	-	-	13,674	47,190
WY	6	61,029	-	8,488	-	16,874	-	-	46,634	28,986

NOTES: I/DD – Intellectual/Developmental Disability; TBI/SCI – Traumatic Brain Injury/Spinal Cord Injury. A dash indicates no § 1915(c) waiver was offered for that target enrollment group. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of CMS Form 372

Table 8: Medicaid § 1915(c) HCBS Waiver Participants, by Service and State, 2013

	Case Management	Respite/ Home Health/ Personal Care	Habilitation/ Day Care	Nursing/ Therapy	Residential/ Foster Care	Other Services
Total	618,888	866,597	659,304	252,007	242,045	1,532,316
AK	5,125	3,125	3,801	451	-	5,389
AL	9,321	7,902	7,451	1,604	-	21,356
AR	6,831	9,324	324	532	936	19,654
CA	16,936	44,570	62,935	17,953	35,596	71,642
CO	1,238	19,323	19,010	3,083	4,936	46,727
CT	13,226	5,609	13,325	1,440	639	36,799
DC	2,672	1,603	1,540	264	-	3,262
DE	1,544	1,364	1,650	251	1,236	869
FL	89,021	42,139	25,430	15,403	22,401	111,897
GA	12,001	19,654	9,011	412	24,031	25,189
HI	-	2,401	2,340	54	-	365
IA	19,877	25,965	13,289	1,118	10,361	55,400
ID	1,263	2,030	6,473	4,672	4,467	15,228
IL	6,493	29,267	29,709	9,055	9,281	89,793
IN	19,013	11,320	32,460	13,024	1,051	31,204
KS	3,564	29,012	11,362	596	-	24,598
KY	36,198	17,066	12,257	8,366	6,231	15,707
LA	8,957	7,901	6,011	106	113	12,907
MA	-	9,210	12,054	602	2,240	26,079
MD	12,122	7,012	21,009	2,604	2,353	11,870
ME	1,645	5,952	4,535	118	-	4,846
MI	-	9,023	394	2,364	4,650	36,084
MN	41,397	20,687	24,903	751	5,136	69,014
MO	168	12,870	8,502	1,929	296	30,346
MS	20,475	20,710	3,886	108	683	29,058
MT	3,031	2,400	4,865	749	67	9,339
NC	14,601	39,013	8,312	943	35	18,315
ND	503	850	3,153	32	154	5,636
NE	-	1,228	7,667	122	2,613	6,222
NH	2,901	6,501	2,135	2,640	901	5,694
NJ	24,601	20,945	9,354	832	3,901	8,654
NM	5,647	4,108	4,048	15,827	2,642	6,015
NV	2,901	323	3,602	765	693	5,124
NY	12,551	25,525	107,982	3,456	1,987	73,124
OH	7	75,623	31,392	6,595	6,714	156,394
OK	25,013	23,640	7,936	25,875	1,540	59,701
OR	21,929	15,020	5,570	510	27,507	18,473
PA	77,296	65,013	49,147	8,753	901	93,154
SC	16,802	16,001	7,694	765	10	49,012
SD	3,519	590	5,491	4,560	1,210	6,321
TN	6,890	6,901	9,032	6,901	1,002	9,321
TX	4,955	26,451	21,367	49,924	16,010	80,962
UT	6,588	3,168	5,203	3,479	3,369	9,915
VA	16,057	65,000	8,386	1,469	56	4,725
WA	-	46,901	2,650	8,560	23,214	52,364
WI	29,032	48,601	8,102	5,001	10,654	36,402
WV	10,301	4,877	9,540	15,974	-	18,032
WY	4,676	2,879	3,015	1,415	228	4,134

NOTES: Data may not sum to total due to rounding. "Other Services" include assistance with chores, meals, transportation, etc. A dash indicates that the service was not offered in a § 1915(c) waiver. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 9: Medicaid § 1915(c) HCBS Waiver Expenditures, by Service and State, 2013
(\$, in thousands)

	Case Management	Respite/ Home Health/ Personal Care	Habilitation/ Day Care	Nursing/ Therapy	Residential/ Foster Care	Other Services
Total	1,105,436	12,319,336	16,527,542	937,978	5,073,390	5,480,899
AK	13,201	54,680	125,650	3,569	-	40,025
AL	30,265	43,213	282,855	36,501	-	38,099
AR	8,324	224,033	3,015	268	15,301	46,904
CA	41,603	194,931	831,310	210,520	1,110,836	202,107
CO	1,017	196,106	304,122	8,344	46,114	60,601
CT	18,302	112,324	631,581	2,501	10,503	198,632
DC	3,965	109,216	65,042	1,365	-	83,012
DE	2,663	17,654	20,322	41	55,037	1,132
FL	90,363	306,555	468,846	69,457	180,325	241,635
GA	29,046	95,365	26,085	6,980	412,302	405,988
HI	-	68,901	38,964	2,365	-	5,535
IA	19,120	85,444	56,755	3,469	298,333	74,673
ID	1,022	8,438	133,745	1,826	45,301	22,726
IL	8,538	405,924	547,010	13,249	138,463	464,330
IN	12,368	89,675	436,549	36,450	23,655	156,152
KS	610	276,733	289,954	2,013	-	129,659
KY	47,557	158,333	105,363	51,403	209,391	28,708
LA	12,652	115,415	41,142	8,681	884	381,454
MA	-	68,902	751,012	410	36,548	191,942
MD	18,101	113,941	760,985	6,407	75,521	32,060
ME	1,222	266,708	57,961	127	-	16,675
MI	-	59,012	2,365	10,325	37,950	577,510
MN	68,904	256,987	965,702	2,904	365,770	395,981
MO	230	402,481	195,201	14,780	9,375	98,047
MS	34,954	127,388	37,094	238	8,184	63,052
MT	8,287	14,699	94,426	1,851	1,160	13,158
NC	26,324	504,327	209,402	33,402	12,894	26,355
ND	425	15,022	119,386	54	477	12,635
NE	-	1,664	210,988	1,855	36,574	57,995
NH	10,366	159,645	56,970	5,960	10,241	24,014
NJ	33,698	821,589	18,966	26,870	90,355	15,679
NM	18,046	124,812	37,771	22,237	123,684	9,848
NV	1,795	1,896	68,567	6,570	6,296	1,091
NY	55,687	209,242	5,133,215	7,773	3,560	84,366
OH	4	1,331,628	248,903	34,255	99,081	269,793
OK	68,401	201,549	123,257	9,962	23,996	29,991
OR	11,675	108,818	59,134	744	611,587	13,109
PA	121,809	894,637	1,705,170	105,563	9,402	177,584
SC	137,357	129,458	165,287	1,407	-	31,575
SD	8,983	15,887	83,587	8,309	-	1,975
TN	18,980	468,041	99,655	5,012	3,650	8,310
TX	9,794	256,432	230,485	53,452	443,951	404,151
UT	14,287	11,596	123,870	6,750	41,282	10,519
VA	6,840	1,042,546	111,153	43,292	584	9,310
WA	-	917,660	9,911	929	183,037	19,833
WI	56,970	1,187,473	95,048	39,702	289,548	96,541
WV	20,367	23,678	263,401	23,970	-	199,748
WY	11,311	18,678	80,362	3,863	2,239	6,678

NOTES: Data may not sum to total due to rounding. "Other Services" include assistance with chores, meals, transportation, etc. A dash indicates that the service was not offered in a § 1915(c) waiver. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 10: Medicaid § 1915(c) HCBS Waiver Expenditures Per Participant Served, by Service and State, 2013 (\$)

	Case Management	Respite/ Home Health/ Personal Care	Habilitation/ Day Care	Nursing/ Therapy	Residential/ Foster Care	Other Services
Avg.	1,786	14,216	25,068	3,722	20,961	3,577
AK	2,576	17,498	33,057	7,915	-	7,427
AL	3,247	5,469	37,962	22,756	-	1,784
AR	1,219	24,028	9,306	504	16,347	2,386
CA	2,456	4,374	13,209	11,726	31,207	2,821
CO	821	10,149	15,998	2,707	9,342	1,297
CT	1,384	20,026	47,398	1,737	16,437	5,398
DC	1,484	68,133	42,235	5,171	-	25,448
DE	1,725	12,943	12,316	165	44,528	1,303
FL	1,015	7,275	18,437	4,509	8,050	2,159
GA	2,420	4,852	2,895	16,943	17,157	16,118
HI	-	28,697	16,651	43,805	-	15,164
IA	962	3,291	4,271	3,103	28,794	1,348
ID	809	4,157	20,662	391	10,141	1,492
IL	1,315	13,870	18,412	1,463	14,919	5,171
IN	651	7,922	13,449	2,799	22,507	5,004
KS	171	9,539	25,520	3,378	-	5,271
KY	1,314	9,278	8,596	6,144	33,605	1,828
LA	1,413	14,608	6,844	81,892	7,820	29,554
MA	-	7,481	62,304	681	16,316	7,360
MD	1,493	16,249	36,222	2,461	32,096	2,701
ME	743	44,810	12,781	1,076	-	3,441
MI	-	6,540	6,003	4,368	8,161	16,005
MN	1,664	12,423	38,779	3,866	71,217	5,738
MO	1,366	31,273	22,959	7,662	31,674	3,231
MS	1,707	6,151	9,546	2,208	11,982	2,170
MT	2,734	6,124	19,409	2,471	17,315	1,409
NC	1,803	12,927	25,193	35,421	368,391	1,439
ND	846	17,673	37,864	1,678	3,097	2,242
NE	-	1,355	27,519	15,205	13,997	9,321
NH	3,573	24,557	26,684	2,258	11,366	4,217
NJ	1,370	39,226	2,028	32,296	23,162	1,812
NM	3,196	30,383	9,331	1,405	46,815	1,637
NV	619	5,870	19,036	8,589	9,085	213
NY	4,437	8,198	47,538	2,249	1,791	1,154
OH	529	17,609	7,929	5,194	14,757	1,725
OK	2,735	8,526	15,531	385	15,582	502
OR	532	7,245	10,617	1,459	22,234	710
PA	1,576	13,761	34,695	12,060	10,435	1,906
SC	8,175	8,091	21,483	1,839	-	644
SD	2,553	26,927	15,222	1,822	-	312
TN	2,755	67,822	11,034	726	3,643	892
TX	1,977	9,695	10,787	1,071	27,730	4,992
UT	2,169	3,660	23,807	1,940	12,254	1,061
VA	426	16,039	13,255	29,471	10,422	1,970
WA	-	19,566	3,740	108	7,885	379
WI	1,962	24,433	11,731	7,939	27,177	2,652
WV	1,977	4,855	27,610	1,501	-	11,077
WY	2,419	6,488	26,654	2,730	9,821	1,615

NOTES: "Other Services" include assistance with chores, meals, transportation, etc. A dash indicates that the service was not offered in a § 1915(c) waiver. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of CMS Form 372.

Table 11: Financial Eligibility Criteria for Medicaid § 1915(c) HCBS Waivers, by Type of Waiver and State, 2015

	I/DD	Aged (≥ 65)	Aged/ Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI
(as a percent of the maximum monthly Supplemental Security Income (SSI) Federal Benefit Rate (FBR))								
AK	300%	300%	-	300%	300%	-	-	-
AL	300%	-	300%	300%	-	300%	-	-
AR	300%	300%	-	300%	300%	-	-	-
CA	100%	-	100%	100%	100%	100%	-	-
CO	300%	-	300%	-	300%	300%	300%	300%
CT	300%	-	300%	300%	300%	-	300%	300%
DC	300%	-	300%	-	-	-	-	-
DE	250%	-	-	-	-	-	-	-
FL	300%	-	300%	300%	300%	300%	-	300%
GA	300%	-	300%	-	300%	-	-	300%
HI	100%	-	-	-	-	-	-	-
IA	300%	300%	-	300%	300%	300%	-	300%
ID	300%	-	300%	-	300%	-	-	-
IL	100%	100%	100%	100%	100%	100%	-	100%
IN	300%	-	300%	-	-	-	100%	300%
KS	300%	300%	-	300%	300%	-	-	300%
KY	300%	-	300%	300%	-	-	-	300%
LA	300%	-	300%	-	300%	-	-	-
MA	300%	300%	-	-	100%	-	-	300%
MD	300%	300%	100%	300%	300%	-	-	300%
ME	300%	-	300%	-	-	-	-	300%
MI	100%	-	300%	-	300%	-	-	-
MN	300%	300%	-	300%	-	-	-	300%
MO	100%	-	100%	100%	100%	100%	-	-
MS	300%	-	300%	300%	-	-	300%	300%
MT	100%	-	100%	-	100%	-	100%	-
NC	100%	-	100%	-	100%	-	-	-
ND	100%	-	100%	100%	100%	-	-	-
NE	100%	-	100%	-	-	-	-	100%
NH	100%	100%	-	-	-	-	-	100%
NJ	300%	-	300%	-	-	300%	-	300%
NM	300%	-	300%	-	300%	300%	-	-
NV	300%	300%	-	300%	-	-	-	-
NY	100%	-	100%	-	100%	-	-	100%
OH	300%	-	300%	-	-	-	-	-
OK	300%	300%	300%	-	-	-	-	-
OR	300%	-	300%	-	300%	-	-	-
PA	300%	300%	-	-	-	300%	-	300%
SC	300%	-	300%	300%	300%	300%	-	300%
SD	300%	300%	-	-	-	-	-	-
TN	300%	-	300%	-	-	-	-	-
TX	300%	-	-	-	300%	-	-	-
UT	300%	300%	300%	300%	300%	-	-	300%
VA	300%	-	300%	300%	-	-	-	-
WA	300%	-	300%	-	300%	-	-	-
WI	300%	-	300%	-	300%	-	-	300%
WV	300%	-	300%	-	-	-	-	300%
WY	300%	-	300%	-	300%	-	-	300%

NOTES: I/DD – Intellectual/Developmental Disability; TBI/SCI – Traumatic Brain Injury/Spinal Cord Injury. In 2015, 300 percent of the SSI FBR was \$2,199 per month. Arizona, Rhode Island, and Vermont are excluded from the table because the states did not operate any § 1915(c) waivers in 2015 (all HCBS were provided through a § 1115 waiver). A dash indicates that there was no operational § 1915(c) waiver for the target enrollment group. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of Medicaid § 1915(c) Waiver Policy Survey.

Table 12: Use of Cost Controls and Self-Direction in Medicaid HCBS Programs, by State, 2015

	Home Health State Plan Services			Personal Care State Plan Services			§ 1915(c) Waivers	
	Financial Eligibility	Limits	Self-Direction	Financial Eligibility	Limits	Self-Direction	Limits	Self-Direction
AK	CN, MN	-	Y	CN, MN	-	Y	S	-
AL	CN, MN	S	-	N/A	N/A	N/A	C, S	Y
AR	CN, MN	S	-	CN	S	Y	S	Y
AZ	CN	C	-	N/A	N/A	N/A	N/A	N/A
CA	CN, MN	S	Y	CN, MN	S	Y	C, S, G	Y
CO	CN, MN	-	Y	N/A	N/A	N/A	C, G	Y
CT	CN, MN	C, S	-	N/A	N/A	N/A	C	Y
DC	CN, MN	S	-	CN	S	-	S	-
DE	CN	S	-	CN, MN	-	-	-	-
FL	CN, MN	C	-	CN, MN	S	Y	C	Y
GA	CN, MN	S	-	N/A	N/A	N/A	-	-
HI	CN, MN	-	-	N/A	N/A	N/A	-	Y
IA	CN, MN	S	-	N/A	N/A	N/A	C, S	Y
ID	CN	S	-	CN, MN, MB	S	Y	C	Y
IL	CN	-	-	N/A	N/A	N/A	C	Y
IN	CN, MN	-	-	N/A	N/A	N/A	C	Y
KS	CN, MN	-	-	CN, MN	-	Y	S	Y
KY	CN, MN	S	-	N/A	N/A	N/A	C, S	Y
LA	CN, MN	-	Y	CN, MN	S	Y	C, S	Y
MA	CN, MN	S	-	CN, MN	-	Y	C	Y
MD	CN, MN	-	-	CN, MN, MB	-	Y	C, S	Y
ME	CN, MN	-	Y	CN, MN	S	-	C, S	Y
MI	CN, MN, MB	C, S	-	CN, MN	-	-	S, G	Y
MN	CN, MN, MB	S	-	CN, MN, I, MB	S	Y	C	Y
MO	CN	S	-	CN	C	Y	C	Y
MS	CN, MN	S	-	N/A	N/A	N/A	S	Y
MT	CN, MN	-	-	CN, MN, MB	S	Y	C, S, G	Y
NC	CN, MN	-	-	CN, MN	S	-	C, S, G	Y
ND	CN, MN	C	-	CN, MN	S	Y	C	Y
NE	CN, MN	C	-	CN, MN, MB	S	Y	S	Y
NH	CN, MN	-	-	CN, MN	-	Y	-	-
NJ	CN, MN	-	-	CN, MN	S	Y	C, S	Y
NM	CN	-	-	CN	-	-	-	Y
NV	CN	S	-	CN	S	Y	C, G	Y
NY	CN, MN	S	-	CN, MN	-	Y	S	Y
OH	CN, MB	S	-	N/A	N/A	N/A	C, S	Y
OK	CN	S	-	CN	-	-	C, S	Y
OR	CN	C, S	-	CN	S	Y	C	Y
PA	CN, MN, MB	S	-	N/A	N/A	N/A	C, S	Y
RI	CN, MN	S	-	CN, MN	-	-	N/A	N/A
SC	CN	S	-	N/A	N/A	N/A	C, S	Y
SD	CN	-	Y	CN	S	Y	C, S	Y
TN	CN, MN	S	-	N/A	N/A	N/A	C, S	Y
TX	CN, MN	-	Y	CN, MN	S	Y	C, S, G	Y
UT	CN, MN	-	-	CN, MN, I, MB	-	Y	-	Y
VA	CN, MN	S	-	N/A	N/A	N/A	S	Y
VT	CN, MN	-	-	CN, MN	-	Y	N/A	N/A
WA	CN, MN	S	-	CN	S	Y	C, S, G	Y
WI	CN, MN	-	-	CN, MN	-	-	G	Y
WV	CN, MN	-	-	CN, MN	S	-	S	Y
WY	CN	-	-	N/A	N/A	N/A	C, S	Y

NOTES: CN – Categorically Needy; MN – Medically Needy; I – Special Income Rules; MB-Medicaid Buy-In; C – Cost Limits; S – Service/Hourly Limits; G – Geographical Limits; Y – Yes, self-direction is required or allowed. Financial eligibility criteria for § 1915(c) waivers are presented in Table 11. N/A are states with no financial eligibility for personal care services or no § 1915(c) waivers.

SOURCES: KCMU and UCSF analyses of Medicaid § 1915(c) Waiver, Home Health, and Personal Care Services Policy Surveys.

Table 13: Waiting Lists for Medicaid § 1915(c) HCBS Waivers, by Target Enrollment Group, 2015

	I/DD	Aged (≥ 65)	Aged/ Disabled	Physically Disabled	Children	HIV/ AIDS	Mental Health	TBI/ SCI	Total
Total No. of Waivers	103	18	54	24	51	11	5	27	293
No. of Waiting Lists	56	4	19	12	23	1	1	15	131
No. of Persons on Waiting Lists	428,151	27,731	117,693	11,744	51,606	65	28	3,823	640,841
(% of row total)	(67%)	(4%)	(18%)	(2%)	(8%)	(<1%)	(<1%)	(1%)	
No. of Waiting Lists that Screen for Eligibility	34	3	14	7	18	1	1	10	88
(% of waiting lists for group)	(61%)	(75%)	(74%)	(58%)	(78%)	(100%)	(100%)	(67%)	(67%)
No. of Waiting Lists that Prioritize Certain Clients	39	3	16	8	12	1	1	12	92
(% of waiting lists for group)	(70%)	(75%)	(84%)	(67%)	(52%)	(100%)	(100%)	(67%)	(70%)
No. of Waiting Lists With Enrollees Receiving Non-Waiver Services	52	4	18	11	20	1	1	13	120
(% of waiting lists for group)	(93%)	(100%)	(95%)	92%)	(87%)	(100%)	(100%)	(87%)	(92%)

NOTES: I/DD – Intellectual/Developmental Disability; TBI/SCI – Traumatic Brain Injury/Spinal Cord Injury.

SOURCE: KCMU and UCSF analysis of Medicaid § 1915(c) Waiver Policy Survey.

Table 14: Waiting List Enrollment for Medicaid § 1915(c) HCBS Waivers, by Target Enrollment Group and State, 2015

	I/DD	Aged (≥ 65)	Aged/Disabled	Physically Disabled	Children	HIV/AIDS	Mental Health	TBI/SCI	Total
Total No. of Waiting Lists	56	4	19	12	23	1	1	15	131
AK	935	0	-	0	0	-	-	-	935
AL	Unknown	-	2,651	132	-	0	-	-	2,783
AR	2,840	0	-	0	53	-	-	-	2,893
CA	0	-	1,707	1,800	20	65	-	-	3,592
CO	3,564	-	0	-	624	0	0	30	4,218
CT	1,009	-	0	812	646	-	0	42	2,509
DC	0	-	0	-	-	-	-	-	0
DE	0	-	-	-	-	-	-	-	0
FL	21,000	-	62,068	0	1	0	-	296	83,365
GA	11,365	-	701	-	0	-	-	135	12,201
HI	0	-	-	-	-	-	-	-	0
IA	0	0	-	5,013	2,356	0	-	1,136	8,505
ID	0	-	0	-	0	-	-	-	0
IL	17,501	0	0	0	13,972	0	0	0	31,473
IN	1,870	-	0	-	-	-	-	44	1,914
KS	3,392	0	-	1,237	268	-	-	0	4,897
KY	5,764	-	0	0	-	-	-	532	6,296
LA	17,083	-	37,267	-	8,478	-	-	-	62,828
MA	0	0	-	-	0	-	-	0	0
MD	12,975	27,000	-	1,401	4,468	-	-	0	45,844
ME	0	-	0	-	-	-	-	0	0
MI	0	-	0	-	0	-	-	-	0
MN	3,654	0	-	801	-	-	-	459	4,914
MO	0	-	0	0	0	0	-	-	0
MS	1,801	-	4,639	576	-	-	0	19	7,035
MT	982	-	471	-	102	-	28	-	1,583
NC	17,800	-	2,936	-	0	-	-	-	20,736
ND	0	-	0	0	0	-	-	-	0
NE	1,368	-	0	-	-	-	-	0	1,368
NH	0	0	-	-	-	-	-	0	0
NJ	0	-	0	-	-	0	-	59	59
NM	0	-	5,365	-	36	0	-	-	5,401
NV	712	530	-	73	-	-	-	-	1,315
NY	0	-	0	-	Unknown	-	-	0	0
OH	62,118	-	0	-	-	-	-	-	62,118
OK	7,213	0	12	-	-	-	-	-	7,225
OR	0	-	0	-	0	-	-	-	0
PA	18,295	0	-	-	-	0	-	0	18,295
SC	1,654	-	0	0	436	0	-	265	2,355
SD	34	0	-	-	-	-	-	-	34
TN	7,564	-	0	-	-	-	-	-	7,564
TX	186,627	-	-	-	17,923	-	-	-	204,550
UT	1,869	201	0	31	54	-	-	86	2,241
VA	16,583	-	0	0	-	-	-	-	16,583
WA	0	-	0	-	0	-	-	-	0
WI	801	-	711	-	2,140	-	-	681	4,333
WV	396	-	1,816	-	-	-	-	0	2,212
WY	317	-	0	-	29	-	-	39	385
Total No. of Enrollees	428,151	27,731	117,693	11,744	51,606	65	28	3,823	640,841
Avg. Waiting Period (in months)	43	25	18	17	25	4	5	16	27

NOTES: Data may not sum to total due to rounding. I/DD – Intellectual/Developmental Disability; TBI/SCI – Traumatic Brain Injury/Spinal Cord Injury. “Unknown” indicates that there was a waiting list but the number of persons on list is unknown. A dash indicates that there was no operational § 1915(c) waiver for the target enrollment group. Arizona, Rhode Island, and Vermont do not have § 1915(c) waivers.

SOURCE: KCMU and UCSF analysis of Medicaid § 1915(c) Waiver Policy Survey.

**Table 15: Medicaid Home Health and Personal Care State Plan Services
Provider Reimbursement Rates, by Service and State, 2015 (\$)**

	Home Health ¹			Personal Care Services ²	
	Agency	Registered Nurse	Home Health Aide	Agency	Provider
AK	169.36	-	-	22.78	12.00
AL	27.00/hour	-	-	Not offered	Not offered
AR	-	145.02	66.63	-	14.00
AZ	-	-	9.15/hour	Not offered	Not offered
CA	-	74.86	45.75	20.85	10.10
CO	-	93.38	33.21/hour	Not offered	Not offered
CT	95.20/hour	-	24.64/hour	Not offered	Not offered
DC	76.00	62.00	17.90/hour	17.80	14.50
DE	-	139.45/hour	30.80/hour	19.80	-
FL	31.04	31.04	17.46	15.00	15.00
GA	61.32	61.32	61.32	Not offered	Not offered
HI	-	-	-	Not offered	Not offered
IA	-	107.44	48.68	Not offered	Not offered
ID	15.76/hour	40.76/hour	143.51	15.76	-
IL	72.00	-	-	Not offered	Not offered
IN	29.62/day	42.04	18.31/hour	Not offered	Not offered
KS	-	50.00	40.50	13.25	13.25
KY	-	88.16	34.13	Not offered	Not offered
LA	44.19	65.22	23.16	11.40	-
MA	-	86.99	24.40/hour	-	14.72
MD	-	120.76	59.99	16.48	35.34/day
ME	16.55/hour	-	-	26.00	-
MI	-	80.98	51.72	14.00	9.50
MN	53.75	32.52/hour	54.29	16.32	16.00
MO	77.16	77.16	77.16	17.88	15.56
MS	75.85	-	-	Not offered	Not offered
MT	74.74	74.74	33.37	19.42	-
NC	103.33	109.60	47.28	13.88	-
ND	118.63	53/hour	-	27.16	19.76
NE	487.83/day	37.90/hour	21.36/hour	8.00	8.68
NH	-	87.36/hour	23.56/hour	17.84	-
NJ	-	117.21/hour	25.87/hour	16.00	-
NM	331.57	-	-	13.16	9.65
NV	52.56/hour	-	-	17.00	-
NY	-	113.12/hour	29.76/hour	20.19	-
OH	18.00/hour	22.76/hour	12.00/hour	Not offered	Not offered
OK	47.49	65.38	29.60	15.68	-
OR	-	191.06	54.94	-	13.75
PA	88	-	-	Not offered	Not offered
RI	64.50	64.50	-	19.46	-
SC	-	72.65	39.13	Not offered	Not offered
SD	-	76.10/hour	32.24/hour	20.64	-
TN	-	-	-	Not offered	Not offered
TX	200.00	98.92	46.09	11.50	-
UT	-	-	67.28	16.00	-
VA	-	185.94	73.28	Not offered	Not offered
VT	-	-	-	-	-
WA	43.83	45.06	45.32	23.00	-
WI	-	32.66/hour	39.71	63.36	-
WV	-	-	-	15.00	15.00
WY	52.00	-	-	Not offered	Not offered
Avg. pay rate	93.93	87.26	52.19	18.82	13.43

NOTES: ¹The reimbursement rate for home health services is per visit unless otherwise noted. ²The reimbursement rate for personal care services is per hour unless otherwise noted.

SOURCES: KCMU and UCSF analyses of Medicaid Home Health and Personal Care Services Policy Surveys.

Endnotes

¹ Steve Eiken, Kate Sredl, Brian Burwell, and Paul Saucier, *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2014*, (Bethesda, MD: Truven Health Analytics, April 2016), <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-2014.pdf>.

² *Id.*

³ *Id.*

⁴ *Olmstead v. L.C.*, 527 U.S. 581 (1999), available at <http://www.law.cornell.edu/supct/html/98-536.ZS.html>; see also Kaiser Commission on Medicaid and the Uninsured, *Olmstead's Role in Community Integration for People with Disabilities Under Medicaid: 15 Years after the Supreme Court's Olmstead Decision* (Washington, DC: Kaiser Family Foundation, June 2014), <http://kff.org/medicaid/issue-brief/olmsteads-role-in-community-integration-for-people-with-disabilities-under-medicaid-15-years-after-the-supreme-courts-olmstead-decision/>.

⁵ Steve Eiken, Kate Sredl, Brian Burwell, and Paul Saucier, *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2014*, (Bethesda, MD: Truven Health Analytics, April 2016), <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-2014.pdf>.

⁶ MFP funding expires in September 2016. For more information, see Kaiser Commission on Medicaid and the Uninsured, *Money Follows the Person: A 2015 State Survey of Transitions, Services, and Costs* (Washington, DC: Kaiser Family Foundation, October 2015), <http://kff.org/medicaid/report/money-follows-the-person-a-2015-state-survey-of-transitions-services-and-costs/>.

⁷ Delaware and Rhode Island had CMS approval to offer personal care state plan services but did not report any participants in their programs.

⁸ Kaiser Commission on Medicaid and the Uninsured, *Implementing the ACA: Medicaid Spending & Enrollment Growth for FY 2014 and FY 2015* (Washington, DC: Kaiser Family Foundation, October 2014), <http://kff.org/medicaid/report-section/implementing-the-aca-medicaid-spending-enrollment-growth-issue-brief>.

⁹ Steve Eiken, Kate Sredl, Brian Burwell, and Paul Saucier, *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2014*, (Bethesda, MD: Truven Health Analytics, April 2016), <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-2014.pdf>.

¹⁰ For background about § 1115 waivers, see Kaiser Commission on Medicaid and the Uninsured, *Five Key Questions and Answers About Section 1115 Medicaid Demonstration Waivers* (Washington, DC: Kaiser Family Foundation, June 2011), <http://kff.org/health-reform/issue-brief/five-key-questions-and-answers-about-section/>.

¹¹ 42 U.S.C. § 1315(a).

¹² Self-direction of personal care services is available to states under the § 1915 (j) option, which allows states to offer self-direction provided that states offer personal care services as an optional state plan benefit or through a § 1915 (c) waiver. 42 U.S.C. § 1396n(j)(4)(A); 42 C.F.R. § 441.452(a).

¹³ Vermont's model is unique in that the state serves as the managed care entity.

¹⁴ Other states implement capitated Medicaid managed LTSS programs through combination § 1915 (b)/(c) waivers. Section 1915 (b) waivers allow states to offer Medicaid services in a managed care model or otherwise limit a beneficiary's choice of providers.

¹⁵ Expenditure data from Steve Eiken, Kate Sredl, Brian Burwell, and Paul Saucier, *Medicaid Expenditures for Long Term Services and Supports (LTSS) in FY 2014*, (Bethesda, MD: Truven Health Analytics, April 2016), <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/downloads/ltss-expenditures-2014.pdf>; participant data from Rhode Island Executive Office of Health and Human Services, *Quarterly Operation Report: Rhode Island Global Consumer Choice Compact 1115 Waiver Demonstration, January 1, 2013 – March 31, 2013*, (Providence, RI: Rhode Island Executive Office of Health and Human Services, September 2013), http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/Quarterly%20Global%20Wavier%20Report%20January%20-%20March%20%202013_1.pdf; State of Vermont Agency of Human Services, *Global Commitment to Health, Quarterly Report* (Waterbury, VT: State of Vermont Agency of Human Services, November 2013), available at <http://dvha.vermont.gov/global-commitment-to-health/gc-ffy13-qtr-4-report.pdf>. Arizona participation counts as reported by state officials to KCMU and UCSF, 2016.

¹⁶ Minnesota has a Section 1115 waiver that offers some fee-for-service HCBS, including Section 1915 (i) and Community First Choice services. Kansas has a joint Section 1115/Section 1915 (c) waiver. New Jersey's Section 1115 waiver was approved in 2012, but enrollment was not effective until July, 2014.

¹⁷ Kaiser Commission on Medicaid and the Uninsured, *Key Themes in Capitated Medicaid Managed Long-Term Services and Supports Waivers* (Washington, DC: Kaiser Family Foundation, November 2014), <http://kff.org/medicaid/issue-brief/key-themes-in-capitated-medicaid-managed-long-term-services-and-supports-waivers/>.

¹⁸ U.S. Dep't of Labor, *Information on the Final Rule: Application of the Fair Labor Standards Act to Domestic Service*, <http://www.dol.gov/whd/homecare/finalrule.htm>. While the new rules were to be effective in January, 2015, enforcement was delayed, and they were challenged in litigation. In August, 2015, the D.C. Circuit Court of Appeals upheld the regulations. *Home Care Assoc. of America v. Weil*, No. 15-5018 (D.C. Cir. Aug. 21, 2015), <http://www.dol.gov/whd/homecare/o821appealdecision.pdf>. DOL has revised its time-limited non-enforcement policy, with no actions to enforce the new rules until 30 days after the D.C. Circuit Court's decision became final, and discretion in enforcement actions considering good faith efforts to comply with the new rule through December 2015. U.S. Dep't of Labor, *We Count on Home Care, Time-Limited Non-Enforcement Policy*, http://www.dol.gov/whd/homecare/non-enforcement_policy.htm; see also 80 *Fed. Reg.* 55029 (Sept. 14, 2015), <http://www.gpo.gov/fdsys/pkg/FR-2015-09-14/pdf/2015-23092.pdf>; U.S. Dep't of Justice, Civil Rights Division and U.S. Dep't of Health & Human Servs., Office for Civil Rights, *Dear Colleague letter* (Dec. 15, 2014), http://www.ada.gov/olmstead/documents/doj_hhs_letter.pdf.

¹⁹ 78 *Fed. Reg.* 60453-60557 (Oct. 1, 2013), <http://webapps.dol.gov/FederalRegister/PdfDisplay.aspx?DocId=27104>.

²⁰ CMS Informational Bulletin, *Self-Direction Program Options for Medicaid Payments in the Implementation of the Fair Labor Standards Act Regulation Changes* (July 3, 2014), <http://www.medicaid.gov/Federal-Policy-Guidance/Downloads/CIB-07-03-2014.pdf>.

²¹ *Id.*

²² 42 C.F.R. § 441.301 (c)(4)-(6). The settings rules also apply to Section 1915 (i) and Community First Choice services. CMS also has indicated it will include these requirements in the special terms and conditions of § 1115 demonstrations that include individuals receiving HCBS. CMS, *Questions and Answers – 1915 (i) State Plan Home and Community-Based Services, 5-Year Period for Waivers, Provider Payment Reassignment, Setting Requirements for Community First Choice, and 1915 (c) Home and Community-Based Services Waivers - CMS 2249-F and 2296-F*, <https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Downloads/Final-Q-and-A.pdf>.

²³ Disabled and Elderly Health Programs Group, Centers for Medicare & Medicaid Services, *Final Rule Medicaid HCBS*, (Baltimore, MD: Centers for Medicare & Medicaid Services, January 16, 2014), <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/downloads/final-rule-slides-01292014.pdf>.

²⁴ "Statewide Transition Plans," Medicaid.gov, CMS, accessed October 4, 2016, <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/long-term-services-and-supports/home-and-community-based-services/statewide-transition-plans.html>.

²⁵ Although Rhode Island and Delaware did not report participants or expenditures for personal care state plan services in 2015, their policy survey responses are included.

²⁶ Reimbursement rates for services provided under § 1915 (c) waivers are not included in the policy survey.



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